



## FIRE ALARM MONITORING SERVICES

### [10.3] FORM C4 (v1.1)

#### APPLICATION TO DISCONNECT A DIRECT BRIGADE ALARM & CANCEL FIRE ALARM MONITORING

THIS FORM ADVISES DFES THAT THE APPLICANT (AS LISTED ON THIS FORM) WISHES TO DISCONNECT THE DIRECT BRIGADE ALARM (DBA) OF THE LISTED PREMISES AND THEREBY CANCEL ALL FIRE ALARM MONITORING SERVICES.

DFES RECOMMENDS CUSTOMERS OBTAIN ADVICE/ PERMISSION FROM THEIR LOCAL GOVERNMENT/ COUNCIL AND BUILDING INSURERS PRIOR TO APPLYING FOR A DBA DISCONNECTION.

**PLEASE NOTE:**

A DISCONNECTION FEE WILL BE CHARGED TO THE BELOW APPLICANT TO RETRIEVE THE DFES-OWNED ALARM SIGNALLING EQUIPMENT (ASE) FROM YOUR PREMISES' FIRE INDICATOR PANEL. YOU WILL BE PROVIDED WITH AN ESTIMATE OF THESE COSTS UPON SUBMISSION AND ACCEPTANCE OF THIS FORM.

ANNUAL MONITORING FEES WILL CONTINUE TO BE CHARGED UNTIL THE DATE THE ASE IS RETRIEVED FROM SITE. ANY ANNUAL FEES ALREADY PAID WILL BE REFUNDED PRO RATA BASED UPON THE DATE THE ASE IS RETRIEVED FROM SITE.

*PLEASE ENSURE ALL SECTIONS OF THIS FORM ARE COMPLETED CORRECTLY SIGNED AND DATED TO AVOID PROCESSING DELAYS.*

1. DETAILS OF PREMISES TO BE DISCONNECTED			
DBA NUMBER (IF KNOWN):			
NAME OF BUILDING			
UNIT/ STREET/LOT NUMBER			
STREET NAME			
SUBURB		POST CODE:	
2. APPLICANT DETAILS			
APPLICANT CONTACT NAME			
APPLICANT ORGANISATION			
APPLICANT CONTACT PHONE		MOBILE:	
APPLICANT EMAIL			
APPLICANT POSITION/ RELATIONSHIP TO SITE	<input type="checkbox"/> BUILDING OWNER	<input type="checkbox"/> BUILDING TENANT	
	<input type="checkbox"/> PROPERTY MANAGER	<input type="checkbox"/> STRATA REPRESENTATIVE	
	<input type="checkbox"/> OTHER:		
<b>NOTE:</b> IF THE APPLICANT IS NOT THE BUILDING OWNER, IT IS THE RESPONSIBILITY OF THE APPLICANT TO PROVIDE NOTIFICATION TO THE BUILDING OWNER OF THIS REQUEST TO DFES TO DISCONNECT/ CANCEL DBA MONITORING.			
3. SITE CONTACT (TO SCHEDULE RETRIEVAL OF ASE IF DISCONNECTION APPROVED BY DFES)			
SITE CONTACT NAME			
SITE CONTACT PHONE		MOBILE:	
SITE CONTACT EMAIL			
INDUCTION REQUIRED	<input type="checkbox"/> NO	<input type="checkbox"/> YES – DETAILS BELOW	
INDUCTION DETAILS			
FIRE INDICATOR PANEL LOCATION			

<b>4. REFUND INFORMATION</b>	
<b>REFUND BANK ACCOUNT</b> <i>MUST BE SAME DETAILS AS CURRENT BILLING INFORMATION</i>	BSB: _____ ACCT #: _____
	ACCOUNT NAME: _____
<b>5. DISCONNECTION REQUEST DETAILS</b>	
<b>REASON FOR DISCONNECTION:</b>	<input type="checkbox"/> MONITORING NOT REQUIRED** <input type="checkbox"/> BUILDING USE CHANGE**
	<input type="checkbox"/> BUILDING VACATED** <input type="checkbox"/> OTHER:**
	<input type="checkbox"/> BUILDING TO BE DEMOLISHED – DATE: _____
** WHERE - MONITORING NOT REQUIRED, BUILDING USE CHANGE, BUILDING VACATED OR OTHER ARE SELECTED A LETTER FROM LOCAL GOVERNMENT / OCCUPANCY PERMIT AUTHORITY IS REQUIRED TO CONFIRM DBA MONITORING IS NO LONGER REQUIRED OR A REQUIREMENT OF OCCUPANCY. WITHOUT LETTER THIS FORM WILL BE REJECTED.	
<b>6. APPLICANT'S DECLARATION TO DISCONNECT DBA (PLEASE PRINT CLEARLY AND USE BLOCK LETTERS)</b>	
<b><i>I HEREBY REQUEST DISCONNECTION OF THE DBA AS LISTED ON THIS FORM AND ACKNOWLEDGE THAT I WILL RECEIVE AN INVOICE FOR THE DISCONNECTION FEE ONCE THE REQUEST FOR DBA DISCONNECTION HAS BEEN APPROVED BY DFES AND EQUIPMENT IS RETRIEVED.</i></b>	
<b>SIGNATURE OF APPLICANT</b> (OR APPROVED REPRESENTATIVE)	_____
<b>NAME OF APPLICANT</b>	_____
<b>POSITION OF APPLICANT</b>	_____
<b>ORGANISATION NAME</b>	_____
<b>DATE SIGNED</b>	_____