Unified Fire Authority - *Fire Prevention Division*

FIRE ALARM AND EMERGENCY COMMUNICATION SYSTEM RECORD OF COMPLETION

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.

1. PROPERTY INFORMATION

Name of property:_____

Address:_____

Description of property:_____

Occupancy type:_____

Name of property representative:_____

Address:_____

Phone:_____ Fax:_____ E-mail:_____

Authority having jurisdiction over this property: **UNIFIED FIRE AUTHORITY**

Phone: **(385) 468-9080** Fax: **(385) 468-9030** E-mail:_____

2. INSTALLATION, SERVICE, AND TESTING CONTRACTOR INFORMATION

Installation contractor for this equipment:_____

Address:_____

License or certification number:_____

Phone:_____ Fax:_____ E-mail:_____

Service organization for this equipment:_____

Address:_____

License or certification number:_____

Phone:_____ Fax:_____ E-mail:_____

A contract for test and inspection in accordance with NFPA standards is in effect as of:_____

Contracted testing company:_____

Address:_____

Phone:_____ Fax:_____ E-mail:_____

Contract expires:_____ Contract number: _____ Frequency of routine inspections:_____

3. DESCRIPTION OF SYSTEM OR SERVICE

❑ Fire alarm system (nonvoice)

❑ Fire alarm with in-building fire emergency voice alarm communication system (EVACS)

❑ Mass notification system (MNS)

❑ Combination system, with the following components:

❑ Fire alarm ❑ EVACS ❑ MNS ❑ Two-way, in-building, emergency communication system

❑ Other (specify):

3. DESCRIPTION OF SYSTEM OR SERVICE *(continued)*

NFPA 72 edition: _____ *Additional description of system(s):*_____

_____

3.1 Control Unit

Manufacturer:_____ Model number:_____

3.2 Mass Notification System ❑ This system does not incorporate an MNS**.**

3.2.1 System Type:

❑ In-building MNS—combination

❑ In-building MNS—stand-alone ❑ Wide-area MNS ❑ Distributed recipient MNS

❑ Other (specify):

3.2.2 System Features:

❑ Combination fire alarm/MNS ❑ MNS autonomous control unit ❑ Wide-area MNS to regional national alerting interface

❑ Local operating console (LOC) ❑ Distributed recipient MNS (DRMNS) ❑ Wide-area MNS to DRMNS interface

❑ Wide-area MNS to high-power speaker array (HPSA) interface ❑ In-building MNS to wide-area MNS interface

❑ Other (specify):

3.3 System Documentation

❑ An owner's manual, a copy of the manufacturer's instructions, a written sequence of operation, and a copy of the numbered record drawings are stored on site. Location:_____

3.4 System Software ❑ This system does not have alterable site-specific software.

Operating system (executive) software revision level:_____

Site-specific software revision date:_____ Revision completed by:_____

❑ A copy of the site-specific software is stored on site. Location:_____

3.5 Off-Premises Signal Transmission ❑ This system does not have off-premises transmission.

Name of organization receiving alarm signals with phone numbers:

Alarm: _____ Phone:_____

Supervisory:_____ Phone:_____

Trouble:_____ Phone:_____

Entity to which alarms are retransmitted: _____ Phone:_____

Method of retransmission:_____

If Chapter 26, specify the means of transmission from the protected premises to the supervising station:

If Chapter 27, specify the type of auxiliary alarm system: ❑ Local energy ❑ Shunt ❑ Wired ❑ Wireless

4. CIRCUITS AND PATHWAYS

4.1 Signaling Line Pathways

4.1.1 Pathways Class Designations and Survivability

Pathways class: _____ Survivability level: _____ Quantity:_____

(See NFPA 72, Sections 12.3 and 12.4)

4.1.2 Pathways Utilizing Two or More Media

Quantity:_____ Description:_____

_____

4.1.3 Device Power Pathways

❑ No separate power pathways from the signaling line pathway

❑ Power pathways are separate but of the same pathway classification as the signaling line pathway

