

SALES/SERVICE 800.662.8313 ALARM SYSTEM WORK ORDER AGREEMENT FLORIDA * ALABAMA * MISSISSIPPI

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1. This Alarm System Work Order Agreement (the "Agreement") is made as of the _________, by and between ADi , (the "Company") and the ("Customer") as the address shown below (the "Premises / Monitored location")

CSAA
FIVE DIAMONI

Customer LAST NAME	FIRST	MI	Password: (4 to 10 Letters WORD) SSN			
Customer LAST NAME	FIRST	MI	DOB (MM/DD/YY) Optional	SSN	☐ Email:		
Monitored Location		Cross Street	City		State Zip		
Call List: 1. Premises ()		Cell	none Company:	AT&T/Bell South/Verizon/Et		
2. 2nd Call Verification Name: _							
3. Emergency Contact Name:			Phone: ()				
4. Emergency Contact Name:						I .	
5. Email Address:		☐ No Emai	I LEAD SOURCE: ☐ OFC	SELF DIS	SCONNECT RE	NEWAL	
PLAN TYPE: Phone Lir IP CAM Honeywell WO WI Alarm.com WO WI Installation Date: Install Time: 8-10 10-12	DVR Honeywell/AVYCO Other (2 hour est. arrival)	Primary Basic Interact Doorlocks	Panel v2 GO Panel v3 V Vive Interactive Automation Brass Nickel Bronze (006)		Doorbell CAM Honeywe	ell	
DESCRIPTION	NEW EQUIP LOCATION	N COST AMOL	2. Install of the system. C				
Type of Install ☐ NEW ☐ TAKEOVER GSM (LTE Communicator)		\$499	devices in connection wi at the time of installation. below and incorporated h	Customer hereby ag	rees to buy the system/de	evices described	
Recessed Door Contact		\$299 \$149	in accordance with the te	rms and conditions se	et forth. IF CUSTOMER I	FAIL TO FULLFILL	
Surface Contact Keyless Remote		\$129 \$119	cost of the system and re		agrees to pay the consul	tation lee, the	
Motion Detector		\$219	3. Customer agrees to months at the above mo	•			
Smoke Communicator Glass Break Detector		\$229 \$219	Upon the execution of thi	s agreement shall au	tomatically start the billing	g process.	
Carbon Monoxide Medical Pendant		\$229 \$149	Billing" through their bank	Customer understands that the monthly payments must be paid through "Direct Billing" through their banking institution or credit card. Customers acknowledge that they			
Door Bell Camera		\$279	THE RIGHT TO CANCEL	authorize Company to obtain a Security System. Residential Clients: CUSTOMER HAS THE RIGHT TO CANCEL THIS TRANSACTION at any time prior to midnight on the 3rd			
Z-Thermostat Wifi-Card		\$279 \$119	verbal method is valid, an	business day after the above date of this work order in writing. Customer agrees that no verbal method is valid, and must be submitted only in writing. The date on this agreement is the agreed upon date for both the Company and the Customer.			
Trip/Deductible Z-Lock □ BZ □ BS □ CS		\$ 65 \$229	4. Client verifies that the system has to be remove	ey are owners of the	property listed above.		
WAP IP-CAM (Indoor)		\$149	additional \$299.00 restoc	king/removal fee and	early termination fees wi	ill apply.	
IP-CAM (Outdoor)		\$279 \$349	5. Client understands th station. Alarm.com or .n	et is not affiliated	nor has any bearing	on the current	
Warranty ePaperwork Advertising Kit	1 1		monitoring services cu companies. By signing	this work order, Cli	ient agrees and unders	stands that they	
Certificate of Insurance	1		have read the above services. Client understa				
Translater			6. Customer agrees that this Customer agrees that this				
			agrees that customized o	order can not be cance	elled after three day of the	is signed documen	
	ENHANCED SERVICE		Credit Card Type:				
DVR	<u> </u>	141516		th. 8th. 10th. 14th	cvv#		
□PERS □PERS w/Fall Detec	t				<u> </u>	 ¬	
Living Room (LR), Great Room (GR Bonus Room (BR), Garage (G),	.), Kitchen (K), Master Bedroom Garage Foyer (GF), Detac	n (MBR), Bedroom (BR) Halli h (D), Room (R), See Not	way (H) e (NB) Equipment Sales Tax	Cost	\$	-	
Checking account #			1 4 11 4			-	
Checking account #Routing #					\$		
Sales Rep's Name: Cell Phone:			One time Program ar	☐ P/Dated nd Setup	\$		
	·		IVE Monthly Mo	nitoring	<u></u>	1	
If takeover, name of previous products (Takover is only if the account is act _{Notes:} Email to: Lauren@adialarr		a completed takeover add		3 3		-	
ome Ownership Requirement and			Total Due		\$		
By Signing below you verify that the al	bove information is true and c	omplete, and you authorize	payment and confirmation with credi	t reporting agencies c	or a third party.		
COMPANY REPRESENTATIVE A	PPROVAL	CUSTOMER SIGNATURE		CUSTOMER SIGN	NATURE		
OST-SERVICE SUMMARY							
interactive USERID:	interac Passw	tive vord:	Pre-Install Conf				
WiFi Password:	Pan	nel Location:	Transformer Locatio	n:	© Ala	arm Direct 2019 vv USA	
N A							
Notes to Admin::							
NOT	ICE OF CANCEL	LATION of Auth	orized Dealer Worko	rder Agreem	ent		
			D	ate of Transa	action:		
You may CANCEL this tra					,		
available to Us in substan You may, if You wish, col	· -		· -				
WITHIN TEN BUSINESS	DAY of cancellation	n request.					
If You cancel, you author If you fail to make the goo	ds available to Us, o	or if You agree to re		•	, then You remai	n liable	
for performance of all obl To cancel this transaction	=		et dated conv of this No	tice of Cancell	ation or any other	er	
written notice to Alarm D					anon or any othe	-	
NOT LATER THAN MIDN	VIGHT OF		(date).	-			

DATE

CUSTOMER SIGNATURE

valid email address to recieve a confirmation of your completed request.

I HEREBY CANCEL THIS TRANSACTION: