

SYSTEM RECORD OF COMPLETION

Form Completion Date: 2/1/16

Supplemental Pages Attached: 1

1. PROPERTY INFORMATION

Name of property: USM Luther Bonney *****ADD TO EXISTING SYSTEM*****

Address: 85 Bedford St. Portland, ME

Description of property: Classrooms, computer labs

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

Phone: 207-774-5829

Fax: n/a

E-mail: n/a

Service organization: Norris, Inc

Address: 2257 West Broadway South Portland, ME

Phone: 1-800-370-3473

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: USM Police/Portland Fire Dept

Address: n/a

Phone: n/a

Fax: n/a

E-mail: n/a

Account number: 19601182

Phone line 1: n/a

Phone line 2: n/a

Means of transmission: Masterbox, Network

Entity to which alarms are retransmitted: Portland Fire Dept

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: 2013

4.1 Control Unit

Manufacturer: Notifier

Model number: NFS2-640

4.2 Software and Firmware

Firmware revision number: 19

4.3 Alarm Verification

This system does not incorporate alarm verification.

Number of devices subject to alarm verification: 0 Alarm verification set for 0 seconds

SYSTEM RECORD OF COMPLETION (continued)

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: Sealed Lead Acid Batteries
 Location, if remote from the plant: n/a
 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 | A | n/a |
| Device Power | n/a | n/a | n/a | n/a |
| Initiating Device | n/a | n/a | n/a | n/a |
| Notification Appliance | 4 | n/a | B | n/a |
| Other (specify): | n/a | n/a | n/a | n/a |

7. REMOTE ANNUNCIATORS

| Type | Location |
|------|----------|
| n/a | n/a |

8. INITIATING DEVICES

| Type | Quantity | Addressable or Conventional | Alarm or Supervisory | Sensing Technology |
|----------------------|----------|-----------------------------|----------------------|--------------------|
| Manual Pull Stations | 2 | Addressable | Alarm | n/a |
| Smoke Detectors | 7 | Addressable | Alarm | Photoelectric |
| Duct Smoke Detectors | 0 | n/a | n/a | n/a |
| Heat Detectors | 0 | n/a | n/a | n/a |
| Gas Detectors | 0 | n/a | n/a | n/a |
| Waterflow Switches | 0 | n/a | n/a | n/a |
| Tamper Switches | 0 | n/a | n/a | n/a |

SYSTEM RECORD OF COMPLETION (continued)

9. NOTIFICATION APPLIANCES

| Type | Quantity | Description |
|---------------------------------|----------|-----------------|
| Audible | n/a | |
| Visible | 37 | Strobes |
| Combination Audible and Visible | 9 | Speaker Strobes |

10. SYSTEM CONTROL FUNCTIONS

| Type | Quantity |
|----------------------------------|----------|
| Hold-Open Door Releasing Devices | 1 |
| HVAC Shutdown | 0 |
| Fire/Smoke Dampers | 0 |
| Door Unlocking | 0 |
| Elevator Recall | 0 |
| Elevator Shunt Trip | 0 |
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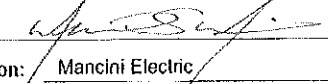
11. INTERCONNECTED SYSTEMS

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

12. CERTIFICATION AND APPROVALS

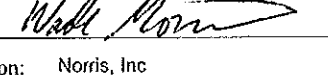
12.1 System Installation Contractor

This system as specified herein has been installed according to all NFPA standards cited herein.

Signed:  Printed name: Michael Merrill Date: 2/03/2016
 Organization: Mancini Electric Title: Project Manager 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: 2/3/16
 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: _____
 Property representative: _____
 AHJ representative: _____

SYSTEM RECORD OF COMPLETION

Form Completion Date: 2/1/16

Supplemental Pages Attached: 1

1. PROPERTY INFORMATION

Name of property: USM Luther Bonney *****ADD TO EXISTING SYSTEM*****

Address: 85 Bedford St. Portland, ME

Description of property: Classrooms, computer labs

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

Phone: 207-774-5829

Fax: n/a

E-mail: n/a

Service organization: Norris, Inc

Address: 2257 West Broadway South Portland, ME

Phone: 1-800-370-3473

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: USM Police/Portland Fire Dept

Address: n/a

Phone: n/a

Fax: n/a

E-mail: n/a

Account number: 19601182

Phone line 1: n/a

Phone line 2: n/a

Means of transmission: Masterbox, Network

Entity to which alarms are retransmitted: Portland Fire Dept

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: 2013

4.1 Control Unit

Manufacturer: Notifier

Model number: NFS2-640

4.2 Software and Firmware

Firmware revision number: 19

4.3 Alarm Verification

This system does not incorporate alarm verification.