❑ Power pathways are separate and different classification from the signaling line pathway

4.1.4 Isolation Modules

Quantity:_____

4.2 Alarm Initiating Device Pathways

4.2.1 Pathways Class Designations and Survivability

Pathways class: _____ Survivability level: _____ Quantity:_____

(See NFPA 72, Sections 12.3 and 12.4)

4.2.2 Pathways Utilizing Two or More Media

Quantity:_____ Description:_____

_____

4.2.3 Device Power Pathways

❑ No separate power pathways from the initiating device pathway

❑ Power pathways are separate but of the same pathway classification as the initiating device pathway

❑ Power pathways are separate and different classification from the initiating device pathway

4.3 Non-Voice Audible System Pathways

4.3.1 Pathways Class Designations and Survivability

Pathways class: _____ Survivability level: _____ Quantity:_____

(See NFPA 72, Sections 12.3 and 12.4)

4.3.2 Pathways Utilizing Two or More Media

Quantity:_____ Description:_____

_____

4.3.3 Appliance Power Pathways

❑ No separate power pathways from the notification appliance pathway

❑ Power pathways are separate but of the same pathway classification as the notification appliance pathway

❑ Power pathways are separate and different classification from the notification appliance pathway

5. ALARM INITIATING DEVICES

5.1 Manual Initiating Devices

5.1.1 Manual Fire Alarm Boxes ❑ This system does not have manual fire alarm boxes.

Type and number of devices: Addressable:_____ Conventional: _____Coded: _____Transmitter:_____

Other (specify):_____

5.1.2 Other Alarm Boxes ❑ This system does not have other alarm boxes.

Description:_____

Type and number of devices: Addressable:_____ Conventional: _____Coded: _____Transmitter:_____

Other (specify):_____

5.2 Automatic Initiating Devices

5.2.1 Smoke Detectors ❑ This system does not have smoke detectors.

Type and number of devices: Addressable:_____ Conventional: _____

Other (specify):_____

Type of coverage: ❑ Complete area ❑ Partial area ❑ Nonrequired partial area

Other (specify):_____

Type of smoke detector sensing technology: ❑ Ionization ❑ Photoelectric ❑ Multicriteria ❑ Aspirating ❑ Beam

Other (specify):_____

5.2.2 Duct Smoke Detectors ❑ This system does not have alarm-causing duct smoke detectors.

Type and number of devices: Addressable:_____ Conventional: _____

Other (specify):_____

Type of coverage:_____

Type of smoke detector sensing technology: ❑ Ionization ❑ Photoelectric ❑ Aspirating ❑ Beam

5.2.3 Radiant Energy (Flame) Detectors ❑ This system does not have radiant energy detectors.

Type and number of devices: Addressable:_____ Conventional: _____

Other (specify):_____

Type of coverage:_____

5.2.4 Gas Detectors ❑ This system does not have gas detectors.

Type and number of devices: Addressable:_____ Conventional: _____

Other (specify):_____

Type of coverage:_____

5.2.5 Heat Detectors ❑ This system does not have heat detectors.

Type and number of devices: Addressable:_____ Conventional: _____

Type of coverage: ❑ Complete area ❑ Partial area ❑ Nonrequired partial area ❑ Linear ❑ Spot

Type of heat detector sensing technology: ❑ Fixed temperature ❑ Rate-of-rise ❑ Rate compensated

5. ALARM INITIATING DEVICES *(continued)*

5.2.6 Addressable Monitoring Modules ❑ This system does not have monitoring modules.

Number of devices:_____

5.2.7 Waterflow Alarm Devices ❑ This system does not have waterflow alarm devices.

Type and number of devices: Addressable:_____ Conventional: _____Coded: _____Transmitter:_____

5.2.8 Alarm Verification ❑ This system does not incorporate alarm verification.

Number of devices subject to alarm verification: _____ Alarm verification set for seconds_____

