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| **Vancouver Fire Department** |
| Fire Marshal’s Office  PO Box 1995 |
| Vancouver, WA 98668 |
| vanfmo@cityofvancouver.us |
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**REPORT OF PRE-TESTING FOR SYSTEM ACCEPTANCE**

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| \*Bring a copy of this form for the final fire / acceptance test. | | | | | | | | | | | |
| **FIRE ALARM** | | | | | | **STATUS** | | | | | |
| New | Existing | FACP Replacement | | | | 100% Pre-tested, Passed | | | Failed or Not Ready | | |
| **Directions**: This is a fillable form – please fill out every field or type N/A if not applicable. Once completed, save this as a PDF form and submit it for review. This form is not required for small tenant improvements (under 30 devices), or installation of dedicated panels for sprinkler monitoring only. For new or large systems, this form shall be filled out and submitted prior to inspection. | | | | | | | | | | | |
| Please describe scope of work/function of alarm: Click or tap here to enter text. | | | | | | | | | | | |
| **Building Information** (all mandatory) | | | | | | | | | | | |
| Premises Name: Click or tap here to enter text. | | | | | | Premises Address: Click or tap here to enter text. | | | | | |
| Contact Name: Click or tap here to enter text. | | | | | | Contact Phone: Click or tap here to enter text. | | | | | |
| Contact Address: Click or tap here to enter text. | | | | | | Contact Email: Click or tap here to enter text. | | | | | |
| Central Station Monitoring: | | Yes | | No | | Dialer/Phone Lines | | Yes | No |  | |
| Monitoring Company Name: Click or tap here to enter text. | | | | | | Radio/AES | | Yes | No |  | |
| Monitoring Company Phone: Click or tap here to enter text. | | | | | | Cellular | | Yes | No |  | |
| **Fire Alarm Inventory For Entire Building** | | | | | | | | | | | |
| NFPA 72 Edition (Year): Click or tap here to enter text. | | | | | | Permit approved? | | Yes | No |  | |
| Permit #: Click or tap here to enter text. | | | | | | | | | | | |
| Barcode # (VFD will assign): Click or tap here to enter text. | | | | | | | | | | | |
| Smoke Detector Sensitivity – Test Due Date (month/year): Click or tap here to enter text. | | | | | | | | | | | |
| **FACP & Annunciators** | | | | | | | | | | | |
| FACP Location: Click or tap here to enter text. | | | | | | | | | | | |
| FACP Manufacturer: Click or tap here to enter text. | | | | | | FACP Model: Click or tap here to enter text. | | | | | |
| FACP – location of key: Click or tap here to enter text. | | | | | Remote Annunciator location: Click or tap here to enter text. | | | | | | |
| Notification Power Expander(s) Installed? | | | Yes  No | | Notification Power Expander(s) Location: | | Click or tap here to enter text. | | | | |
| **Initiating Devices** | | *# of devices/items* | | | |  | | | *# of devices/items* | | |
| Beam detectors | | Click or tap here to enter text. | | | | Smoke detectors - Regular | | | Click or tap here to enter text. | | |
| Duct detectors | | Click or tap here to enter text. | | | | Smokes – Inside Residential Units | | | Click or tap here to enter text. | | |
| Heat trace cable supervisory signals | | Click or tap here to enter text. | | | | Smokes – Elevator Recall | | | Click or tap here to enter text. | | |
| Thermal alarm wire (protector wire) | | Click or tap here to enter text. | | | | Sprinkler valve tamper switches | | | Click or tap here to enter text. | | |
| Heats – above ceiling/attic or underfloor | | Click or tap here to enter text. | | | | Sprinkler flow switches | | | Click or tap here to enter text. | | |
| Heats – regular | | Click or tap here to enter text. | | | | High/low air switches | | | Click or tap here to enter text. | | |
| Heats – Elevator Recall / Shunt Trip | | Click or tap here to enter text. | | | | Other supervisory switches | | | Click or tap here to enter text. | | |