Number of devices subject to alarm verification: 0

Alarm verification set for 0 seconds

SYSTEM RECORD OF COMPLETION (continued)

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: Sealed Lead Acid Batteries
 Location, if remote from the plant: n/a
 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 | A | n/a |
| Device Power | n/a | n/a | n/a | n/a |
| Initiating Device | n/a | n/a | n/a | n/a |
| Notification Appliance | 4 | n/a | B | n/a |
| Other (specify): | n/a | n/a | n/a | n/a |

7. REMOTE ANNUNCIATORS

| Type | Location |
|------|----------|
| n/a | n/a |

8. INITIATING DEVICES

| Type | Quantity | Addressable or Conventional | Alarm or Supervisory | Sensing Technology |
|----------------------|----------|-----------------------------|----------------------|--------------------|
| Manual Pull Stations | 2 | Addressable | Alarm | n/a |
| Smoke Detectors | 7 | Addressable | Alarm | Photoelectric |
| Duct Smoke Detectors | 0 | n/a | n/a | n/a |
| Heat Detectors | 0 | n/a | n/a | n/a |
| Gas Detectors | 0 | n/a | n/a | n/a |
| Waterflow Switches | 0 | n/a | n/a | n/a |
| Tamper Switches | 0 | n/a | n/a | n/a |

SYSTEM RECORD OF COMPLETION (continued)

9. NOTIFICATION APPLIANCES

| Type | Quantity | Description |
|---------------------------------|----------|-----------------|
| Audible | n/a | |
| Visible | 37 | Strobes |
| Combination Audible and Visible | 9 | Speaker Strobes |

10. SYSTEM CONTROL FUNCTIONS

| Type | Quantity |
|----------------------------------|----------|
| Hold-Open Door Releasing Devices | 1 |
| HVAC Shutdown | 0 |
| Fire/Smoke Dampers | 0 |
| Door Unlocking | 0 |
| Elevator Recall | 0 |
| Elevator Shunt Trip | 0 |
| | |
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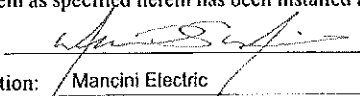
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12. CERTIFICATION AND APPROVALS

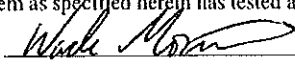
12.1 System Installation Contractor

This system as specified herein has been installed according to all NFPA standards cited herein.

Signed:  Printed name: Michael Merrill Date: 2/03/2016
 Organization: Mancini Electric Title: Project Manager 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: 2/3/16
 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: _____
 Property representative: _____
 AHJ representative: _____

SYSTEM RECORD OF COMPLETION

Form Completion Date: 2/1/16 Supplemental Pages Attached: 1

1. PROPERTY INFORMATION

Name of property: USM Luther Bonney *****ADD TO EXISTING SYSTEM*****
Address: 85 Bedford St. Portland, ME
Description of property: Classrooms, computer labs
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
Phone: 207-774-5829 Fax: n/a E-mail: n/a
Service organization: Norris, Inc
Address: 2257 West Broadway South Portland, ME
Phone: 1-800-370-3473 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: USM Police/Portland Fire Dept
Address: n/a
Phone: n/a Fax: n/a E-mail: n/a
Account number: 19601182 Phone line 1: n/a Phone line 2: n/a
Means of transmission: Masterbox, Network
Entity to which alarms are retransmitted: Portland Fire Dept 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: 2013

4.1 Control Unit

Manufacturer: Notifier Model number: NFS2-640

4.2 Software and Firmware

Firmware revision number: 19

4.3 Alarm Verification

This system does not incorporate alarm verification.

