Permit # _____

APPLICATION FOR ALARM PERMIT

Moline Code of Ordinance 17-8109

Fee $50.00

Check all of the following that apply:

☐ Police Alarm ☐ Fire Alarm

☐ Burglar Alarm ☐ Holdup Alarm ☐ Panic Alarm

☐ Audible Alarm ☐ Interior Alarm ☐ External Alarm

Alarm Location Information:

Name:	Telephone #
Address:	

* If there is more than one occupancy of these premises, a separate permit is required for each occupancy if units are physically separated.

☐ Owner -or- ☐ Manager Information

Name:		Telephone #
Address:		
City:	State:	Zip:

List three (3) persons to contact in the event of an alarm:

Name:	Telephone #
1.	
2.	
3.	

Alarm Company Information:

Company Name:		Telephone#
Address:		
City	State:	Zip

Signature:_____ Date: _____

Please return signed form, along with remittance to:

City of Moline
1616 6TH Avenue
Moline, IL 61265
309-524-2070