

**EASTON**  
*Life Safety Systems* **ELECTRONICS**

\* \* \* DISTRIBUTOR OF SUPRA PRODUCTS \* \* \*

**FIRE DEPARTMENT**  
**REGISTRATION FORM**  
**FOR**  
**PUBLIC SAFETY KEY BOX SYSTEM**

THIS SPECIAL REGISTRATION FORM MUST BE COMPLETED TO INITIATE A PUBLIC SAFETY KEY BOX SYSTEM.

THIS SYSTEM IS AVAILABLE ONLY TO FIRE DEPARTMENTS AND OTHER PUBLIC EMERGENCY AGENCIES AND MUST BE SIGNED BY A CHIEF OFFICER OF THE AGENCY.

FOR PROPER SECURITY, DO NOT SIGN THIS FORM UNTIL YOU HAVE CHECKED ALL THE INFORMATION INCLUDING THE SPECIMEN SIGNATURES ON THE REVERSE SIDE OF THIS FORM. AFTER SIGNING MAIL IMMEDIATELY TO EASTON ELECTRONICS.

PLEASE USE TYPEWRITER. POPULATION OF AREA WE SERVE \_\_\_\_\_

AGENCY NAME \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

NAME OF INDIVIDUAL IN COMPLETE CHARGE(CHIEF,ETC.) \_\_\_\_\_

\_\_\_\_\_ TITLE \_\_\_\_\_

PHONE (        ) \_\_\_\_\_

THE NUMBER OF KEYS WE WILL REQUIRE FOR OUR SYSTEM IS \_\_\_\_\_

(A REASONABLE NUMBER OF KEYS WILL BE PROVIDED AT NO CHARGE.)

KEYS WILL BE SENT BY REGISTERED MAIL.  
SEE OVER

*Where Quality and Service Count*

MATV • SOUND • INTERCOM • FIRE ALARM

6 PEQUOT WAY CANTON, MASSACHUSETTS 02021

PHONE 617-828-1955

FAX 617-828-3719

## AUTHORIZED SIGNATURES

The following signature registration form is the only document establishing authorization

| DATE | PRINT NAME | SIGNATURE |  |
|------|------------|-----------|--|
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AFTER COMPLETING AND CHECKING THE ABOVE INFORMATION AND SIGNATURES MAIL IMMEDIATELY TO:

EASTON ELECTRONICS  
6 Pequot Way  
Canton, Ma. 02021