FIRE ALARM and Emergency communication system inspection and testing form

To be completed by the system inspector or tester at the time of the inspection or test.

It shall be permitted to modify this form as needed to provide a more complete and/or clear record.

Insert N/A in all unused lines.

Attach additional sheets, data, or calculations as necessary to provide a complete record.

|  |  |  |  |
| --- | --- | --- | --- |
| Date of this inspection or test: | 09/09/15 | Time of inspection or test: |  |

1. Property Information

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Name of property: | | | | The Iris Network | | | | | | | | |
| Address: | | 189 Park Ave. Portland, ME | | | | | | | | | | |
| Description of property: | | | | | Commercial | | | | | | | |
| Occupancy type: | | | Office | | | | | | | | | |
| Name of property representative: | | | | | |  | | | | | | |
| Address: | |  | | | | | | | | | | |
| Phone: |  | | | | | | Fax: |  | | | E-mail: |  |
| Authority having jurisdiction over this property: | | | | | | | | | Portland, ME FD | | | |
| Phone: | 207-874-8576 | | | | | | Fax: |  | | E-mail: | |  |

2. Installation, Service, and Testing contractor Information

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Service and/or testing organization for this equipment: | | | | | | | | | R. B. Allen Co. Inc. | | | | | | | | |
| Address: | | 133 Laffayette Rd. North Hampton, NH | | | | | | | | | | | | | | | |
| Phone: | 603-964-8140 | | | | Fax: | | |  | | | E-mail: | | rballen@rballen.com | | | | |
| Service technician or tester: | | | | Brian Fournier | | | | | | | | | | | | | |
| Qualifications of technician or tester: | | | | | |  | | | | | | | | | | | |
| A contract for test and inspection in accordance with NFPA standards is in effect as of: | | | | | | | | | | | | | | | New Install | | |
| The contract expires: | | |  | | | Contract number: | | | |  | | Frequency of tests and inspections: | | | | |  |
| Monitoring organization for this equipment: | | | | | | | | New Install | | | | | | | | | |
| Address: | |  | | | | | | | | | | | | | | | |
| Phone: |  | | | | Fax: | | |  | | | E-mail: | |  | | | | |
| Entity to which alarms are retransmitted: | | | | | | |  | | | | | | | Phone: | |  | |

3. Type of System or Service

|  |  |
| --- | --- |
| Fire alarm system (nonvoice) | |
| Fire alarm with in-building fire emergency voice alarm communication system (EVACS) | |
| Mass notification system (MNS) | |
| Combination system, with the following components:  Fire alarm  EVACS  MNS  Two-way, in-building, emergency communication system | |
| Other (specify): |  |

3. Type of System or Service *(continued)*

|  |  |  |  |
| --- | --- | --- | --- |
| *NFPA 72* edition: | 2010 | Additional description of system(s): |  |

**3.1 Control Unit**

|  |  |  |  |
| --- | --- | --- | --- |
| Manufacturer: | Edwards UTC | Model number: | IO500 |

**3.2 Mass Notification System**  This system does not incorporate an MNS.

**3.2.1 System Type:**

In-building MNS—combination

In-building MNS—stand-alone  Wide-area MNS  Distributed recipient MNS

|  |  |
| --- | --- |
| Other (specify): |  |

**3.2.2 System Features:**

Combination fire alarm/MNS  MNS ACU only  Wide-area MNS to regional national alerting interface

Local operating console (LOC)  Direct recipient MNS (DRMNS)  Wide-area MNS to DRMNS interface

Wide-area MNS to high-power speaker array (HPSA) interface  In-building MNS to wide-area MNS interface

|  |  |
| --- | --- |
| Other (specify): |  |

**3.3 System Documentation**

An owner’s manual, a copy of the manufacturer’s instructions, a written sequence of operation, and a copy of the record

|  |  |  |
| --- | --- | --- |
| record drawings are stored on site. | Location: |  |

**3.4 System Software**  This system does not have alterable site-specific software.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Software revision number: | 3.5 | Software last updated on: | | 09/09/15 |
| 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 | Control panel amps: | 8 max |

**4.1.2 Engine-Driven Generator**  This system does not have a generator.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Location of generator: |  | | | |
| Location of fuel storage: | |  | Type of fuel: |  |

**4.1.3 Uninterruptible Power System**  This system does not have a UPS.

|  |  |  |
| --- | --- | --- |
| Equipment powered by a UPS system: | |  |
| Location of UPS system: |  | |

Calculated capacity of UPS batteries to drive the system components connected to it:

|  |  |  |  |
| --- | --- | --- | --- |
| In standby mode (hours): |  | In alarm mode (minutes): |  |

**4. System power *(continued)***

**4.1.4 Batteries**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Location: | In FACP | Type: | SLA | Nominal voltage: | 12 | Amp/hour rating: | 18 |

Calculated capacity of batteries to drive the system:

|  |  |  |  |
| --- | --- | --- | --- |
| In standby mode (hours): | 24 | In alarm mode (minutes): | 5 |

Batteries are marked with date of manufacture.

