FIRE ALARM SYSTEM
RECORD OF COMPLETION

Name of protected property: _____
Address: _____
Representative of protected property (name/phone): _____
Authority having jurisdiction: _____
Address/telephone number: _____

Organization name / phone *Representative name / phone*

Installer _____
Supplier _____
Service organization _____
Location of record (as-built) drawings: _____
Location of operation and maintenance manuals: _____
Location of test reports: _____
A contract for test and inspection in accordance with NFPA standard(s)
Contract No(s): _____ Effective date: _____ Expiration date: _____

System Software
(a) Operating system (executive) software revision level(s): _____
(b) Site-specific software revision date: _____
(c) Revision completed by: _____
(name) (firm)

1. Type(s) of System or Service

_____ *NFPA 72,* Chapter 6 — Local
If alarm is transmitted to location(s) off premises, list where received: _____
_____

_____ *NFPA 72,* Chapter 8 — Remote Station
Telephone numbers of the organization receiving alarm:
Alarm: _____
Supervisory: _____
Trouble: _____
If alarms are retransmitted to public fire service communications centers or others, indicate location and telephone numbers of the organization receiving alarm: _____
_____
Indicate how alarm is retransmitted: _____

_____ *NFPA 72,* Chapter 8 — Proprietary
Telephone numbers of the organization receiving alarm:
Alarm: _____
Supervisory: _____
Trouble: _____
If alarms are retransmitted to public fire service communications centers or others, indicate location and telephone numbers of the organization receiving alarm: _____
_____
Indicate how alarm is retransmitted: _____

_____ *NFPA 72,* Chapter 8 — Central Station
Prime contractor: _____
Central station location: _____

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Means of transmission of signals from the protected premises to the central station:

_____ McCulloh _____ Multiplex _____ One-way radio

_____ Digital alarm communicator _____ Two-way radio _____ Others

Means of transmission of alarms to the public fire service communications center:

(a) _____

(b) _____

System location: _____

_____ *NFPA 72,* Chapter 9 — Auxillary

Indicate type of connection: _____ Local energy _____ Shunt _____ Parallel telephone

Location of telephone number for receipt of signals: _____

2. Record of System Installation

(Fill out after installation is complete and wiring is checked for opens, shorts, ground faults, and improper branching, but prior to conducting operational acceptance tests.)

This system has been installed in accordance with the NFPA standards as shown below, was inspected by _____ on _____, includes the devices shown in 5 and 6, and has been in service since _____ .

____ *NFPA 72,* Chapters 1 2 3 4 5 6 7 8 9 10 11 (circle all that apply)

____ NFPA 70, *National Electrical Code*, Article 760

____ Manufacturer's instructions

____ Other (specify): _____

Signed: _____ Date: _____

Organization: _____

3. Record of System Operation

Documentation in accordance with Inspection Testing Form, Figure 10.6.2.3, is attached _____ .

All operational features and functions of this system were tested by _____ date _____ and found to be operating properly in accordance with the requirements of:

____ *NFPA 72,* Chapters 1 2 3 4 5 6 7 8 9 10 11 (circle all that apply)

____ NFPA 70, *National Electrical Code*, Article 760

____ Manufacturer's instructions

____ Other (specify): _____

Signed: _____ Date: _____

Organization: _____

4. Signaling Line Circuits

Quantity and class of signaling line circuits connected to system *(see NFPA 72, Table 6.6.1)*:

Quantity: _____ Style: _____ Class: _____

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5. Alarm-Initiating Devices and Circuits

Quantity and class of initiating device circuits *(see NFPA 72, Table 6.5)*:
Quantity:_____ Style:_____ Class:_____

MANUAL
(a) Manual stations Noncoded_____ Transmitters_____ Coded_____ Addressable_____
(b) Combination manual fire alarm and guard's tour coded stations _____

AUTOMATIC
Coverage: Complete _____ Partial_____
Selective _____ Nonrequired _____

(a) Smoke detectors_____ Ion _____ Photo _____ Addressable_____
(b) Duct detectors _____ Ion _____ Photo _____ Addressable_____
(c) Heat detectors_____ FT _____ RR _____ FT/RR _____ RC_____ Addressable _____
(d) Sprinkler waterflow indicators: Transmitters_____ Noncoded _____ Coded _____ Addressable_____
(e) The alarm verification feature is disabled _____ or enabled _____ , changed from _____ seconds to _____ seconds.
(f) Other (list): _____
_____

6. Supervisory Signal-Initiating Devices and Circuits (use blanks to indicate quantity of devices)

GUARD'S TOUR
(a)_____Coded stations
(b)_____Noncoded stations
(c) _____Compulsory guard's tour system comprised of_____ transmitter stations and intermediate stations
Note: Combination devices are recorded under 5(b), Manual, and 6(a), Guard's Tour.

SPRINKLER SYSTEM
Check if provided
(a)_____Valve supervisory switches
(b)_____Building temperature points
(c) _____Site water temperature points
(d)_____Site water supply level points

Electric fire pump:
(e)_____Fire pump power
(f) _____Fire pump running
(g)_____Phase reversal

Engine-driven fire pump:
(h)_____Selector in auto position
(i) _____Engine or control panel trouble
(j) _____Fire pump running

ENGINE-DRIVEN GENERATOR:
(a)_____Selector in auto position
(b)_____Control panel trouble
(c) _____Transfer switches
(d)_____Engine running
Other supervisory function(s) (specify): _____
_____
_____

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7. Annunciator(s)

Number:_____ Type: _____ Location: _____

8. Alarm Notification Appliances and Circuits

NFPA 72, Chapter 6 — Emergency Voice/Alarm Service

Quantity of voice/alarm channels:_____ Single: _____ Multiple:_____

Quantity of speakers installed: _____ Quantity of speaker zones:_____

Quantity of telephones or telephone jacks included in system: _____

Quantity and the class of notification appliance circuits connected to system *(see NFPA 72, Table 6.7)*:

Quantity:_____ Style:_____ Class: _____

Types and quantities of notification appliances installed:

(a) Bells _____ With Visible _____

(b) Speakers_____ With Visible _____

(c) Horns_____ With Visible _____

(d) Chimes _____ With Visible _____

(e) Other:_____ With Visible _____

(f) Visible appliances without audible:_____

9. System Power Supplies

(a) Fire Alarm Control Panel: Nominal voltage: _____ Current rating:_____

Overcurrent protection: Type:_____ Current rating:_____

Location:_____

(b) Secondary (standby):

Storage battery:_____ Amp-hour rating: _____

Calculated capacity to drive system, in hours: _____

Engine-driven generator dedicated to fire alarm system:_____

Location of fuel storage: _____

(c) Emergency system used as backup to primary power supply:_____

Emergency system described in NFPA 70, Article 700:_____

10. Comments

Frequency of routine tests and inspections, if other than in accordance with the referenced NFPA standard(s):

_____

System deviations from the referenced NFPA standard(s) are:_____

_____

_____

_____

(signed) for installation contractor/supplier (title) (date)

_____

(signed) for alarm service company (title) (date)

_____

(signed) for central station (title) (date)

Upon completion of the system(s) satisfactory test(s) witnessed (if required by the authority having jurisdiction):

_____

(signed) representative of the authority having jurisdiction (title) (date)

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