

Customer Number

PFA Number

ADT Fire Monitoring

PO Box 2439 | Shortland Street | Auckland 1140

p: 0800 238 111 | f: 0800 238 113 | e: adt.firemon.nz@tycoint.comw: www.adtfiremonitoring.co.nz

Customer Update Form

Note: This information is essential for the correct response of the Fire and Emergency New Zealand in the event of an emergency.

Please complete this form in full and return to ADT Fire Monitoring by:

Email adtfm.admin@tycoint.com Fax 0800 238 113 Post PO Box 2439, Shortland Street, Auckland 1140.

Customer and Billing Information					
Customer Name					
Postal Address					
Suburb		Town/City		Post Code	
Contact Name				Phone	
Mobile		Email			
Building Owner Information (The person/s or entity who owns the premise/s)					
Name of Registered Owner					
Postal Address					
Suburb		Town/City		Post Code	
Owners Contact Name				Phone	
Mobile		Email			
Monitored Site Details (Note: If there is more than one site, please complete for each site)					
Business Name					
Building Name (if different)					
Street Address					
Suburb		Town/City		Post Code	
Phone		Email			
Contacts/Keyholders (Persons to be contacted, in listed order, for access or if information is required)					
1. Contact Name				Position	
Work				Mobile	
Home				Email	
Notification for Live Fire Event	Yes <input type="checkbox"/> No <input type="checkbox"/>	Notifications to be sent (choose 1 only)		Phone Call <input type="checkbox"/>	SMS via Mobile <input type="checkbox"/> Email <input type="checkbox"/>
2. Contact Name				Position	
Work				Mobile	
Home				Email	
Notification for Live Fire Event	Yes <input type="checkbox"/> No <input type="checkbox"/>	Notifications to be sent (choose 1 only)		Phone Call <input type="checkbox"/>	SMS via Mobile <input type="checkbox"/> Email <input type="checkbox"/>
3. Contact Name				Position	
Work				Mobile	
Home				Email	
Notification for Live Fire Event	Yes <input type="checkbox"/> No <input type="checkbox"/>	Notifications to be sent (choose 1 only)		Phone Call <input type="checkbox"/>	SMS via Mobile <input type="checkbox"/> Email <input type="checkbox"/>

Name _____
 Signature _____
 Company Name _____
 Date _____

