

Acct# _____

Responsible Party List-Business

CAME SECURITY ALARMS
2950 Main Street
Morro Bay, CA. 93442
(805) 772-0607
Fax: (805) 772-0686

Alarm Company Operator's Lic. No. ACO – 5808 Cont. Lic. No. 422645 C7-C10

PLEASE COMPLETE AND RETURN TO CAME SECURITY AS SOON AS POSSIBLE

ACCOUNT NAME: _____

IDENTIFICATION—Check the method to be used.

ADDRESS: _____

Password _____

ZIP: _____

Password for each employee
(Please enclose list with authorized signature)

TELEPHONE: () _____
() _____

ALARM PERMIT #: _____
(may be required – please check with your local police dept/city hall)

EMAIL: _____

RESPONSIBLE PARTIES: (PLEASE PROVIDE FIRST & LAST NAMES)

Please choose two (2) contact numbers as your ECV contacts (CIRCLE ECV). Prior to dispatching police, we will attempt to contact these two (2) numbers for possible clarification / cancellation of alarm activity.

(1) Name: _____ ECV

Home _____ Cell _____ Work _____ Other _____

(2) Name: _____ ECV

Home _____ Cell _____ Work _____ Other _____

(3) Name: _____ ECV

Home _____ Cell _____ Work _____ Other _____

Persons authorized to change account Info/order service:

Persons authorized to get confidential Info (openings/closings,etc...)

Special Instructions / Extra Information:

Mailing address (other than site):

AUTHORIZED SIGNATURE (S):

DATE: _____