



Level 2, Building 6, Central Park
666 Great South Road
PO Box 2439
Shortland Street, Auckland 1140
New Zealand
Phone: 0800 238 111
Fax: 0800 238 113
adt.firemon.nz@tycoint.com
www.adtfiremonitoring.co.nz

**ADT FIRE MONITORING
ADDITIONAL FIRE SYSTEM
CONNECTION CONTRACT v3**



Customer No:

FA No/s:

ADT FIRE MONITORING

This information is essential for the correct response of the New Zealand Fire Service in the event of an emergency. Please fill in these schedules **completely and correctly** and return to:

ADT Fire Monitoring
PO Box 2439
Shortland Street
Auckland 1140

NAME OF PERSON COMPLETING CONTRACT

Name:	
Signature:	
Company Name:	
Date:	
Contact No:	

Schedule 1 - SITE INFORMATION

If more than one site - please complete a separate contract for each site

Business Name:		
Building Name (if different):		
Unit or Level:		
Street Number:	Street Name:	
Suburb:		
Town/City:	Phone:	
Daytime Contact:	First Name:	Last Name:
Daytime Contact Phone:		
Building Occupancy e.g Retail, Apartments etc		



Customer No:
FA No/s:

ADT FIRE MONITORING

Schedule 2 - SYSTEM DETAIL

Letter of Approval for Plans and Drawings received from NZFS? Yes <input type="checkbox"/> No <input type="checkbox"/>		Date Issued:								
System Type:	02 <input type="checkbox"/>	03 <input type="checkbox"/>	04 <input type="checkbox"/>	04a <input type="checkbox"/>	04b <input type="checkbox"/>	05 <input type="checkbox"/>	06 <input type="checkbox"/>	07 <input type="checkbox"/>	21 <input type="checkbox"/>	22 <input type="checkbox"/>
Is the fire panel analogue addressable? Yes <input type="checkbox"/> No <input type="checkbox"/>		<i>With an analogue addressable fire alarm system, the exact fire location and type of alarm is determined immediately by the control panel as each individual detector has a unique address that show its exact position and type of detection.</i>								
ASE Required: Yes <input type="checkbox"/> No <input type="checkbox"/>		Alterations: Yes <input type="checkbox"/> No <input type="checkbox"/>								
Location of ASE:										
Type of ASE Required: 2 <input type="checkbox"/> 8 <input type="checkbox"/> 16 <input type="checkbox"/>		Jack Point Installed: Yes <input type="checkbox"/> No <input type="checkbox"/>				Power Point Installed: Yes <input type="checkbox"/> No <input type="checkbox"/>				
No. of FA connections	Manufacturer e.g Vitech, Wormald	Make	Fire Panel / Sprinkler / Combined		Location					
e.g 2	Petronics	P1	Fire Panel		Main Office					

Schedule 3 - INSTALL AND SERVICE COMPANY INFORMATION

Install Company:	Name:	ID:
Call Out Service Company:	Name:	ID:
Testing Service Company:	Name:	ID:
Commissioning Agent: Write the Service Agents name & contact number		
Certifying Company: Write Certifier's name & contact number		

Date required for Live Connection / /
Note: A minimum of six weeks lead time is required for processing your application. Monitoring fees are chargeable when an ASE is connected to the network.



Customer No:

FA No/s:

ADT FIRE MONITORING

Schedule 4 - CONTACTS / KEYHOLDERS

Persons to be contacted, in listed order, if access to building or information is required – Note: YOU MUST COMPLETE ONE PER SITE

1.

First Name:	
Last Name:	
Work Phone:	Times available:
Mobile Phone:	Times available:
Home Phone:	Times available:
Email:	

2.

First Name:	
Last Name:	
Work Phone:	Times available:
Mobile Phone:	Times available:
Home Phone:	Times available:
Email:	

3.

First Name:	
Last Name:	
Work Phone:	Times available:
Mobile Phone:	Times available:
Home Phone:	Times available:
Email:	

4.

First Name:	
Last Name:	
Work Phone:	Times available:
Mobile Phone:	Times available:
Home Phone:	Times available:
Email:	



Customer No:

FA No/s:

ADT FIRE MONITORING

Schedule 5 - CONTRACT TERM AND PRICE

The contract will be issued for the minimum term selected and invoiced quarterly

Initial term: Please tick one	18 months <input type="checkbox"/> 3 years <input type="checkbox"/> 5 years <input type="checkbox"/>
Prices (excluding GST)	These prices are applicable on the commencement of connection of each site to the ASE Network
Per Primary FA Connection:	\$69.30* per month
Per Secondary FA Connection:	\$14.43* per month
* This price will be adjusted annually in line with Consumer Price Index (CPI) and with any increase in Fire Service fee imposed by NZFS	

Schedule 6 - CONNECTION FEES

One off fee invoiced at the time of connection to the ADT Fire Monitoring network

New Connection	\$595*	<i>New building/site, includes initial Fire Alarm connections and standard ASE aerial; includes additional fire alarms on same site</i>
Adding a New Fire Alarm	\$395*	<i>Adding a secondary connection to an existing connected site using existing ASE</i>

*These charges apply in respect to the work undertaken by ADT for administration and commissioning to the NZFS. The Service Agent will charge the customer directly for their site attendance, labour and costs. **Note:** For non standard connections, additional wiring and or extender aerials costs may be on charged

Schedule 7 - ADT SELECT (ONLINE REPORTING)

ADT Select is a service that provides easy access to information to assist our customers with managing their automated Fire Alarm obligations and improving operational efficiency. This web based customer service portal allows you to quickly review your monitoring activity online, anytime.

<input checked="" type="checkbox"/>	Service	Fee
<input type="checkbox"/>	ADT Select	\$20.00 per month (invoiced quarterly)



Customer No:

FA No/s:

ADT FIRE MONITORING

Schedule 8 - AUTHORISED CONTRACT SIGNATORY

1. All fees quoted are exclusive of GST.
2. The applicant acknowledges that:
 - a. They have authority to sign on behalf of and to bind the customer
 - b. The information provided is true and correct in every detail
 - c. The Terms & Conditions signed for the Customer Contract are binding for Customer No:

On behalf of the Customer

First Name:	Surname:
Title: Mr <input type="checkbox"/> Ms <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Dr <input type="checkbox"/> Other <input type="checkbox"/>	
Signature:	
Date:	

On behalf of ADT Fire Monitoring

First Name:	Surname:
Signature:	
Date:	

For ADT Use Only

		MM	Initials
Schedule 1	SITE INFORMATION		
Schedule 2	SYSTEM DETAIL		
Schedule 3	INSTALL AND SERVICE COMPANY INFORMATION		
Schedule 4	CONTACTS / KEYHOLDERS		
Schedule 5	CONTRACT TERM AND PRICE		
Schedule 6	CONNECTION FEES		
Schedule 7	ADT SELECT (ONLINE REPORTING)		
Schedule 8	AUTHORISED CONTRACT SIGNATORY		