## **ALARM MONITORING SERVICE AGREEMENT**

Operations: 1-800-NED-COPS (800-633-2677)

Fax:

(800-633-2677) 856-629-4043 LYDIA SECURITY MONITORING, INC. D/B/A CENTRAL OFFICE PROCESSING SERVICES, C.O.P.S. MONITORING, AND ALARMWATCH P.O. BOX 836

	- INTERNAL USE ONLY -	
ENTERED BY	DATE	INVOICE#

n. NJ 08094 START MONITORING ON (DATE) 10/27/2025 DEALER USE SUBSCRIBER OR DEALER LIC./REG.# REC.# 533 ACCOUNT# BY AND BETWEEN LYDIA SECURITY MONITORING, INC. DBA CENTRAL OFFICE PROCESSING SERVICES, C.O.P.S. MONITORING, AND ALARMWATCH ("COMPANY") AND 2025 October THIS AGREEMENT IS MADE THIS 27 DAY OF | John Charshafian (Rite Aid) ("SUBSCRIBER"). SUBSCRIBER IS SOMETIMES REFERRED TO HEREIN AS "YOU" OR "YOUR". MONITORED ADDRESS 865 Route 45 ("PREMISES") on Pilesgrove STATE N.J. TOWNSHIP 7IP CODE 08009 201 468 2555 CALL TO VERIFY PHONE NO. 1: -CALL TO VERIFY PHONE NO. 2: SUBJECT TO THE TERMS AND CONDITIONS HEREINAFTER SET FORTH, COMPANY AGREES TO PERFORM MONITORING SERVICES (DEFINED IN THE SECTION TITLED "MONITORING SERVICE") FOR AN ELECTRONIC SECURITY ALARMANDIOR VIDEO ANDIOR VOICE COMMUNICATION SYSTEM ("SYSTEM"), AS A SUBCONTRACTOR OF Premier Fire & Security LLC YOU UNDERSTAND AND AGREE THAT YOUR LOCALMUNICIPALITY MAY REQUIRE THAT YOU OBTAIN A LICENSE OR PERMIT FOR THE USE OR MONITORING OF THE SYSTEMAND THAT YOU ARE SOLELY RESPOI FOR DETERMINING AND COMPLYING WITH SUCH OBLIGATIONS. ACCOUNT IS ☐ U.L. CERTIFIED FOR ☐ FM CERTIFIED FOR 699A COMMERCIAL RESIDENTIAL ACCT TYPE: PASS CODES: Jbrooks13 TRANSMISSION FORMAT: CONTACT ID COMMENTS: PANEL TYPE: AUTHORITIES LISTED IN ORDER AGENCIES OR AUTHORITIES TO BE NOTIFIED CHECK P=POLICE, F=FIRE, M=MEDICAL, OR A=AUXILIARY PHONE #: P1 ☐ F1 ☑ M1 ☐ A1 ☐ CALL: Salem County Communications 856 769 2233 P2 F2 M2 A2 CALL: Salem County Communications 856 769 2233 P3 F3 M3 A3 CALL: Salem County Communications 856 2233 769 RESP. PARTIES RESPONDING PARTIES (RP) LISTED IN ORDER TO BE NOTIFIED UPON RECEIPT OF SIGNALS FOR LISTED CODES. LIST ONLY ONE NOTIFICATION METHOD PER LINE. IF RP HAS MULTIPLE CONTACT METHODS, LIST RP MULTIPLE TIMES CHOOSE ONE PHONE DESCRIPTION OR CELL PHONE CARRIER FOR TEXT MESSAGES NOTIFICATION METHOD: CALL EMAIL TEXT PHONE NUMBER OR EMAIL ADDRESS John Charshafian ☑ □ □ 201-468-2555 3 5 6 ALARM COMPANY NOTIFICATION ATTENTION DEALER: ALARM NOTIFICATION WILL BE SENT VIA COP-A-FAX OR EMAIL IF YOU HAVE ACTIVATED EITHER SERVICE. IF DEALER PHONE NOTIFICATION IS REQUIRED, INDICATE WITH EITHER "A" (ALARM COMPANY NOTIFICATION) OR "R" (RUNNER FOR FIRE SYSTEM RESPONSE) IN "AL CO" FIELD. ATTACH RIDER FOR SPECIAL INSTRUCTIONS OR ADDITIONAL CODES USE TEMPLATE# CONTACT ID 24 SUPERVISED TEST FREQUENCY (i.e. 24, 72, 168, etc.): CODE SPECIFIC TO PREMISE OPENING/CLOSING: SUPERVISED UNSUPERVISED CONDITION CONDITION CONDITION П CONDITION CONDITION DISPATCH MODIFICATION (SELECT ONLY ONE) 1. ACTIVATE "SUBSCRIBER DELAY OF DISPATCH" MODIFICATION TO MY ACCOUNT (MAXIMUM OF FOUR SEPARATE CALLS PRIOR TO DISPATCH) 2. ACTIVATE "MULTIPLE ALARM ANALYSIS" BEFORE RESPONDING TO MY ACCOUNT: DO NOT RESPOND TO A BURGLAR ALARM SIGNAL UNLESS MORE THAN ONE UNIQUE CODE OR MINUTES (MAXIMUM 10 MINUTES) ZONE IS RECEIVED WITHIN 3. ACTIVATE "DUPLICATE SIGNAL SUPPRESSION" AFTER RESPONDING TO MY ACCOUNT: AFTER INITIALLY DISPATCHING THE POLICE DEPARTMENT, DO NOT RESPOND TO REPEAT BURGLARY OR LOWER PRIORITY ALARMS WITH DUPLICATE CODES OR ZONES RECEIVED WITHIN 3 MINUTES (MAXIMUM 60 MINUTES) NOTICES TO SUBSCRIBER. YOU SPECIFICALLY ACKNOWLEDGE AND ACCEPT THE DISCLAIMER/LIMITATION OF LIABILITY AND INDEMNITY PARAGRAPHS HEREOF. TERMS AND CONDITIONS ON THE REVERSE SIDE ARE AN INTEGRAL PART OF THIS AGREEMENT. YOU ACKNOWLEDGE RECEIPT OF A COPY OF THIS AGREEMENT. READ THE FRONT AND REVERSE BEFORE SIGNING.

