

## VILLAGE OF BROADVIEW ALARM PERMIT

TYPE OF APPLICATION (circle one)

New Alarm – Date of Installation:

Renewal

Update Information (no fee)

### ALARM SITE INFORMATION

Name of Resident, Owner or Business Name \_\_\_\_\_

Driver's License No. or Federal Tax ID No. (If a business) \_\_\_\_\_

Street # \_\_\_\_\_

Street Name \_\_\_\_\_

Suite/Apt. # \_\_\_\_\_

Zip Code \_\_\_\_\_

Phone \_\_\_\_\_ Business Phone \_\_\_\_\_ Alternate Phone \_\_\_\_\_

Email \_\_\_\_\_  Residence  Business (circle one)

If mailing address is different from the alarm location, please notify licensing administrator.

**PRIMARY CONTACT** (Individual who is locally responsible for responding to alarms and giving access to the alarm site and who is responsible for proper maintenance and operation of the alarm system and payment of fees.)

Primary Contact's Name: \_\_\_\_\_

Street Address: \_\_\_\_\_ City, State, Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Business Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

I have read the completed application and know the same is true and correct and hereby agree that I will comply with all provisions of Municipal Code of the Village of Broadview and applicable State Laws. I accept responsibility and payment of all fees and fines that may result from the operation of the alarm system servicing the above premises.

Signature \_\_\_\_\_ Date \_\_\_\_\_

(If permit holder is not an individual, the signature of the primary contact is required)

**SECONDARY CONTACT(S)** (Another person who is able to respond to alarms and give access to alarm site):

Last Name \_\_\_\_\_

First Name \_\_\_\_\_

Home Phone # \_\_\_\_\_

Secondary Phone # \_\_\_\_\_

### NEW ALARM REGISTRATION MUST COMPLETE BELOW:

Name of Alarm Company: \_\_\_\_\_

Address of Alarm Company: \_\_\_\_\_

Phone Number of Alarm Company: \_\_\_\_\_

Alarm installed on (date): \_\_\_\_\_

Permit No. issued by Village \_\_\_\_\_

Mail Completed Form, Invoice (if it was provided) & Alarm Fee to: \_\_\_\_\_  
Broadview Fire Department 2400 S. 25th Avenue Broadview, Illinois 60155

### OFFICE USE ONLY

Date: \_\_\_\_\_ Fee Paid: \_\_\_\_\_ Account/Permit Number: \_\_\_\_\_