



**131 LAFAYETTE RD**  
**NORTH HAMPTON NEW HAMPSHIRE 03862**  
**1-800-258-7264**

**FIRE ALARM SYSTEMS**

**TESTING • MAINTENANCE • ENGINEERING • INSTALLATION**

**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.*

4-21-17

Time of inspection or test: .....

**1. PROPERTY INFORMATION**

Name of property: INNOVATION HALL UNE

Address: 772 Stevens Ave PORTLAND MAINE

Description of property: .....

Occupancy type: .....

Name of property representative: .....

Address: .....

Phone: .....

Fax: .....

E-mail: .....

Authority having jurisdiction over this property: .....

Phone: .....

Fax: .....

E-mail: .....

**2. INSTALLATION, SERVICE, AND TESTING CONTRACTOR INFORMATION**

Service and/or testing organization for this equipment: R.B ALLEN CO

Address: 131 LAFAYETTE RD NORTH HAMPTON NH

Phone: 603-964-8140

Fax: .....

E-mail: .....

Service technician or tester: .....

Qualifications of technician or tester: .....

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

The contract expires: .....

Contract number: .....

Frequency of tests and inspections: .....

Monitoring organization for this equipment: .....

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: EST Model number: EST3

**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: BY FACP

**3.4 System Software**

This system does not have alterable site-specific software.

Software revision number: 3.7 Software last updated on: 4-21-17

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: 2.0

**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: FCC 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: 2.0

**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: EXTENDERS Type: SLA Nominal voltage: 12 Amp/hour rating: 8

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: .....

Annunciator  
2,4,5,6,7 .....

Annunciator 3: .....

#### 6. NOTIFICATIONS MADE PRIOR TO TESTING

Monitoring organization Contact: ..... Time: .....

Building management Contact: ..... Time: .....

Building occupants Contact: ..... Time: .....

Authority having jurisdiction Contact: ..... Time: .....

Other, if required Contact: ..... Time: .....

#### 7. TESTING RESULTS

##### 7.1 Control Unit and Related Equipment

Description	Visual Inspection	Functional Test	Comments
Control unit	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	TESTED AS DESIGNED
Lamps/LEDs/LCDs	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	TESTED AS DESIGNED
Fuses	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	TESTED AS DESIGNED
Trouble signals	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	TESTED AS DESIGNED
Disconnect switches	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	TESTED AS DESIGNED
Ground-fault monitoring	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	TESTED AS DESIGNED
Supervision	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	TESTED AS DESIGNED

Local annunciator	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	TESTED AS DESIGNED
Remote annunciators	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	TESTED AS DESIGNED
Power extender panels	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	TESTED AS DESIGNED
Isolation modules	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
Other (specify)	<input type="checkbox"/>	<input type="checkbox"/>	

## 7. TESTING RESULTS (continued)

### 7.2 Control Unit Power Supplies

Description	Visual Inspection	Functional Test	Comments
120-volt power	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	TESTED AS DESIGNED
Generator or UPS	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	TESTED AS DESIGNED
Battery condition	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	TESTED AS DESIGNED
Load voltage	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	TESTED AS DESIGNED
Discharge test	<input type="checkbox"/>	<input type="checkbox"/>	
Charger test	<input type="checkbox"/>	<input type="checkbox"/>	
Other (specify)	<input type="checkbox"/>	<input type="checkbox"/>	

