

**SAFE BLU**  
**Strathmore, AB.**  
**Ph: 934 9387 Fax: 934 9344**

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**FIRE ALARM SYSTEM ANNUAL TEST AND INSPECTION REPORT**

DATE: JULY 11, 2014

BUILDING NAME: GLEICHEN RCMP

ADDRESS: 508 4<sup>TH</sup> AVENUE, GLIECHEN AB.

COMPANY: SAME

CONTACT PERSON: \_\_\_\_\_

TELEPHONE NO: 403 734 3056

SYSTEM MANUFACTURER: EST QUICKSTART

MODEL NO: EST QS1

OPERATION:

SINGLE STAGE: ☒

TWO STAGE: ☐

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**TEST RESULTS**

(EVERY LINE MUST HAVE THE APPROPRIATE MARKING IN THE SPACE PROVIDED)

This is to certify that the Fire Alarm System has been tested and inspected in accordance with Section 5 periodic inspections and tests – daily and monthly; and Section 6, periodic inspections and tests – yearly, and these records document the results of testing performed.

1. The Fire Alarm System is now fully functional.

Yes ☒ No ☐

OR

2. The Fire Alarm System has deficiencies noted on the pages attached.

Yes ☐ No ☒

Comments:

SYSTEM IS NOT MONITORED  
DIALER AND 2 LINE FAULTS ON PANEL

A copy of this report will be given to: \_\_\_\_\_



Ken MacLean

Signature of Technician

P0553

Technician's Certification Number

24-7 Fire & Electrical Services Ltd.

Company Name

PRE-TEST CHECKLIST					
1.	Is there a fire department interconnection?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>			
If yes, take necessary steps to alert central station/fire department, etc.					
<b>DO NOT USE THE FIRE DEPARTMENT EMERGENCY TELEPHONE NUMBER.</b> <b>(IN CALGARY USE THE NON-EMERGENCY PHONE NUMBER 264-1022)</b>					
Name of person contacted at the central station or fire department:					
<table border="0" style="width: 100%;"> <tr> <td style="width: 33%; border-bottom: 1px solid black;">Name</td> <td style="width: 33%; border-bottom: 1px solid black;">Title</td> <td style="width: 33%; border-bottom: 1px solid black;">Phone No.</td> </tr> </table>			Name	Title	Phone No.
Name	Title	Phone No.			
Date and time fire alarm system is out of service: JULY 11, 2014 12:30 PM					
Date and time fire alarm is back in service: JUL 11, 2014 4:30 PM					
2.	Do you have auxiliary functions that can impair building functions such as elevator capture, fan shutdown, door holders, etc.?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>			
2a.	Can these be disabled and tested by groups?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>			
3.	Have building occupants been made aware of fire alarm testing?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>			
4.	Has a pre-determined time been established for testing signaling devices?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>			
5.	Have provisions been made for acquiring access to the secured areas of the building?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>			
6.	Has an alternative plan been established to alert occupants and local fire department should an actual fire condition occur during testing?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>			
7.	The fire alarm system has emergency power provided by:	AC Generator <input type="checkbox"/> Rechargeable battery <input checked="" type="checkbox"/>			

EVERY LINE MUST HAVE THE APPROPRIATE MARKING IN THE BOX PROVIDED

YES	NO	NOT APPLICABLE (NA)
Tested correctly	Did not test correctly (See Remarks Section)	Function or feature not provided on this fire alarm system.

ALARM SIGNAL TESTS	YES	NO	NA
All alarm signaling appliances sound simultaneously in the general alarm state powered by the emergency power supply (5 min. minimum duration).	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
All audible alarm signals sound simultaneously in the evacuation alarm state powered by the emergency power supply (as per the Alberta Building Code 1990).	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Alarm signals are audible throughout the building.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Visual alarm signals clearly indicate a visual alarm to all points in the visual alarm area when operated on normal power supply.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Each audible and visual signaling device has been tested.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
NUMBER OF AUDIBLE / VISUAL DEVICES: 8			

CONTROL UNIT TESTS		YES	NO	NA
Power on Visual Indicator		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Common Visual Trouble Lamp		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Common Audible Trouble Signal		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Trouble Signal Silence Switch		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
AC Power Failure Trouble		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Main Power Supply Failure Trouble Signal		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ground Fault Tested on Positive and Negative Trouble Signal		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Control Panel Interconnection to Fire Department Confirmed		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Alert Signal Operation		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alarm Signal Operation		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Automatic Transfer from Alert Signal to Alarm Signal		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Acknowledge Switch Operation		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alarm Signal Silence Inhibit		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Alarm Signal Silence Operation		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alarm Signal Silence Visual Indication		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alarm Signal, when silenced, Automatically Reinitiate Upon Subsequent Alarm		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alarm Signal Silence Automatic Cut - Out Timer		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Input Circuit, Alarm & Supervisory Operation Including Visual Indicator		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Input Circuit Trouble Operation		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Output Circuit Alarm Operation		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Output Circuit Trouble Operation		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Visual Indicator Test (Lamp Tests)		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reset Operation		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Main Power Supply to Emergency Power Supply Transfer		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Control Panel Locked		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Control Unit Interconnection to Monitoring Station		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Monitoring Company Name and Phone #	NOT MONITORED			
Building System ID # and Pass Code ID #				

BATTERY TESTS		
Correct Battery Type as Recommended by Manufacturer	2 X	12V 18AH - NEW 2012
Correct Rating as Determined by Battery Calculations based on Full System Load	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	
Battery Voltage (AC Power On)	27.3	
Battery Charging Current (AC Power On)	200 MA - 540 MA	
Battery Voltage (AC Power Off - Supervisory Condition)	24.7V - 450 MA	
Battery Voltage (AC Power Off - General Alarm Condition) Full Load	24.1 V - 1.65 A	
BATTERY TESTS INSPECTIONS		
Battery Inspected for Physical Damage	YES	NO NA
Battery Terminals Cleaned and Lubricated	<input checked="" type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Battery Terminals Clamped Tightly	<input checked="" type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Within Manufacturer's Rated Life Date Code	<input checked="" type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Disconnection Causes Trouble Signal	<input checked="" type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>

REMOTE TROUBLE UNIT		YES	NO	NA
Input Wiring from Control Unit is Supervised		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Visual Trouble Signal		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Audible Trouble Signal		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Audible Trouble Signal Silence		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

POWER SUPPLY INSPECTION		YES	NO	NA
Fused in Accordance with Manufacturer's Marked Rating of the System		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Adequate to Meet the Requirements of the System		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

ANNUNCIATOR TESTS	YES	NO	NA
Power On Indicator	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Individual Alarm & Supervisory Zone Indication	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Individual Alarm & Supervisory Zone Designation Labels are Properly Identified	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Common Trouble Signal	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Visual Indicator Test (Lamp Test)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Input Wiring from Control Unit is Supervised	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Switches for Ancillary Functions Operate as Intended	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alarm Signal Silence Visual Indicator	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other Ancillary Functions Visual Indicators	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Manual Activation of Alarm Signal & Indication	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

CONTROL UNIT INSPECTIONS	YES	NO	NA
Input Circuit Designations, Correctly Identified in Relation to Connected Field Devices	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Output Circuit Designations, Correctly Identified in Relation to Connected Field Devices	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Designations for Common Control Functions & Indicators	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cabinet, Plug-In Components, Modules, and Cables Securely in Place	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cleanliness	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fuses in Accordance with Manufacturer's Specification	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

ANCILLARY DEVICES	If no ancillary devices are present check here <input type="checkbox"/>	
TYPE OF DEVICE (List)	OPERATIONAL	
	YES <input type="checkbox"/>	NO <input type="checkbox"/>
OFFICE TO CELL BLOCK DOOR MAG HOLDER	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
	YES <input type="checkbox"/>	NO <input type="checkbox"/>
	YES <input type="checkbox"/>	NO <input type="checkbox"/>
	YES <input type="checkbox"/>	NO <input type="checkbox"/>

\*NOTE: Power supply for ancillary devices must not be from fire alarm power supply circuit.

AFTER TEST CHECKLIST	YES	NO	NA
Reconnect Auxiliary Functions (off site connections)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Reconnect Ancillary Functions	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reconnect Time Limit Cutouts	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Ensure Fire Alarm System is on Normal Power	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Advise Building Management Work Is Completed	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Advise Fire Department Work Is Completed	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ensure That the Alarm System Is Functional	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

SUMMARY		YES	NO	NA
1.	The fire alarm system is now <b>FULLY</b> functional.	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>	
2.	The fire alarm system is operational with minor deficiencies as noted in this report.	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>	
3.	The fire alarm system has major deficiencies as noted in this report.	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>	
4.	A copy of this report will be given to: STAFF SGT GOLLAN			
BUILDING OWNER / BUILDING OWNER'S REPRESENTATIVE				

TEST AND MAINTENANCE CODES REQUIRE THAT THE BUILDING OWNER FOR A MINIMUM OF TWO YEARS MAINTAIN THIS RECORD.