5.2.9 Presignal ❑ This system does not incorporate pre-signal.

Number of devices subject to presignal:_____

Describe presignal functions:_____

5.2.10 Positive Alarm Sequence (PAS) ❑ This system does not incorporate PAS.

Describe PAS:_____

5.2.11 Other Initiating Devices ❑ This system does have other initiating devices.

Describe:_____

6. SUPERVISORY SIGNAL–INITIATING DEVICES

6.1 Sprinkler System Supervisory Devices ❑ This system does not have sprinkler supervisory devices.

Type and number of devices: Addressable:_____ Conventional: _____Coded: _____Transmitter:_____

Other (specify):_____

6.2 Fire Pump Description and Supervisory Devices ❑ This system does not have a fire pump.

Type fire pump: ❑ Electric ❑ Engine

Type and number of devices: Addressable:_____ Conventional: _____Coded: _____Transmitter:_____

Other (specify):_____

6.2.1 Fire Pump Functions Supervised

❑ Power ❑ Running ❑ Phase reversal ❑ Selector switch not in auto ❑ Engine or control panel trouble ❑ Low fuel

Other (specify):_____

6.3 Duct Smoke Detectors (DSDs) ❑ This system does not have DSDs causing supervisory signals.

Type and number of devices: Addressable:_____ Conventional: _____

Other (specify):_____

Type of coverage:_____

Type of smoke detector sensing technology: ❑ Ionization ❑ Photoelectric ❑ Aspirating ❑ Beam

6.4 Other Supervisory Devices ❑ This system does not have other supervisory devices.

Describe:_____

7. MONITORED SYSTEMS

7.1 Engine-Driven Generator ❑ This system does not have a generator.

7.1.1 Generator Functions Supervised

❑ Engine or control panel trouble ❑ Generator running ❑ Selector switch not in auto ❑ Low fuel

❑ Other (specify):_____

7.2 Special Hazard Suppression Systems ❑ This system does not monitor special hazard systems.

Description of special hazard system(s):_____

_____

7.3 Other Monitoring Systems ❑ This system does not monitor other systems.

Description of other system(s):_____

_____

8. ANNUNCIATORS ❑ This system does not have annunciators.

8.1 Location and Description of Annunciators

Location 1:_____

Location 2:_____

Location 3:_____

9. ALARM NOTIFICATION APPLIANCES

9.1 In-Building Fire Emergency Voice Alarm Communication System ❑ This system does not have an EVACS.

Number of single voice alarm channels: _____ Number of multiple voice alarm channels:_____

Number of speakers:_____ Number of speaker circuits:_____

Location of amplification and sound-processing equipment:_____

_____

Location of paging microphone stations:

Location 1:_____

Location 2:_____

Location 3:_____

9.2 Nonvoice Notification Appliances ❑ This system does not have nonvoice notification appliances.

Horns: _____ With visible:_____ Bells: _____ With visible:_____

Chimes:_____ With visible:_____

Visible only:_____ Other (describe):_____

9.3 Notification Appliance Power Extender Panels ❑ This system does not have power extender panels.

Quantity:_____

Locations:_____

_____

10. MASS NOTIFICATION CONTROLS, APPLIANCES, AND CIRCUITS ❑ This system does not have an MNS.

10.1 MNS Local Operating Consoles

Location 1:_____

Location 2:_____

Location 3:_____

10.2 High-Power Speaker Arrays

Number of HPSA speaker initiation zones:_____

Location 1:_____

Location 2:_____

Location 3:_____

10.3 Mass Notification Devices

Combination fire alarm/MNS visible appliances: _____ MNS-only visible appliances:_____

Textual signs:_____ Other (describe):_____

Supervision class:_____

10.3.1 Special Hazard Notification

❑ This system does not have special suppression predischarge notification.

❑ MNS systems DO NOT override notification appliances required to provide special suppression predischarge notification.

11. TWO-WAY EMERGENCY COMMUNICATION SYSTEMS

11.1 Telephone System ❑ This system does not have a two-way telephone system.

Number of telephone jacks installed: Number of warden stations installed:

Number of telephone handsets stored on site:

Type of telephone system installed: ❑ Electrically powered ❑ Sound powered

11.2 Two-Way Radio Communications Enhancement System

❑ This system does not have a two-way radio communications enhancement system.

