



Glencoe Department of Public Safety

325 Hazel Avenue · Glencoe, Illinois 60022
847-835-4112 voice · 847-835-8438 fax



ALARM PERMIT APPLICATION

Dear Alarm Owner:

Attached is an application form for the current year's Alarm Permit. Please complete it and return with the \$50.00 permit fee. (Cost for Senior Citizens, age 65, is \$25.00 with proof of age.) If paying with a check or money order, it should be made payable to the Village of Glencoe.

It is important that the data on this form be correct, including your 'key holder' information. Key holders are persons who have the keys to your premises but do not reside there. These persons may be contacted by the Public Safety Department when we are unable to contact you concerning an alarm activation. The key holders should be knowledgeable in the operation of your alarm system and should therefore be knowledgeable to its deactivation, if required. While the Department of Public Safety will maintain your key as a 'backup', a responsible family member, neighbor or friend is to be listed as the primary key holder.

Copies of the alarm ordinance are available at the Public Safety Department free of charge. It explains the different systems that are regulated and the method used to compute the quarterly service charge. Familiarization with the document may avoid future problems. Feel free to contact me or Deputy Chief Alan Kebby at 847-835-4112 should you have any questions.

Sincerely,

Len Stang, Jr.
Glencoe Department of Public Safety



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2011 ALARM PERMIT APPLICATION

In accordance with Section 9A-3 of the Glencoe Village Code, the undersigned hereby applies for an Alarm Permit for the period from January 1 to December 31, 2011, and further agrees to conform with Chapter 9A of the Glencoe Village Code and all ordinances and regulations of the Village of Glencoe that govern alarms.

NAME: _____

ADDRESS: _____

HOME PHONE: _____ WORK PHONE: _____

CELLULAR: _____ CELLULAR: _____

TYPE OF ALARMS: BURGLAR FIRE MEDICAL (CHECK ALL THAT APPLY)

If this is a residence, please tell us how we can reach you at work; i.e., names, phone number with extension, cell, pager, etc.

Key holders who do not reside at this address

NAME: _____ PHONE: _____

NAME: _____ PHONE: _____

NAME: _____ PHONE: _____

NAME: _____ PHONE: _____

Alarm Monitoring Company

NAME: _____ PHONE: _____

ADDRESS: _____ CITY: _____ ZIP: _____

I understand that the Village of Glencoe shall not be liable for any failure of service or for any damages that might result from the installation or operation of the alarm system, and that all alarm calls, regardless of the cause, may be counted in determining the service charges as outlined in the Glencoe Village Code, Section 9A-7. I certify that maintenance will be provided by a certified bonded alarm company for my alarm at all times.

Signature: _____ Date: _____