**DEVICE LEGEND**

Bell	B	Pressure Switch	PS
Duct Smoke Detector	DS	Remote Relay	REL
Fire Phone	FP	Heat Detector, Rate of Rise	RHT
Sprinkler Flow Switch	FS	Smoke Detector	S
Horn	H	Smoke Alarm	SA
Horn/Strobe Combination	HS	Paging Speaker	SP
Heat Detector, Fixed Temperature	HT	Sprinkler Tamper Switch	TS
Manual Pull Station	M	Visual Appliance	V

**TECHNICIANS REMARKS / DEFICIENCY FIRE ALARM / SPRINKLER SYSTEM**

DIALER AND 2 LINE FAULTS ON PANEL  
SYSTEM IS NOT MONITORED

**EMERGENCY / EXIT LIGHTING:****FIRE EXTINGUISHERS / FIRE HOSES:**

GLIECHEN RCMP  
STRATHMORE, AB.

## SAFE BLU

JULY 11 2014

## FIRE ALARM DEVICE REPORT

LOCATION	DEVICE								NOTES	
		Correctly Installed	Requires Repair	Alarm Operation	Alarm Operation Deactivated	Zone Circuit & Ground Fault	Power Supply			
MAIN FLOOR										
FRONT RECEPTION	M		✓			130				
FRONT HALLWAY RECEPTION	S		✓			046				
FRONT VESTIBULE	CR135		✓			036				
BULL PEN SOUTH	S		✓			039				
BULL PEN NORTH	S		✓			032				
GUARD ROOM 131	HT		✓			052				
INTERVIEW ROOM 109	HT		✓			035				
OFFICE CORRIDOR	M		✓			129				
OFFICE CORRIDOR NORTH	S		✓			033				
OFFICE CORRIDOR SOUTH	S		✓			034				
PARADE ROOM 112	S		✓			031				
NORTH EXIT	M		✓			131				
NORTH STAIR	S		✓			094				
MENS WASHROOM 116	S		✓			037				
WOMENS WASHROOM 117	S		✓			038				
SHIFT SUPERVISORY	HT		✓			047				
DEPT. COMMAND OFFICE	HT		✓			048				
MAIN WORK STATION	HT		✓			045				
OPEN FILE STORAGE	HT		✓			044				
OFFICE MANAGER	HT		✓			043				
SARGENTS OFFICE	HT		✓			042				VICTIM SERVICE OFFICE
EQUIPMENT ROOM 113	HT		✓			040				
BULL PEN	H/S		✓							
HALLWAY BY WASHROOMS	H/S		✓							
VESTIBULE	H/S		✓							
CYLL BLOCK										
OVER NIGHT EXHIBIT ROOM	S		✓			057				
SECURE EXHIBIT ROOM	S		✓			056				
VESTIBULE	S		✓			058				
VISITOR ROOM	S		✓			063				
GUARDS WASHROOM	S		✓			062				
GUARD ROOM	S		✓			051				
INTERVIEW ROOM	S		✓			080				
BREATH TEST ROOM	S		✓			074				
SECURE BAY	M		✓			132				GARAGE
COLD STORAGE	HT		✓			050				IN SECURE BAY GARAGE
SECURE BAY	HT		✓			087				GARAGE
GARAGE BAY 148	HT		✓			068				
GARAGE BAY 143	M		✓			134				
PATROL CORRIDOR NORTH	S		✓			061				
PATROL CORRIDOR CENTER	S		✓			059				
MALE SHOWER ROOM	S		✓			065				
PRISONER'S EFFECTS ROOM 141	S		✓			053				
WOMEN'S SHOWER	S		✓			066				
PRISONER'S EFFECTS ROOM 139	S		✓			054				
PATROL CORRIDOR SOUTH	S		✓			055				
GUARD ROOM 125	M		✓			133				

M=MANUAL STATION  
S=SMOKE DETECTORRHT=RATE OF RISE HEAT  
HT=FIXED HEATB=BELL  
H=HORN  
S=SPEAKER  
V=STROBE LIGHT

GLIECHEN RCMP  
STRATHMORE, AB.

