

FIRE ALARM SYSTEM RECORD OF COMPLETION

To be completed by the system installation contractor at the time of system acceptance and approval.

1. Protected Property Information

Name of property: _____

Address: 161 marginal way

Description of property: office

Occupancy type: _____

Name of property representative: unknown

Address: _____

Phone: _____ Fax: _____ E-mail: _____

Authority having jurisdiction over this property: Portland Fire Dept

Phone: _____ Fax: _____ E-mail: _____

2. Fire Alarm System Installation, Service, and Testing Information

Installation contractor for this equipment: DeBlois Electric

Address: Lewiston, ME

Phone: 2077832512 Fax: _____ E-mail: _____

Service organization for this equipment: RBAllen

Address: 131 Lafayette Rd N Hampton, NH

Phone: 6039648140 Fax: _____ E-mail: _____

Location of as-built drawings: _____ Location of Historical Test Reports: _____

Location of system operation and maintenance manuals: _____

A contract for test and inspection in accordance with NFPA standards is in effect as of unknown

Contracted testing company: unknown

Address: _____

Phone: _____ Fax: _____ E-mail: _____

Contract expires: _____ Contract number: _____ Frequency of routine inspections: _____

3. Type of Fire Alarm System or Service

NFPA 72®, Chapter Reference of System Type: Remote Station

Name of organization receiving alarm signals with phone numbers (if applicable):

Alarm: Cunningham Security Phone: _____

Supervisory: Cunningham Security Phone: _____

Trouble: Cunningham Security Phone: _____

Entity to which alarms are retransmitted: Portland Fire Dept Phone: _____

Method of retransmission of alarms to that organization or location: Digital Dialer

If Chapter 8, note the means of transmission from the protected premises to the central station:

Digital alarm communicator McCulloh Multiplex 2-way radio 1-way radio N/A

If Chapter 9, note the type of connection: Local energy Shunt N/A

3.1 System Software

Operating system (executive) software revision level: 3.7

Site-specific software revision date: 4 Revision completed by: RB Allen

4. Signaling Line Circuits

Characteristics of signaling line circuits connected to this system (see NFPA 72®, Table 6.6.1):

Quantity: 1 Style: 6 Class: A

5. Alarm-Initiating Devices and Circuits

Characteristics of initiating device circuits connected to this system (see NFPA 72®, Table 6.5):

Quantity: 0 Style: n/a Class: n/a

5.1 Manual Initiating Devices

5.1.1 Manual Pull Stations Number of manual pull stations: 8

Type of devices: Addressable Conventional Coded Transmitter N/A

5.2 Automatic Initiating Devices

5.2.1 Area Smoke Detectors Number of smoke detectors: 27

Type of coverage: Complete area Partial area Nonrequired partial area N/A

Type of devices: Addressable Conventional Coded Transmitter N/A

Type of smoke detector sensing technology: Ionization Photoelectric

5.2.2 Duct Smoke Detectors Number of duct smoke detectors: 4

Type of coverage: partial

Type of devices: Addressable Conventional Coded Transmitter N/A

Type of smoke detector sensing technology: Ionization Photoelectric

5.2.3 Heat Detectors Number of heat detectors: 3

Type of coverage: Complete area Partial area Nonrequired partial area N/A

Type of devices: Addressable Conventional Coded Transmitter N/A

5.2.4 Sprinkler Waterflow Detectors Number of waterflow detectors: 1

Type of devices: Addressable Conventional Coded Transmitter N/A

5.2.5 Alarm Verification Number of devices subject to alarm verification: 0

Alarm verification on this system is: Enabled Disabled Set for _____ seconds

6. Supervisory Signal-Initiating Devices and Circuits

6.1 Sprinkler System Number of valve supervisory switches: 1

Type of devices: Addressable Conventional Coded Transmitter N/A

6.2 Fire Pump

Type of fire pump: Electric Diesel

Type of fire pump supervisory devices: Addressable Conventional Coded Transmitter N/A

Fire Pump Functions Supervised

Fire pump power Fire pump running Fire pump phase reversal Selector switch not in auto

Engine or control panel trouble Low fuel

Other: _____

6.3 Engine-Driven Generator

Type of generator supervisory devices: Addressable Conventional Coded Transmitter N/A

Engine or control panel trouble Generator running Selector switch not in auto Low fuel

Other: _____

7. Annunciators

7.1 Annunciator 1 Local Remote

Type: Addressable Directory Graphic N/A Location: main panel

7.2 Annunciator 2 Local Remote

Type: Addressable Directory Graphic N/A Location: Main Entry

7.3 Annunciator 3 Local Remote

Type: Addressable Directory Graphic N/A Location: _____

8. Alarm Notification Devices and Circuits

8.1 Emergency Voice Alarm Service

Number of single voice alarm channels: n/a Number of multiple voice alarm channels: _____

Number of speakers: _____ Number of speaker zones: _____

8.2 Telephone Jacks

Number of telephone jacks installed: n/a Number of telephone handsets stored on site: _____

Type of telephone system installed: Electrically powered Sound powered N/A

8.3 Nonvoice Audible System

Characteristics of notification device circuits connected to this system (see NFPA 72®, Table 6.5):

Quantity: 1 Style: y Class: A

8.4 Types and Quantities of Nonvoice Notification Appliances Installed

Bells: 0 With visual device: 0 Horns: 20 With visual device: 20

Chimes: 0 With visual device: 0 Bells: 0 With visual device: 0

Visual devices without audible devices: 21 Other (describe): _____

13. Certifications and Approvals

13.1 System Installation Contractor

This system as specified herein has been installed and tested according to all NFPA standards cited herein.

Signed: _____ Printed name: _____ Date: _____

Organization: _____ Title: _____ Phone: _____

13.2 System Service Contractor

This system as specified herein has been installed and tested according to all NFPA standards cited herein.

Signed: _____ Printed name: _____ Date: _____

Organization: _____ Title: _____ Phone: _____

13.3 Central Station

This system as specified herein will be monitored according to all NFPA standards cited herein.

Signed: _____ Printed name: _____ Date: _____

Organization: _____ Title: _____ Phone: _____

13.4 Property Representative

I accept this system as having been installed and tested to its specifications and all NFPA standards cited herein.

Signed: _____ Printed name: _____ Date: _____

Organization: _____ Title: _____ Phone: _____

13.5 Authority Having Jurisdiction

I have witnessed a satisfactory acceptance test of this system and find it to be installed and operating properly in accordance with its approved plans and specifications, its approved sequence of operations, and with all NFPA standards cited herein.

Signed: _____ Printed name: _____ Date: _____

Organization: _____ Title: _____ Phone: _____