

CUSTOMER FALSE ALARM PREVENTION CHECKLIST

- | Yes | No | |
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| ___ | ___ | 1. I have been made aware of the applicable alarm Ordinance and I will comply with its requirements. |
| ___ | ___ | 2. I understand it is my responsibility to prevent false alarms, and I understand it is critical and my responsibility to assure that all users of the system (such as residents, employees, guests, cleaning people, and repair people) are trained on the proper use of the system. |
| ___ | ___ | 3. I understand that there is a 7-day no dispatch period for intrusion alarms, excluding Panic, Duress and Holdup signals, during which time the alarm company will have no obligation to and will not respond to any alarm signal from an alarm site and will not make an alarm dispatch request to law enforcement, even if the alarm signal is the result of an actual alarm event. |
| ___ | ___ | 4. I have been trained in the proper operation of the system and have been given an operating sheet summarizing the proper use of the system, as well as the security system operating manual. |
| ___ | ___ | 5. I know how to turn off motion detectors while leaving other sensors on. (Residential Only) |
| ___ | ___ | 6. I know how to test the system, including the communication link with the monitoring center. |
| ___ | ___ | 7. I understand that my entry time is ___ and my exit time is ___. |
| ___ | ___ | 8. I have the alarm company phone number to request repair service or to ask questions about the alarm system. |
| ___ | ___ | 9. I know how to cancel an accidental alarm activation and have the system cancellation code or code word. |
| ___ | ___ | 10. I understand that indoor pets can cause false alarms and I will contact my alarm company to adjust the system if I acquire any additional indoor pets. |
| ___ | ___ | 11. I understand that the main control panel and transformer are located in _____. |
| ___ | ___ | 12. I have received an alarm sheet, which describes how the alarm company will communicate with me in the event of various alarm signals. |
| ___ | ___ | 13. I understand the importance of: <ul style="list-style-type: none">▪ keeping my emergency contact information updated and I know how to do this;▪ immediately advising the alarm company if my phone number changes (including area code changes); and▪ immediately advising the alarm company of any other changes to my telephone service such as call waiting or a fax line. |
| ___ | ___ | 14. I will advise the alarm company if I do any remodeling (such as painting, moving walls, doors or windows). |
| ___ | ___ | 15. I understand that certain building defects (such as loose fitting doors or windows, rodents, inadequate power, and roof leaks) can cause false alarms. I will correct these defects as I become aware of them. |
| ___ | ___ | 16. The alarm company has given me written false alarm prevention techniques to help me prevent false alarms. |

Comments:

ALARM COMPANY

Technician

CUSTOMER

Print Name(s)

Signature(s)

Date