Insurance discount request for installation of the EZ-Lock passive arming vehicle and equipment anti-theft system.

Dear Insurance Agent:

The installation of a (passive) No Theft "EZ-Lock" System is equipped on my vehicle or equipment. This System is a passive arming electronic lockout module. It is always armed until a known code is transmitted and the system enables the vehicle to start. This is the number one recommended type of anti-theft and qualifies my account for the maximum amount of discount. For more infomation to help me receive this full benifit, please go to: www.ez-lock.net for complete details.

Customer Information

Insured customer Name:		_ Date
Street Address:	Email	
City/State:	Zip:	
Insurance Company:		
Policy#		
Vehicle Year/Make/Model:		
Vehicle Identification #:		
The signature below certifies my ve "EZ-Lock" anti-theft system.	hicle or machine is equip	pped with the No Theft
Purchased from:		
Date installed:	Installed by:	
Address:	Telephon	e:
Insured Customer Signature:		