



Eastern Fire Services Inc. 170 KittyHawk Ave, Auburn, ME 04210 207-784-1507

FIRE ALARM SYSTEM INSPECTION AND TESTING FORM

TEST AND INSPECT JOB# <u>258-F</u>	CENTRAL STATION ACCOUNT# <u>19601099</u>
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Date(s) of this inspection or test: 3/27/15 Time of inspection or test: 7:30AM

1. PROPERTY INFORMATION

Name of property: RENY'S

Address: 540 CONGRESS ST. PORTLAND

Description of property: 2 Story Building/Sprinkled

Occupancy type: Retail

Name of property representative: MARC FOSTER

Address: _____

Phone: 408-5789 Fax: _____ E-mail: _____

Authority having jurisdiction over this property: Portland Fire Department

Phone: 207-874-8576 Fax: _____ E-mail: _____

2. INSTALLATION, SERVICE, AND TESTING CONTRACTOR INFORMATION

Service and/or testing organization for this equipment: EASTERN FIRE SERVICES INC.

Address: 170 KITTYPHAWK AVE. AUBURN ME 04210

Phone: 207-795-6314 Fax: 207-782-0566 E-mail: _____

Service technician or tester: Caleb Burgess/Bob Castonguay

Qualifications of technician or tester: System Technicians

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

The contract expires: _____ Contract number: 258-F Frequency of tests and inspections: Annual

Monitoring organization for this equipment: CENTRA-LARM ACCT. #19601099

Address: _____

Phone: 1-800-639-2066 Fax: _____ E-mail: _____

Entity to which alarms are retransmitted: PORTLAND FIRE DEPARTMENT Phone: 207-874-8576

3. TYPE OF SYSTEM OR SERVICE

Fire alarm system (nonvoice)

NFPA 72 edition: _____ Additional description of system(s): ADDRESSABLE

3.1 Control Unit

Manufacturer: SIEMENS Model number: FS-250

Location of control unit: ELECTRICAL RM



3. **TYPE OF SYSTEM OR SERVICE (continued)**

3.2 System Documentation

An owner’s manual, a copy of the manufacturer’s instructions, a written sequence of operation, and a copy of the record drawings are stored on site. Location: UNDER PANEL

3.3 System Software

This system does not have alterable site-specific software.

Software revision number: _____ Software last updated on: _____

A copy of the site-specific software is stored on site. Location: _____

4. **SYSTEM POWER**

4.1 Control Unit

4.1.1 Primary Power

Input voltage of control panel: 120 VAC Control panel amps: 2.4 Amps

Location of primary power: LP #7 Main Electric Room with FACP

4.1.2 Batteries

Location: FACP Type: LEAD/ACID Nominal voltage: 12 VDC Amp/hour rating: 12 AH

Calculated capacity of batteries to drive the system: N/A

In standby mode (hours): 24 In alarm mode (minutes): 15

Batteries are marked with date of manufacture. Power patrol model SLA-1105 Installed 3/22/11

5. **ANNUNCIATORS**

This system does not have annunciators.

5.1 Location and Description of Annunciators

Annunciator 1: BY CONGRESS ST. ENTRANCE

Annunciator 2: BY APT ENTRANCE

Annunciator 3: N/A

6. **NOTIFICATIONS MADE PRIOR TO TESTING**

Monitoring organization Contact: CENTRALARM Via BOLDNET Time: 7:35AM

Building management Contact: MARC FOSTER Time: _____

Building occupants Contact: RENY'S Time: 7:30AM

Authority having jurisdiction Contact: PORTLAND FIRE Time: 7:40AM

Other, if required Contact: _____ Time: _____

OTHER SYSTEM VENDORS

Vendor	Company Information
Elevator Company:	_____
Sprinkler Company:	<u>Eastern Fire Services Inc</u>
Suppression Company:	<u>AAA Fire Extinguisher Co., Inc</u>



7. TESTING RESULTS

7.1 Control Unit and Related Equipment

Description	Visual Inspection	Functional Test	Comments
Control unit - FACP	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	OK
Lamps/LEDs/LCDs	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	OK
Fuses	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	OK
Trouble signals	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	OK
Disconnect switches/buttons	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	OK
Ground-fault monitoring	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	OK
Supervision	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	OK
Local annunciator	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	OK
Remote annunciators	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	OK
Power extender panels	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	OK
Isolation modules	<input type="checkbox"/>	<input type="checkbox"/>	
Other (specify)	<input type="checkbox"/>	<input type="checkbox"/>	