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

Description	Visual Inspection	Functional Test	Comments
Control unit	<input type="checkbox"/>	<input type="checkbox"/>	N/A
Lamps/LEDs/LCDs	<input type="checkbox"/>	<input type="checkbox"/>	N/A
Fuses	<input type="checkbox"/>	<input type="checkbox"/>	N/A
Primary power supply	<input type="checkbox"/>	<input type="checkbox"/>	N/A
Secondary power supply	<input type="checkbox"/>	<input type="checkbox"/>	N/A
Trouble signals	<input type="checkbox"/>	<input type="checkbox"/>	N/A
Disconnect switches	<input type="checkbox"/>	<input type="checkbox"/>	N/A
Ground-fault monitoring	<input type="checkbox"/>	<input type="checkbox"/>	N/A
Panel supervision	<input type="checkbox"/>	<input type="checkbox"/>	N/A
System performance	<input type="checkbox"/>	<input type="checkbox"/>	N/A
Sound pressure levels Occupied <input type="checkbox"/> Yes <input type="checkbox"/> No Ambient _____ dBA Alarm _____ dBA (attach report with locations, values, and weather conditions)	<input type="checkbox"/>	<input type="checkbox"/>	N/A

System intelligibility <input type="checkbox"/> CSI <input type="checkbox"/> STI (attach report with locations, values, and weather conditions)	<input type="checkbox"/>	<input type="checkbox"/>	N/A
Other (specify)	<input type="checkbox"/>	<input type="checkbox"/>	N/A

## 7. TESTING RESULTS (continued)

### 7.4 Notification Appliance Power Extender Panels

Description	Visual Inspection	Functional Test	Comments
Lamps/LEDs/LCDs	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	TESTED AS DESIGNED
Fuses	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	TESTED AS DESIGNED
Primary power supply	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	TESTED AS DESIGNED
Secondary power supply	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	TESTED AS DESIGNED
Trouble signals	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	TESTED AS DESIGNED
Ground-fault monitoring	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	TESTED AS DESIGNED
Panel supervision	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	TESTED AS DESIGNED
Other (specify)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	

### 7.5 Mass Notification Equipment

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

**7. TESTING RESULTS (continued)**

**7.5 Mass Notification Equipment (continued)**

Description	Visual Inspection	Functional Test	Comments
MNS to direct recipient MNS	<input type="checkbox"/>	<input type="checkbox"/>	N/A
Sound pressure levels Occupied <input type="checkbox"/> Yes <input type="checkbox"/> No Ambient _____ dBA Alarm _____ dBA (attach report with locations, values, and weather conditions)	<input type="checkbox"/>	<input type="checkbox"/>	
System intelligibility <input type="checkbox"/> CSI <input type="checkbox"/> STI (attach report with locations, values, and weather conditions)	<input type="checkbox"/>	<input type="checkbox"/>	
Other (specify) _____	<input type="checkbox"/>	<input type="checkbox"/>	

**7.6 Two-Way Communications Equipment**

Description	Visual Inspection	Functional Test	Comments
Phone handsets	<input type="checkbox"/>	<input type="checkbox"/>	N/A
Phone jacks	<input type="checkbox"/>	<input type="checkbox"/>	N/A
Off-hook indicator	<input type="checkbox"/>	<input type="checkbox"/>	N/A
Call-in signal	<input type="checkbox"/>	<input type="checkbox"/>	N/A
System performance	<input type="checkbox"/>	<input checked="" type="checkbox"/>	N/A
System audibility	<input type="checkbox"/>	<input type="checkbox"/>	N/A
System intelligibility	<input type="checkbox"/>	<input type="checkbox"/>	N/A
Radio communications enhancement system	<input type="checkbox"/>	<input type="checkbox"/>	N/A
Area of refuge communication system	<input type="checkbox"/>	<input type="checkbox"/>	N/A
Elevator emergency communications system	<input type="checkbox"/>	<input type="checkbox"/>	N/A
Other (specify) _____	<input type="checkbox"/>	<input type="checkbox"/>	N/A



**7. TESTING RESULTS (continued)**

**7.7 Combination Systems**

Description	Visual Inspection	Functional Test	Comments
Fire extinguishing monitoring devices/system	<input type="checkbox"/>	<input type="checkbox"/>	N/A
Carbon monoxide detector/system	<input type="checkbox"/>	<input type="checkbox"/>	N/A
Combination fire/security system	<input type="checkbox"/>	<input type="checkbox"/>	N/A
Other (specify)	<input type="checkbox"/>	<input type="checkbox"/>	N/A

