

City of Highland Park

Project Blue Light Business Application

Thank you for your interest in Project Blue Light! This is a public-private-community program, blending real-time crime-fighting and community policing to improve neighborhood safety, promote revitalization and growth of local businesses, and strengthen HPPD's efforts to deter, identify, and solve crimes.

Things you should know before joining the program:

1. If you currently have surveillance cameras, Project Blue Light will supplement your existing system, not replace it.
2. Your business must have adequate lighting.
3. Although HPPD does not charge a fee for participation, business owners are responsible for the following costs:
 - Installation and maintenance of Project Blue Light cameras
 - Blue light
 - Project Blue Light signs

If your business is closed due to renovations, remodeling, or construction please wait to complete this online application until your business is 2 weeks away from opening.

*** Required**

Highland Park Business Address *

Answer: _____

Business Name *

Answer: _____

Business Corporate Entity Name *

Answer: _____

Business License Number *

Answer: _____

Business License Expiration Date

Date: _____

Business Phone Number *

Answer: _____

Owner's Full Name *

If corporate owned, please enter the full name of the company contact

Answer: _____

Owner's Date of Birth (If corporate owned, please enter N/A)

Date: _____

Owner's Home Address *

If corporate owned, please enter the corporate address

Answer: _____

Owner's Phone Number *

If corporate owned, please enter the phone number of the company contact

Answer: _____

Owner's Email *

If corporate owned, please enter the email of the company contact

Answer: _____

Primary Contact

Only complete if different from owner's name

Answer: _____

Primary Contact Email

Only complete if different from owner's email

Answer: _____

Primary Contact Phone

Only complete if different from owner's phone number

Answer: _____

Select Business Type (circle one)*

- Gas station
- Grocery Store
- Liquor Store
- Restaurant
- Medical
- Apartment Building
- Church
- Community Center
- School / Vocational Center
- Child Care Center
- Car Wash
- Bank
- Laundromat
- Retail Store
- Other: _____

List Business Days and Hours of Operation *

Answer: _____

Are you the business owner? *

_____ Yes _____ No

Do you own the building? *

_____ Yes _____ No

How many businesses occupy your building? *

Answer: _____

Number of public entrances *

Answer: _____

Select Property Description (circle one)*

- Single business in one building
- Single business in two or more buildings
- Multiple businesses in one building
- Multiple businesses in two or more buildings
- Other:
- How is the property used? *
- Retail
- Residential
- Industrial
- Offices
- Multi-use
- Hotel / Motel
- Other: _____

By signing below, you agree to the terms and requirements stated in the Memorandum of Understanding (MOU) and are authorized to do so. *

Date: _____

Signature: _____

Print Name: _____