7.2 Control Unit Power Supplies

Description	Visual Inspection	Functional Test	Comments
120-volt power	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	124.7 VAC
Generator or UPS	<input type="checkbox"/>	<input type="checkbox"/>	
Battery condition	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Battery #1=Pass; Battery #2=Pass
Load voltage	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Battery #1 @ 12.89VDC; Battery #2 @ 12.90VDC
Discharge test	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Battery #1=100%; Battery #2=100%
Charger test	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	27.5 VDC
Other (specify)	<input type="checkbox"/>	<input type="checkbox"/>	

7.3 Combination Systems

Description	Visual Inspection	Functional Test	Comments
Fire extinguishing monitoring devices/system	<input type="checkbox"/>	<input type="checkbox"/>	Wet Sprinkler System Tested by Others
Carbon monoxide detector/system	<input type="checkbox"/>	<input type="checkbox"/>	
Combination fire/security system	<input type="checkbox"/>	<input type="checkbox"/>	
Other (specify)	<input type="checkbox"/>	<input type="checkbox"/>	



7. TESTING RESULTS (continued)

7.4 Special Hazard Systems

Description (specify)	Visual Inspection	Functional Test	Comments
	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	

7.5 Monitored Systems

Description (specify)	Visual Inspection	Functional Test	Comments
Engine-driven generator	<input type="checkbox"/>	<input type="checkbox"/>	
Fire pump	<input type="checkbox"/>	<input type="checkbox"/>	
Special suppression systems	<input type="checkbox"/>	<input type="checkbox"/>	
Other (specify)	<input type="checkbox"/>	<input type="checkbox"/>	

7.6 Auxiliary Functions

Description	Visual Inspection	Functional Test	Comments
Door-releasing devices	<input type="checkbox"/>	<input type="checkbox"/>	
Fan shutdown	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	OK
Smoke management/smoke control	<input type="checkbox"/>	<input type="checkbox"/>	
Smoke damper operation	<input type="checkbox"/>	<input type="checkbox"/>	
Smoke shutter release	<input type="checkbox"/>	<input type="checkbox"/>	
Door unlocking	<input type="checkbox"/>	<input type="checkbox"/>	
Elevator recall	<input type="checkbox"/>	<input type="checkbox"/>	
Elevator shunt trip	<input type="checkbox"/>	<input type="checkbox"/>	
Other (specify)	<input type="checkbox"/>	<input type="checkbox"/>	

7.7 Alarm Initiating Device

A device test results sheet is attached listing all devices tested and the results of the testing.

7.8 Supervisory Alarm Initiating Device

A device test results sheet is attached listing all devices tested and the results of the testing.

7.9 Alarm Notification Appliances

An appliance test results sheet is attached listing all appliances tested and the results of the testing.



7. TESTING RESULTS (continued)

7.10 Supervisory Station Monitoring

Description	Visual Inspection	Functional Test	Time	Comments
Alarm signal	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	7:30AM to 10:30AM	OK
Alarm restoration	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	7:30AM to 10:30AM	OK
Trouble signal	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	7:30AM to 10:30AM	OK
Trouble restoration	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	7:30AM to 10:30AM	OK
Supervisory signal	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	7:30AM to 10:30AM	OK
Supervisory restoration	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	7:30AM to 10:30AM	OK

8. NOTIFICATIONS THAT TESTING IS COMPLETE

Monitoring organization	Contact: <u>CENTRALARM</u>	Time: <u>10:45AM</u>
Building management	Contact: <u>MARC FOSTER</u>	Time: _____
Building occupants	Contact: <u>MARC FOSTER</u>	Time: _____
Authority having jurisdiction	Contact: <u>PORTLAND FIRE DEPT.</u>	Time: _____
Other, if required	Contact: _____	Time: _____

9. SYSTEM RESTORED TO NORMAL OPERATION

Date: 3-27-15 Time: 10:30am

10. CERTIFICATION

10.1 Inspector Certification:

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

Signed: Robert R. Castonguay Printed name: Robert R. Castonguay Date: 3-27-15
 Organization: EFSI Title: System Technician Phone: 207-795-6314

10.2 Acceptance by Owner or Owner's Representative:

The undersigned has a service contract for this system in effect as of the date shown below.

