SL-1 REPLACEMENT FORM

To switch account data from the OLD Subscriber unit to the NEW Replacement Unit, complete this worksheet and fax to 631-789-9292.

Worksheets received via fax are processed from 9:00AM to 4:00PM Eastern Time, Monday – Friday, excluding Holidays.

SUBSCRIBER DATA	DEALER DATA
Subscriber Name:_____	**Dealer ID / 10-Digit Telephone #: (Required)** (□□□) □□□-□□□□ **Dealer Company Name:** _____
OLD UNIT DATA	**REPLACEMENT UNIT DATA**
OLD Subscriber Unit ID#:_____ ☐ **Check this box and initial here _____ to CANCEL the OLD Subscriber Unit ID and transfer any unused, pre-paid airtime to the NEW Subscriber Unit.**	**NEW Subscriber Unit ID** **#** :_____

Return Instructions

Please ship the OLD unit(s) to:

NAPCO Security Group
333 Bayview Avenue,
Amityville, New York 11701

Please enclose a copy of this Worksheet.

DEALER AUTHORIZATION: BY SIGNING BELOW THE DEALER INDICATES THAT ALL INFORMATION PROVIDED IS ACCURATE AND THAT THE DEALER WILL BEAR THE SOLE RESPOSIBILITY FOR NOTIFYING STARLINK IN THE EVENT THAT ANY INFORMATION CHANGES, AND FURTHER AGREES TO ACCEPT THE TERMS OF THE STARLINK DEALER AGREEMENT WITH REFERENCE TO THE SUBSCRIBER UNIT REFERENCED ABOVE.

SIGNATURE X_____PRINT NAME_____DATE:_____

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