



PLAINFIELD POLICE DEPARTMENT

14300 S. COIL PLUS DR.
PLAINFIELD, IL 60544
(815) 436-6544

APPLICATION FOR RESIDENTIAL BURGLAR ALARM PERMIT

RESIDENT NAME: Last:		First:	
Address:		Subdivision:	
ALARM LOCATION IS:	House	Townhouse	Condo Apartment
OWNER INFORMATION			
OWNER #1: Name			
Phone: Home: ()	Work: ()	Cell: ()	Page: ()
OWNER #2 Name			
Phone: Home: ()	Work: ()	Cell: ()	Page: ()
Is Resident Alarm Subscriber over 65 years of age? (Exempt from permit fee)		YES	Date of Birth: NO
Is Resident Alarm Subscriber disabled? (Exempt from permit fee)		YES	NO Attach Documentation
ALARM SYSTEM INFORMATION			
Name of Alarm Servicing Company:		Phone:	
IL Burglar Alarm License #:			
Mailing Address:			
City, State, Zip:			
Name of Alarm Monitoring Company:		Phone:	
IL Burglar Alarm License #:			
Mailing Address:			
City State Zip:			
Type of Alarm System:	BURGLAR Audible/Silent	PANIC Audible/Silent	Date of Installation:
Hazards: Please list any animals, hazardous materials, or any other items that are stored on the premises, which may be encountered by a police/fire response to the premises. If necessary, use other side.			
KEYHOLDER INFORMATION			
List all persons who have the ability to control the alarm system in the order they should be contacted. Provide one or more contact telephone numbers for each of your keyholders. You may use cellular or pager numbers. If necessary, use other side. Keyholders should be able to arrive at alarm location within 30 minutes.			
Keyholder Name	Home #	Work #	Cell #

There is an application fee of \$10.00 per residence. The fee must be paid upon submission of this application. Please make checks payable to the Village of Plainfield, and mail with completed application to: Plainfield Police Department, Attn: Licensing Coordinator, 14300 S. Coil Plus Drive, Plainfield, IL 60544-7704. If you have any further questions, please contact the Plainfield Police Department, Monday – Friday, 8:00 a.m. – 8:00 p.m., Saturday from 8:00 am. – Noon at (815) 436-6544 or you may reach us online at www.plainfield-il.org.

RESIDENT SIGNATURE: _____ DATE: _____

FOR POLICE USE ONLY	_____NEW _____ RENEWAL _____ CHANGE	PERMIT NO. _____	DATE ISSUED: _____	PAID: _____
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