

1. Contracts

Signed and valid contracts shall be in place for each of the following, or a copy of the certification.

A. Approved Central Station Monitoring.

Effective Date: _____

B. Testing and inspection per NFPA 72 and current Redmond Fire Department Standards.

Company Name: _____

Address: _____

Phone #: _____ Effective Date: _____

C. Emergency repair service per Redmond Fire Department Standard 9.00. (to include dispatch of a repair technician when requested by Redmond Fire Department, with out pre-authorization of Subscriber)

Effective Date: _____

Company Name: _____

Address: _____

Phone #: _____ 24-Hour Phone #: _____

2. Means of Signal Transmission

The means of transmission from the protected premises to the Central Station is:

3. Transmitter Information

Transmitter Manufacture: _____

Transmitter Model #: _____

List all zones transmitted to Central Station:

1. _____	9. _____
2. _____	10. _____
3. _____	11. _____
4. _____	12. _____
5. _____	13. _____
6. _____	14. _____
7. _____	15. _____
8. _____	16. _____

4. Control Panel Information

Control Panel Manufacturer: _____

Control Panel Model #: _____

List all zones or groups of devices sent to FACP:

1.	9.
2.	10.
3.	11.
4.	12.
5.	13.
6.	14.
7.	15.
8.	16.

5. Annunciator Information

N/A (not installed): _____

Annunciator Manufacturer: _____

Annunciator Model #: _____

Annunciator Location _____

6. Devices

<u>Device Type</u>	<u>Number of Devices</u>	<u>Number Tested</u>
Manual Pull Stations	_____	_____
Rate of Rise/Fixed Temp Det.	_____	_____
Fixed Temp. Detectors	_____	_____
Line Type Heat Detector	_____	_____
Spot Type Smoke Detectors	_____	_____
Beam Type Smoke Detectors	_____	_____
Duct Type Smoke Detectors	_____	_____
Air Sampling Smoke Det.	_____	_____
Flame Detectors	_____	_____
Other Devices	_____	_____

7. System Software (Complete for all addressable systems)

Operating system software revision level(s): _____

Application software revision level(s): _____

Revision completed by: _____

8. Sprinkler System Alarm and Supervisory Devices

<u>Device Type</u>	<u>Number of Devices</u>	<u>Located in Zone</u>
Wet Waterflow Devices	_____	_____
Dry Waterflow Devices	_____	_____
Sprinkler Valve Supervisory	_____	_____
PIV Supervisory	_____	_____
High/Low Air Supervisory	_____	_____
Other Suppression Devices	_____	_____
Other Devices	_____	_____

9. Alarm Notification Appliances and Circuits

Number of indicating circuits connected to the system: _____

Types and quantities of alarm indicating appliances installed:

Bells	_____	Horn Only	_____
Horn-Strobes	_____	Speakers	_____
Strobe Only	_____	Other*	_____

10. System Power Supplies

A. Primary Power Supply: Voltage: _____ Current Rating: _____
 Overcurrent Protection: Type: _____ Current Rating: _____

B. Secondary (Stand-by) Power Supply
 (Check those that apply)
 _____ Storage Battery(s): Amp-Hour Rating: _____
 _____ Engine Driven generator dedicated to fire alarm system

C. Auxiliary Power Supplies:
 Number of auxiliary power supplies installed: _____

NAC PANEL LOCATION	NAC PANEL 1	NAC PANEL 2	NAC PANEL 3	NAC PANEL 4	NAC PANEL 5	NAC PANEL 6	NAC PANEL 7
EOL VDC							
EOL VDC							
EOL VDC							
EOL VDC							

11. List all deviations from applicable Codes or Standards:
