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: 01/07/2016 Supplemental Pages Attached:
1.	PROPERTY INFORMATION
	Name of property: Pine Tree Shopping Center (Workout Anytime)
	Address: 1100 Brighton Avenue Portland, Maine 04102
	Description of property: Multi-Unit Retail Space
	Name of property representative: Brooks Rankin
	Address: 1100 Brighton Avenue Ste 12 Portland, Maine 04102
	Phone: (207) 536-1473 Fax: NA E-mail: Brooks.rankin@workoutanytime.com
2.	INSTALLATION, SERVICE, TESTING, AND MONITORING INFORMATION
	Installation contractor: The Paradigm Group
	Address: 109 Smokehill Lane Suite 120 Woodstock, GA 30188
	Phone: (770) 399-3157 Fax: NA E-mail: bhazelrigs@theparadigmgroup.com
	Service organization: Protection Professionals
	Address: 325 US Rte 1 Falmouth, Maine 04105
	Phone: (207) 775-5755 Fax: (207) 781-2064 E-mail: info@protectionprofessionals.net
	Testing organization: Protection Professionals
	Address: 325 US Route One Falmouth, ME 04105
	Phone: (207) 775-5755 Fax: (207) 781-2064 E-mail: info@protectionprofessionals.net
	Effective date for test and inspection contract: NA
	Monitoring organization: Rapid Response
	Address: 400 W Division Street, Syracuse, NY 13204
	Phone: (800) 932-3822 Fax: N/A E-mail: N/A
	Account number: 4461117 Phone line 1: (207) 773-2498 Phone line 2: (207) 773-2499
	Means of transmission: Phone Lines & City AES 4175
	Entity to which alarms are retransmitted: Portland Fire Department Dispatch Phone: (207) 874-8576
3.	
_	On-site location of the required record documents and site-specific software:
4	. DESCRIPTION OF SYSTEM OR SERVICE This is a: □ New system X Modification to existing system Permit number: NA NA
	This is a.
	NFPA 72 edition: 2013
	4.1 Control Unit
	Manufacturer: FARADAY Model number: MPC-6000
	4.2 Software and Firmware
	Firmware revision number: NA

umber of devices subject to alarm verification:	N/A	Alarm verification set for	N/A	second
inder of devices subject to diarin verification.	14/74		1772	

5. SYSTEM POWER

5.1 Control Unit		,
5.1.1 Primary Power		
Input voltage of control panel: 120VAC	Control panel amps:	2.4
Overcurrent protection: Type: NA	Amps: NA	
Branch circuit disconnecting means location: NA	Number: NA	
5.1.2 Secondary Power		
Type of secondary power: SLA Batteries		
Location, if remote from the plant: In FACP		
Calculated capacity of secondary power to drive the system:		
	n alarm mode (minutes):	5
•		
5.2 Control Unit		
X This system does not have power extender panels		
X Power extender panels are listed on supplementary sheet A		

CIRCUITS AND PATHWAYS

6. CIRCUITS AND PATHW Pathway Type	Dual Media Pathway	Separate Pathway	Class	Survivability Level
Signaling Line	NA	NA	В	0
Device Power	NA	NA	NA	NA
Initiating Device	NA	NA	NA	NA
Notification Appliance	NA	NA	В	0
Other (specify):				
Other (specify).				

7. REMOTE ANNUNCIATORS

Туре	Location
Faraday	Outside by Dollar Tree

8. INITIATING DEVICES

Туре	Quantity	Addressable or Conventional	Alarm or Supervisory	Sensing Technology
Manual Pull Stations	2	Addressable	Alarm	Contact
Smoke Detectors	0	NA	NA	NA
Duct Smoke Detectors	2	Addressable	Alarm	Photoelectric
Heat Detectors	0	NA	NA	NA
Gas Detectors	0	NA	NA	NA
Waterflow Switches	0	NA	NA	NA
Tamper Switches	0	NA	NA	NA

