



Village of Inverness

1400 Baldwin Road, Inverness, Illinois 60067
(847) 358-7740 - Fax (847) 358-8774



PERMIT APPLICATION FOR ALARM SYSTEM (Permits are not transferable)

Resident's Name _____

Street Address _____

Telephone _____

Cell Phone #1 _____

Cell Phone #2 _____

Please select a 4 Digit PIN for Phone Verification: _____

Name of Alarm Company _____

Alarm Company Phone Number _____

The undersigned agree to provide Inverness Police Department and the applicable fire district personnel with access to the premises at all times for the purpose of investigating emergency calls and to provide the following information for that purpose:

1. Key Holder Name: _____

Telephone _____

Cell Phone _____

2. Key Holder Name: _____

Telephone _____

Cell Phone _____

3. Key Holder Name: _____

Telephone _____

Cell Phone _____

The undersigned understands that the Village of Inverness and its respective officers, employees, and agents shall not be liable for and are hereby released from liability for any failure of service or damages, including but not limited to damages resulting from breaking in to gain entrance, that might result from and/or may arise in any way as a result of the installation or operation of any alarm system, alarm connection and/or alarm service. The undersigned further agrees to indemnify the Village of Inverness and their respective officers, employees and agents for all claims, demands, judgments, liability costs and expenses that might result from and/or may arise in any way as a result of any alarm systems, the alarm connection and/or alarm service.

Signature _____

Date _____

Received by Village _____

Date _____

Updated: _____

Updated: _____

Updated: _____

Updated: _____