**7.8 Special Hazard Systems**

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

**7.9 Emergency Communications System**

- Visual
- Functional
- Simulated operation
- Ensure predischage 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	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	N/A
Fire pump	<input type="checkbox"/>	<input type="checkbox"/>	N/A
Special suppression systems	<input type="checkbox"/>	<input type="checkbox"/>	N/A
Other (specify)	<input type="checkbox"/>	<input type="checkbox"/>	N/A

**7. TESTING RESULTS (continued)**

**7.11 Auxiliary Functions**

Description	Visual Inspection	Functional Test	Comments
Door-releasing devices	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	TESTED AS DESIGNED
Fan shutdown	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	TESTED AS DESIGNED
Smoke management/smoke control	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	TESTED AS DESIGNED
Smoke damper operation	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	TESTED AS DESIGNED
Smoke shutter release	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	TESTED AS DESIGNED
Door unlocking	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	TESTED AS DESIGNED
Elevator recall	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	TESTED AS DESIGNED
Elevator shunt trip	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	TESTED AS DESIGNED
MNS override of FA signals	<input type="checkbox"/>	<input type="checkbox"/>	N/A
Other (specify)	<input type="checkbox"/>	<input type="checkbox"/>	

**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	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Alarm restoration	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Trouble signal	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Trouble restoration	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Supervisory signal	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Supervisory restoration	<input checked="" type="checkbox"/>	<input type="checkbox"/>		

**8. NOTIFICATIONS THAT TESTING IS COMPLETE**

Monitoring organization	Contact: .....	Time: .....
Building management	Contact: .....	Time: .....
Building occupants	Contact: .....	Time: .....
Authority having jurisdiction	Contact: .....	Time: .....
Other, if required	Contact: .....	Time: .....

**9. SYSTEM RESTORED TO NORMAL OPERATION**

Date: 4-21-17 ..... 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: James Healy ..... Printed name: ..... Date: 4-21-17  
Organization: R.B ALLEN CO ..... Title: ..... 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: .....



**10. MASS NOTIFICATION CONTROLS, APPLIANCES, AND CIRCUITS**  This system does not have an MNS.

**10.1 MNS Local Operating Consoles**

Location 1: .....  
Location 2: .....  
Location 3: .....

**10.2 High-Power Speaker Arrays**

Number of HPSA speaker initiation zones: .....  
Location 1: .....  
Location 2: .....  
Location 3: .....

**10.3 Mass Notification Devices**

Combination fire alarm/MNS visible appliances: ..... MNS-only visible appliances: .....  
Textual signs: ..... Other (describe): .....  
Supervision class: .....

**10.3.1 Special Hazard Notification**

- This system does not have special suppression predischage notification.
- MNS systems DO NOT override notification appliances required to provide special suppression predischage notification.

**11. TWO-WAY EMERGENCY COMMUNICATION SYSTEMS**

**11.1 Telephone System**

This system does not have a two-way telephone system.

Number of telephone jacks installed: ..... Number of warden stations installed: .....  
Number of telephone handsets stored on site: .....  
Type of telephone system installed:  Electrically powered  Sound powered

**11.2 Two-Way Radio Communications Enhancement System**

This system does not have a two-way radio communications enhancement system.

Percentage of area covered by two-way radio service: Critical areas: 100 % General building areas: %

Amplification component locations: .....  
Inbound signal strength: ..... dBm Outbound signal strength: ..... dBm  
Donor antenna isolation is: ..... dB above the signal booster gain  
Radio frequencies covered: .....  
Radio system monitor panel location: .....

**11. TWO-WAY EMERGENCY COMMUNICATION SYSTEMS (continued)**

**11.3 Area of Refuge (Area of Rescue Assistance) Emergency Communications Systems**

This system does not have an area of refuge (area of rescue assistance) emergency communications system.