**4.2 In-Building Fire Emergency Voice Alarm Communication System or Mass Notification System**

This system does not have an EVACS or MNS.

**4.2.1 Primary Power**

|  |  |  |  |
| --- | --- | --- | --- |
| Input voltage of EVACS or MNS panel: |  | EVACS or MNS panel amps: |  |

**4.2.2 Engine-Driven Generator**  This system does not have a generator.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Location of generator: |  | | | |
| Location of fuel storage: | |  | Type of fuel: |  |

**4.2.3 Uninterruptible Power System**  This system does not have a UPS.

|  |  |  |
| --- | --- | --- |
| Equipment powered by a UPS system: | |  |
| Location of UPS system: |  | |

Calculated capacity of UPS batteries to drive the system components connected to it:

|  |  |  |  |
| --- | --- | --- | --- |
| In standby mode (hours): |  | In alarm mode (minutes): |  |

**4.2.4 Batteries**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Location: |  | Type: |  | Nominal voltage: |  | Amp/hour rating: |  |

Calculated capacity of batteries to drive the system:

|  |  |  |  |
| --- | --- | --- | --- |
| In standby mode (hours): |  | In alarm mode (minutes): |  |

Batteries are marked with date of manufacture.

**4.3 Notification Appliance Power Extender Panels**  This system does not have power extender panels.

**4.3.1 Primary Power**

|  |  |  |  |
| --- | --- | --- | --- |
| Input voltage of power extender panel(s): | 120 | Power extender panel amps: | 10 |

**4.3.2 Engine-Driven Generator**  This system does not have a generator.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Location of generator: |  | | | |
| Location of fuel storage: | |  | Type of fuel: |  |

**4.3.3 Uninterruptible Power System**  This system does not have a UPS.

|  |  |  |
| --- | --- | --- |
| Equipment powered by a UPS system: | |  |
| Location of UPS system: |  | |

Calculated capacity of UPS batteries to drive the system components connected to it:

|  |  |  |  |
| --- | --- | --- | --- |
| In standby mode (hours): |  | In alarm mode (minutes): |  |

4. System power *(continued)*

**4.3.4 Batteries**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Location: | At FACP | Type: | SLA | Nominal voltage: | 12 | Amp/hour rating: | 7 |

Calculated capacity of batteries to drive the system:

|  |  |  |  |
| --- | --- | --- | --- |
| In standby mode (hours): | 24 | In alarm mode (minutes): | 5 |

Batteries are marked with date of manufacture.

5. Annunciators This system does not have annunciators.

**5.1 Location and Description of Annunciators**

|  |  |
| --- | --- |
| Annunciator 1: | FACP |
| Annunciator 2: |  |
| Annunciator 3: |  |

**6. Notifications made prior to testing**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Monitoring organization | Contact: | Simplex | Time: |  |
| Building management | Contact: | Yes | Time: |  |
| Building occupants | Contact: | Yes | Time: |  |
| Authority having jurisdiction | Contact: | Yes | Time: |  |
| Other, if required | Contact: |  | Time: |  |

**7. Testing results**

**7.1 Control Unit and Related Equipment**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Description** | | **Visual Inspection** | **Functional Test** | **Comments** |
| Control unit | |  |  |  |
| Lamps/LEDs/LCDs | |  |  |  |
| Fuses | |  |  |  |
| Trouble signals | |  |  |  |
| Disconnect switches | |  |  |  |
| Ground-fault monitoring | |  |  |  |
| Supervision | |  |  |  |
| Local annunciator | |  |  |  |
| Remote annunciators | |  |  | N/A |
| Power extender panels | |  |  |  |
| Isolation modules | |  |  | N/A |
| Other (specify) |  |  |  |  |

