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 E-mail: firesafe@fire-safe.com  
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WORK ORDER NUMBER  
 564899

Account Number M160162  
 Customer Name Waterford Concrete

MANUFACTURER	MODEL NO.	SIZE	LAST SERVICE DATE
<u>Ranco Guard</u>	<u>RG 46</u>	<u>4-gal</u>	<u>2/16</u>

RETURN FOR SERVICE										NUMBER OF LOANERS
QTY.	LBS.	DC	CO <sub>2</sub>	W	QTY.	LBS.	DC	CO <sub>2</sub>	W	

- |  | YES                                 | NO                                  |
|--|-------------------------------------|-------------------------------------|
| 1. All appliances properly covered w/correct nozzles   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| 2. Duct and plenum covered w/correct nozzles   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| 3. Check Positioning of all nozzles  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| 4. Hood / duct penetrations sealed w/weld or UL device   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| 5. Pressure gauge in proper range (if gauged)  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| 6. Check cartridge weight (if applicable)  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| 7. Inspect cylinder and mount  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| 8. Operate system from terminal link   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| 9. Test for proper operation from remote   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| 10. Check operation of micro switch  | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| 11. Check operation of gas valve   | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| 12. Clean nozzles  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| 13. Proper nozzle covers in place  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| 14. UL 300 Listed  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| 15. Replaced fuse links  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| 16. Check travel of cable nuts / S-hooks   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| 17. Piping & conduit securely bracketed  | <input type="checkbox"/>            | <input type="checkbox"/>            |
| 18. Proper separation between fryers & flame   | <input type="checkbox"/>            | <input type="checkbox"/>            |
| 19. Proper clearance-flame to filters  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| 20. Exhaust fan in operating order   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| 21. Proper filters   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| 22. Replace systems covers   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| 23. System operational & seals in place  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| 24. Slave system operational   | <input type="checkbox"/>            | <input type="checkbox"/>            |
| 25. Clean cylinder & mount   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| 26. Fan warning sign on hood   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| 27. Personnel instructed in manual operation of system   | <input type="checkbox"/>            | <input type="checkbox"/>            |
| 28. Proper hand portable extinguishers   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| 29. Portable extinguishers properly serviced   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| 30. Service & Certification tag on system  | <input type="checkbox"/>            | <input type="checkbox"/>            |
| 31. Fire Alarm: <input type="checkbox"/> Municipal <input type="checkbox"/> Local <input type="checkbox"/> N/A |                                     |                                     |

QTY.	PART #	DESCRIPTION	PRICE	AMOUNT
	SYS	SYSTEM INSPECTION		
	T-SYS	TANDEM SYSTEM INSPECTION		
		TANKS IN SYSTEM		
	SYS-H/CO	CO2 / CLEAN AGENT SYSTEM INSPECTION		
	SWAPOUT			
	360LINK	360 FUSIBLE LINK		
	450LINK	450 FUSIBLE LINK		
	500LINK	500 FUSIBLE LINK		
	LINK			
	PCC02	CO2 CARTRIDGE		
	EXTBASE	EXTINGUISHER INSPECTION		
	EXT	EXTINGUISHER INSPECTION		
	MTHLY	MONTHLY EXTINGUISHER INSPECTION		
		EXTINGUISHER S INSPECTED		
	TRAVEL	TRAVEL TIME		
	LAB-OS	LABOR, ON-SITE TIME		
1	B244	Net Chem		
2	B412	511 P3C		

<b>"Protecting Your Assets"</b>	SUBTOTAL	
	TAX	
	TOTAL	

Payment Method:  
 Cash     Check # \_\_\_\_\_     N/30  
 VISA # \_\_\_\_\_  
 M/C # \_\_\_\_\_

NOTE DISCREPANCIES OR DEFICIENCIES BELOW

Comments: New install 4-gal

I, THE UNDERSIGNED, CERTIFY THAT I PERSONALLY INSPECTED THE ABOVE PREMISES AND FOUND CONDITIONS AS NOTED.

SERVICE TECHNICIAN <u>Ben Hovey</u>	DATE <u>7-7-16</u>	TIME <u>PM</u>	CUSTOMER SIGNATURE <u>[Signature]</u>	DATE 
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