|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Form Completion Date: | 11/13/19 | Supplemental Pages Attached: | 0 |  |

1. Property Information

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Name of property: | | | Bangor Savings Bank | | | | | | |
| Address: | | 280 Fore St. Portland, ME | | | | | | | |
| Description of property: | | | | Bank/offices | | | | | |
| Name of property representative: | | | | | N/A | | | | |
| Address: | | N/A | | | | | | | |
| Phone: | N/A | | | | | Fax: | N/A | E-mail: | N/A |

2. INSTALLATION, SERVICE, TESTING, AND MONITORING INFORMATION

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Installation contractor: | | | | | | Mancini Electric | | | | | | | | | | | | |
| Address: | | | 179 Sheridan St. Portland, ME 04101 | | | | | | | | | | | | | | | |
| Phone: | | 207-774-5829 | | | | | | | Fax: | | | N/A | | E-mail: | | N/A | | |
| Service organization: | | | | | Norris, Inc | | | | | | | | | | | | | |
| Address: | | | 2257 West Broadway South Portland, ME | | | | | | | | | | | | | | | |
| Phone: | 800-370-3473 | | | | | | | | Fax: | | | N/A | | E-mail: | | www.norrisinc.com | | |
| Testing organization: | | | | | N/A | | | | | | | | | | | | | |
| Address: | | | N/A | | | | | | | | | | | | | | | |
| Phone: | N/A | | | | | | | | Fax: | | | N/A | | E-mail: | | N/A | | |
| Effective date for test and inspection contract: | | | | | | | | | | | | N/A | | | | | | |
| Monitoring organization: | | | | | | | | HSMC | | | | | | | | | | |
| Address: | | | N/A | | | | | | | | | | | | | | | |
| Phone: | 1-800-933-4762 | | | | | | | | Fax: | | | N/A | | E-mail: | | N/A | | |
| Account number: | | | | 202-8259 | | | | | | | Phone line 1: | | N/A | | Phone line 2: | | | N/A |
| Means of transmission: | | | | | | | Digital Communicator | | | | | | | | | | | |
| Entity to which alarms are retransmitted: | | | | | | | | | | Portland FD | | | | | Phone: | | 207-874-8576 | |

3. DOCUMENTATION

|  |  |
| --- | --- |
| On-site location of the required record documents and site-specific software: | N/A |

4. DESCRIPTION OF SYSTEM OR SERVICE

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| This is a: | New system | | | | Modification to existing system | | | Permit number: | | | N/A | | | |
| NFPA 72 edition: | | | N/A | | |
|  | | | | | |
| **4.1 Control Unit** | | | | | | | | | | | | | | | | |
| Manufacturer: | | Notifier | | | | | | | | Model number: | | AFP-200 | | | | |
|  | | | | | | | | | | | | | | | | |
| **4.2 Software and Firmware** | | | | | | | | | | | | | | | | |
| Firmware revision number: | | | | N/A | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | |
| **4.3 Alarm Verification** | | | | | | | | This system does not incorporate alarm verification. | | | | | | | |
| Number of devices subject to alarm verification: | | | | | | |  | | Alarm verification set for | | | |  | seconds | |

5. SYSTEM POWER

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **5.1 Control Unit** | | | | | | | | | | | | |
| **5.1.1 Primary Power** | | | | | | | | | | | | |
| Input voltage of control panel: | | | 120 VAC | | | | Control panel amps: | | | 3 | | |
| Overcurrent protection: Type: | | | Circuit Breaker | | | | Amps: | 20 | | | | |
| Branch circuit disconnecting means location: | | | | | N/A | | Number: | | N/A | | | |
|  | | | | | | | | | | | | |
| **5.1.2 Secondary Power** | | | | | | | | | | | | |
| Type of secondary power: | | Batteries | | | | | | | | | |
| Location, if remote from the plant: | | | | In FACP | | | | | | | |
| Calculated capacity of secondary power to drive the system: | | | | | | | | | | | |
| In standby mode (hours): | 24 | | | | | In alarm mode (minutes): | | | | | 5 | |
|  | | | | | | | | | | | | |
| **5.2 Control Unit** | | | | | | | | | | | | |
| This system does not have power extender panels | | | | | | | | | | | | |
| Power extender panels are listed on supplementary sheet A | | | | | | | | | | | | |

