



ALARM SYSTEM DESCRIPTION FOR BANK BURGLAR ALARM SYSTEM CERTIFICATE

PROTECTED PROPERTY						
Name:						
Address:						
City:			State:	Zip Code:		
Country: (If not US)			I			
		ALARM SERVICE C	OMPANY			
File No.		Service Center	Service Center No.			
Name:			-			
Address:						
City:			State:	Zip Code:		
Counrty: (If not US)				•		
Representative: (Name & Title)			Phone Number	Phone Number		
			Fax Number)		
		PERIOD OF ISSU	ANCE			
Issue Date:	Expiration Date:	New Renew Expiring Certificate Replace Lost Certificate		If Renewing or Replacing, Please Give Original Certificate's Serial No.		
	COL	MMENTS AND CLARI	FICATIONS			

Note: Clarify location or area of coverage, as needed

SYSTEM DESCRIPTION

Category: Bank								
Type of System	Extent of Protection	Quantity						
Safe	Complete							
Safe	Partial							
☐ Vault	Complete Partial							
☐ Night Depository	Complete Partial							
Automated Teller Machine	Complete Partial							
Holdup (Supplementary, per Ul	_681)	number of intiating devices						
Area Covered/Location: (Building(s), Flo	oor(s), or Area(s)							
Alarm Sounding Device Location:	☐ Inside ☐ Outside	Inside and Outside						
	DEMOTE MONITORING							
REMOTE MONITORING								
Entity Conducting the Monitoring None (Proceed to Controls and Transmitter Units Section)								
UL Listed Central Station or Residential Monitoring Station								
File No. — Service Center								
	se enter address at right)							
_	Gity, State.							
Party Notified in case of alarm:		oscriber's Agent (Person signated by Subscriber)						
Party Notified in case of alarm: Law Enforcement Agency		signated by Subscriber)						
	des	signated by Subscriber)						
	Name:	signated by Subscriber)						
	Name:Street:City, State, Zip:	signated by Subscriber)						
Law Enforcement Agency	Name:Street:City, State, Zip:	signated by Subscriber)						
Law Enforcement Agency Alarm Transmission Method (Prime	Name:Street:City, State, Zip:	Derived Channel						
☐ Law Enforcement Agency Alarm Transmission Method (Prime Multiplex	Name: Street: City, State, Zip: Direct Wire	Derived Channel Transmitter (McCulloh)						

Alarm Transmission Method (Secondary) (May be required for some types of primary transmission means. See UL 827 and equipment installation manual.)								
None	☐ Multiplex		Derived Channel					
Private Radio System (Two-	way) Radio Network/	Transport System (Two-wa	ay) Direct Wire					
Private Radio System (One-	way) Radio Network	Transport System (One-wa	ay) Transmitter (McCulloh)					
Digital Alarm Communicator Cellular Digital Alarm Communicator								
File No(If not known, fill in name and address be Name: Address:		ii useu).						
City:		State:	Zip					
Line Security Employed:	No Line Security (Equipment marked Grade A, B, or C, or having to reference to line Security)	Standard (Equipment marked Standard, Grade AA, BB, or CC)	Encryption (Equipment marked Encryption)					

CONTROL AND TRANSMITTER UNITS

Manufacturers and Models Nos.