| Pull Stations | | Click or tap here to enter text. | | | | Other: | | | Click or tap here to enter text. | | |
| **Notification Appliances** | | *# of devices/items* | | | |  | | | *# of devices/items* | | |
| Bells, chimes | | Click or tap here to enter text. | | | | Horn/strobe combo | | | Click or tap here to enter text. | | |
| Exterior sprinkler alarm bell | | Click or tap here to enter text. | | | | Horns only | | | Click or tap here to enter text. | | |
| Speakers | | Click or tap here to enter text. | | | | Strobes only | | | Click or tap here to enter text. | | |
| Speaker strobes | | Click or tap here to enter text. | | | | Low frequency sounders | | | Click or tap here to enter text. | | |
| **Auxiliary Equipment** | | *# of devices/items* | | | |  | | | *# of devices/items* | | |
| Auto door release | | Click or tap here to enter text. | | | | Fire/smoke dampers | | | Click or tap here to enter text. | | |
| Auto door unlock | | Click or tap here to enter text. | | | | Generators | | | Click or tap here to enter text. | | |
| Elevator recall | | Click or tap here to enter text. | | | | Ventilation controls | | | Click or tap here to enter text. | | |
| Fire doors | | Click or tap here to enter text. | | | | ERRCS/DAS | | | Click or tap here to enter text. | | |
| Smoke Control (Stair or Elevator Press) | | Click or tap here to enter text. | | | | VESDA | | | Click or tap here to enter text. | | |
| Two-way communication systems | | Click or tap here to enter text. | | | | Other: | | | Click or tap here to enter text. | | |
| **Stairway Door Locks** | | *# of devices/items* | | | |  | | | *# of devices/items* | | |
| Electric bolt | | Click or tap here to enter text. | | | | Stairwell egress devices | | | Click or tap here to enter text. | | |
| Electric strike | | Click or tap here to enter text. | | | | Other: | | | Click or tap here to enter text. | | |
| **Battery Info** | | | | | | | | | | | |
| *Location (FACP or Power Supply)* | | Number of Batteries | | *Charge Voltage* | | *Battery Voltage* | | *Load Voltage* | *Install Date* | *Size* | |
| Click or tap here to enter text. | | Click or tap here to enter text. | | Click or tap here to enter text. | | Click or tap here to enter text. | | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | |
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| **Installation & Testing Contractor Information** | | | | | | | | | | | |
| Company Name: | Click or tap here to enter text. | | | | | Phone: | Click or tap here to enter text. | | | | |
| Address: | Click or tap here to enter text. | | | | | Emergency Phone: | Click or tap here to enter text. | | | | |
|  | | | | | | Email: | Click or tap here to enter text. | | | | |
| **Certified Technician/Installer Information** | | | | | | | | | | | |
| Technician/Installer Name: | | Click or tap here to enter text. | | | | | | | | | |
| Certification Number: | | Click or tap here to enter text. | | | | Cert Type: | Click or tap here to enter text. | | | | |
| **REPORT OF PRE-TESTING FOR USE PRIOR TO AHJ INSPECTION AND SYSTEM ACCEPTANCE** | | | | | | | | | | | |
| Date of System Pre-Test: | | Click or tap here to enter text. | | | | | | | | | |
| Record of completion in accordance with NFPA 72: By checking this box I verify that the system or portion thereof has been installed and tested in accordance with the approved plans and specifications. | | | | | | | | | | Yes | No |
| The items on the checklists below shall be tested. This list does not constitute all of the required acceptance criteria of the fire and life safety system. Refer to the CURRENT FIRE CODE AND REFERENCED NFPA 72 STANDARD and the MANUFACTURER'S INSTRUCTIONS for installation. ONLY SELECT N/A FOR ITEMS THAT DO NOT EXIST AT THE BUILDING, DO NOT USE N/A TO INDICATE THAT A TEST OR RESULT IS NOT AVAILABLE. | | | | | | | | | | | |
| **PRE-TEST STEPS AND INFORMATION** | | | | | | | | | | | |
