



Customer Support Driven

Proposal Created for: Wheaton Park District

Prepared By: Kevin Ambron
Phone: 847.375.0300

3 Years in a Row!
2017, 2018 & 2019



Ranked # 1 in the Midwest



**Imperial Recognized as One of
America's Fastest Growing
Security System Integrators**



SERVICES OFFERED



VIDEO SURVEILLANCE

CCTV or Closed Circuit Television is a system that allows the owner to both monitor as well as record activity on his or her property.



DOOR ACCESS SYSTEMS

One of the best ways to maintain a level of control entry to your property whether it be your office, or other building is an access control system.



LOW VOLTAGE CABLING

A modern computer network begins by designing a cabling infrastructure that allows all subsystems to integrate fully and easily.



BURGLAR ALARM SYSTEMS

Protecting your business, building and employees is your priority and our specialty. We only use the very best security alarm equipment.



FIBER INSTALLATIONS

Stay connected with the most up to date and reliable cabling, fiber optics. Our team is highly qualified and educated to install for any project of any size.



INTERCOM SYSTEMS

We offer a wide range of intercom packages designed to provide effortless communications. Communicate throughout the office in a clear fashion.



"Excellent Job, well trained"
John O'leary with O'learys Contractor Equipment

"Rapid response times"
Joe Losurdo with Gold Max

Initial

Imperial Surveillance, Inc. - Illinois Wisconsin Indiana Minnesota Iowa
Phone 847-375-0300 Fax 847-375-6722 www.ImperialCCTV.com IL License # 127.001463



Wheaton Park District Subscriber ('Sub')
Wheaton Park District
Wheaton, IL 60187
Rob Sperl
630-464-0161

Quote # - 131080
Quote Date - Jul 24, 2020 11:06 AM
Consultant - Kevin Ambron
Project Name - Wheaton Park District Cosley Zoo Kiebler &
Taylor Barns Fire Rewiring w/ Conduit

(a) Schedule of Protection / Bill of Materials / Scope of Work

Schedule of Protection: Fire Alarm Systems

Bill of Materials:

Qty	Imperial Item #	Description
1	CBL 14/2 FIRE	14/2 Solid Fire Cable / Lot of Red UL Rated Fire Wire
1	Conduit Misc.	Conduit Raceways & Misc. Conduit Parts
1	Labor Prevailing Wage	Prevailing Wage Labor

Scope of Work:

1. Remove existing fire devices
2. Completely remove existing fire cabling
3. Install conduit and jboxes to fire device locations
4. Run new fire cabling in conduit from fire panel to device locations
--Run cable from Taylor Barn to Kiebler Barn through trenched pipe
5. Re-install existing fire devices
6. Test fire system

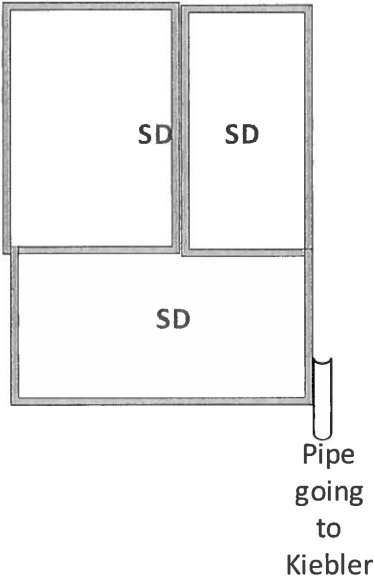
**Refer to fire drawings for device locations

**Additional costs if cable needs to be run from Main fire panel at Gift Shop to Kiebler Barn

**Wheaton Park District will lay new trenched pipe from Taylor Barn to Kiebler Barn

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Taylor Barn



INDEX

- FP= Fire Panel
- SD= Smoke Detector
- HS= Horn/Strobe
- PS= Pull Station





Guaranteed Response Time _____

Imperial Plan

Complete peak performance around-the-clock

OR

Outright Installation Sale: \$ 20,980.00

*Customer is responsible for firewall to protect against data breaches and holds Imperial Surveillance harmless if data breach occurs.

*Imperial Surveillance is not liable or responsible in any event of abuse, misuse, and or illegal use of this equipment.

*Please see the attached Addendum for additional Terms.