6. CIRCUITS AND PATHWAYS

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Pathway Type** | **Dual Media Pathway** | **Separate Pathway** | **Class** | **Survivability Level** |
| Signaling Line | 1 | N/A | B | N/A |
| Device Power | N/A | N/A | N/A | N/A |
| Initiating Device | N/A | N/A | N/A | N/A |
| Notification Appliance | 1 | N/A | B | N/A |
| Other (specify): | N/A | N/A | N/A | N/A |
|  |

7. REMOTE ANNUNCIATORS

|  |  |
| --- | --- |
| **Type** | **Location** |
| N/A | N/A |
| N/A | N/A |

8. INITIATING DEVICES

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Type** | **Quantity** | **Addressable or Conventional** | **Alarm or Supervisory** | **Sensing Technology** |
| Manual Pull Stations | 1 | Addressable | Alarm | Manual |
| Smoke Detectors | 8 | Addressable | Alarm | Photoelectric |
| Duct Smoke Detectors | N/A | N/A | N/A | N/A |
| Heat Detectors | N/A | N/A | N/A | N/A |
| Gas Detectors | N/A | N/A | N/A | N/A |
| Waterflow Switches | N/A | N/A | N/A | N/A |
| Tamper Switches | N/A | N/A | N/A | N/A |

**9. NOTIFICATION APPLIANCES**

|  |  |  |
| --- | --- | --- |
| **Type** | **Quantity** | **Description** |
| Audible | N/A | N/A |
| Visible | N/A | N/A |
| Combination Audible and Visible | 8 | Horn strobes |

10. SYSTEM CONTROL FUNCTIONS

|  |  |
| --- | --- |
| **Type** | **Quantity** |
| Hold-Open Door Releasing Devices | N/A |
| HVAC Shutdown | N/A |
| Fire/Smoke Dampers | N/A |
| Door Unlocking | N/A |
| Elevator Recall | N/A |
| Elevator Shunt Trip | N/A |
|  |  |
|  |  |

11. INTERCONNECTED SYSTEMS

|  |  |  |  |
| --- | --- | --- | --- |
| This system does not have interconnected systems. | | | |
| Interconnected systems are listed on supplementary sheet |  | . |

12. CERTIFICATION AND APPROVALS

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **12.1 System Installation Contractor** | | | | | | | | | | | | | |
| This system as specified herein has been installed according to all NFPA standards cited herein. | | | | | | | | | | | | | |
| Signed: |  | | | | | | Printed name: | | Craig Beardsley | Date: | 11/13/19 | | |
| Organization: | | Mancini Electric | | | | | Title: | Electrician | | Phone: | | 207-774-5829 | |
|  | | | | | | | | | | | | | |
| **12.2 System Operational Test** | | | | | | | | | | | | | |
| This system as specified herein has tested according to all NFPA standards cited herein. | | | | | | | | | | | | | |
| Signed: |  | | | | | | Printed name: | | Wade Morin | Date: | 11/13/19 | | |
| Organization: | | Norris, Inc | | | | | Title: | Technician | | Phone: | | 800-370-3473 | |
|  | | | | | | | | | | | | | |
| **12.3 Acceptance Test** | | | | | | | | | | | | | |
| Date and time of acceptance test: | | | | |  | | | | | | | |
| Installing contractor representative: | | | | | |  | | | | | | |
| Testing contractor representative: | | | | | Wade Morin | | | | | | | |
| Property representative: | | | | N/A | | | | | | | | |
| AHJ representative: | | | N/A | | | | | | | | | |