

**Customer Monitoring Information Sheet**

**Customer First and Last Name:** \_\_\_\_\_

**Verbal Cancel Code:** \_\_\_\_\_ **Verbal Duress Code:** \_\_\_\_\_

**Physical Address to be monitored:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_ **Zip:** \_\_\_\_\_ **Premise Phone:** \_\_\_\_\_

**Subdivision:** \_\_\_\_\_ **Cross Streets:** \_\_\_\_\_

**City/County Limits:** \_\_\_\_\_ **Gate house phone:** \_\_\_\_\_

**Local Contact List (must have at least one contact in addition to the main premise number)**

	<u>Name</u>	<u>Number</u>	<u>Home</u>	<u>Work</u>	<u>Cell</u>
1.	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Billing Address (if different than above):**

**Name:** \_\_\_\_\_ **Alternate Phone:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Special Instructions:** \_\_\_\_\_

**Note:** Using the phone company's "vacation service" will prevent the alarm from being received at the central station. I verify that the above information is correct, and I will notify Executive Electronics of any changes in writing.

**Customer Signature**

**Customer Print Name**

**Date**

<b>EE Use Only</b>	Panel Location _____
Primary acct #: _____	Secondary acct #: _____
<b>Timer Test</b> Yes No Interval _____	<b>Audible signal</b> Yes No Interval _____
Panel Phone Number _____	<b>Fire</b> Yes No