

COMMERCIAL ALARM MONITORING AGREEMENT

ACCOUNT NUMBER 444178 COMMUNICATOR MAKE & MODEL DATE ON LINE _____ DEALER Maggie

SUBSCRIBER
 Hidalgo Co. Treasures Dept
 NAME BARBARA S. CLOSER
 ADDRESS Edinburg, TX 78539 SUITE/APT. NO. _____
 CITY _____ STATE _____ ZIP CODE _____
 TEL. NO. () _____ () _____ () _____
 FAX NO. () _____ () _____ () _____ S. S. NO. _____
 TDL# _____

COMPANY
Superior Alarms
 600 Ash Avenue, McAllen, TX 78501
 Ph. (956) 682-6005
 FAX (956) 630-2434 JUL 20 2010
 2:05

Physical Address SAME LOCATION OF ALARM DEVICES _____ City _____ State _____ Zip _____
 Directions to Subscriber's Location: _____

Fire Hold-up Burglar Panic Low Batt Medical Close Open Other _____
 Business Warehouse Office Store Factory Other _____

CODES ZONES / DESCRIPTIONS (ATTACH SEPARATE SHEET OF PAPER IF NECESSARY)

ALARM ZONE	CONDITION	COMMENTS / AREA PREMISES INSTRUCTIONS		AUDIBLE		CONDITION	VERIFY / AREA PREMISES INSTRUCTIONS		AUDIBLE	
		YES	NO	YES	NO		YES	NO	YES	NO

LOCAL AUTHORITIES TO BE NOTIFIED

CODE _____ AUTHORITY Edinburg Police Dept. TELEPHONE NUMBER _____
Local Police Department () _____
Local Fire Department () _____
 Other _____ () _____
 Other _____ () _____

AUTHORIZED INDIVIDUALS TO BE NOTIFIED

IN ORDER OF PRIORITY (individuals to be notified in the event of an alarm condition. Calls are made in sequence until contact is made.)

NAME	PRIMARY PHONE # (Desc)	ALTERNATE PHONE # (Desc)	CODE WORD
1	()	()	()
2	()	()	()
3	()	()	()
4	()	()	()
5	()	()	()

Phone Descriptions are: B = Beeper, C = Car, D = Digital Pager, H = Home, W = Work, V = Voice Pager

FOR OPEN / CLOSE MONITORING ONLY

Check for appropriate open/close:
 Log only (no action) Supervised (action outside specified timed) Action to be taken _____
 Supervised schedule below: use your local time.

	SUN	MON.	TUES.	WED.	THURS.	FRI.	SAT.
OPEN							
CLOSE							

Activity Report Yes No Monthly

Early Open Allowance _____
 Late Open Allowance _____
 Late Close Allowance _____
 Mailed to: _____

FEES • TERMS • PAYMENTS

INITIAL TERM: 3 Year(s) Annual Fee \$ 180.00 + tax
60 No. of payments equal payments of \$ 90.00, each payable semi on the 1st day of Sept./Mar., beginning 1st Sept, and continuing regularly and semi Annually thereafter.

Subject to Terms and Conditions of this Agreement (including those on the reverse side), the Subscriber agrees to subscribe for monitoring by Company.
SUBSCRIBER MUST SIGN IN THREE PLACES

ACCEPTED:
 By _____ Title _____
 Date _____
 For Office Use Only Typed by _____ Checked by _____

WHITE - SUPERIOR ALARMS PINK - CUSTOMER COPY
 FOR SUPERIOR CENTRAL STATION, INC. USE ONLY REV. A

Monitoring Information Approved By _____ Date _____
 Monitoring Information Entered By _____ Date _____
 Billing Information Completed By _____ Date _____
 Billing Information Entered By _____ Date _____
 Form Filed in Customer File By _____ Date _____