Number of stations: \_\_\_\_\_ Location of central control point: \_\_\_\_\_

Days and hours when central control point is attended: \_\_\_\_\_

Location of alternate control point: \_\_\_\_\_

Days and hours when alternate control point is attended: \_\_\_\_\_

**11.4 Elevator Emergency Communications Systems**

This system does not have an elevator emergency communications system.

Number of elevators with stations: \_\_\_\_\_ Location of central control point: \_\_\_\_\_

Days and hours when central control point is attended: \_\_\_\_\_

Location of alternate control point: \_\_\_\_\_

Days and hours when alternate control point is attended: \_\_\_\_\_

**11.5 Other Two-Way Communication Systems**

Describe: \_\_\_\_\_

**12. CONTROL FUNCTIONS**

This system activates the following control functions:

Hold-open door releasing devices     Smoke management     HVAC shutdown     F/S dampers

Door unlocking     Elevator recall     Fuel source shutdown     Extinguishing agent release

Elevator shunt trip     Mass notification system override of fire alarm notification appliances

Other (specify): \_\_\_\_\_

**12.1 Addressable Control Modules**

This system does not have control modules.

Number of devices: \_\_\_\_\_

Other (specify): \_\_\_\_\_

**13. SYSTEM POWER**

**13.1 Control Unit**

**13.1.1 Primary Power**

Input voltage of control panel: 120 \_\_\_\_\_ Control panel amps: 20 \_\_\_\_\_

Overcurrent protection: Type: CIRCUIT BREAKER \_\_\_\_\_ Amps: \_\_\_\_\_

Location (of primary supply panel board): \_\_\_\_\_

Disconnecting means location: \_\_\_\_\_

**13.1.2 Engine-Driven Generator**

This system does not have a generator.

Location of generator: \_\_\_\_\_

Location of fuel storage: \_\_\_\_\_ Type of fuel: \_\_\_\_\_

**13. SYSTEM POWER (continued)**

**13.1.3 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): .....

**13.1.4 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  Battery calculations are attached

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

This system does not have an EVACS or MNS system.

**13.2.1 Primary Power**

Input voltage of EVACS or MNS panel: ..... EVACS or MNS panel amps: .....

Overcurrent protection: Type: CIRCUIT BREAKER Amps: 20

Location (of primary supply panel board): .....

Disconnecting means location: .....

**13.2.2 Engine-Driven Generator**

This system does not have a generator.

Location of generator: .....

Location of fuel storage: ..... Type of fuel: .....

**13.2.3 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): .....

**13.2.4 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  Battery calculations are attached

**13. SYSTEM POWER (continued)**

**13.3 Notification Appliance Power Extender Panels**

This system does not have power extender panels.

**13.3.1 Primary Power**

Input voltage of power extender panel(s): 120 Power extender panel amps: 20

Overcurrent protection: Type: CIRCUIT BREAKER Amps: 20

Location (of primary supply panel board):

Disconnecting means location:

**13.3.2 Engine-Driven Generator**

This system does not have a generator.

Location of generator:

Location of fuel storage: Type of fuel:

**13.3.3 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):

**13.3.4 Batteries**

Location: Type: SEALED LA Nominal voltage: 18 Amp/hour rating: 8

Calculated capacity of batteries to drive the system:

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

Batteries are marked with date of manufacture  Battery calculations are attached

**14. 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.*

This is a:  New system  Modification to an existing system Permit number:

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

NFPA 72, Edition:

NFPA 70, National Electrical Code, Article 760, Edition:

Manufacturer's published instructions

Other (specify):

System deviations from referenced NFPA standards:

Signed: Printed name: Date: 4-21-17

Organization: REGIONAL ELECTRIC Title: Phone:



**15. RECORD OF SYSTEM OPERATIONAL ACCEPTANCE TEST**

New system

*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 for the following:*

Modifications to an existing system

*All newly modified operational features and functions of the 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 the following:*

NFPA 72, Edition: .....

