

FIRE DEPARTMENT REGISTRATION

Knox FDC Program

Completion of this registration form provides the Knox Company with information necessary to begin your Knox FDC Program and deliver Knox Keywrench(es) to your authorized personnel.

We assign an identification number to each Knox Keywrench delivered to your department. **All Keywrenches remain the sole and exclusive property of the Knox Company and may only be used in a manner consistent with the "Terms and Conditions of Use" described in this form.**

Registration forms for contractors who wish to use a Knox Keywrench, as well as brochures explaining the Knox FDC Program, are provided to your department at no charge.

Please complete the information required on the reverse side of this sheet, carefully read the Terms and Conditions of Use below and record the authorized signatures for your department.



TERMS AND CONDITIONS OF USE

In order for the Knox Company to maintain the integrity of the Knox FDC Program, Knox requires that all persons who will use Knox Keywrenches be bound by the following "Terms and Conditions of Use." Therefore, each person signing the reverse side of this sheet agrees that:

- a. All Knox Keywrenches delivered to the department shall remain the sole and exclusive property of the Knox Company, and may only be used in accordance with these Terms and Conditions of Use.
- b. The Knox Keywrench is a security device and distribution must be controlled within the department. The persons signing on the reverse side who are authorized signatories for the Knox FDC Program are authorized to place orders for Knox Keywrenches. Such persons should make every reasonable effort to protect against improper use, damage or loss of Knox Keywrenches.
- c. Department personnel shall not release the Knox Keywrench to any non-fire department personnel or to any personnel from another department (other than those departments named on the reverse side under "Mutual or Automatic Aid Department Access"). Signatories shall notify users of these Terms and Conditions of Use.
- d. It is recommended that all Knox Keywrenches be kept in a secure place and be maintained in good condition.
- e. If a department wishes to discontinue the Knox FDC Program, all Knox Keywrenches shall be returned to the Knox Company after all Knox FDC products have been removed from service. Departments may also retain Knox Keywrenches to fulfill obligations under Mutual or Automatic Aid Department Access agreements.
- f. Knox Company requests that notification be given of loss, theft, damage or destruction to any Knox Keywrench in a timely manner, in order that records may be kept accurately for the total number of Knox Keywrenches distributed to the department.
- g. Knox Keywrenches must not be duplicated or altered in any way. Damaged and worn-out Knox Keywrenches should not be used and shall be returned to the Knox Company for replacement.
- h. Use of the Knox Keywrench is only for the purpose of accessing sprinkler and standpipe systems that use Knox FDC products.
- i. Knox Master Keys and their associated codes may be used only with product manufactured by the Knox Company. Use with any other products is prohibited.
- j. Tampering with or altering key codes in Knox Products without expressed authorization from the Knox Company is prohibited.
- k. These Terms and Conditions of Use are defined to help ensure the dependability of the Knox Rapid Access System over its lengthy expected life. Failure to comply with these Terms and Conditions of Use may result in a system more vulnerable to misuse, both intentional and unintentional. Therefore, the Knox Company reserves its rights to cancel the respective Knox Rapid Access System registration and support, which include the efforts required to maintain and control the registered key code/section for the Department.

CHANGE NOTICE

Changes in authorized signatures must be submitted to the Knox Company on a Knox change request form or on official fire department letterhead and signed with an authorized signature.

STATEMENT OF AUTHORITY

By signing this statement, you represent that the persons listed on this form are authorized to order products (i.e. Master Keys, Key Vaults, etc.) from the Knox Company and that the Knox Company may accept the authorized signatures on this form and rely on them when supplying products ordered by your department.



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Registration Form

Please type or print the following information:

Department Name			
Street Address			
Mailing Address		Phone ()	
City		Fax ()	
County	State	Zip	Email
Department Head - The officer who is in charge of your department.			
Name		Title	
Knox FDC Program Coordinator The Knox FDC Program coordinator for your department. All materials will be sent to this person at the address above.			
Name		Title	
Mutual or Automatic Aid Department Access			
Will a mutual aid department require Knox Keywrenches? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Department Name		Registered with Knox Company? <input type="checkbox"/> Yes <input type="checkbox"/> No	
System Requirements			
Please order the exact number of Knox Keywrenches required to avoid loss or misplacement. Remember to include any keywrenches required by your mutual aid departments. With an authorized signature, additional Knox Keywrenches can be ordered any time at no charge.			
Population Served		Number of Knox Keywrenches Required	
Authorized Signatures Authorized signatures are required to order additional Knox Keywrenches and delete or add names and authorized signatures.			
Print Name and Title		Authorized Signature	Date
FDC Specifications Knox Engineers may require a male and female thread sample to confirm the correct fit. Sample will be returned upon request.			
Our department uses National Hose (NH) thread (formerly called National Standard Thread – NST). <input type="checkbox"/> Yes <input type="checkbox"/> No			
If No, please specify thread size: (OD X TPI)		OD (Outside Diameter) X	TPI (Threads Per Inch)
Ordering Knox FDC Products			
Do you want to use the original Knox Authorization Order Form? (If YES, do you authorize Knox Company to accept copies or faxes of this form?)		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Do you want to use the online eApproval system at Knoxbox.com for Ordering Knox FDC Products? (If YES, you will need to complete the Blanket Authorization form.)		<input type="checkbox"/> Yes <input type="checkbox"/> No	

Upon completion, present ORIGINAL Registration Form to your Knox Account Manager or MAIL to:
Attn: Records, Knox Company, 1601 W. Deer Valley Rd., Phoenix, AZ 85027