Percentage of area covered by two-way radio service: Critical areas:_____ % General building areas: _____%

Amplification component locations:_____

_____

Inbound signal strength:_____ dBm Outbound signal strength:_____ dBm

Donor antenna isolation is _____dB above the signal booster gain

Radio frequencies covered:_____

Radio system monitor panel location:_____

11. TWO-WAY EMERGENCY COMMUNICATION SYSTEMS *(continued)*

11.3 Area of Refuge (Area of Rescue Assistance) Emergency Communications Systems

❑ This system does not have an area of refuge (area of rescue assistance) emergency communications system.

Number of stations: Location of central control point:_____

Days and hours when central control point is attended:_____

Location of alternate control point:_____

Days and hours when alternate control point is attended:_____

11.4 Elevator Emergency Communications Systems

❑ This system does not have an elevator emergency communications system.

Number of elevators with stations:_____ Location of central control point:_____

Days and hours when central control point is attended:_____

Location of alternate control point:_____

Days and hours when alternate control point is attended:_____

11.5 Other Two-Way Communication Systems

Describe:_____

12. CONTROL FUNCTIONS

This system activates the following control functions:

❑ Hold-open door releasing devices ❑ Smoke management ❑ HVAC shutdown ❑ F/S dampers

❑ Door unlocking ❑ Elevator recall ❑ Fuel source shutdown ❑ Extinguishing agent release

❑ Elevator shunt trip ❑ Mass notification system override of fire alarm notification appliances

Other (specify):_____

12.1 Addressable Control Modules ❑ This system does not have control modules.

Number of devices:_____

Other (specify):_____

13. SYSTEM POWER

13.1 Control Unit

13.1.1 Primary Power

Input voltage of control panel:_____ Control panel amps:_____

Overcurrent protection: Type:_____ Amps:_____

Location (of primary supply panel board):_____

Disconnecting means location:_____

13.1.2 Engine-Driven Generator ❑ This system does not have a generator.

Location of generator:_____

Location of fuel storage: _____Type of fuel:_____

13. SYSTEM POWER *(continued)*

13.1.3 Uninterruptible Power System ❑ This system does not have a UPS.

Equipment powered by a UPS system:_____

Location of UPS system:_____

Calculated capacity of UPS batteries to drive the system components connected to it:

In standby mode (hours):_____ In alarm mode (minutes):_____

13.1.4 Batteries

Location: _____ Type:_____ Nominal voltage: _____ Amp/hour rating:_____

Calculated capacity of batteries to drive the system:

In standby mode (hours):_____ In alarm mode (minutes):_____

❑ Batteries are marked with date of manufacture ❑ Battery calculations are attached

13.2 In-Building Fire Emergency Voice Alarm Communication System or Mass Notification System

❑ This system does not have an EVACS or MNS system.

13.2.1 Primary Power

Input voltage of EVACS or MNS panel: EVACS or MNS panel amps:

Input voltage of power extender panel(s):_____ Power extender panel amps:_____

Overcurrent protection: Type:_____ Amps:_____

Location (of primary supply panel board):_____

13.2.2 Engine-Driven Generator ❑ This system does not have a generator.

Location of generator:_____

Location of fuel storage: _____Type of fuel:_____

13.2.3 Uninterruptible Power System ❑ This system does not have a UPS.

Equipment powered by a UPS system:_____

Location of UPS system:_____

Calculated capacity of UPS batteries to drive the system components connected to it:

In standby mode (hours):_____ In alarm mode (minutes):_____

13.2.4 Batteries

Location: _____ Type:_____ Nominal voltage: _____ Amp/hour rating:_____

Calculated capacity of batteries to drive the system:

In standby mode (hours):_____ In alarm mode (minutes):_____

❑ Batteries are marked with date of manufacture ❑ Battery calculations are attached