NFPA 70, National Electrical Code, Article 760, Edition: .....

X Manufacturer's published instructions

Other (specify): .....

Individual device testing documentation [Inspection and Testing Form (Figure 14.6.2.4) is attached]

Signed: James Gailey Printed name: JAMES GAILEY Date: 4-21-17  
Organization: R.B.ALLEN Title: TECHNICIAN Phone: 603-964-8140

**16. CERTIFICATIONS AND APPROVALS**

**16.1 System Installation Contractor:**

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

Signed: \_\_\_\_\_ Printed name: \_\_\_\_\_ Date: 4-21-17  
Organization: REGIONAL ELECTRIC Title: ELECTRICIAN Phone: \_\_\_\_\_

**16.2 System Service Contractor:**

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

Signed: \_\_\_\_\_ Printed name: \_\_\_\_\_ Date: \_\_\_\_\_  
Organization: \_\_\_\_\_ Title: \_\_\_\_\_ Phone: \_\_\_\_\_

**16.3 Supervising Station:**

This system, as specified herein, will be monitored according to all NFPA standards cited herein.

Signed: \_\_\_\_\_ Printed name: \_\_\_\_\_ Date: \_\_\_\_\_  
Organization: \_\_\_\_\_ Title: \_\_\_\_\_ Phone: \_\_\_\_\_

**16. CERTIFICATIONS AND APPROVALS (continued)**

**16.4 Property or Owner Representative:**

This system, as specified herein, will be monitored according to all NFPA standards cited herein.

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

**16.5 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, with its approved sequence of operations, and with all NFPA standards cited herein.

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

# FIRE ALARM AND EMERGENCY COMMUNICATION SYSTEM RECORD OF COMPLETION

To be completed by the system installation contractor at the time of system acceptance and approval.  
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.

## 1. PROPERTY INFORMATION

Name of property: INNOVATION HALL UNE  
Address: 772 Stevens Ave PORTLAND MAINE  
Description of property:  
Occupancy type: NURSING  
Name of property representative:  
Address:  
Phone: Fax: E-mail:  
Authority having jurisdiction over this property:  
Phone: Fax: E-mail:

## 2. INSTALLATION, SERVICE, AND TESTING CONTRACTOR INFORMATION

Installation contractor for this equipment: REGIONAL ELECTRIC  
Address:  
License or certification number:  
Phone: Fax: E-mail:  
Service organization for this equipment:  
Address:  
License or certification number:  
Phone: Fax: E-mail:  
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. DESCRIPTION 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):

NFPA 72, Fig. 10.18.2.1.1 (p. 1 of 12)

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

NFPA 72 edition: \_\_\_\_\_ Additional description of system(s): \_\_\_\_\_

**3.1 Control Unit**

Manufacturer: EST \_\_\_\_\_ Model number: EST3 \_\_\_\_\_

**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 autonomous control unit     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 numbered record drawings are stored on site.    Location: FACP \_\_\_\_\_

**3.4 System Software**

This system does not have alterable site-specific software.

Operating system (executive) software revision level: 2.0 \_\_\_\_\_

Site-specific software revision date: \_\_\_\_\_ Revision completed by: \_\_\_\_\_

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

**3.5 Off-Premises Signal Transmission**

This system does not have off-premises transmission.

