

Your monitored estate
at your fingertips

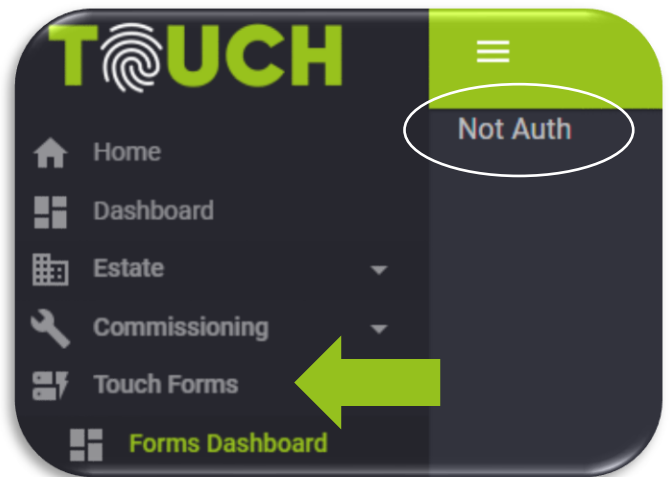


Touch Forms - Orders

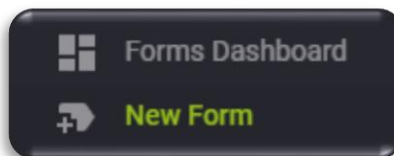
Touch Forms are located on the main Touch homepage.

The Dashboard gives an overview of all forms you have filled in.

If you are presented with a message that states "Not Auth" it means your settings do not allow you to view or create forms on Touch. Please ask a super user to alter your permissions on Touch to "Allow" you to view and create new forms.



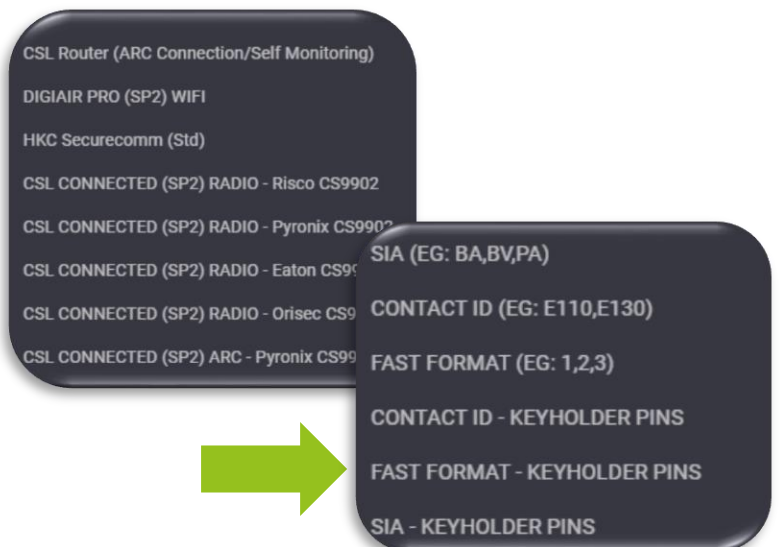
To compile a new form, select "New Form."



Select the type of account the form is in reference to.



Select the type of system you wish to order and the required format. For keyholder only sites, select the format with 'Keyholder Pins'.



Populate the relevant site details.



Enter Site Details

Site Name: SMC TEST
Business/Property Name or if Domestic, Owner's Name

Address 1: SMC STREET
Address 2: TOWN
City: CITY
County:
Post Code: NG8 8NG

Site Type: Domestic Site

Premise Number 1:
Premise Number 2:
Site Password: SMC123
Alternative ID: 12345

BACK STEP NEXT STEP

Enter the delivery address information.



Equipment Delivery

My Address Site Address Different Address

Customer Name: SMC TEST
Name of receiver

Address 1: SMC STREET
Address 2: TOWN
City: CITY
County:
Post Code: NG8 8NG

BACK STEP NEXT STEP

Select whether the site has Fire Brigade response or just Keyholder response.