NOTICES TO SUBSCRIBER. YOU SPECIFICALLY ACKNOWLEDGE AND ACCEPT THE DISCLAIMER/LIMITATION OF LIABILITY AND INDEMNITY PARAGRAPHS HEREOF. TERMS AND CONDITIONS ON THE REVERSE SIDE ARE AN INTEGRAL PART OF THIS AGREEMENT. YOU ACKNOWLEDGE RECEIPT OF A COPY OF THIS AGREEMENT. READ THE FRONT AND REVERSE BEFORE SIGNING. NO WARRANTIES. THERE ARE NO WARRANTIES, EXPRESS OR IMPLIED, WHICH EXTEND BEYOND THE DESCRIPTION ON THE FACE OR REVERSE HEREOF, INCLUDING ANY IMPLIED WARRANTY OF MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE.

PRINTED NAME	PRINT OR TYPE NAME	
James DeMaio	John Charshafian	
AUTHORIZED REPRESENTATIVE SIGNATURE	SIGNATURE	
BY: Jayles DeMaio (Oct 28, 2025 10:16:18 EDT)	John Charshafian  BY: John Charshafian (Oct 28, 2025 10:14:37 EDT)	
LYDIA SECURITY MONITORING, INC.	SUBSCRIBER:	
IN WITNESS WHEREOF, THE PARTIES, INTENDING TO BE LEGALLY BOUND HEREBY,	, HAVE SIGNED OR CAUSED THIS AGREEMENT TO BE SIGNED ON THE DATE FIRST ABOVE WRITTE	N.

OR TERMINATE THIS AGREEMENT AT ANY TIME UPON MAILING WRITTEN NOTICE TO YOU FIVE (5) DAYS BEFORE THE SUSPENSION OR TERMINATION DATE

, PARTNERS OR EMPLOYEES (COLLECTIVELY, "REPRESENTATIVES") IS AN INSURER; THAT YOU CURRENTLY HAVE AND SHALL ALWAYS MAINTAIN INSURANCE BE ON YOUR PREMISES FOR MEDICAL, DISABILITY, LIFE, AND PROPERTY DAMAGE; THAT RECOVERY FOR ALL SUCH LOSS, DAMAGE, COST AND EXPENSE COMPANY AND REPRESENTATIVES ARE RELEASED FROM ALL LIABILITY DUE TO ACTIVE OR PASSIVE SOLE, JOINT OR SEVERAL NEGLIGENCE OF ANY KIND STEM, BREACH OF CONTRACT, EXPRESS OR IMPLIED, BREACH OF WARRANTY, EXPRESS OR IMPLIED, OR BY LOSS OR DAMAGE TO OR MALFUNCTION OF

Y. MPANY ONLY (I) WHEN SIGNED BY AN AUTHORIZED REPRESENTATIVE OF COMPANY, WHO MUST BE A CORPORATE OFFICER IF (A) THERE ARE ANY ADDITIONS TO HAVE BEEN ALTERED, DELETED OR SUBSTITUTED BY OTHER WORDING, OR (II) UPON COMMENCEMENT OF SERVICES. PROVIDED, HOWEVER, IN SUCH EVENT O THIS AGREEMENT BY YOU ARE DEEMED REJECTED BY COMPANY, AND (Y) THE ONLY TERMS AND CONDITIONS APPLICABLE TO THE SERVICES PROVIDED TO

TO SERVICE OF PROCESS BY U.S. MAIL, CERTIFIED, RETURN RECEIPT REQUESTED, OR NATIONAL OVERNIGHT COURIER SERVICE (WITH CONFIRMATION

Y KIND OR DEGREE.

<u>CONSENT TO CALL SUBSCRIBER AND CALL LIST.</u> YOU, FOR YOURSELF AND AS THE AUTHORIZED AGENT OF EACH PERSON ON YOUR CALL LIST FROM TIME-TO-TIME, CONSENT TO COMPANY CALLING EACH SUCH PERSON'S CELL ONE OR OTHER MOBILE DEVICE.

<u>STATUTORY NOTICES</u>, SEE SCHEDULE A BELOW AND MADE A PART HEREOF.

## SCHEDULE A-STATE LICENSE NUMBERS

MARYLAND: ALABAMA. DELAWARE (BURGLARY): (302) 739-5901 RHODE ISLAND (BURGLARY): (401) 462-8580 TEXAS (BURGLARY): 107-840 B11561 (512) 424-7293 ARKANSAS: (501) 618-8600 FLORIDA: (850) 487-1395 OKLAHOMA: (405) 521-6100 UTAH: (801) 530-6628 EF20000481 5854940-6501 CMPY.0001488 AC899 TEXAS (FIRE): ACR-2215 CALIFORNIA VIRGINIA (512) 305-7900 ACO 6132, ACQ 5175 127-001299, 124-001558 PSID-1777 (916) 322-4000 (217) 785-0820 (503) 378-2100 (804) 786-4700