SYSTEM RECORD OF INSPECTION AND TESTING

This form is to be completed by the system inspection and testing contractor at the time of a system test.
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.

Inspection/Test Start Date/Time: 04/08/2019 09:00 Inspection/Test Completion Date/Time: 04/08/2019 11:30

Supplemental Form(s) Attached: No (yes/no)

1. PROPERTY INFORMATION

Name of property: City of Staunton - Public Library

Address: 1 Churchville Ave., Staunton, VA. 24401

Description of property: Library

Name of property representative: Tim Powell

Address: 1911 Craigmont Rd., Staunton, VA. 24401

Phone: 540-332-3892 Fax: E-mail: powelltc@ci.staunton.va.us

2. TESTING AND MONITORING INFORMATION

Testing organization: Greer's Supply Co., Inc.

Address: 2401-A Plantation Rd.NE, Roanoke, VA. 24012

Phone: 540-265-0555 Fax: 540-265-0554 E-mail: craig@greersupply.com

Monitoring organization: Vector Security

Address: 2805 N. Parham Rd., Suite 500, Richmond, VA. 23294

Phone: 800-666-4642 Fax: E-mail: ashawthorne@vectorsecurity.com

Account number: 691-0870 Phone line 1: Phone line 2:

Means of transmission: DACT

Entity to which alarms are retransmitted: City of Staunton E911 Phone: 540-885-6877

3. DOCUMENTATION

On-site location of the required record documents and site-specific software: none

4. DESCRIPTION OF SYSTEM OR SERVICE

4.1 Control Unit

Manufacturer: FireLite Model number: MS4824

4.2 Software and Firmware

Firmware revision number: unknown

4.3 System Power

4.3.1 Primary (Main) Power

Nominal voltage: 120 Amps: 4 Location: 1FL Circulation Desk

Overcurrent protection type: Breaker Amps: 20 Disconnecting means location: Panel B #24

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

4.3.2 Secondary Power

Type: Battery Location: in Panel

Battery type (if applicable): Sealed Lead-Acid

Calculated capacity of batteries to drive the system:

In standby mode (hours): 24 In alarm mode (minutes): 5

5. NOTIFICATIONS MADE PRIOR TO TESTING

Monitoring organization	Contact:	Vector Security	Time:	09:25
Building management	Contact:	Roger Gay	Time:	09:25
Building occupants	Contact:	Verbal	Time:	09:25
Authority having jurisdiction	Contact:	N/A	Time:	
Other, if required	Contact:	N/A	Time:	

6. TESTING RESULTS

6.1 Control Unit and Related Equipment

Description	Visual Inspection	Functional Test	Comments
Control unit	☒	☒	
Lamps/LEDs/LCDs	☒	☒	
Fuses	☒	☒	
Trouble signals	☒	☒	
Disconnect switches	☐	☐	N/A
Ground-fault monitoring	☒	☐	
Supervision	☐	☐	N/A
Local annunciator	☐	☐	N/A
Remote annunciators	☐	☐	N/A
Remote power panels	☐	☐	N/A
	☐	☐	

6.2 Secondary Power

Description	Visual Inspection	Functional Test	Comments
Battery condition	☒	☒	Installed 1/12/2018 tested better than rated capacity
Load voltage	☒	☒	
Discharge test	☒	☒	
Charger test	☒	☒	
Remote panel batteries	☐	☐	N/A
	☐	☐	

