



Form CF007

INTRUDER ALARM SYSTEM KEYHOLDER FORM

	-	
Company / Name		Your Insurance Company or Broker details:
Address		
Post Code		Optional
Premises Tel.		

Please complete and return the Keyholder/User information as required by Police Force Policy as soon as possible.

KEYHOLDERS & USERS	NAME	PIN No. preferred	Contact Telephone
Keyholder/User 1 (required)			
Keyholder/User 2 (required)			
Keyholder/User 3 (optional)			
Keyholder/User 4 (optional)			
ALARM USERS ONLY	NAME	PIN No. preferred	
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			

Please note Keyholders will be contacted by our Central Monitoring Station in the order listed until a contact has been made. A minimum of TWO Keyholders are required by the Police, both must be able to attend the site within 20 minutes using their own transport when requested. Keyholders are automatically users of the Alarm system so there is no need to duplicate them in the user list.

Users only of the alarm system are never contacted by the Police. But we do require their details for identification purposes should they wish to cancel an accidental alarm activation, or should the Central monitoring station contact the premises. There is no maximum number of users, please continue on a separate sheet if you have more than 10 users.

Please return by email to: admin@centurion.net or post to: Centurion Fire & Security Ltd Centurion House, Park Road West, Huddersfield, HD4 5RX

Print Name:	
Authorised Signature	Date:

NOTE: NEW INTRUDER ALARM SYSTEMS ONLY

The Police will NOT issue a URN (unique response number) for your premises until this form is completed and returned to us with a cheque for the Police Administration fee made payable to the appropriate Police force which in your location is:

Fee £

www.centurion.net