

COMMERCIAL ALARM MONITORING AGREEMENT

ACCOUNT NUMBER 462892 COMMUNICATOR MAKE & MODEL DATE ON LINE _____ DEALER Dejuna

SUBSCRIBER Texas Drs Highway Patrol
 NAME 414 N. Bickertial
 ADDRESS McAllen TX 78501
 CITY McAllen STATE TX ZIP CODE 78501
 TEL NO. 956 984-5736
 FAX NO. () () () S.S. NO. _____
 TOL# _____

COMPANY Superior Alarms
 600 Ash Avenue, McAllen, TX 78501
 Ph. (956) 682-6005
 FAX (956) 630-2434

LOCATION OF ALARM DEVICES 2812 S. International City Weslaco State TX Zip _____
 Physical Address _____
 Directions to Subscriber's Location: 5 miles S. on FM 1015 from exp. 83 Building West side of Road

CONDITIONS MONITORED _____
 Fire Hold-up Burglar Panic Low Batt Medical Close Open Other _____
 TYPE OF INSTALLATION _____
 Business Warehouse Office Store Factory Other _____

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

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

LOCAL AUTHORITIES TO BE NOTIFIED
 CODE AUTHORITY NAME TELEPHONE NUMBER
 Local Police Department Hidalgo Co. Sheriff () ()
 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.
 Early Open Allowance _____
 Late Open Allowance _____
 Late Close Allowance _____
 Mailed to: _____
 Activity Report Yes No Monthly

Activity Report	SUN	MON	TUES	WED	THURS	FRI	SAT
OPEN							
CLOSE							

FEES • TERMS • PAYMENTS
 INITIAL TERM: 1 Year(s) Annual Fee \$ 120.00 + tax
 No. of payments equal payments of \$ 10.00, each payable Monthly on the 1st day of Jan Feb March, beginning Jan 1st, and continuing regularly and Monthly 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 _____
 SIGNATURE OF SUBSCRIBER Hon. Ramon Garcia County Judge

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 _____
 WHITE - SUPERIOR ALARMS PINK - CUSTOMER COPY
 FOR SUPERIOR CENTRAL STATION, INC. USE ONLY REV. A
 Approved by: _____
 Date _____
 T S MOORE PRINTING 956.687.6868 12/09