13. SYSTEM POWER *(continued)*

13.3 Notification Appliance Power Extender Panels ❑ This system does not have power extender panels.

13.3.1 Primary Power

Input voltage of power extender panel(s):_____ Power extender panel amps:_____

Overcurrent protection: Type:_____ _____ Amps:_____

Location (of primary supply panel board):_____

Disconnecting means location:_____

13.3.2 Engine-Driven Generator ❑ This system does not have a generator.

Location of generator:_____

Location of fuel storage: _____Type of fuel:_____

13.3.3 Uninterruptible Power System ❑ This system does not have a UPS.

Equipment powered by a UPS system:_____

Location of UPS system:_____

Calculated capacity of UPS batteries to drive the system components connected to it:

In standby mode (hours):_____ In alarm mode (minutes):_____

13.3.4 Batteries

Location: _____ Type:_____ Nominal voltage: _____ Amp/hour rating:_____

Calculated capacity of batteries to drive the system:

In standby mode (hours):_____ In alarm mode (minutes):_____

❑ Batteries are marked with date of manufacture ❑ Battery calculations are attached

14. RECORD OF SYSTEM INSTALLATION

Fill out after all installation is complete and wiring has been checked for opens, shorts, ground faults, and improper branching, but before conducting operational acceptance tests.

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

The system has been installed in accordance with the following requirements: (Note any or all that apply.)

❑ *NFPA 72, Edition:*_____

❑ *NFPA 70, National Electrical Code, Article 760, Edition:*_____

❑ Manufacturer's published instructions

Other (specify):_____

_____

System deviations from referenced NFPA standards:):_____

_____

Signed:_____ Printed name:_____ Date:_____

Organization:_____ Title:_____ Phone:_____

15. RECORD OF SYSTEM OPERATONAL ACCEPTANCE TEST

❑ New system

All operational features and functions of this system were tested by, or in the presence of, the signer shown below, on the date shown below, and were found to be operating properly in accordance with the requirements for the following:

❑ Modifications to an existing system

All newly modified operational features and functions of the system were tested by, or in the presence of, the signer shown below, on the date shown below, and were found to be operating properly in accordance with the requirements of the following:

❑ *NFPA 72, Edition:*_____

❑ *NFPA 70, National Electrical Code, Article 760, Edition:*_____

❑ Manufacturer's published instructions

Other (specify):_____

_____

❑ Individual device testing documentation [Inspection and Testing Form (Figure 14.6.2.4) is attached]

Signed:_____ Printed name:_____ Date:_____

Organization:_____ Title:_____ Phone:_____

16. CERTIFICATIONS AND APPROVALS

16.1 System Installation Contractor:

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

Signed:_____ Printed name:_____ Date:_____

Organization:_____ Title:_____ Phone:_____

16.2 System Service Contractor:

The undersigned has a service contract for this system in effect as of the date shown below.

Signed:_____ Printed name:_____ Date:_____

Organization:_____ Title:_____ Phone:_____

16.3 Supervising Station:

This system, as specified herein, will be monitored according to all NFPA standards cited herein.

Signed:_____ Printed name:_____ Date:_____

Organization:_____ Title:_____ Phone:_____

16. CERTIFICATIONS AND APPROVALS *(continued)*

16.4 Property or Owner Representative:

I accept this system as having been installed and tested to its specifications and all NFPA standards cited herein.

Signed:_____ Printed name:_____ Date:_____

Organization:_____ Title:_____ Phone:_____

Note:
Upon completion of work, inspection and tests shall be made by the contractor's representative, and witnessed by an owner's representative. All defects shall be corrected and the system(s) are to be in service before contractor's personnel leave the job site.

This certificate shall be filled out and signed as indicated. Copies shall be prepared for approving authorities, owners, and contractor. It is understood the owner's representative's signature in no way prejudices any claim against a contractor for faulty material, poor workmanship, or failure to comply with the approving authority's requirements or local ordinances.

For Office Use Only

Date Information Received:

Received By:

Comments: