2024

OFFICE USE ONLY:

## VILLAGE OF BANNOCKBURN RESIDENTIAL BURGLAR ALARM SYSTEM



\_\_DATE\_\_

ONE TIME: NEW APPLICATION FEE: UPDATE BURGLAR ALARM SYSTEM		KE CHECK PA	YABLE	TO VILLAGE OF BANNOCKBURN		
RESIDENT INFORMATION						
NAME:			PHONE #			
BILLING ADDRESS		Email Address				
ALARM INSTALLATION ADDRESS						
ALARM INFORMATION COMPANY INSTALLING		G/MONITORING SYSTEM:				
BUSINESS PHONE #: ADDRESS:						
TYPE OF ALARM (Please pick on) LOCAL ONLY (Bell, Siren w/no off premise connection) DIRECT CONNECT TO POLICE DEPARTMENT ALARM PANEL CONTACT PHONE #:						
CENTRAL STATION MONITORING STATION NAME: CONTACT PHONE #:						
FALSE ALARM FEE SCH	EDULE			ALARM INFORMATION		
		1. Do you have a maintenance contract? 2. Is a minimum thirty-second delay mechanism installed for ingress and egress doorways? 3. Does you alarm system consist, in whole or in part, of a direct dialer or other device that automatically selects a telephone trunk line at the Police Department? 4. Is your alarm system equipped with a battery pack back-up power Supply or other alternative source of back-up power capable of sustaining the operation of the system for a minimum of six (6) hours? 5. Does you alarm system consist of an outside ringer? (if Yes answer 6 & 7) 6. Is an audible sound emitting from such ringer similar to emergency vehicles or any other audible Village alert system? 7 Is such outside ringer equipped with an automatic cut-off mechanism that permits deactivation within ten (10) minutes of the initial alarm?  Pelephone number of persons authorized to respond to and reset the Alarm System located at above. List at least three (3) persons in the order you would like them contacted if the contact be located.  PHONE #:  PHONE #:  PHONE #:				
CONTACT NAME:				PHONE #:		
CONTACT NAME:				PHONE #:		
As the Alarm User(s) at the above stated Bannockburn Ordinance No. 9-901 et sec may be amended from time to time, inclu Section Six of such Ordinance. I also ac insure that all Alarm Occurrences comm therefore the Village makes no warranty, the Subscriber's Alarm System.	address, I/We agree quitur (a copy of the o ding without limitation knowledge that the V unicated from the Su guarantee, represen	to abide by and Ordinance is avon on the payment /illage is not an abscriber's Alan tation or promi	d be bo vailable of servainsure om Syst se that	by contacting the Police Departme vice charges pursuant to the provier ar and that the Village cannot and d tem will be received by the Village of	ent), as it sions of oes not and, rence by	
PRINTED NAME SIGNATURE					DATE	
x						
<del></del>						

BANNOCKBURN PERMIT NUMBER B: \_\_\_\_\_\_PAID CHECK #\_\_\_