



Premier Fire Alarms and Integration Systems, Inc.

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State License EF20000777
"The Retrofit Experts"



Owner's Insurance Premium Credit Request

This form should be forwarded to your homeowner's insurance carrier for possible premium credit

A. General Information:

Insured's Name: _____
Insured's Address: _____

Flanco Condominium Association, Inc.
3701 North Country Club Drive
Aventura, FL 33180

Insurance Company: _____
Policy #: _____
Type of System: Fire Alarm
Installed By: Premier Fire Alarms
Serviced By: Premier Fire Alarms

B. Notifies: Local Sounding Device n/a Police Dept. n/a Fire Dept n/a Central Station X

Name and Address of Central Station: Monitoring Partners
1025 NW 17th Ave. A-1
Delray Beach, FL 33445

C: Powered by: 120VAC with Battery back-up

D: Testing: Annual

E: Smoke Detector Locations: All smoke detectors located in common areas are connected to the Fire Alarm System.

F: Burglary Detecting Devices: N/A

G: Additional Pertinent Information: Fire Sprinkler System installed is tied in to fire alarm system and is monitored.

Insured's Signature: _____ Date: _____
Alarm Company Signature: Naren A Park Date: 9/7/16