

Date: _____ **Completed by:** _____

TYPE OF WORK: Warehouse Garage Lab Construction Manufacturing

Name of company : _____

Main contact : _____ **Email :** _____

Type of Device:

Name of unit/units : _____, _____, _____, _____

Device will be used : Inside Outside Indoors and outdoors

Type of worker: on the road Fixed location Multiple locations

SELECT AND COMPLETE THE APPLICABLE SECTIONS BELOW FOR THE ALERT MANAGEMENT CONFIGURATION

SECTION A : *(For the supervision of the internal battery and if applicable Geofence function of the DEVICE and for the event reporting, this can be sent to a specific person internally) If this is the case, please complete the information in this section.*

1) **Low battery alert :** Email: _____

2) **GEOFENCES** if applicable (limits of virtual outdoor areas radius 1000 meters) * only if the device is used outdoors:

3) **Geofence1 :** complet address : _____

Entering zone alert

Exiting zone alert

Entering & exiting zone

Optional: Sending of the monthly event report: This report will be sent by email every month in pdf format. Up to 3 contacts can be added for reporting.

Emails: _____

(SECTION B) 24/7 CENTRAL MONITORING MANAGEMENT

SECTION B Information of responders to contact in case of emergency during notification validation by Central Supervision

1) **Physical address of worker #1:** _____

2) **Physical address of worker #2:** _____

3) **Onsite worker phone number :** _____

4) **Alert supervision:** SOS notification Fall Notification

5) **Supervision schedule:** Day evenings nights weekends

4) **Name of person to be contacted in case of an emergency notification validated by the agents of the Call center monitoring center:**

Name contact #1: _____

Tel: _____

Name contact #2: _____

Tel: _____

Name contact #3: _____

Tel: _____

Name contact #4: _____

Tel: _____

COMMENTS : _____

**Complete and save this document for you files. Once completed please email us at
sales@laxsonsolutions.com for the configuration devices.**