

Client Response Update Form --- v1.5 2018

Client/Site Name: _____

Section 1: Contacts who are to be called for any issues or response to alarm system, a MAXIMUM of 3 contacts only allowed.

Emergency Keyholder Contacts Must be available at all times.	Order	Name	Mobile	Phone
	1			
	2			
	3			

Section 2: Action we will carry out in the event of an alarm from your system, make one selection only, for domestic sites we will call the site number first.

Select A Single Response From List Of Options.	<input type="radio"/> Contact first available Keyholder only to attend all alarms.
	<input type="radio"/> Contact first available Keyholder, and dispatch a Patrol to attend all alarms. I agree to pay the Patrol Callout Fee.
	<input type="radio"/> Contact a Patrol only to attend all alarms. I agree to pay the Patrol Callout Fee.

Section 3: If you have selected to contact a Keyholder only to attend alarms above, you must select an alternative response if no keyholder is available.

Alternative Response If Keyholder Is Unavailable.	<input type="radio"/> If none of the Keyholders can be contacted, no further action is required, I understand my security will be compromised.
	<input type="radio"/> If none of the Keyholders can be contacted, I authorise a Patrol to be dispatched, I agree to pay the Patrol Callout fee.
	Preferred Alarm Response Provider: _____

Section 4: Only complete this if you have chosen Supervised Open/Close Monitoring, enter your earliest Open time and latest Close time below.

Supervised Open And Close Times.	Status	Mon	Tue	Wed	Thu	Fri	Sat	Sun
	Open							
	Close							

Note: A 30 minute tolerance is allowed either side of Open and Close times before the Control Room will action a breach of schedule.

Section 5: User Details, all users of the alarms system must be listed and have a Voice ID for verification with the Control Room, or a Site ID.

User Details. Note: Naskam does not retain your Pin No in our Monitoring Software only your Voice ID.	Voice ID	User Name

Site Voice ID _____ **A Site Voice ID will apply to all staff when quoted.**

By signing below you agree that all the information provided above is correct and authorise Naskam Security to make these updates to your current Response data.

Signature: _____ Date: _____