

SYSTEM RECORD OF COMPLETION

*This form is 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.

Form Completion Date: 07/24/2019 Supplemental Pages Attached: 2

1. PROPERTY INFORMATION

Name of property: 250 Canco Road City of Portland Building
Address: 250 Canco Road Portland, Maine 04103
Description of property: Vehicle Maintenance Building
Name of property representative: NA
Address: NA
Phone: NA Fax: NA E-mail: NA

2. INSTALLATION, SERVICE, TESTING, AND MONITORING INFORMATION

Installation contractor: Corey Electric
Address: 609 Main St #3, Westbrook, ME 04092
Phone: 207-591-8151 Fax: NA E-mail: pcorey@coreyelectric.com
Service organization: Protection Professionals
Address: 325 US-1, Falmouth, ME 04105
Phone: (207) 775-5755 Fax: (207) 781-2064 E-mail: info@protectionprofessionals.net
Testing organization: Protection Professionals
Address: 325 US-1, Falmouth, ME 04105
Phone: (207) 775-5755 Fax: (207) 781-20164 E-mail: info@protectionprofessionals.net
Effective date for test and inspection contract: _____
Monitoring organization: City of Portland AES Masterbox 2141
Address: NA
Phone: NA Fax: NA E-mail: NA
Account number: City AES 2141 Phone line 1: NA Phone line 2: NA
Means of transmission: AES 7794 Fire Radio City of Portland Freq
Entity to which alarms are retransmitted: Portland Fire Department Phone: (207) 874-8576

3. DOCUMENTATION

On-site location of the required record documents and site-specific software: Document Cabinet by Fire Alarm Control Panel

4. DESCRIPTION OF SYSTEM OR SERVICE

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

NFPA 72 edition: 13

4.1 Control Unit

Manufacturer: Bosch Model number: D9412GV4

4.2 Software and Firmware

Firmware revision number: NA

4.3 Alarm Verification

This system does not incorporate alarm verification.

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

SYSTEM RECORD OF COMPLETION (continued)

5. SYSTEM POWER

5.1 Control Unit

5.1.1 Primary Power

Input voltage of control panel: 16VAC Control panel amps: NA

Overcurrent protection: Type: NA Amps: NA

Branch circuit disconnecting means location: NA Number: NA

5.1.2 Secondary Power

Type of secondary power: Battery (12v-7ah)

Location, if remote from the plant: In Panel

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	NA	NA	NA	NA
Device Power	NA	NA	NA	NA
Initiating Device	NA	NA	B	0
Notification Appliance	NA	NA	B	0
Other (specify):	NA	NA	NA	NA

7. REMOTE ANNUNCIATORS

Type	Location
Bosch Alphanumeric	Main Entrance
NA	NA

8. INITIATING DEVICES

Type	Quantity	Addressable or Conventional	Alarm or Supervisory	Sensing Technology
Manual Pull Stations	6	Addressable	Alarm	Contact
Smoke Detectors	2	Addressable	Alarm	Photo
Duct Smoke Detectors	0	NA	NA	NA
Heat Detectors	0	NA	NA	NA
Gas Detectors	0	NA	NA	NA
Waterflow Switches	1	Addressable	Alarm	Contact
Tamper Switches	2	Addressable	Supervisory	Contact

SYSTEM RECORD OF COMPLETION (continued)

9. NOTIFICATION APPLIANCES

Type	Quantity	Description
Audible	NA	NA
Visible	4	Potter Strobe
Combination Audible and Visible	15	Potter Horn Strobe

10. SYSTEM CONTROL FUNCTIONS

Type	Quantity
Hold-Open Door Releasing Devices	NA
HVAC Shutdown	NA
Fire/Smoke Dampers	NA
Door Unlocking	NA
Elevator Recall	NA
Elevator Shunt Trip	NA
NA	NA
NA	NA

11. INTERCONNECTED SYSTEMS

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

12. CERTIFICATION AND APPROVALS

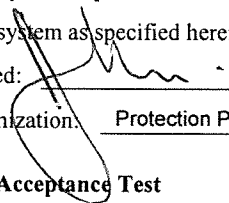
12.1 System Installation Contractor

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

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

12.2 System Operational Test

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

Signed:  Printed name: Jordan Valliere Date: 07/17/2019
 Organization: Protection Professionals Title: SR. Technician / Operations Phone: (207) 775-5755

12.3 Acceptance Test

Date and time of acceptance test: _____
 Installing contractor representative: _____
 Testing contractor representative: _____
 Property representative: _____
 AHJ representative: _____

**INITIATING DEVICE
SUPPLEMENTARY RECORD OF INSPECTION AND TESTING**

*This form is a supplement to the System Record of Inspection and Testing.
It includes an initiating device test record.*

*This form is to be completed by the system inspection and testing contractor at the time of the inspection and/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.*

Inspection/Test Start Date/Time: _____ Inspection/Test Completion Date/Time: _____

