Instructions For Completing the Security Alarm Information Sheet
SAIS-8-01

Note: For help in completing this form, please contact Joey Pons at x25357 or jvp6188@louisiana.edu

General
Any department who has a monitored security alarm used to secure rooms or buildings should complete this document.

Completion of the Table
Location of the Alarm
• Please identify the building and room number that the alarm is monitoring.

Phone attached to the Alarm
• In order for the alarm to be monitored, it has to be attached to a phone line. Please identify the phone number of the line attached to the alarm.
• If this phone line is shared with another user, please identify that user or the use of the phone (ex. computer laboratory phone).

Alarm Information
• List the name of the manufacturer and model number of the alarm.
• List the name of the vendor who is monitoring the alarm (i.e. Security Link, Argus, etc).
• List the account number for the alarm (given by the manufacturer)

Primary and Secondary Key Holder
• Identify the name of two departmental employees who are familiar with the alarm system and have access to disable it. PLEASE DO NOT GIVE THE ACCESS CODE FOR THE ALARM.
• Be sure to include both the office phone number and a home phone number. Primary and Secondary Key Holders will be asked to disable alarms as per the policy, sections 2.0, 5.0, and 6.0.