

**WESTERN SECURITY SYSTEMS LTD**  
**COMMERCIAL PROPERTY - KEYHOLDER LIST**

**Read the notes on pages two before completing this form.**

**Business Name:**

**Full Address:**

**Telephone No.:**

**Company-Wide Password:**

Keyholders In Order of Call Out.	First Name ( In Full)	Surname (In Full)	Keyholder Telephone No.'s  You Can Provide Up To Two Numbers Per Individual Keyholder in Each Box.	Individual Keyholder Password  (If Applicable)
1	<input style="width: 170px; height: 35px;" type="text"/>	<input style="width: 170px; height: 35px;" type="text"/>	<input style="width: 260px; height: 35px;" type="text"/>	<input style="width: 190px; height: 35px;" type="text"/>
2	<input style="width: 170px; height: 35px;" type="text"/>	<input style="width: 170px; height: 35px;" type="text"/>	<input style="width: 260px; height: 35px;" type="text"/>	<input style="width: 190px; height: 35px;" type="text"/>
3	<input style="width: 170px; height: 35px;" type="text"/>	<input style="width: 170px; height: 35px;" type="text"/>	<input style="width: 260px; height: 35px;" type="text"/>	<input style="width: 190px; height: 35px;" type="text"/>
4	<input style="width: 170px; height: 35px;" type="text"/>	<input style="width: 170px; height: 35px;" type="text"/>	<input style="width: 260px; height: 35px;" type="text"/>	<input style="width: 190px; height: 35px;" type="text"/>
5	<input style="width: 170px; height: 35px;" type="text"/>	<input style="width: 170px; height: 35px;" type="text"/>	<input style="width: 260px; height: 35px;" type="text"/>	<input style="width: 190px; height: 35px;" type="text"/>
6	<input style="width: 170px; height: 35px;" type="text"/>	<input style="width: 170px; height: 35px;" type="text"/>	<input style="width: 260px; height: 35px;" type="text"/>	<input style="width: 190px; height: 35px;" type="text"/>
7	<input style="width: 170px; height: 35px;" type="text"/>	<input style="width: 170px; height: 35px;" type="text"/>	<input style="width: 260px; height: 35px;" type="text"/>	<input style="width: 190px; height: 35px;" type="text"/>
8	<input style="width: 170px; height: 35px;" type="text"/>	<input style="width: 170px; height: 35px;" type="text"/>	<input style="width: 260px; height: 35px;" type="text"/>	<input style="width: 190px; height: 35px;" type="text"/>
9	<input style="width: 170px; height: 35px;" type="text"/>	<input style="width: 170px; height: 35px;" type="text"/>	<input style="width: 260px; height: 35px;" type="text"/>	<input style="width: 190px; height: 35px;" type="text"/>
10	<input style="width: 170px; height: 35px;" type="text"/>	<input style="width: 170px; height: 35px;" type="text"/>	<input style="width: 260px; height: 35px;" type="text"/>	<input style="width: 190px; height: 35px;" type="text"/>

## Read these notes before starting to complete the form.

A minimum of two entirely separate keyholders must be entered on page one to ensure compliance. This electronic form will demand that at least two keyholders are entered.

- ✓ Passwords are used for the purpose of authenticating that person. If you or your keyholder cannot quote a password, the Alarm Monitoring Centre will treat you/them as a "hostile" person and will not offer you/them any form of assistance. Furthermore, failure to quote a correct password can result in the Police being called for which you may lose Police response !!
- ✓ Allow your keyholders to choose their own password as they will generally choose a word, number or combination of both that they will easily remember.
- ✓ Your keyholders must have a good understanding of the alarm system. Ensure that they are aware of the sticker on your alarm keypad. It contains important account information to assist them should the alarm system activate. It is your responsibility to ensure that your keyholders are trained in the use of the alarm system.

The "ARC Account Ref" field shown below is a mandatory field. If you do not have a sticker on your keypad you will need to call our office find out your Account Reference Number as we will NOT action any changes without it. Furthermore you agree that the keyholders listed on Page one will overwrite all existing keyholders currently recorded on the database of the Alarm Monitoring Centre for the business property shown at the top of Page one.

Your ARC Account Ref.:  (See sticker on your alarm keypad)

Your Full Name:

Date:

When you have completed this form, return both pages to our offices using either method shown below: -

**Post:** Western Security Systems Ltd  
South Glade  
Gwaelod-y-Garth  
Cardiff  
CF15 9TS

**Email:** When you have completed this form, click the grey "Submit by Email" button at the very top of the 1st page.