Type Audible Visible	Quantity		
	0	NA	
	3	Strobe	
Combination Audible and Visible	5	Horn/Strobe	
0. SYSTEM CONTROL FU	NCTIONS		
IU. STSTEW CONTROL TO	Туре		Quantity
Hold-Open Door Releasing Devices			NA
HVAC Shutdown			NA
Fire/Smoke Dampers			NA
Door Unlocking			NA
Elevator Recall			
Elevator Shunt Trip			
 ☑ This system does not have ☑ Interconnected systems are l 12. CERTIFICATION AND 12.1 System Installation Co 	interconnected system isted on supplementar APPROVALS ntractor	y sheet	No. of the constru
 Interconnected systems are I 12. CERTIFICATION AND I 12.1 System Installation Co This system as specified here 	interconnected system isted on supplementar APPROVALS ntractor in has been installed	y sheet according to all NFPA standards	
 ☑ This system does not have ☑ Interconnected systems are I 12. CERTIFICATION AND I 12.1 System Installation Co This system as specified here Signed: 	interconnected system isted on supplementar APPROVALS ntractor in has been installed	y sheet according to all NFPA standards	Date:
☐ This system does not have ☐ Interconnected systems are I 12. CERTIFICATION AND I 12.1 System Installation Co This system as specified here Signed: ☐ Organization: 12.2 System Operational To This system as specified here	interconnected system isted on supplementar APPROVALS ntractor in has been installed	y sheet according to all NFPA standards _ Printed name: Title: ng to all NFPA standards cited he	Date:Phone:erein.

Audible Visible Combination Audible and Visible Type Hold-Open Door Releasing Devices HVAC Shutdown Fire/Smoke Dampers Door Unlocking Elevator Recall	Quantity NA NA NA NA NA NA NA NA NA N
Combination Audible and Visible 5 10. SYSTEM CONTROL FUNCTIONS Type Hold-Open Door Releasing Devices HVAC Shutdown Fire/Smoke Dampers Door Unlocking Elevator Recall	Quantity NA NA NA NA NA
Combination Audible and Visible 5 10. SYSTEM CONTROL FUNCTIONS Type Hold-Open Door Releasing Devices HVAC Shutdown Fire/Smoke Dampers Door Unlocking Elevator Recall	Quantity NA NA NA NA NA
Type Hold-Open Door Releasing Devices HVAC Shutdown Fire/Smoke Dampers Door Unlocking Elevator Recall	24 24 24 24 24
Type Hold-Open Door Releasing Devices HVAC Shutdown Fire/Smoke Dampers Door Unlocking Elevator Recall	24 24 24 24 24
HVAC Shutdown Fire/Smoke Dampers Door Unlocking Elevator Recall	NA NA NA
Fire/Smoke Dampers Door Unlocking Elevator Recall	AA AA
Door Unlocking Elevator Recall	NA
Elevator Recall	NA
	NA
Elevator Shunt Trip	
	NA
	NA
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 of Signed: Printed name: Beinn Haston Organization: Organization: Printed name: Beinn Haston Organization: Printed name: Printed name: Beinn Haston Organization: Printed name:	vited herein. ZELCIGS Date: <u>1-7-2016</u> Phone: 770-389-06
12.2 System Operational Test This system as specified herein has tested according to all NFPA standards cited here Signed: Printed name: BYZON	ein. PAU15 Date: 1-7-2016
Organization: Printed hands Title: Tech	Phone: 207-775-57
12.3 Acceptance Test	
Date and time of acceptance test:	

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:	
		Number of Supplemental Pages Attached: NA
1.	PROPERTY INFORMATIO	N
	Name of property: Pine Tree S	Shopping Center (Workout Anytime)
	Address: 1100 Brighton Aven	ue Portland, Maine 04102

2. INITIATING DEVICE TEST RESULTS

Device Type	Address	Location	Test Results
Pull	1037	Main Exit	Passed
Pull	1067	Rear Exit	Passed
			8
			_
	5		

See main System Record of Inspection and Testing for additional information, certifications, and approvals.

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.

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:	01/07/2016 - 14:00	Inspection/Test Completion Date	/Time: 01/07/2016 - 14:30	-
		Number of Supplemental Pag	ges Attached: NA		
١.	PROPERTY INFORMATION				
	Name of property: Pine Tree Shopping Center (Workout Anytime)			-	
	Address: 1100 Brighton Ave		-		

2. NOTIFICATION APPLIANCE TEST RESULTS

Appliance Type	Location/Identifier	Test Results
AV	Ceiling Excersise Area Front	Passed
AV	Ceiling Excersise Area Rear	Passed
AV	Mens Locker Room	Passed
AV	Womans Locker Room	Passed
AV	Rear Exit Of Building	Passed
V	Tanning Room #1	Passed
V	Tanning Room #2	Passed
V	Hydro Bed Room	Passed
	·	

See main System Record of Inspection and Testing for additional information, certifications, and approvals.