**7. Testing results *(continued)***

**7.2 Control Unit Power Supplies**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Description** | | **Visual Inspection** | **Functional Test** | **Comments** |
| 120-volt power | |  |  |  |
| Generator or UPS | |  |  | N/A |
| Battery condition | |  |  |  |
| Load voltage | |  |  |  |
| Discharge test | |  |  |  |
| Charger test | |  |  |  |
| Other (specify) |  |  |  |  |

**7.3 In-Building Fire Emergency Voice Alarm Communications Equipment**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Description** | | | | **Visual Inspection** | **Functional Test** | **Comments** |
| Control unit | | | |  |  | N/A |
| Lamps/LEDs/LCDs | | | |  |  | N/A |
| Fuses | | | |  |  | N/A |
| Primary power supply | | | |  |  | N/A |
| Secondary power supply | | | |  |  | N/A |
| Trouble signals | | | |  |  | N/A |
| Disconnect switches | | | |  |  | N/A |
| Ground-fault monitoring | | | |  |  | N/A |
| Panel supervision | | | |  |  | N/A |
| System performance | | | |  |  | N/A |
| Sound pressure levels  Occupied  Yes  No | | | |  |  | N/A |
| Ambient |  | | dBA |
| Alarm |  | | dBA |
| (attach report with locations, values, and weather conditions) | | | |
| System intelligibility  CSI  STI  (attach report with locations, values, and weather conditions) | | | |  |  | N/A |
| Other (specify) | |  | |  |  |  |

**7. Testing results *(continued)***

**7.4 Notification Appliance Power Extender Panels**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Description** | | **Visual Inspection** | **Functional Test** | **Comments** |
| Lamps/LEDs/LCDs | |  |  |  |
| Fuses | |  |  |  |
| Primary power supply | |  |  |  |
| Secondary power supply | |  |  |  |
| Trouble signals | |  |  |  |
| Ground-fault monitoring | |  |  |  |
| Panel supervision | |  |  |  |
| Other (specify) |  |  |  |  |

**7.5 Mass Notification Equipment**

|  |  |  |  |
| --- | --- | --- | --- |
| **Description** | **Visual Inspection** | **Functional Test** | **Comments** |
| Functional test |  |  | N/A |
| Reset/power down test |  |  | N/A |
| Fuses |  |  | N/A |
| Primary power supply |  |  | N/A |
| UPS power test |  |  | N/A |
| Trouble signals |  |  | N/A |
| Disconnect switches |  |  | N/A |
| Ground-fault monitoring |  |  | N/A |
| CCU security mechanism |  |  | N/A |
| Prerecorded message content |  |  | N/A |
| Prerecorded message activation |  |  | N/A |
| Software backup performed |  |  | N/A |
| Test backup software |  |  | N/A |
| Fire alarm to MNS interface |  |  | N/A |
| MNS to fire alarm interface |  |  | N/A |
| In-building MNS to wide-area MNS |  |  | N/A |

**7. Testing results *(continued)***

**7.5 Mass Notification Equipment *(continued)***

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Description** | | | | **Visual Inspection** | **Functional Test** | **Comments** |
| MNS to direct recipient MNS | | | |  |  | N/A |
| Sound pressure levels  Occupied  Yes  No | | | |  |  | N/A |
| Ambient |  | | dBA |
| Alarm |  | | dBA |
| (attach report with locations, values, and weather conditions) | | | |
| System intelligibility  CSI  STI  (attach report with locations, values, and weather conditions) | | | |  |  | N/A |
| Other (specify) | |  | |  |  |  |

**7.6 Two-Way Communications Equipment**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Description** | | **Visual Inspection** | **Functional Test** | **Comments** |
| Phone handsets | |  |  | N/A |
| Phone jacks | |  |  | N/A |
| Off-hook indicator | |  |  | N/A |
| Call-in signal | |  |  | N/A |
| System performance | |  |  | N/A |
| System audibility | |  |  | N/A |
| System intelligibility | |  |  | N/A |
| Radio communications enhancement system | |  |  | N/A |
| Area of refuge communication system | |  |  | N/A |
| Elevator emergency communications system | |  |  | N/A |
| Other (specify) |  |  |  |  |

**7. Testing results *(continued)***

**7.7 Combination Systems**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Description** | | **Visual Inspection** | **Functional Test** | **Comments** |
| Fire extinguishing monitoring devices/system | |  |  | N/A |
| Carbon monoxide detector/system | |  |  | Pass |
| Combination fire/security system | |  |  | N/A |
| Other (specify) |  |  |  |  |

**7.8 Special Hazard Systems**

|  |  |  |  |
| --- | --- | --- | --- |
| **Description (specify)** | **Visual Inspection** | **Functional Test** | **Comments** |
|  |  |  | N/A |
|  |  |  |  |
|  |  |  |  |

**7.9 Emergency Communications System**

Visual

Functional

Simulated operation

Ensure predischarge notification appliances of special hazard systems are not overridden by the MNS.

