LSS Legacy security services, inc.

Subscriber Account Alarm Monitoring Agreement

Dealer Information	Subscriber Information					
Dealer Number:	Subscriber Account Number:					
Dealer Name:	Secondary Account Number:					
Template Number:	Subscriber Name:					
Special Instructions/Cross Street:	Address (No PO Box):					
	City: State: Zip:					
	Verification Telephone Number:					
	Second Verification Number:					
	Passcode:					

Authorities			24-Hour Emergency Number (no 911)			Permit Number		
PD								
FD								
MD								

	Notification List	Telephone Number	Time Frame	User Name	User #	Passcode	
1							
2							
3							
4							

Zone	P/S	Alarm Type	A	dditional Description	Premise	Security	Dispatch	Responsible Party	Installer	Log	Cancelable*	Hold Signal**

Indicate action order by placing 1, 2, 3, 4 in the respective notification boxes. (Ex: "1" for 1st, "2" for 2nd...). If no order is provided we will assume the instructions flow from left to right respectively.

*Action on an intrusion alarm may be suspended for a maximum of 60 seconds pending the receipt of a Cancel/Abort Signal. **Action on a Supervisory, Trouble, A/C Failure or Low Battery alarm may be suspended for a maximum of 60 minutes pending receipt of a Restore signal.

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Panel Telephone Num	ber	Panel Type:	Panel Type: Forma			Exter	Extended Format 🛛 Yes	
	Time Zone:	,	Test Frequency			Dealer Notification:		
Eastern	□ Central	□ None	□ Daily		🗆 E-mail	🗆 Pager	□ Phone	
□ Mountain	□ Pacific	□ Weekly	\Box Monthly		Text Dealer Access			og)
		Daylight Savings Tir	ne:Yes	N	0			

YOU agree to the Agreement and Understandings printed on the Front and Reverse sides of this form. YOU acknowledge that YOU have read and Understand them and that no changes have been made to this pre-printed form. YOU agree that Central Station's liability is specifically limited by the Agreement and Understandings contained herein.

Authorized Signature, Subscriber	Subscriber Name (please print)			
0				
Authorized Signature, Dealer	Dealer Na	ame (please print)	Date	
Authorized Signature, LSS			Date	
	White to LSS	Yellow to Dealer	Pink to Subscriber	
	FOR	INTERNAL USE ONLY	7	
	FOR	-		
	Please insert appropri			
	i icuse insert appropri			