

VILLAGE OF ITASCA

PERMIT # _____ - _____

540 W IRVING PARK ROAD, ITASCA, ILL. 60143
Administrative (630) 773-1004 Fax (630) 773-2734

APPLICATION FOR USER PERMIT
RESIDENTIAL AND COMMERCIAL BURGLAR ALARM SYSTEMS

*** RETURN THIS DOCUMENT TO THE ITASCA POLICE DEPARTMENT FOR PROCESSING ***

COMPANY NAME OR PROPERTY OWNER (if residence)			
PROTECTED PREMISE ADDRESS AND TELEPHONE NUMBER	ADDRESS		TELEPHONE NUMBER
LOCATION DESCRIPTION	☐ COMMERCIAL ☐ FINANCIAL	☐ INDUSTRIAL ☐ PUBLIC INSTITUTION	☐ OFFICE ☐ RESIDENCE
TYPE OF ALARM INSTALLED (check all that apply)	☐ AUDIBLE ☐ HOLDUP ☐ OTHER	☐ PERIMETER ☐ GLASS BREAK ☐ DURESS	☐ INTERIOR ☐ MOTION ☐ PANIC
NAME OF ALARM INSTALLATION COMPANY			
STREET ADDRESS	CITY / STATE / ZIP CODE	TELEPHONE	
NAME OF ALARM MONITORING COMPANY			
STREET ADDRESS	CITY / STATE / ZIP CODE	TELEPHONE	
NAME OF COMPANY SERVICING ALARM			
STREET ADDRESS	CITY / STATE / ZIP CODE	TELEPHONE	
NAME OF PERSON TO WHOM ALL ALARM CORRESPONDENCE SHALL BE DIRECTED (NOT THE ALARM COMPANY)	NAME / POSITION	TELEPHONE	
	ADDRESS	CITY / STATE	

PROVIDE A LIST OF THREE PERSONS, INCLUDING THEIR ADDRESSES AND TELEPHONE NUMBERS, WHO CAN BE CONTACTED (AND WILL RESPOND) TO THE PREMISES IN THE EVENT OF AN EMERGENCY, OR TO RESET OR DEACTIVATE THE ALARM SYSTEM.

1	NAME:			
	ADDRESS:			
	TELEPHONE	Other Telephone #		
2	NAME:			
	ADDRESS:			
	TELEPHONE	Other Telephone #		
3	NAME:			
	ADDRESS:			
	TELEPHONE	Other Telephone #		

PERMIT # _____ - _____

PRINTED NAME OF APPLICANT_____
SIGNATURE OF APPLICANT_____
DATE

NOTE: IT IS UNLAWFUL FOR ANY ALARM USER TO FAIL TO AMEND ITS ALARM USER PERMIT APPLICATION WITHIN 14 DAYS AFTER ANY OF THE INFORMATION REQUIRED AND CONTAINED THEREIN BECOMES OUTDATED OR INACCURATE.

OFFICE USE ONLY	APPROVED []	ENTERED []
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