



# Premise Alert Program Notification

## Gurnee Police and Fire Department

## Zion Police and Fire Department



*Please Print Legibly*

New

Change Information

Remove Information

Renewal

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Gender: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Eyes: \_\_\_\_\_ Hair: \_\_\_\_\_

Residential address: \_\_\_\_\_ Apt. # \_\_\_\_\_

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

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

Place of Employment/Educational Facility (if applicable): \_\_\_\_\_

Address: \_\_\_\_\_

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

*Special Needs Information (check one):*

Medical (disability/special needs)

Hazard

Information

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### Emergency Contact

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_ Apt. # \_\_\_\_\_

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

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

- ❖ *By completing and submitting this form, information about your special needs will be placed on file with the Gurnee Communications Center and will enable emergency personnel to recognize that your call may require special handling. Your information will remain confidential and used only by Village of Gurnee Police and Fire Department personnel and conforms to Illinois Public Act 96-0788.*
- ❖ *The provision of special needs information will not result in preferential treatment.*
- ❖ *I understand that this information will be kept on file for a period not to exceed two (2) years and if any of the above information changes I am responsible for notifying the Gurnee Communications Center by filing an amended request form.*
- ❖ *The information will automatically expire two (2) years from the date it is received by the Gurnee Communications Center, and I must renew the form prior to expiration if I want the information to remain in the database.*
- ❖ *By signing and submitting this request form, I hereby give my permission for my name and phone number to be released to the emergency and law enforcement agencies mentioned above. I understand this information will remain confidential and used only by the police, fire, EMS and 9-1-1 personnel that serve the Village of Gurnee.*

Print Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

*Please return the completed form to:*  
**Gurnee Police Department, Attention: Communications,**  
**100 N O'Plaine Rd, Gurnee, IL 60031 Fax: 847-244-8690**

### Agency Use Only:

Date received by PD: \_\_\_\_\_

Entered by: \_\_\_\_\_

Date entered into CAD: \_\_\_\_\_

ID# \_\_\_\_\_



**Premise Alert Program Notification**  
**Gurnee Police and Fire Department**  
**Zion Police and Fire Department**  
July 2017



*On August 28, 2009, the Illinois Premise Alert Program (Public Act 96-0788) was enacted, allowing individuals with special needs or disabilities, or their guardians, to provide personal information to Public Safety Agencies in the State of Illinois for emergency dissemination to police, fire, and EMS personnel.*

*The Gurnee Communications Center serves as the primary communication center for the Village of Gurnee, City of Zion, Beach Park Fire Protection District and the Newport Fire protection District. As a communication center they have embraced this safety program as it is designed to enhance police and fire service to those residents who have disabilities or special needs, by providing first responders with vital information about individuals at a specific address. This could be a life saver for people who may have Alzheimer's disease, are blind, paralyzed or autistic.*

*The information provided to first responders for the Illinois Premise Alert Program is stored in a police department maintained, secure database that can be provided to first responders, via our computer aided dispatch (CAD) system, prior to their arrival at the scene.*

*This program allows families and medical personnel to voluntarily provide information about their special circumstances free of charge. Residents wishing to participate in this program should contact the Gurnee Communications Center at (847) 599-7000 for details, or fill out the attached notification form and return it as listed below.*

*Individuals may also complete the required Premise Alert Program Notification Form by going to our website at [HTTP://www.gurnee.il.us](http://www.gurnee.il.us), and faxing the signed form to 847 244-8690, or by mailing the signed form to:*

**Gurnee Police Department**  
**Attention: Communications,**  
**100 N O'Plaine Rd**  
**Gurnee, IL 60031**

*Prior to signing the completed form, please make sure you read the bullet points on the notification form, so you understand what the expectations are.*