



"Dealer" Unit Activation Form

In order to activate the ProTracker(CS,FS)TM GPS device you will need to provide the following information. Once completed, fax or mail this form to ProTrackGPS. Please retain a copy for your records. You will need to verify this information when requesting any vehicle tracking. Please inform us of any future changes immediately.

DEALER NAME:

<u>Customer Information</u>	
Date: _____	
Full Name: _____	Alternate Contact: _____
Address: _____	City: _____ State: _____ Zip Code: _____
Home Phone: _____	Work Phone: _____ Cell: _____
Fax: _____	Email: _____
<u>Vehicle Information</u>	
Year: _____	Make: _____ Model: _____ Color: _____
License Plate: _____	State Issue: _____ VIN: _____
Names of all authorized operators: _____	

Your customer must select an account password to authorize vehicle tracking. Full name and password are required when requesting any services from us. Please provide your customer a copy of this form.

Unit Serial Number :	Customer Password:
Service Type: Anti-Theft Protection	Family Protection (A) On-Demand (B) 24hr Continuous

CUSTOMER,

ProTrackGPS is available 24 hours a day, 7 days a week to assist you. If you are reporting a stolen vehicle, please do not contact us prior to calling your local law enforcement agency. You will need to file a police report and notify them that your vehicle is equipped with a GPS tracking device. Provide them with our contact information so we can work directly with them to expedite the return of your vehicle. ProTrackGPS **WILL NOT** assist a customer in the location and recovery of a stolen vehicle. This is for your safety and our peace of mind. Please leave it to the professionals. Contact us immediately if any of the above information changes.

ProTrackGPS
24 hour Customer Support
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