

## 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: 04/17/2015 Supplemental Pages Attached: n/a

### 1. PROPERTY INFORMATION

Name of property: Portland Riverside Golf Course  
Address: 1158 Riverside Street Portland, Maine 04103  
Description of property: Commercial Building  
Name of property representative: Aaron D. Shields  
Address: City of Portland  
Phone: (207) 756-8292 Fax: (207) 874-8473 E-mail: ads@portlandmaine.gov

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

Installation contractor: Protection Professionals  
Address: 325 US Route 1 Falmouth, Maine 04105  
Phone: (207) 775-5755 Fax: (207) 781-2064 E-mail: info@protectionprofessionals.net  
Service organization: Protection Professionals  
Address: 325 US Route 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 1 Falmouth, Maine 04105  
Phone: (207) 775-5755 Fax: (207) 781-2064 E-mail: info@protectionprofessionals.net  
Effective date for test and inspection contract: n/a  
Monitoring organization: City of Portland  
Address: n/a  
Phone: (207) 874-8576 Fax: n/a E-mail: n/a  
Account number: MB# 2127 Phone line 1: n/a Phone line 2: n/a  
Means of transmission: AES Radio  
Entity to which alarms are retransmitted: Portland Fire Department Dispatch Phone: n/a

### 3. DOCUMENTATION

On-site location of the required record documents and site-specific software: Document Cabinet by FACP

### 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: Potter Model number: P200

#### 4.2 Software and Firmware

Firmware revision number: n/a

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4.3 Alarm Verification

This system does not incorporate alarm verification.

Number of devices subject to alarm verification:   n/a   Alarm verification set for   n/a   seconds

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**5. SYSTEM POWER**

**5.1 Control Unit**

**5.1.1 Primary Power**

Input voltage of control panel: 120VAC Control panel amps: 3  
 Overcurrent protection: Type: C.B. Amps: 20  
 Branch circuit disconnecting means location: Sprinkler Room Number: n/a

**5.1.2 Secondary Power**

Type of secondary power: Sealed Lead Acid Batteries - 12VDC / 18AH (x2)  
 Location, if remote from the plant: In FACP  
 Calculated capacity of secondary power to drive the system:  
 In standby mode (hours): 24hrs In alarm mode (minutes): 5min

**5.2 Control Unit**

X This system does not have power extender panels  
 X 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	n/a	n/a	B	0
Device Power	n/a	n/a	n/a	n/a
Initiating Device	n/a	n/a	B	0
Notification Appliance	n/a	n/a	B	0
Other (specify):	n/a	n/a	n/a	n/a

**7. REMOTE ANNUNCIATORS**

Type	Location
n/a	n/a
n/a	n/a

**8. INITIATING DEVICES**

Type	Quantity	Addressable or Conventional	Alarm or Supervisory	Sensing Technology
Manual Pull Stations	8	Addressable	Alarm	Contact
Smoke Detectors	1	Addressable	Alarm	Photoelectric
Duct Smoke Detectors	Zero	n/a	n/a	n/a
Heat Detectors	Zero	n/a	n/a	n/a
Gas Detectors	1	n/a	Supervisory	n/a
Waterflow Switches	1	Conventional	Alarm	Contact
Tamper Switches	n/a	n/a	n/a	n/a

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9. NOTIFICATION APPLIANCES

Type	Quantity	Description
Audible	Zero	n/a
Visible	6	Strobe
Combination Audible and Visible	10	Horn/Strobe

10. SYSTEM CONTROL FUNCTIONS

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

11. INTERCONNECTED SYSTEMS

- This system does not have interconnected systems.  
 Interconnected systems are listed on supplementary sheet n/a.

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: [Signature] Printed name: BYRON DAVIS Date: 4/20/15  
 Organization: Protection Professionals Title: CET Phone: 775-5755

12.2 System Operational Test

This system as specified herein has tested according to all NFPA standards cited herein.  
 Signed: [Signature] Printed name: Jordan Vallees Date: 4/20/2015  
 Organization: Protection Professionals Title: ENL Technician Phone: 775-5755

12.3 Acceptance Test

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