



EASTERN FIRE PROTECTION

FIRE PROTECTION CONTRACTORS AND DESIGNERS

SPRINKLER SYSTEM COMPLIANCE LETTER

March 27, 2012

Mr. Dan Jacques

Waterfront, ME
14 Maine St.
Brunswick

To Whom it May Concern:

This letter certifies that the Sprinkler System modified at **254 Commercial Street, Portland, ME** is in accordance with NFPA 13, State, and local codes.

Signed: 
Marc Tardif, President

Date: 3-27-12

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: Merrill Wharf – 2nd flr On Point ; 1st flr Featherly, Waterfront and Yoga studio
Address: 254 Commercial St., Portland, ME
Description of property: Office building
Occupancy type: Office Space
Name of property representative: Waterfront Maine
Address:
Phone: Fax: E-mail:
Authority having jurisdiction over this property: Portland F.D.
Phone: 207.874.8576 Fax: E-mail:

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

Installation contractor for this equipment: Deblois Electric
Address: 1033 Sabatus ST, Lewiston, ME
Phone: 783.6512 Fax: E-mail:
Service organization for this equipment:
Address:
Phone: 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
Contracted testing company:
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:
Name of organization receiving alarm signals with phone numbers (if applicable):
Alarm: Seacoast Security Phone: 207.772.1097
Supervisory: Seacoast Security Phone: 207.772.1097
Trouble: Seacoast Security Phone: 207.772.1097
Entity to which alarms are retransmitted: Phone:
Method of retransmission of alarms to that organization or location:

NFPA 72, Fig. 4.5.2.1 (p. 1 of 5)

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: _____

Site-specific software revision date: _____ Revision completed by: _____

4. Signaling Line Circuits

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

Quantity: _____ Style: _____ Class: _____

5. Alarm-Initiating Devices and Circuits

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

Quantity: _____ Style: _____ Class: _____

5.1 Manual Initiating Devices

5.1.1 Manual Pull Stations Number of manual pull stations: _____ 1

Type of devices: Addressable Conventional Coded Transmitter N/A

5.2 Automatic Initiating Devices

5.2.1 Area Smoke Detectors Number of smoke detectors: _____

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: _____

Type of coverage: _____

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: _____

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: _____

Type of devices: Addressable Conventional Coded Transmitter N/A

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

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: _____

Type of devices: Addressable Conventional Coded Transmitter N/A

NFPA 72, Fig. 4.5.2.1 (p. 2 of 5)

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: _____

7.2 Annunciator 2 Local Remote

Type: Addressable Directory Graphic N/A Location: _____

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: _____ Number of multiple voice alarm channels: _____

Number of speakers: _____ Number of speaker zones: _____

8.2 Telephone Jacks

Number of telephone jacks installed: _____ 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: _____ Style: _____ Class: _____

8.4 Types and Quantities of Nonvoice Notification Appliances Installed

Bells: _____ With visual device: _____ Horns: _____ With visual device: 15

Chimes: _____ With visual device: _____ Bells: _____ With visual device: _____

Visual devices without audible devices: 4 Other (describe): _____

9. Emergency Control Functions Activated

- Hold-open door releasing devices
- Smoke management or smoke control
- Door unlocking
- Elevator recall
- Other

10. System Power Supply

10.1 Primary Power

Nominal voltage: _____ Amps: _____
 Overcurrent protection: Type: _____ Amps: _____
 Location (of primary supply panelboard): _____
 Disconnecting means location: _____

10.2 Secondary Power

Location: _____ Type: _____ Nominal voltage: _____ Current rating: _____
 Number of standby batteries: _____ Amp hour rating: _____
 Location of emergency generator: _____
 Location of fuel storage: _____
 Calculated capacity of secondary power to drive the system _____
 In standby mode: _____ In alarm mode: _____

11. Record of System Installation

Fill out after all installation is complete and wiring has been checked for opens, shorts, ground faults, and improper branching, but before conducting operational acceptance tests.

The system has been installed in accordance with the following NFPA standards: (Note any or all that apply.)

- NFPA 72®
- NFPA 70®, Article 760
- Manufacturer's published instructions
- Other (please specify): _____

System deviations from referenced NFPA standards: _____


Signed: _____ Printed name: _____ Date: _____
 Organization: _____ Title: _____ Phone: _____

12. Record of System Operation

All operational features and functions of this system were tested by or in the presence of the signer shown below, on the date shown below, and were found to be operating properly in accordance with the requirements of:

- NFPA 72®
- NFPA 70®, Article 760
- Manufacturer's published instructions
- Other (please specify): _____

Documentation in accordance with Inspection and Testing Form (Figure 10.6.2.3 of NFPA 72®) is attached

Signed:  Printed name: Patrick McMahon Date: 3-27-2012

Organization: R.B. Allen Co., Inc. Title: Service Tech Phone: 603.964.8140

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: _____