



# Village of Skokie

Police Department

Account: \_\_\_\_\_

## ALARM PERMIT REGISTRATION FORM

Please review information for accuracy, mark through any incorrect data, write corrections above lined out portion, sign, date and return corrections.

\$25.00 Original Alarm Permit Fee

\$20.00 Annual Alarm Permit

**1 Alarmed Location**

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Occupant Name or Business Name \_\_\_\_\_

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Address \_\_\_\_\_ Suite/Apt# \_\_\_\_\_

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City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**2 Responsible Party**

Name \_\_\_\_\_ Phn1 \_\_\_\_\_

\_\_\_\_\_ Phn2 \_\_\_\_\_

Address \_\_\_\_\_ Phn3 \_\_\_\_\_

\_\_\_\_\_ Phn4 \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ E-mail address \_\_\_\_\_

**3 Contact Names**

**Contact 1**

Name \_\_\_\_\_ Phn1 \_\_\_\_\_

\_\_\_\_\_ Phn2 \_\_\_\_\_

**Contact 2**

Name \_\_\_\_\_ Phn1 \_\_\_\_\_

\_\_\_\_\_ Phn2 \_\_\_\_\_

**Contact 3**

Name \_\_\_\_\_ Phn1 \_\_\_\_\_

\_\_\_\_\_ Phn2 \_\_\_\_\_

**4 Alarm Companies**  Not Monitored

**Monitored By** \_\_\_\_\_ Phn1 \_\_\_\_\_

**Installed By:** \_\_\_\_\_ Phn1 \_\_\_\_\_

If the Skokie Police respond to an activated alarm and make observations that indicate suspicion and cannot contact a keyholder, I give them authority to enter and search to investigate.  Yes  No

I hereby certify that the above information is accurate to the best of my knowledge.