



# Customer Referral Form

(Fax This Form to 281-840-4435)

Agent #: \_\_\_\_\_ Agent's Name: \_\_\_\_\_ Cell: \_\_\_\_\_ Fax: \_\_\_\_\_

Today's Date: \_\_\_\_\_, 2007      Agent's email: \_\_\_\_\_

Customer's Name: \_\_\_\_\_ SS# \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
Year of Birth \_\_\_\_\_ Gender: ( ) Female ( ) Male

Service Address: \_\_\_\_\_ ( ) Home ( ) Business  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Current Home address: \_\_\_\_\_  
\* If different from service address  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Previous Home address: \_\_\_\_\_  
\* If current home address is less than 2 years  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Contact Phone #    Home: (        ) \_\_\_\_\_  
                          Work: (        ) \_\_\_\_\_  
                          Cell: (        ) \_\_\_\_\_

Best # to call:    ( ) Home ( ) Work ( ) Cell  
Best time to call? \_\_\_\_\_ Mon Tues Wed Thurs Fri Sat Sun  
Primary language \_\_\_\_\_ Alternate language \_\_\_\_\_

Type of property: ( ) Single House ( ) Townhouse ( ) Condo ( ) Office Building  
( ) Other \_\_\_\_\_

Does the customer have prewired security system in place?    ( ) Yes ( ) No  
Current monitoring company \_\_\_\_\_  
Previous monitoring company \_\_\_\_\_  
Contract expiration \_\_\_\_\_  
Monthly payment \$ \_\_\_\_\_

Agent's relationship with customer (if applicable) \_\_\_\_\_  
Is the customer a NAT agent?    ( ) Yes ( ) No

Notes/Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please call (877)-NAT-2008 x 2 or email to [natalarm@yahoo.com](mailto:natalarm@yahoo.com) to confirm that the fax was received.