By _____

10/30/2022

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Imperial Surveillance, Inc. - Illinois Wisconsin Indiana Minnesota Iowa
Phone 847-375-0300 Fax 847-375-6722 www.ImperialCCTV.com IL License # 127.001463

Authorized Representative

Date

Imperial Surveillance, Inc. - Illinois Wisconsin Indiana Minnesota Iowa

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Highly Trained Techs

CREDIT CARD AUTHORIZATION PLEASE PRINT CLEARLY

*** THIS CARDHOLDER MUST SIGN BOTH THIS FORM AND THE ORDER ***
ACKNOWLEDGEMENT AND RETURN THEM TO IMPERIAL SURVEILLANCE.

Checking/ Savings Account

☐ Checking ☐ Savings
Name on Acct _____
Bank Name _____
Account Number _____
Bank Routing # _____
Bank City/State _____

Routing Number Account Number
222222222 000 111 555 1027

Credit Card

☐ Visa ☐ MasterCard
☐ Amex ☐ Discover

Cardholder Name _____
Account Number _____
Exp. Date _____
CCV Code _____

I authorize Imperial Surveillance to charge my account listed above \$ _____ which will represent my 50% Deposit.


☐ _____ (initial) Please save for use to pay final payment.

Signed and Agreed (CARD HOLDER SIGNATURE) (Signature MUST match signature on order acknowledgment)

Print Name _____ Date _____

☐ CHECK PAYMENTS—PLEASE SEND COPY

☐ Check Number _____ Date _____

 Initial

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ACH Authorization Form

Kenneth Kirschenbaum, Esq., Tel. No. (316) 747-5700
KIRSCHENBAUM CONTRACTS©Copyright 3-21-10

Rapid Response _____

Illinois Department of Financial and Professional Regulation
License No.: 127.001463

IMPERIAL SURVEILLANCE
1601 E. Algonquin Road
Arlington Heights, Illinois 60005-4758
(630) 269-6730

ACH RECURRING PAYMENT AND CREDIT CARD AUTHORIZATION FORM

Here's How Recurring Payments Work:

You authorize regularly scheduled charges to your checking, savings account, or credit card. You will be charged the amount indicated below each billing period during the initial term of my agreement and all automatic renewal terms. The charge will appear on your bank statement as an "ACH Debit" or your credit card statement. You agree that no prior-notification will be provided unless the date or amount changes, in which case you will receive notice from us at least 10 days prior to the payment being collected.

Please complete the information below:

I, _____ authorize IMPERIAL SURVEILLANCE
(full name)

to charge my ☐ bank account or ☐ credit card indicated below on the _____ of each
day/date

_____ for payment of my _____
week/month/quarter Insert type of bill

in the amount of \$ _____

Billing Address: _____

Email Address: _____

Select payment method below:

☐ **AUTOMATED ACH FROM BANK ACCOUNT PAYMENT:**

Account Type:	<input type="checkbox"/> Checking	<input type="checkbox"/> Savings
Name on Acct	_____	
Bank Name	_____	
Account Number	_____	
Bank Routing #	_____	
Bank City/State	_____	

 Initial

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I understand that this authorization will remain in effect until I cancel it in writing, and I agree to notify IMPERIAL SURVEILLANCE in writing of any changes in my account information or termination of this authorization at least 15 days prior to the next billing date. If the above noted periodic payment dates fall on a weekend or holiday, I understand that the payment may be executed on the next business day. I understand that because this is an electronic transaction, these funds may be withdrawn from my account, or charged to my credit card, on the above noted periodic transaction dates. In the case of a transaction being rejected for Non-Sufficient Funds (NSF) I understand that IMPERIAL SURVEILLANCE may at its discretion attempt to process the charge again within 30 days, and I agree to an additional \$25.00 charge for each attempt returned NSF which will be initiated as a separate transaction from the authorized recurring payment. I acknowledge that the origination of recurring transactions to my account must comply with the provisions of U.S. Law. I agree not to dispute this recurring billing with my bank or credit card company so long as the transactions correspond to the terms indicated in this authorization form. I agree that an ACH or credit card denial will constitute a breach of my payment obligation in my agreement with IMPERIAL SURVEILLANCE.