See *NFPA 72*, 24.4.1.7.1.

**7.10 Monitored Systems**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Description (specify)** | | **Visual Inspection** | **Functional Test** | **Comments** |
| Engine-driven generator | |  |  | N/A |
| Fire pump | |  |  | N/A |
| Special suppression systems | |  |  | N/A |
| Other (specify) |  |  |  |  |

**7. Testing results *(continued)***

**7.11 Auxiliary Functions**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Description** | | **Visual Inspection** | **Functional Test** | **Comments** |
| Door-releasing devices | |  |  |  |
| Fan shutdown | |  |  |  |
| Smoke management/smoke control | |  |  | N/A |
| Smoke damper operation | |  |  | N/A |
| Smoke shutter release | |  |  | N/A |
| Door unlocking | |  |  | N/A |
| Elevator recall | |  |  | Pass |
| Elevator shunt trip | |  |  | Pass |
| MNS override of FA signals | |  |  | N/A |
| Other (specify) |  |  |  |  |

**7.12 Alarm Initiating Device**

Device test results sheet attached listing all devices tested and the results of the testing

**7.13 Supervisory Alarm Initiating Device**

Device test results sheet attached listing all devices tested and the results of the testing

**7.14 Alarm Notification Appliances**

Appliance test results sheet attached listing all appliances tested and the results of the testing

**7.15 Supervisory Station Monitoring**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Description** | **Yes** | **No** | **Time** | **Comments** |
| Alarm signal |  |  |  |  |
| Alarm restoration |  |  |  |  |
| Trouble signal |  |  |  |  |
| Trouble restoration |  |  |  |  |
| Supervisory signal |  |  |  |  |
| Supervisory restoration |  |  |  |  |

**8. Notifications that testing is complete**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Monitoring organization | Contact: | Simplex | Time: |  |
| Building management | Contact: | Yes | Time: |  |
| Building occupants | Contact: | Yes | Time: |  |
| Authority having jurisdiction | Contact: | Yes | Time: |  |
| Other, if required | Contact: |  | Time: |  |

**9. system restored to normal operation**

|  |  |  |  |
| --- | --- | --- | --- |
| Date: | 09/09/15 | Time: |  |

**10. Certification**

**10.1 Inspector Certification:**

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

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Signed: | Brian Fournier | | Printed name: | Brian Fournier | Date: | 09/09/15 | |
| Organization: | | R. B. Allen Co. Inc. | Title: | Technician | Phone: | | 603-964-8140 |

**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: |  | Date: |  | |
| Organization: | |  | Title: |  | Phone: | |  |

**Device test results**

**(Attach additional sheets if required)**

|  |  |  |  |
| --- | --- | --- | --- |
| **Device Type** | **Address** | **Location** | **Test Results** |
| Smoke | **01010** | 1st Fl Elev lobby | Pass |
| Smoke | **01007** | 1st Fl Elev Mach Rm | Pass |
| Smoke | **01008** | 1st Fl Bedroom 115 | Pass |
| Pull Station | **010149** | 1st Fl Entrance | Pass |
| Pull Station | **010142** | 1st Fl Stair S1 | Pass |
| Heat | **01011** | 1st Fl Elev Mach Rm | Pass |
| Smoke | 01009 | 1st Fl Dining 113 | Pass |
| Smoke | 01006 | **1st Fl Above FACP** | Pass |
| CO Det | 01009 | 1st Fl Dining 113 | Pass |
| Waterflow | 01141 | Main Waterflow | Tested Manually |
| Tamper | 01140 | Tamper System Side | Pass |
| Tamper | 01139 | Tamper City Side | Pass |
| Tamper | 01143 | Tamper Elev Pit | Pass |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| Horn / Strobes |  | 1st Fl | Pass |
| Strobes |  | 1st Fl | Pass |
| Exterior Beacon |  | 1st Fl | Pass |
|  |  |  |  |
|  |  |  |  |
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