

ZONE INFORMATION SHEET

CUSTOMER NAME: _____ ACCOUNT# 410 _____

ADDRESS: _____ PANEL PH# _____

CITY : _____ STATE: CO ZIP: 809 _____ DATE: _____

ZONE	DESCRIPTION	ALARM CODE	RESTORE CODE	BYPASS CODE	TROUBLE CODE	TROUBLE RESTORE CODE	PANEL CODES
1							OPEN 1- _____ CLOSE _____
2							MANUAL FIRE _____ RESTORE _____
3							HOSTAGE _____ RESTORE _____
4							PANIC _____ RESTORE _____
5							HOLDUP _____ RESTORE _____
6							MEDICAL _____ RESTORE _____
7							PANEL TRB _____ RESTORE _____
8							BLOWN FUSE _____ RESTORE _____
9							AC LOSS _____ RESTORE _____
10							LOW BAT _____ RESTORE _____
11							GROUND FLT _____ RESTORE _____
12							PHONE 1 TRB _____ RESTORE _____
13							PHONE 2 TRB _____ RESTORE _____
14							DATA LOST _____ RESTORE _____
15							_____ RESTORE _____
16							_____ RESTORE _____
							TEST SIGNAL _____ INTERVAL _____
							HOURS DAYS WEEKS MONTHS

SPECIAL INSTRUCTIONS <hr/> <hr/> <hr/> <hr/>	CIRCLE FORMAT 4X2 CID
--	------------------------------------