☐ **AUTOMATED CREDIT CARD PAYMENT:**

Credit Card #: _____ Expiration Date: _____ Security Code: _____


☐ Mastercard ☐ Visa ☐ American Express ☐ _____

Cardholder's Name (As it appears on credit card): _____

Billing Address: _____

Email Address: _____

SIGNATURE _____ DATE _____

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_____ In-House IT Staff _____

Network Survey

Thank you for choosing Imperial Surveillance!
Required Information Prior to Install

Managed network: YES / NO *If Managed, please provide:

Contact Name: _____

Email: _____

Tel: _____

Internet Service: __ATT / __COMCAST / OTHER: _____

Router Manufacture: _____

Admin Router Login Known :YES / NO

**If not known, you will need this on the day of install to avoid additional site visit/charge.

Customer Notes: _____

Customer Contact Person _____ Tel _____

Completed By (Signature)

Date

Initial

IMPERIAL SURVEILLANCE
1601 E. Algonquin Road
Arlington Heights, Illinois 60005-4758
(630) 269-6730

ADDITIONAL EQUIPMENT, SYSTEMS AND SERVICE DISCLAIMER NOTICE


The undersigned acknowledges that a representative of IMPERIAL SURVEILLANCE (hereinafter referred to as "IMPERIAL" or "ALARM COMPANY") has explained additional equipment, systems and protection that may be available from IMPERIAL, for additional charges, and the undersigned has had sufficient opportunity to consider the additional services that may be available, and has decided not to request or contract for such additional equipment, systems or protection. The additional equipment, systems and protection discussed included but was not limited to the following:

- | | | | |
|-----------------------|--|--|--|
| • hard wire systems | • UL, ETL or other nationally recognized testing lab approved installation | • data storage and retrieval | • video monitoring |
| • wireless systems | • UL, ETL or other nationally recognized testing lab approved monitoring | • access control | • cellular/ radio backup |
| • additional contacts | • sprinkler / fire alarm | • fire, smoke, carbon monoxide, water, heat, temperature | • latest technology |
| • motion detectors | • electrical surge protection | • roof, attic walls, exterior | • dedicated telephone line communication |
| • audio surveillance | | • independent secondary systems | |
| • video surveillance | | | |
| • guard response | | | |
| • stationary guards | | | |

The undersigned acknowledges that:

• Not all of the above services are available or offered by IMPERIAL but the services and equipment were brought to the undersigned's attention and the undersigned declined such services or the opportunity to obtain the services from other security companies.

• That IMPERIAL has explained that it has no control over communication pathways such as telephone lines, VoIP, Internet, radio or cellular. Not all communication pathways are available in all areas and all communication pathways are subject to failing. If available IMPERIAL has discussed alternative communication pathways and Subscriber is responsible for selecting the available communication pathways. The security system will not communicate if the communication pathways are not working.

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- That IMPERIAL is not responsible for the security or privacy of any wireless network system or router and that wireless systems can be accessed by others and it is the undersigned's responsibility to secure access to the system with pass codes and lock outs.
- That IMPERIAL has advised undersigned of any permits required for the alarm system and monitoring, and undersigned acknowledges that it is undersigned's responsibility to obtain and maintain all required permits and pay any false alarm or other fines related to the alarm systems or service.
- That smoke detectors and other battery operated devices must be checked monthly and batteries replaced at least annually and that the undersigned is responsible to check and replace batteries.
- That IMPERIAL has explained all components, operation and use of the alarm system to the undersigned's satisfaction.
- That if audio or video devices are installed, the undersigned has been advised to independently ascertain that the audio or video devices are used lawfully. IMPERIAL has made no representations and has provided no advice regarding the use of audio or video devices.

If IMPERIAL is taking over this system installed by anyone other than IMPERIAL:

- ☐ The undersigned declines inspection of existing system installed by others and assumes all risk and conditions of the system and has only requested IMPERIAL to re-program communication and monitor existing system with no repair obligation. IMPERIAL has inspected the security and or fire alarm system, reported non-operational components, and:
- ☐ The undersigned declines to authorize repairs and assumes all risk for existing system.
- ☐ The undersigned authorizes and agrees to pay for repairs which shall be detailed in the Sale or Service Agreement.

DEFICIENCIES (continue on additional page, if needed): _____

ADDITIONAL COMMENTS _____

Date: _____

Signature

Signature

Print Name

Print Name