6. TESTING RESULTS *(continued)*

6.3 Alarm and Supervisory Alarm Initiating Device

Device Type	Address	Location	Test Results
Pull	1	Gnd FL@Right Stair	Pass
Pull	2	Gnd FL@Left Stair	Pass
Pull	2	Gnd FL@Program Room	Pass
Smoke w/Confirm	2	Gnd FL Mechanical (Boiler) Room	Pass
Smoke w/Confirm	2	Gnd FL Storage@Sprinkler Room	Pass
Smoke w/Confirm	2	Gnd FL Sprinkler Room	Pass
Smoke w/Confirm	2	Gnd FL Mechanical (HVAC) Room	Pass
Smoke	3	Gnd FL Elevator Eqpt Rm	Pass
Smoke	3	Gnd Fl Elevator Lobby	Pass
Duct Smoke	4	Gnd FL Mechanical (HVAC) Room	Pass
Pull	11	1FL Circulation Desk	Pass
Pull	11	1FL@Right Stair	Pass
Pull	11	E in Right Stair@ Exit	Pass
Pull	11	1FL@Left Stair	Pass
Pull	11	1FL in Left Stair@Exit	Pass
Smoke w/Confirm	12	E Mailroom	Pass
Smoke w/Confirm	12	1FL Circulation Storage	Pass
Smoke	13	E Elevator Lobby	Pass
Smoke	13	1FL Elevator Lobby	Pass
Pull	14	2FL@Left Stair	Pass
Pull	14	2FL@Right Stair	Pass
Smoke	15	2FL Director Supply Closet	Pass
Smoke	15	2FL File Room	Pass
Smoke	15	2FL Lounge	Pass
Smoke	15	2FL Tech Svcs Storage	Pass
Smoke	15	2FL Sprinkler Room	Pass
Smoke	15	2FL Meeting Room Storage	Pass
Smoke	16	2FL Elevator Lobby	Alarm - No Recall
Smoke	16	Elevator Top-of-Shaft	Not Tested
Duct Smoke	17	2FL Mechanical Room	Pass
Monitor	18	Dry Riser Tamper/Waterflow	Tested by Others
Monitor	19	No Connection	Not Tested
Monitor	9	Gnd FL Sprinkler Waterflow	Tested by Others
Monitor	10	Gnd FL Sprinkler Valve Tamper	Tested by Others

6. TESTING RESULTS *(continued)*

6.4 Notification Appliances

Appliance Type	Location/Identifier	Test Results
Audible/Visible	Gnd FL@Desk	Pass
Audible/Visible	Gnd FL Program Room	Pass
Audible/Visible	Gnd FL Children's Fiction	Pass
Audible/Visible	Gnd FL Adult Fiction	Pass
Visible	Gnd FL Men's Toilet	Pass
Visible	Gnd FL Women's Toilet	Pass
Audible/Visible	1FL@Toilets	Pass
Audible/Visible	1FL Central	Pass
Audible/Visible	1FL Non-Fiction	Pass
Visible	1FL Men's Toilet	Pass
Visible	1FL Women's Toilet	Pass
Audible/Visible	2FL Hall@Public Relations	Pass
Audible/Visible	2FL Hall@Elevator	Pass
Visible	2FL Men's Toilet	Pass
Visible	2FL Women's Toilet	Pass

6. TESTING RESULTS *(continued)*

6.5 Interface Equipment

Circuit Interface / Signaling Line Circuit Interface / Fire Alarm Control Interface

Interface Type	Location/Identifier	Test Results

6.6 Supervising Station Monitoring

Description	Yes	No	Time	Comments
Alarm signal	☒	☐	9:25	
Alarm restoration	☐	☒	N/A	
Trouble signal	☒	☐	10:49	
Trouble restoration	☒	☐	10:51	
Supervisory signal	☐	☒	N/A	
Supervisory restoration	☐	☒	N/A	

7. NOTIFICATIONS THAT TESTING IS COMPLETE

Monitoring organization	Contact:	Vector Security	Time:	11:20
Building management	Contact:	Roger Gay	Time:	11:20
Building occupants	Contact:	Verbal	Time:	11:30
Authority having jurisdiction	Contact:	N/A	Time:	
Other, if required	Contact:	N/A	Time:	

8. SYSTEM RESTORED TO NORMAL OPERATION

Date: 04/08/2019 Time: 11:30

9. CERTIFICATION

This system as specified herein has been inspected and tested according to NFPA 72, 2013 edition, Chapter 14.

Signed: Craig Dickerson Printed name: Craig Dickerson Date: 04/08/2019

Organization: Greer's Supply Co., Inc. Title: Fire & Security Technician Phone: 540-312-4403

Qualifications (refer to 10.5.3): VA DCJS 11-4689, 99-168356

10. DEFECTS OR MALFUNCTIONS NOT CORRECTED AT CONCLUSION OF SYSTEM INSPECTION, TESTING, OR MAINTENANCE

Elevator did not recall on 2FL Lobby Smoke Alarm

10.1 Acceptance by Owner or Owner's Representative:

The undersigned accepted the test report for the system as specified herein:

Signed: Roger Gay Printed name: Roger Gay Date: 04/08/2019

Organization: City of Staunton Public Works Title: Technician Phone: 540-490-1123