

VILLAGE OF GLEN ELLYN
535 DUANE STREET GLEN ELLYN, ILLINOIS 60137
RESIDENTIAL ALARM USERS PERMIT APPLICATION

Type of Alarm: Fire () Burglar () Panic/Hold-Up ()

RESIDENT NAME (Last)		(First)	
ADDRESS:		Home Phone: ()	
ALARM LOCATION IS: House () Townhome () Condo () Apartment ()			
LOCATION OF ALARM PANEL:			
OWNER INFORMATION			
OWNER #1: Name			
Work Phone:	Cell:	Other Phone	Email:
OWNER #2: Name			
Work Phone:	Cell:	Other Phone	Email:
Is there anyone in the home responders should be aware of who has a medical condition? (If yes, please explain)			
If yes, is the person ambulatory?			
ALARM SYSTEM INFORMATION			
Alarm Service Company:		Telephone:	
State License Number:			
Mailing Address:		City, State, Zip	
Alarm Monitoring Company:		Telephone:	
Mailing Address:		City, State, Zip	
Type of Alarm System: Burglar: Audible/Silent Panic: Audible/Silent			
Date of Alarm Installation:		Does burglar alarm have an automatic reset? Yes () No ()	
Hazards: Please list any hazardous materials, animals, or any other items kept on the premises that may be encountered by police/fire responders. Use reverse side if necessary.			
KEYHOLDER INFORMATION			
Please list, <u>in order of contact preference</u> , all persons have access to residence, know alarm code or who can reach an owner promptly. Keyholders must be able to arrive at location within 45 minutes activation/notification.			
Keyholder Name	Home Phone	Cell Phone	Work/other phone
1.			
2.			
3.			
4.			
There is an annual application fee of \$25.00 per residence. The fee must be paid upon submission of this application. Please make checks payable to the Village of Glen Ellyn. Mail to the Glen Ellyn Police Department, Attn: Alarm Permits, 535 Duane Street, Glen Ellyn, IL 60137. If you have any questions, please contact the Police Department at 630-469-1187.			
Applicant Signature _____		Date: _____	
FOR POLICE USE ONLY	NEW _____ RENEWAL _____ CHANGE _____	PERMIT # _____	DATE ISSUED _____ PAID \$ _____