Master Box Approval

Applicant: Norris Inc. **Emergency Contact: Nephrology Assoc.** App Phone #: 207-883-1104 x 1104 Emergency phone #: 207-774-5222 **Building Name: Nephrology Associates** Date of Application: 2/21/12 Billing Address: 1600 Congress St, STE B **Building Address: 1600 Congress St** Portland, ME 04102 Occupancy: Health Care Comments: Assembly OL>300, 20 unit apartment building, etc. Applicant completes red box and submits with Fire Alarm Permit □ Denied FIRE PREVENTION: Approved 3 / 21 / 12 e Prevention Officer Date Zone 2: City disconnect - Water Flow Zone 1: Water flow Zone 3: Pulls and detectors **Zone 4: City disconnect – Pulls and Detectors** Zone 5: Unassigned Zone 6: Unassigned Zone 8: AES Tamper switch Zone 7: Unassigned Modify City Box response to alarm sounding in CAD: ☐ YES ✓ NO FIRE ALARM: Box #: (discontinue existing supervised box number) 1279 ELECTRICAL DIVISION:

Approved Box Type: **AES Radio Box** New Other In Service Date: Test Date: Fire Alarm Technician **AES** Circuit if applicable: FIRE ALARM: Same Running Assignment As Box: _ Notifications: ☐ All Stations ☐ Run Books ☐ Digitizer ☐ Computer ☐ Cad Box Test ☐ South Portland Other Dispatcher **BILLING:** □ Entered **Financial Officer**

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