

Customer Termination Form

For Mobile use ONLY

Line # _____ Account # _____ Dealer _____

911 Address Information

Customer Name		
Address		
Address (Additional)	Cross Street	
City	State	Zip Code

This form is specially made for mobile devices. Please ONLY use this specific form on smartphones / tablets. Desktops / Laptops should use the full featured form available at www.hsmc-ul.com.

Both Apple (iOS) and Android may use the official Adobe Acrobat app from the relevant app stores. The native Mail app from iOS will also work with this form.

Tap on the "check" boxes to add a check.

A signature may be used where necessary, with finger input.

Upon completion, use the "share" button to return the completed form.

Termination Information

At whose request is service terminated?	Security Company <input type="checkbox"/>	Property Owner <input type="checkbox"/>	HSMC <input type="checkbox"/>	Other <input type="checkbox"/>
If other, please explain: _____				
Reason for Service Termination	Change Dealer <input type="checkbox"/>	Customer Moved <input type="checkbox"/>	Non-Payment <input type="checkbox"/>	Other <input type="checkbox"/>
If other, please explain: _____				
How was the system disconnected?	Deprogrammed <input type="checkbox"/>	RJ31X Cut & Mailed <input type="checkbox"/>	Panel Removed <input type="checkbox"/>	Other <input type="checkbox"/>
If other, please explain: _____				
If NOT DISCONNECTED, please explain future plans for termination: _____				

Important Termination Notice to the Customer

This is a notification that I (We), _____ currently have Central Station Monitoring and request the termination of our security system's monitoring by your company for the address above.

_____, the alarm installer, has explained to us that any security system functions derived through Central Station Monitoring will be inoperative. These include, but are not limited to low battery, duress and other emergency alarm code transmissions. It has also been explained that because of this disconnection our security system will be a local alarm ONLY.

I (We) do request Central Station termination and also agree to notify our insurance company regarding this policy change.

Signature of Customer / Agent

Date

This is a notification that _____, the alarm system installer, has notified the Customer that their alarm system has been disconnected from Central Station Monitoring and that their alarm system, henceforth, will be a local alarm ONLY.