Name of organization receiving alarm signals with phone numbers:

Alarm: \_\_\_\_\_ Phone: \_\_\_\_\_

Supervisory: \_\_\_\_\_ Phone: \_\_\_\_\_

Trouble: \_\_\_\_\_ Phone: \_\_\_\_\_

Entity to which alarms are retransmitted: \_\_\_\_\_ Phone: \_\_\_\_\_

Method of retransmission: \_\_\_\_\_

If Chapter 26, specify the means of transmission from the protected premises to the supervising station:  
\_\_\_\_\_

If Chapter 27, specify the type of auxiliary alarm system:    Local energy     Shunt    x Wired     Wireless

## 4. CIRCUITS AND PATHWAYS

### 4.1 Signaling Line Pathways

#### 4.1.1 Pathways Class Designations and Survivability

Pathways class: \_\_\_\_\_ Survivability level: \_\_\_\_\_ Quantity: \_\_\_\_\_  
(See NFPA 72, Sections 12.3 and 12.4)

#### 4.1.2 Pathways Utilizing Two or More Media

Quantity: \_\_\_\_\_ Description: \_\_\_\_\_

#### 4.1.3 Device Power Pathways

- No separate power pathways from the signaling line pathway
- Power pathways are separate but of the same pathway classification as the signaling line pathway
- Power pathways are separate and different classification from the signaling line pathway

#### 4.1.4 Isolation Modules

Quantity: \_\_\_\_\_

### 4.2 Alarm Initiating Device Pathways

#### 4.2.1 Pathways Class Designations and Survivability

Pathways class: \_\_\_\_\_ Survivability level: \_\_\_\_\_ Quantity: \_\_\_\_\_  
(See NFPA 72, Sections 12.3 and 12.4)

#### 4.2.2 Pathways Utilizing Two or More Media

Quantity: \_\_\_\_\_ Description: \_\_\_\_\_

#### 4.2.3 Device Power Pathways

- No separate power pathways from the initiating device pathway
- Power pathways are separate but of the same pathway classification as the initiating device pathway
- Power pathways are separate and different classification from the initiating device pathway

### 4.3 Non-Voice Audible System Pathways

#### 4.3.1 Pathways Class Designations and Survivability

Pathways class: \_\_\_\_\_ Survivability level: \_\_\_\_\_ Quantity: \_\_\_\_\_  
(See NFPA 72, Sections 12.3 and 12.4)

#### 4.3.2 Pathways Utilizing Two or More Media

Quantity: \_\_\_\_\_ Description: \_\_\_\_\_

#### 4.3.3 Device Power Pathways

- No separate power pathways from the notification appliance pathway
- Power pathways are separate but of the same pathway classification as the notification appliance pathway
- Power pathways are separate and different classification from the notification appliance pathway

## 5. ALARM INITIATING DEVICES

### 5.1 Manual Initiating Devices

#### 5.1.1 Manual Fire Alarm Boxes

This system does not have manual fire alarm boxes.

Type and number of devices: Addressable: 23 Conventional: \_\_\_\_\_ Coded: \_\_\_\_\_ Transmitter: \_\_\_\_\_

Other (specify): \_\_\_\_\_

#### 5.1.2 Other Alarm Boxes

This system does not have other alarm boxes.

Description: \_\_\_\_\_

Type and number of devices: Addressable: \_\_\_\_\_ Conventional: \_\_\_\_\_ Coded: \_\_\_\_\_ Transmitter: \_\_\_\_\_

Other (specify): \_\_\_\_\_

### 5.2 Automatic Initiating Devices

#### 5.2.1 Smoke Detectors

This system does not have smoke detectors.

Type and number of devices: Addressable: 28 Conventional: \_\_\_\_\_

Other (specify): \_\_\_\_\_

Type of coverage:  Complete area  Partial area  Nonrequired partial area

Other (specify): \_\_\_\_\_

Type of smoke detector sensing technology:  Ionization  Photoelectric  Multicriteria  Aspirating  Beam

Other (specify): \_\_\_\_\_

#### 5.2.2 Duct Smoke Detectors

This system does not have alarm-causing duct smoke detectors.

Type and number of devices: Addressable: 7 Conventional: \_\_\_\_\_

Other (specify): \_\_\_\_\_

Type of coverage: \_\_\_\_\_

Type of smoke detector sensing technology:  Ionization  Photoelectric  Aspirating  Beam

#### 5.2.3 Radiant Energy (Flame) Detectors

This system does not have radiant energy detectors.

