

EMERGENCY DATA SHEET

Customer name and address:

Site name and address:

Please provide the following as it relates to the monitored location:

County: _____ Email address (optional): _____

I wish to have the following person contacted at the number listed prior to Vector attempting to dispatch on a burglary alarm activation. This individual will have been provided the proper passcode as verification to cancel an accidental activation.

Name: _____

Phone Number: (____) _____ Cell _____ Home _____ Work _____ Pager _____

Call Intercept Code (if applicable): _____

If you would like this person(s) to have a unique passcode different from what is on your monitoring information, please provide that code:

Passcode: _____ (maximum of 10 characters)

Customer Signature: _____

Print Name: _____

Date: _____

You may wish to take this opportunity to update the contact information that is listed on your monitoring record. If so, please list the names, telephone numbers, and telephone types for those individuals you would like called following the dispatch of the authorities. If the individual subscribes to call intercept service please provide the proper access code. These numbers will be called in the order they are supplied. (Additional contacts may be attached.)

1st Contact Name: _____

Telephone #1 (____) _____ Cell _____ Home _____ Work _____ Pager _____

Telephone #2 (____) _____ Cell _____ Home _____ Work _____ Pager _____

2nd Contact Name: _____

Telephone #1 (____) _____ Cell _____ Home _____ Work _____ Pager _____

Telephone #2 (____) _____ Cell _____ Home _____ Work _____ Pager _____

3rd Contact Name: _____

Telephone #1 (____) _____ Cell _____ Home _____ Work _____ Pager _____

Telephone #2 (____) _____ Cell _____ Home _____ Work _____ Pager _____