Confirm if the site should include fire pins, and if the site is a Sleeping Risk.



Fire Brigades

Keyholder Only Fire Brigade

FB ABERDEEN FIRE SERVICE | FIRE BRIGADE
FB AVON FIRE SERVICE | FIRE BRIGADE
FB BEDFORDSHIRE FIRE SERVICE | FIRE BRIGADE
FB BERKSHIRE (THAMES VALLEY) | FIRE BRIGADE
FB BUCKINGHAMSHIRE (THAMES VAL | FIRE BRIGADE
FB CAMBRIDGESHIRE FIRE SERVICE | FIRE BRIGADE
FB CENTRAL SCOTLAND FIRE SERV | FIRE BRIGADE
FB CHESHIRE (NW FIRE CNTRL) | FIRE BRIGADE

Agency:

If required, select the relevant Fire Brigade from the Drop-down menu.



Zones will automatically then populate.

Enter any location or comments in 'Zone Comment'.



Zone Selection

Include Fire Pins?

Standard Sleeping Risk

Zone ID	Event ID	Event Description	Restore Required	Zones to Restore	Zone Comment
AR	699MFR	AC MAINS RESTORED	N	AT	
AT	622MF	AC MAINS FAIL	N		
BA	1322OC	INTRUDER (NP)	N		
BB	6102O	ZONE OMITTED - Re-armed	N		
BC	1399	ABORT	N		
BV	1380	INTRUDER (CONFIRMED)	N		
FA	123CF	FIRE ALARM (CFOA FILTERING)	N		
HA	200	PERSONAL ATTACK	N		

Enter the keyholder information.

If the site is using a generic password and not individual passwords for each keyholder, leave the password field blank.



First Name*
SMC

Last Name*
TEST

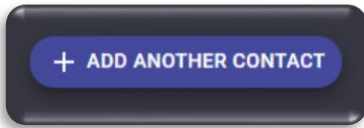
Password
...

Contact Type*
Monitoring

Relation
Authority

Any zone amendments should be sent through to data-chanes@smc-monitoring.com.

Choose if the keyholder is a keyholding company, 24 hr duty keyholder or standard, 'monitoring' keyholder.



Select "Add another contact" to add additional keyholders.

Contact Details

First Name*
SMC

Last Name*
Duty Mobile

Password
SMC123456

Monitoring

On duty 24 HOUR Key-Holder

Keyholding Company

Enter URN information and 'URN Type' or select 'Keyholder only'.

If the site will not have URN's or if you do not have a URN yet but will be applying for one soon choose 'Keyholder Only'. Once a URN is sent, we will upgrade the system and amend event codes.

URN - Police Agencies

Keyholder Only URNs

Agency:

URN Type: Personal Attack

URN:

URN Description:

+ ADD ANOTHER URN

ABERDEEN (NTH EAST) A-DIV | POLICE FORCE

AVON & SOMERSET POLICE | POLICE FORCE

BEDFORDSHIRE POLICE | POLICE FORCE

CAMBRIDGESHIRE POLICE | POLICE FORCE

CENTRAL (FORTH VALLEY) C-DIV | POLICE FORCE

CHESHIRE POLICE | POLICE FORCE

CLEVELAND POLICE | POLICE FORCE

CUMBRIA POLICE | POLICE FORCE

Select the required Police force from the drop-down menu.

Additional Requests/Notes and Terms & Conditions

Additional information

Please put any additional information or requests here that you may think is relevant. If none, please leave blank.

You Agree to all the Terms and Conditions before submitting this new Application form through TOUCH

First Name Surname

Enter your Full Name Here

I Agree

← BACK STEP → SUBMIT NEW FORM

Enter any additional information or required equipment.

Enter your name, agree to the Terms and Conditions, and then select 'Submit New Form'. Your form will then be submitted and processed by the admin team.

Submit New Touch Form

✓ Touch Form has been submitted successfully! Please return back to the Dashboard to see this form in the list and to be able to track it's processing progress.

RETURN