Type and number of devices: Addressable: \_\_\_\_\_ Conventional: \_\_\_\_\_

Other (specify): \_\_\_\_\_

Type of coverage: \_\_\_\_\_

#### 5.2.4 Gas Detectors

This system does not have gas detectors.

Type of detector(s): 3 \_\_\_\_\_

Number of devices: Addressable: \_\_\_\_\_ Conventional: \_\_\_\_\_

Type of coverage: \_\_\_\_\_

#### 5.2.5 Heat Detectors

This system does not have heat detectors.

Type and number of devices: Addressable: 4 Conventional: \_\_\_\_\_

Type of coverage:  Complete area  Partial area  Nonrequired partial area  Linear  Spot

Type of heat detector sensing technology:  Fixed temperature  Rate-of-rise  Rate compensated

**5. ALARM INITIATING DEVICES (continued)**

**5.2.6 Addressable Monitoring Modules**

This system does not have monitoring modules.

Number of devices: .....

**5.2.7 Waterflow Alarm Devices**

This system does not have waterflow alarm devices.

Type and number of devices: Addressable: 4 Conventional: ..... Coded: ..... Transmitter: .....

**5.2.8 Alarm Verification**

This system does not incorporate alarm verification.

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

**5.2.9 Presignal**

This system does not incorporate pre-signal.

Number of devices subject to presignal: .....

Describe presignal functions: .....

**5.2.10 Positive Alarm Sequence (PAS)**

This system does not incorporate PAS.

Describe PAS: .....

**5.2.11 Other Initiating Devices**

This system does not have other initiating devices.

Describe: .....

**6. SUPERVISORY SIGNAL-INITIATING DEVICES**

**6.1 Sprinkler System Supervisory Devices**

This system does not have sprinkler supervisory devices.

Type and number of devices: Addressable: 4 Conventional: ..... Coded: ..... Transmitter: .....

Other (specify): .....

**6.2 Fire Pump Description and Supervisory Devices**

This system does not have a fire pump.

Type fire pump:  Electric pump  Engine

Type and number of devices: Addressable: ..... Conventional: ..... Coded: ..... Transmitter: .....

Other (specify): .....

**6.2.1 Fire Pump Functions Supervised**

Power  Running  Phase reversal  Selector switch not in auto  Engine or control panel trouble  Low fuel

Other (specify): .....

**6.3 Duct Smoke Detectors (DSDs)**

This system does not have DSDs causing supervisory signals.

Type and number of devices: Addressable: 7 Conventional: .....

Other (specify): .....

Type of coverage: .....

Type of smoke detector sensing technology:  Ionization  Photoelectric  Aspirating  Beam

**6.4 Other Supervisory Devices**

This system does not have other supervisory devices.

Describe: .....

**7. MONITORED SYSTEMS**

**7.1 Engine-Driven Generator**

This system does not have a generator.

**7.1.1 Generator Functions Supervised**

Engine or control panel trouble     Generator running     Selector switch not in auto     Low fuel

Other (specify): .....

**7.2 Special Hazard Suppression Systems**

This system does not monitor special hazard systems.

Description of special hazard system(s): .....

**7.3 Other Monitoring Systems**

This system does not monitor other systems.

Description of special hazard system(s): .....

**8. ANNUNCIATORS**

This system does not have annunciators.

**8.1 Location and Description of Annunciators**

Location 1: LOBBY .....

Location 2: ARMORY .....

Location 3: .....

**9. ALARM NOTIFICATION APPLIANCES**

**9.1 In-Building Fire Emergency Voice Alarm Communication System**

This system does not have an EVACS.

Number of single voice alarm channels: ..... Number of multiple voice alarm channels: .....

Number of speakers: ..... Number of speaker circuits: .....