Signed: _____ Printed name: Mark Foster Date: 3-27-15
 Organization: _____ Title: Owner Phone: 207-408-5789



Eastern Fire Services Inc. 170 KittyHawk Ave, Auburn, ME 04210 207-784-1507

FIRE ALARM SYSTEM INITIATING DEVICE LIST

TEST AND INSPECT JOB# 258-F			CENTRAL STATION ACCOUNT# 19601099				
Device Type	Model Number	Address /Zone	Location/Description	Visual	Functional	Test Method	Test Results
SMOKE	HFP11	1001	FACP ELECTRICAL RM	X	X	Smoke	OK
PULL	HTRI-M	1002	LOWER FREE ST EXIT	X	X	Activated	OK
PULL	HTRI-M	1003	BASEMENT/MEZZ EXIT	X	X	Activated	OK
PULL	HTRI-M	1004	FREE ST MEZZ	X	X	Activated	OK
PULL	HTRI-M	1007	FREE ST ENTRANCE	X	X	Activated	OK
PULL	HTRI-M	1008	REAR EMERG. EXIT	X	X	Activated	OK
PULL	HTRI-M	1009	BASEMENT STAIRWAY #1	X	X	Activated	OK
DUCT	HFP-11	1010	SOUTHWEST AHU	X	X	Smoke	OK
PULL	HTRI-M	1011	LOADING DOCK EXIT	X	X	Activated	OK
DUCT	HFP-11	1012	SOUTHEAST AHU	X	X	Smoke	OK
DUCT	HFP-11	1014	MIDDLE AHU	X	X	Smoke	OK
DUCT	HFP-11	1016	NORTHEAST AHU	X	X	Smoke	OK
DUCT	HFP-11	1018	NORTHWEST AHU	X	X	Smoke	OK
PULL	HTRI-M	1020	CONGRESS ST ENTRANCE	X	X	Activated	OK
SMOKE	HFP-11	1023	CONGRESS ST ENTRANCE	X	X	Smoke	OK
PULL	HTRI-M	1024	APPARTMENT ENTRANCE	X	X	Activated	OK
SMOKE	HFP-11	1025	APPARTMENT STAIRWAY	X	X	Smoke	OK
SMOKE	HFP-11	1026	APPARTMENT HALLWAY NORTH	X	X	Smoke	OK
SMOKE	HFP-11	1027	APPARTMENT HALLWAY SOUTH	X	X	Smoke	OK
PULL	HTRI-M	1028	APPARTMENT HALLWAY EXIT RF	X	X	Activated	OK
PULL	HTRI-M	1009	BASEMENT #2	X	X	Activated	OK
PULL	HTRI-M	1009	BASEMENT #3	X	X	Activated	OK
TAMPER	HTRI-D	1006	BASEMENT SPRINKLER RISER			Tested by Others	
FLOW	HTRI-D	1006	BASEMENT SPRINKLER RISER			Tested by Others	



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FIRE ALARM SYSTEM NOTIFICATION APPLIANCE DEVICE LIST

TEST AND INSPECT JOB# 258-F		CENTRAL STATION ACCOUNT# 19601099					
Device Type	Model Number	Circuit/ Address	Location/Description	Visual	Functional	Device Setting Audible/Visual	Test Results
AV	ZH-MC-R		FREE ST RETAIL SPACE R.R	X	X		PASS
AV	ZH-MC-R		RETAIL LAYAWAY	X	X		PASS
AV	ZH-MC-R		RETAIL BACK ENTRANCE	X	X		PASS
AV	ZH-MC-R		RETAIL BY EMERGENCY EXIT	X	X		PASS
AV	ZH-MC-R		RETAIL BY FACP RM	X	X		PASS
AV	ZH-MC-R		RETAIL CENTER EAST	X	X		PASS
AV	ZH-MC-R		RETAIL CENTER MID	X	X		PASS
AV	ZH-MC-R		RETAIL CENTER WEST	X	X		PASS
AV	ZH-MC-R		RETAIL FRONT EAST	X	X		PASS
AV	ZH-MC-R		RETAIL FRONT MID	X	X		PASS
AV	ZH-MC-R		RETAIL FRONT WEST	X	X		PASS
AV	ZH-MC-R		RETAIL NORTH EAST	X	X		PASS
AV	ZH-MC-R		RETAIL NORTH WEST	X	X		PASS
AV	ZH-MC-R		FACP CORRIDOR	X	X		PASS
STROB V.O	ZR-MC-R		PUBLIC TOILET	X	X		PASS
V.O	ZR-MC-R		MEETING ROOM	X	X		PASS
V.O	ZR-MC-R		MEN'S RESTROOM	X	X		PASS
V.O	ZR-MC-R		WOMEN'S RESTROOM	X	X		PASS
V.O	ZR-MC-R		BREAK ROOM	X	X		PASS
V.O	ZR-MC-R		EMPL MEN'S RESTROOM	X	X		PASS
V.O	ZR-MC-R		EMPL WOMEN'S RESTROOM	X	X		PASS
A.V	ZH-MC-R		OUTSIDE EMPLOYEE RESTROOM	X	X		PASS
A.V	ZH-MC-R		OUTSIDE BREAK ROOM	X	X		PASS
A.V	ZH-MC-R		SOUTHEAST STORAGE	X	X		PASS
A.V	ZH-MC-R		STORAGE MIDDLE	X	X		PASS
A.V	ZH-MC-R		STORAGE WEST	X	X		PASS
A.V	ZH-MC-R		MEZZ FREE ST SIDE	X	X		PASS
V.O	ZR-MC-R		APTM #1	X	X		PASS
V.O	ZR-MC-R		APTM #2	X	X		PASS
V.O	ZR-MC-R		APTM #3	X	X		PASS
V.O	ZR-MC-R		APTM #4	X	X		PASS
AV	ZH-MC-R		RETAIL SOUTHWEST CORNER	X	X		PASS
	HCP	1022		X	X		PASS
	HCP	1021		X	X		PASS
	HCP	1005		X	X		PASS



