



SECURITY ALARM AGREEMENT FORM

Lessee acknowledges that he/she has received an orientation of the unit security alarm system and understands the operation of the alarm system.

Lessee agrees to pay \$50.00 per occurrence of false alarms and will pay within five (5) business days.

If Lessee requests to change their security alarm system code, he/she agrees to pay \$20.00 per occurrence and will pay within five (5) business days.

Lessee agrees to provide the name and phone number of two (2) individuals that the Police Department will contact. The individual(s) shall enter the unit and turn off the alarm system and reset the alarm system. Lessee is responsible for orientating the individual(s) on the security alarm system. Please UPDATE contacts when changes occur.

Contact #1: _____
Printed Name Phone Number

Contact #2: _____
Printed Name Phone Number

Lessee agrees that they will not abuse the security alarm system and equipment. Lessee agrees to report any damages or problems immediately to the EHP.

Lessee consents to being responsible for the security alarm system and the manual. The following items are the responsibility of the Lessee while in the housing unit:

- 1. Interior Keypad 5. Exterior Siren
2. Interior Motion Sensor 6. Exterior Strobe Light
3. Interior Siren 7. Wiring
4. Interior System Contacts 8. Operation Manual

*If Lessee vacates the premises and the manual is not returned or is not returned in good condition, the Lessee shall pay \$30.00.

Lessee Signature (primary)

Date

Lessee Printed Name (primary)

Unit Location

White (EHP)

Canary (Lessee)