Location of amplification and sound-processing equipment: .....

Location of paging microphone stations:

Location 1: .....

Location 2: .....

Location 3: .....

**9.2 Nonvoice Notification Appliances**

This system does not have nonvoice notification appliances.

Horns: ..... With visible: ..... Bells: ..... With visible: .....

Chimes: ..... With visible: .....

Visible only: ..... Other (describe): .....

**9.3 Notification Appliance Power Extender Panels**

This system does not have power extender panels.

Quantity: .....

Locations: .....



	TESTED
01020001	X
01020002	X
01020003	X
01020004	X
01020005	X
01020006	X
01020007	X
01020008	X
01020009	X
01020010	X
01020011	X
01020012	X
01020013	X
01020014	X
01020015	X
01020016	X
01020017	X
01020018	X
01020019	X
01020020	X
01020021	X
01020022	X
01020023	X
01020024	X
01020025	X
01020026	X
01020027	X
01020028	X
01020029	X
01020030	X
01020031	X
01020032	X
01020033	X
01020034	X
01020035	X
01020036	X
01020037	X
01020138	X
01020139	X
01020140	X
01020141	X

	RIGHT FL1 BPS10 TRIP WITH CKT3-4 NATN GARD	TESTED
01020142		
01020143	PULL INNOVATION HALL FL1 ENTRANCE 125	X
01020144	PULL INNOVATION HALL FL1 SMALL FUNCT RM116	X
01020145	PULL INNOVATION HALL FL2 TOP OF STAIR 4	X
01020146	PULL INNOVATION HALL FL1 ENTRANCE 100	X
01020147	PULL INNOVATION HALL FL1 CLASSROOM B101	X
01020148	PULL INNOVATION HALL FL1 INNOVATION HUB153	X
01020149	PULL INNOVATION HALL FL1 FUNCTION RM 116	X
01020150	PULL INNOVATION HALL FL2 BY STAIR 501	X
01020151	PULL INNOVATION HALL FUNCTION RM 104	X
01020152	PULL INNOVATION HALL FUNCTION RM 104	X
01020153	PULL INNOVATION HALL FUNCTION RM 104	X
01020154	RELAY FOR PRIMARY ELEVATOR RECALL	
01020155	RELAY FOR ALTERNATE ELEVATOR RECALL	
01020156	RELAY FOR ELEVATOR HAT LIGHT	
01020157	RELAY FOR TOP OF FUNCTION RM STAIRS	

		TESTED
01020159	WATERFLOW ARMORY	X
01020160	TAMPER INNOVATON HALL FL1	X
01020161	WATERFLOW INNOVATON HALLFL1	X
01020162	MAIN SPRINKLER TAMPER	X
01020163	MAIN WATERFLOW	X
01020164	TAMPER INNOVATON HALL FL1 DRY SYSTEM ATTIC	X
01020165	WTRFLW INNOVATON HALL DRY SYSTEM ATTIC	X
01020166	BEAM SMOKE INNOVATION HALL TROUBLE	X
01020167	BEAM SMOKE INNOVATION HALL ALARM	X
01020168	WTRFLW INNOVATON HALL DRY SYSTEM LOW AIR	X
01020169	AES RADIO MASTERBOX ANTENNA CUT	
01020170	AES RADIO MASTERBOX BYPASS SWITCH ACTIVE	
01020171	PULL INNOVATION HALL FL1 ENTRANCE 151	X
01020172	PULL INNOVATION HALL FL1 VESTIBULE 152	X
01020173	PULL INNOVATION HALL FL1 BY KITCHEN 165	X
01020174	PULL INNOVATION HALL FL2 TOP OF STAIR S05	X
01020175	PULL INNOVATION HALL FL2 TOP OF STAIR S02	X
01020176	PULL INNOVATION HALL FL1 CLASS ROOM 102	X
01020177	PULL INNOVATION HALL FL1 ENTRANCE 152	X