Number of Supplemental Pages Attached: _____

1. PROPERTY INFORMATION

Name of property: 250 Canco Road City of Portland Building

Address: 250 Canco Road Portland, Maine 04103

2. INITIATING DEVICE TEST RESULTS

Device Type	Address	Location	Test Results
	20		
	21		
	22		
	23		
	24		
Bosch Pull Station	25	Repair Garage # 1	Pass
Bosch Pull Station	26	Repair Garage # 1	Pass
Bosch Pull Station	27	Plow Bay	Pass
Bosch Pull Station	28	Plow Bay	Pass
Bosch Pull Station	29	Repair Garage # 2	Pass
Bosch Pull Station	30	Body and Paint Shop	Pass
Bosch Module	31	Sprinkler Waterflow North Riser Main	Pass
Bosch Module	32	Sprinkler Tamper North Riser Maine	Pass
NA	33	NA	NA
NA	34	NA	NA
NA	35	NA	NA
Bosch Module	36	Sprinkler Tamper Body and Paint Shop	Pass
Smoke	7	Smoke Detector above Fire Alarm Control Panel	Pass
Smoke	8	Smoke Detector 2 nd Floor Data Room above Potter NAC Signal Expander	Pass

**NOTIFICATION APPLIANCE
SUPPLEMENTARY RECORD OF INSPECTION AND TESTING**

*This form is a supplement to the System Record of Inspection and Testing.
It includes a notification appliance test record.*

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Insert N/A in all unused lines.*

Inspection/Test Start Date/Time: _____ Inspection/Test Completion Date/Time: _____

Number of Supplemental Pages Attached: _____

1. PROPERTY INFORMATION

Name of property: 250 Canco Road City of Portland Building

Address: 250 Canco Road Portland, Maine 04103

2. NOTIFICATION APPLIANCE TEST RESULTS

Appliance Type	Ckt#	Cd	Location/Identifier	Test Results
Ceiling Mount (AV)	PSN	110cd	Repair Garage # 1	Pass
Ceiling Mount (AV)	PSN	110cd	Repair Garage # 1	Pass
Horn Strobe (AV)	PSN	110cd	Repair Garage # 1	Pass
Horn Strobe (AV)	PSN	110cd	Parts Room / Storage Lower Level	Pass
Ceiling Mount (AV)	PSN	110cd	Repair Garage # 2 / Heavy Trucks	Pass
Ceiling Mount (AV)	PSN	110cd	Repair Garage # 2 / Heavy Trucks	Pass
Ceiling Mount (AV)	PSN	110cd	Repair Garage # 2 / Heavy Trucks	Pass
Horn Strobe (AV)	PSN	110cd	Stairwell to Upper Level	Pass
Horn Strobe (AV)	PSN	110cd	Hallway by Hose Room	Pass
Horn Strobe (AV)	PSN	110cd	Upper Level Conference / Meeting Room	Pass
Ceiling Mount (AV)	PSN	110cd	Plow Bay	Pass
Ceiling Mount (AV)	PSN	110cd	Plow Bay	Pass
Horn Strobe (AV)	PSN	30cd	Break Room	Pass
Strobe (V)	PSN	15cd	H C Restroom	Pass
Strobe (V)	PSN	15cd	Change Room	Pass
Strobe (V)	PSN	15cd	Restroom	Pass
Strobe (V)	PSN	15cd	Restroom	Pass
Strobe (V)	PSN	15cd	Locker Room	Pass
Horn Strobe (AV) EOL	PSN	110cd	Body and Paint Shop	Pass

**NOTIFICATION APPLIANCE
SUPPLEMENTARY RECORD OF INSPECTION AND TESTING (continued)**

2. NOTIFICATION APPLIANCE TEST RESULTS (continued)

Appliance Type	Ckt#	Cd	Location/Identifier	Test Results
	PSN	110cd	Plow Bay	Pass
Horn Strobe (AV)	PSN	30cd	Break Room	Pass
Strobe (V)	PSN	15cd	H C Toilet	Pass
Strobe (V)	PSN	15cd	Change Room	Pass
Strobe (V)	PSN	15cd	Toilet	Pass
Strobe (V)	PSN	15cd	Toilet	Pass
Strobe (V)	PSN	15cd	Locker Room	Pass
Horn Strobe (AV) EOL	PSN	110cd	Body and Paint Shop	Pass

NOTIFICATION APPLIANCE POWER PANEL SUPPLEMENTARY RECORD OF COMPLETION

This form is a supplement to the System Record of Completion. It includes a list of types and locations of notification appliance power extender panels.

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Form Completion Date: _____ Number of Supplemental Pages Attached: _____

1. PROPERTY INFORMATION

Name of property: 250 Canco Road City of Portland Building

Address: 250 Canco Road Portland, Maine 04103

2. NOTIFICATION APPLIANCE POWER EXTENDER PANELS

Make and Model	Location	Area Served	Power Source
Potter - PSN 64	Data Room	Vehicle Maintenance	HP Data Room CB # 7

See Main System Record of Completion for additional information, certifications, and approvals.