



## C4 FORM

### Application to DFES to Disconnect a DBA and 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.

#### Important Information

Annual Monitoring Fees will continue to be charged until the date DFES approve the disconnection request and the site is placed Offline. Any annual fees already paid will be refunded pro-rata based upon the date the site is placed Offline.

**i** Please ensure **all sections** of this form are completed correctly, signed, and dated to avoid processing delays.

Complete on screen, or print and fill in by hand in **BLACK PEN** using **BLOCK LETTERS**. If filling by hand, fill circles with a large dot and mark boxes with a tick to indicate your answer.

### 1. Details of Premises to be Disconnected

DBA Number:			
Name of building:			
Building address:			Postcode:

### 2. Applicant Details

**i** 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 the DBA and Fire Alarm Monitoring.

Applicant name:				
Applicant organisation:				
Applicant phone:				
Applicant mobile:				
Applicant email:				
Applicant position / relationship to the site:	Building Owner	Property Manager	Strata Representative	Building tenant
	Other – details:			



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### 3. Site Contact

*The Site Contact will be contacted by FAMS to schedule the retrieval of the ASE if Disconnection is approved by DFES.*

Site Contact name:			
Site Contact phone:			
Site Contact mobile:			
Site Contact email:			
Induction required:	No	Yes – details:	
Fire Indicator Panel make / model:			
Fire Indicator Panel location:			

### 4. Refund Payment Details

*Refund Bank Details must be the same as the current Billing Information.*

Account name:	
Account BSB:	
Account number:	

### 5. Disconnection Request Reason

<b>Monitoring not required*</b>		
<b>Building use change*</b>		
<b>Building vacated*</b>		
<b>Other*</b> – provide details:		
Building to be demolished – date:		(dd/mm/yyyy)
Redevelopment / construction site		

*\* Where these options are selected, a letter from the Local Government / Occupancy Permit Authority is required to confirm DBA Monitoring is no longer required or a requirement of occupancy. Without this letter, the form will be rejected.*



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## 5. Applicant's Declaration

I hereby request the Disconnection of the DBA as listed on this form.

Signature of Authorised Applicant (or Approved Representative):	_____ OR; type to sign:	
Name of Authorised Applicant:		
Position of Authorised Applicant:		
Company / business name:		
Applicant's phone:		
Applicant's email:		
Date signed:		(dd/mm/yyyy)

Date form completed:

(dd/mm/yyyy)