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FIRE ALARM SYSTEM EQUIPMENT LIST

TEST AND INSPECT JOB# 258-F			CENTRAL STATION ACCOUNT# 19601099	
Manufacturer	Part Type	Model Number	Quantity	Comments
SIEMENS	FACP	FS-250	1	
POWER PATROL	BATTERIES	SLA-1105	2	
SIEMENS	ASBULT CABINET		1	
SIEMENS	DACT	FS-DACT	1	
SIEMENS	ANNUNCIATOR	FS-RD2	2	
NOTIFIER	POWER EXTENDER	FCPS-24	1	
SIEMENS	HORN/STROBE	ZH-MC-R	21	
SIEMENS	STROBE ONLY	ZR-MC-R	11	
SIEMENS	HORN CONTROL MODULES	HCP	3	
SIEMENS	DUAL ADDRESSABLE MODULE	HTRI-D	1	
SIEMENS	ADDRESSABLE MINI MODULES	HTRI-M	12	
SIEMENS	PULL STATIONS	MSM-K	3	
SIEMENS	SMOKES	HFP-11	10	
SIEMENS	BASES	DB-11	5	
SIEMENS	DUCT HOUSINGS	AD2-XHR	5	
SIEMENS	PULL STATIONS	MSM-KD	9	



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FIRE ALARM SYSTEM INSPECTION COMMENTS/DEFICIENCIES

TEST AND INSPECT JOB# 258-F	CENTRAL STATION ACCOUNT# 19601099
1.	
2.	
3.	
4.	
5.	



Eastern Fire Services Inc. 170 KittyHawk Ave, Auburn, ME 04210 207-784-1507

NOTIFICATION APPLIANCE POWER EXTENDER PANELS SUPPLEMENTAL FORM

TEST AND INSPECT JOB# <u>258-F</u>	CENTRAL STATION ACCOUNT# <u>19601099</u>
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1 Control Unit

Manufacturer: NOTIFIER Model number: FCPS-24
 Location: APT. HALLWAY ABOVE A/V Description: SIGNAL DRIVER PANEL

2 Primary Power

Input voltage of power extender panel(s): 123.8 VAC Power extender panel amps: 3 AMP
 Location of primary power: APT. HALLWAY ELECTRIC ROOM PANEL CIRCUIT #12

3 Batteries

Batteries are marked with date of installation: N/A.

Location: IN SDP Type: SLA Nominal voltage: 12 VDC Amp/hour rating: 7 AH

Calculated capacity of batteries to drive the system: EMBASSY BATTERIES EB-1270

In standby mode (hours): 24 In alarm mode (minutes): 15

4 Test Results

Description	Visual Inspection	Functional Test	Comments
Lamps/LEDs/LCDs	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	PASS
Fuses	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	PASS
Primary power supply	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	124.3VAC
Battery condition	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Battery #1=100%@12.89VDC; Battery#2=100%@12.86VDC
Charger test	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	27.4 VDC
Trouble signals	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	PASS
Ground-fault monitoring	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	PASS
Panel supervision	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	PASS
Other (specify)	<input type="checkbox"/>	<input type="checkbox"/>	

5 Control Unit Outputs

Description	Visual Inspection	Functional Test	Comments
Output #1	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	-2.87 VDC 4-Wire
Output #2	<input type="checkbox"/>	<input type="checkbox"/>	
Output #3	<input type="checkbox"/>	<input type="checkbox"/>	
Output #4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	-2.86VDC 2-Wire
Auxiliary Power Output:	<input type="checkbox"/>	<input type="checkbox"/>	