| AVOID "UNWANTED/FALSE ALARMS" BY PUTTING THE FIRE ALARM SYSTEM IN TEST MODE. Failure to place the Fire Alarm System (FAS) into test mode and/or taking other precautions to prevent unwanted alarms may result in enforcement fees issued to the contractor. | | | | | | | | | | | |
| **GENERAL** | | | | | | | | | | | |
| 1. The building occupants were notified, if building is occupied. | | | | | | | | | Yes | No | N/A |
| 1. The onsite supervisory station was notified. | | | | | | | | | Yes | No | N/A |
| 1. The Central Station Monitoring Service was notified to place FAS in test mode. | | | | | | | | | Yes | No | N/A |
| 1. Final Electrical approval has been signed off by the electrical inspector. | | | | | | | | | Yes | No | N/A |
| 1. Coordination with other contractors required for testing such as fire sprinkler, elevators, etc. | | | | | | | | | Yes | No | N/A |
| 1. Fire Department plan review and permitting / design requirements have been met. | | | | | | | | | Yes | No | N/A |
| 1. The key to the panel is available at the FACP. | | | | | | | | | Yes | No | N/A |
| 1. The operating instructions are available at the FACP. | | | | | | | | | Yes | No |  |
| 1. Plans, as-builts, cut-sheets and other construction documentation are available in a documentation cabinet or other approved location. | | | | | | | | | Yes | No |  |
| 1. Stamped/approved set of fire alarm plans, permit card, and checklist are onsite and available. | | | | | | | | | Yes | No |  |
| 1. Materials and equipment needed to restore pull stations are available at the main panel, e.g. glass rods, plates, keys and allen wrenches, etc. | | | | | | | | | Yes | No | N/A |
| **ALARM PANEL** | | | | | | | | | | | |
| 1. The FACP operates on AC power. | | | | | | | | | Yes | No | N/A |
| 1. If the system has batteries, the FACP operates on Battery power. | | | | | | | | | Yes | No | N/A |
| 1. If the system has emergency generator/standby power, the FACP operates on emergency generator/standby power. | | | | | | | | | Yes | No | N/A |
| 1. If the system has battery or standby power, the trouble indicators function properly and a trouble signal comes on with AC power off. | | | | | | | | | Yes | No | N/A |
| **INITIATING DEVICES AND NOTIFICATION APPLIANCES** | | | | | | | | | | | |
| 1. Initiating & notification appliances tested operate properly on AC power. | | | | | | | | | Yes | No |  |
| 1. If system has generator/standby power, initiating and notification appliances tested operate properly on generator/standby power. | | | | | | | | | Yes | No | N/A |
| 1. If system has batteries, initiating and notification appliances operate properly on battery power. | | | | | | | | | Yes | No | N/A |
| 1. 100% of the INITIATING DEVICES per circuit are in accordance with the NFPA 72 Chapter 14 standards referenced by the current fire code. | | | | | | | | | Yes | No |  |
| 1. 100% of smoke detectors included in this report of pre-testing have been sensitivity tested/calibrated per NFPA 72 (may not be required for addressable systems). | | | | | | | | | Yes | No | N/A |
| 1. 100% of the AUDIBLE NOTIFICATION APPLIANCES per circuit are in accordance with NFPA 72. | | | | | | | | | Yes | No |  |
| 1. The audible notification appliances provide sound levels that meet the requirements of NFPA 72. | | | | | | | | | Yes | No |  |
| 1. The audible notification appliances in residential units generate the required low frequency. | | | | | | | | | Yes | No | N/A |
| 1. 100% of the VISUAL NOTIFICATION APPLIANCES per circuit are in accordance with NFPA 72 and are synced where required. | | | | | | | | | Yes | No | N/A |
| 1. Positive alarm sequence programming and panel perform to standards. | | | | | | | | | Yes | No | N/A |
| **BATTERIES** | | | | | | | | | | | |
| 1. Batteries tested per NFPA 72. | | | | | | | | | Yes | No | N/A |
| **INTERFACE DEVICES** | | | | | | | | | | | |
| The FACP received signals from the following Interface devices: Click or tap here to enter text. Tested by: Click or tap here to enter text. | | | | | | | | | Simulation:  Operation: | | |
