

## Master Box Approval

Applicant: \_\_\_\_\_

App Phone #: \_\_\_\_\_

Building Name: \_\_\_\_\_

Building Address: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

Emergency phone #: \_\_\_\_\_

Date of Application: \_\_\_\_\_

Billing Address: \_\_\_\_\_

Occupancy: \_\_\_\_\_

Assembly OL>300, 20 unit apartment building, etc.

Comments: \_\_\_\_\_

**Applicant completes above and submits with Fire Alarm Permit**

**1**

FIRE PREVENTION:

☐ Approved

☐ Denied

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Date

\_\_\_\_\_  
Fire Prevention Officer

Zone 1: \_\_\_\_\_ Zone 2: City disconnect Zone 3: \_\_\_\_\_

Zone 4: \_\_\_\_\_ Zone 5: \_\_\_\_\_ Zone 6: \_\_\_\_\_

Zone 7: \_\_\_\_\_ Zone 8: AES Tamper switch

☐ Modify City Box response to alarm sounding in CAD

**2**

FIRE ALARM:

Box #: \_\_\_\_\_

**3**

ELECTRICAL DIVISION:

☐ Approved

☐ Denied

Box Type: AES Radio Box / \_\_\_\_\_  
New Other

Test Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ In Service Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

\_\_\_\_\_  
Fire Alarm Technician

AES

Circuit if applicable: \_\_\_\_\_

**4**

FIRE ALARM: Same Running Assignment As Box: \_\_\_\_\_

Notifications: ☐ All Stations ☐ Run Books ☐ Digitizer ☐ Computer ☐ Cad Box Test

☐ South Portland ☐ \_\_\_\_\_  
Other Dispatcher

**5**

BILLING: ☐ Entered

\_\_\_\_\_  
Financial Officer