Number of devices subject to alarm verification: 0 Alarm verification set for 0 seconds

SYSTEM RECORD OF COMPLETION (continued)

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: Sealed Lead Acid Batteries

Location, if remote from the plant: n/a

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 | A | n/a |
| Device Power | n/a | n/a | n/a | n/a |
| Initiating Device | n/a | n/a | n/a | n/a |
| Notification Appliance | 4 | n/a | B | n/a |
| Other (specify): | n/a | n/a | n/a | n/a |

7. REMOTE ANNUNCIATORS

| Type | Location |
|------|----------|
| n/a | n/a |

8. INITIATING DEVICES

| Type | Quantity | Addressable or Conventional | Alarm or Supervisory | Sensing Technology |
|----------------------|----------|-----------------------------|----------------------|--------------------|
| Manual Pull Stations | 2 | Addressable | Alarm | n/a |
| Smoke Detectors | 7 | Addressable | Alarm | Photoelectric |
| Duct Smoke Detectors | 0 | n/a | n/a | n/a |
| Heat Detectors | 0 | n/a | n/a | n/a |
| Gas Detectors | 0 | n/a | n/a | n/a |
| Waterflow Switches | 0 | n/a | n/a | n/a |
| Tamper Switches | 0 | n/a | n/a | n/a |

SYSTEM RECORD OF COMPLETION (continued)

9. NOTIFICATION APPLIANCES

| Type | Quantity | Description |
|---------------------------------|----------|-----------------|
| Audible | n/a | |
| Visible | 37 | Strobes |
| Combination Audible and Visible | 9 | Speaker Strobes |

10. SYSTEM CONTROL FUNCTIONS

| Type | Quantity |
|----------------------------------|----------|
| Hold-Open Door Releasing Devices | 1 |
| HVAC Shutdown | 0 |
| Fire/Smoke Dampers | 0 |
| Door Unlocking | 0 |
| Elevator Recall | 0 |
| Elevator Shunt Trip | 0 |
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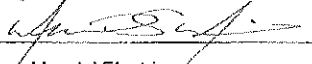
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12. CERTIFICATION AND APPROVALS


12.1 System Installation Contractor

This system as specified herein has been installed according to all NFPA standards cited herein.

Signed:  Printed name: Michael Merrill Date: 2/03/2016
 Organization: Mancini Electric Title: Project Manager Phone: 207-774-5829

12.2 System Operational Test

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

Signed:  Printed name: Wade Morin Date: 2/3/16
 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: _____
 Property representative: _____
 AHJ representative: _____

**NOTIFICATION APPLIANCE POWER PANEL
SUPPLEMENTARY RECORD OF COMPLETION**

Form Completion Date: 2/1/16 Number of Supplemental Pages Attached: 1

1. PROPERTY INFORMATION

Name of property: USM Luther Bonney
Address: 85 Bedford St. Portland, ME

2. NOTIFICATION APPLIANCE POWER EXTENDER PANELS

| Make and Model | Location | Area Served | Power Source |
|-----------------------|----------------------|--------------------|---------------------|
| Notifier FCPS | Computer Lab IT Room | Computer Lab Area | n/a |
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See Main System Record of Completion for additional information, certifications, and approvals.

**NOTIFICATION APPLIANCE POWER PANEL
SUPPLEMENTARY RECORD OF COMPLETION**

Form Completion Date: 2/1/16 Number of Supplemental Pages Attached: 1

1. PROPERTY INFORMATION

Name of property: USM Luther Bonney
Address: 85 Bedford St. Portland, ME

2. NOTIFICATION APPLIANCE POWER EXTENDER PANELS

| Make and Model | Location | Area Served | Power Source |
|-----------------------|----------------------|--------------------|---------------------|
| Notifier FCPS | Computer Lab IT Room | Computer Lab Area | n/a |
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See Main System Record of Completion for additional information, certifications, and approvals.

**NOTIFICATION APPLIANCE POWER PANEL
SUPPLEMENTARY RECORD OF COMPLETION**

Form Completion Date: 2/1/16 Number of Supplemental Pages Attached: 1

1. PROPERTY INFORMATION

Name of property: USM Luther Bonney

Address: 85 Bedford St. Portland, ME

2. NOTIFICATION APPLIANCE POWER EXTENDER PANELS

| Make and Model | Location | Area Served | Power Source |
|-----------------------|----------------------|--------------------|---------------------|
| Notifier FCPS | Computer Lab IT Room | Computer Lab Area | n/a |
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