| 1. Emergency Generator(s) | | | | | | | | | Yes | No | N/A |
| 1. Flow Switches | | | | | | | | | Yes | No | N/A |
| 1. Supervisory Switch(es) | | | | | | | | | Yes | No | N/A |
| 1. Range Hood Suppression System(s) | | | | | | | | | Yes | No | N/A |
| 1. Dry Chemical System(s) | | | | | | | | | Yes | No | N/A |
| 1. Clean Agent System(s) | | | | | | | | | Yes | No | N/A |
| 1. Pre-action Systems(s) | | | | | | | | | Yes | No | N/A |
| 1. Fire Pump(s) | | | | | | | | | Yes | No | N/A |
| 1. CO2 System(s) | | | | | | | | | Yes | No | N/A |
| **OTHER EQUIPMENT CONTROLLED BY FACP** | | | | | | | | | | | |
| The following Fire Safety Functions responded to signals from the FACP: Click or tap here to enter text. Tested by: Click or tap here to enter text. | | | | | | | | | Simulation:  Operation: | | |
| 1. Fan Controls | | | | | | | | | Yes | No | N/A |
| 1. Smoke Dampers and Combination Fire/Smoke Dampers | | | | | | | | | Yes | No | N/A |
| 1. Elevator Recall System | | | | | | | | | Yes | No | N/A |
| 1. Elevator Shunt Switch(es) | | | | | | | | | Yes | No | N/A |
| 1. Shaft Pressurization System | | | | | | | | | Yes | No | N/A |
| 1. Magnetic Door Holders (see inventory) | | | | | | | | | Yes | No | N/A |
| 1. Door Lock devices (see inventory) | | | | | | | | | Yes | No | N/A |
| 1. Stage Amplifier/Audio-Visual Shut Down | | | | | | | | | Yes | No | N/A |
| 1. Remote Annunciator Panels | | | | | | | | | Yes | No | N/A |
| **ALARM PANEL MONITORING** | | | | | | | | | | | |
| 1. A signal was received at the Central Station monitoring company (correct address, device, etc.) | | | | | | | | | Yes | No | N/A |
| **STAIRWAY DOOR LOCKS [if no stairways, or locking doors not required, skip this section and proceed to final checks]** | | | | | | | | | | | |
| This building has stairways: | | | | | | | | | Yes | No | N/A |
| 1. All stairway door locking devices release simultaneously, upon activation of the fire alarm system from anywhere in the building. | | | | | | | | | Yes | No | N/A |
| 1. All stairway door locking devices release simultaneously upon activation from the fire command center. | | | | | | | | | Yes | No | N/A |
| 1. All of the doors open, close, and latch properly. | | | | | | | | | Yes | No | N/A |
| **FINAL CHECKS AND REPORTS** | | | | | | | | | | | |
| Put the Fire Alarm/monitoring system back into service and/or other precautionary measures that were made to restore fire alarm system to normal operation (includes removal of protective coverings.) | | | | | | | | | | | |
| 1. I will schedule the final fire / acceptance test after notifying the Fire Marshal's Office in advance to coordinate testing of large systems. | | | | | | | | | Yes | No | N/A |
| 1. I will provide a copy of the acceptance test report to the responsible party. | | | | | | | | | Yes | No | N/A |
| 1. I will submit this test report to the Fire Marshal's Office prior to scheduling inspections. | | | | | | | | | Yes | No | N/A |
| By accepting this statement, I, the certified technician shown on this form, certify that this fire protection system(s) has been properly tested for system acceptance and meets NFPA standards for report of system completion in accordance with the current Fire Code (FC) used by the department that has jurisdiction and NFPA Standards adopted by the FC for this system. Any deficiencies found are noted in the report  and have been reported to the building Owner/Manager for corrective action. | | | | | | | | | | | |
| I accept. | I am authorized to submit this report for the certified technician who has accepted this statement. | | | | | | | | | | |
| **SIGNATURE** | | | | | | | | | | | |
| Signature of Technician | | | | | | | | | | | |
| Signature of Building Representative | | | | | | | | | | | |

**This Report Must Be Submitted Prior to Scheduling Final Fire / Acceptance Test. You Must Also Have a Printed Copy Available for the Inspector at the Job Site**

[Submit reports to](http://www.thecomplianceengine.com/) vanfmo@cityofvancouver.us