

# ELECTRONIC MONITORING CONTRACT

Tampa Monitoring Solutions **813-777-5137**

Name: \_\_\_\_\_ Case Number: \_\_\_\_\_

**Initial the following statements confirming the device you have been issued and acknowledging your understanding of the monitoring instructions, requirements, and care of the assigned device.**

- The following device has been issued to me:  
\_\_\_\_\_
- I am to remain at my residence or designated locations according to the approved electronic monitoring schedule provided to me. I must adhere to all designated curfew hours.
- Failure to make payments on time will result in violation of my monitoring conditions and will be reported immediately to Judge, Jail, or Probation officer.
- I am responsible for the device assigned to me and will not tamper with or remove the device.
- I am responsible for keeping this device charged at all times and maintaining the Global Positioning System (GPS) signal.
- I am responsible for paying for any intentional damage or loss of this device. I also understand I may be charged with a new crime under these circumstances.
- I must contact TAMPA MONITORING SOLUTIONS if I have any violations or issues with the GPS device.

**I have reviewed this form with TAMPA MONITORING SOLUTIONS. I fully understand the instructions regarding the use of the monitor assigned to me and acknowledge that I am responsible for safeguarding the device.**

X \_\_\_\_\_  
Signature \_\_\_\_\_ Date

X \_\_\_\_\_  
Tampa Monitoring (Agent) \_\_\_\_\_ Date