## SAFE BLU

JULY 11 2014

## FIRE ALARM DEVICE REPORT


LOCATION	DEVICE								NOTES
		Device-01 Numbered	Rate of Rise	Alarm Condition	Interposition Confirmed	Zone Circuit #	Ground Fault	Pos & Delay	
GUARD STATION	H/S			✓					
HALLWAY NORTH	H/S			✓					
HALLWAY SOUTH	H/S			✓					
FEMALE CELL JUVENILE 134	S			✓		078			CELL 14
FEMALE CELL JUVENILE 135	S			✓		080			CELL 13
JUVENILE CELL 136	S			✓		082			CELL 12
CELL 137	S			✓		084			CELL 11
PRISONER'S ROOM 121	S			✓		064			
CELL 138	S			✓		086			CELL 10
CELL 143	S			✓		088			CELL 7
CELL 144	S					090			CELL 6 NO ACCESS
	S			✓		092			CELL 5
CELL 127	S					072			CELL 3 NO ACCESS
HOLDING CELL 126	S			✓		070			CELL 2
FEMALE CELL 133	S			✓		076			CELL 15
WOMEN'S WASHROOM CELLBLOCK	H/S			✓					
MEN'S WASHROOM CELLBLOCK	H/S			✓					
HALLWAY NORTH	H/S			✓					
HALLWAY SOUTH	H/S			✓					
GUARD STATION	H/S			✓					
BASEMENT									
MECHANICAL ROOM NORTH	HT			✓		018			
MECHANICAL ROOM SOUTH	HT					002			NO ACCESS
CRAWL SPACE N.W.	HT					003			
CRAWL SPACE N.E.	HT					005			
CRAWL SPACE CENTER N.E.	HT					006			
CRAWL SPACE CENTER S.E.	HT					008			
CRAWL SPACE S.E.	HT					009			
CRAWL SPACE S.W.	HT					007			
CRAWL SPACE CENTER S.W.	HT					004			
CRAWL SPACE CENTER N.W.	HT					021			
GYM N.W.	HT			✓		021			
GYM S.W.	HT			✓		024			
GYM S.E.	HT			✓		023			
GYM N.E.	HT			✓		022			
TELEPHONE ROOM	S			✓		016			
ELECTRICAL ROOM	S					011			
BASEMENT NORTH EXIT	M			✓		127			
CORRIDOR NORTH	S			✓		012			
CORRIDOR SOUTH	HT			✓		013			
LOCKER ROOM	S			✓		017			
WOMEN'S LOCKER ROOM	S			✓		014			
MEN'S LOCKER ROOM	S			✓		015			
JANITOR ROOM	HT			✓		020			
TOP OF STAIR SOUTH	S			✓		096			
TOP OF SOUTH STAIR	M			✓		135			
EXERCISE ROOM	H/S			✓					
HALLWAY	H/S			✓					
MECH ROOM 3 FURNACE 2 RETURN	D/S			✓		027			
MECH ROOM 3 FURNACE 1 RETURN	D/S			✓		026			
MECH ROOM 3 FURNACE 3 RETURN	D/S			✓		028			

M=MANUAL STATION  
S=SMOKE DETECTORRHT=RATE OF RISE HEAT  
HT=FIXED HEATB=BELL  
H=HORN  
S=SPEAKER  
V=STROBE LIGHT





## Inspection and Testing of Fire Alarm Systems

 <b>Centratech Technical Services Ltd</b> # 1 – 7644 – 49 <sup>th</sup> Ave Red Deer, Alberta	Date of Service: July 16, 2014		Time: 0900 Hrs
	Annual Inspection		Last Service Date July 2013
	Single Stage N/A	Two Stage YES	Direct Connection Reliance  YES
	Manufacturer: Simplex		Model: 4002
Building Name: K311 RCMP Innisfail Detachment		Contact Person: Charlene	Phone: Fax:
Address: 4904-45 Avenue		Owner: RCMP	Phone: Fax:
City: Innisfail, Alberta	Postal Code: T4G 1S6	Fire Signal Receiving Centre: Not Monitored	Phone: Fax:

“Yes”- Acceptable    “No” - Unacceptable    (Explain No answers in comments)

Yes	No	Summary
<input checked="" type="checkbox"/>	<input type="checkbox"/>	The entire fire alarm system has been inspected and tested in accordance with CAN/ULC S536-04
<input checked="" type="checkbox"/>	<input type="checkbox"/>	The fire alarm system documentation is on site and includes a description of the system.
<input checked="" type="checkbox"/>	<input type="checkbox"/>	The fire alarm system is fully functional.
<input type="checkbox"/>	<input checked="" type="checkbox"/>	The fire alarm system has deficiencies.
<input checked="" type="checkbox"/>	<input type="checkbox"/>	A copy of this report is given to the Owner or the owner's representative.

<input type="checkbox"/>		<b>Technicians After-test Checklist</b>
<input checked="" type="checkbox"/>		Reconnect time limit cutouts?
<input checked="" type="checkbox"/>		Reconnect ancillary functions?
<input checked="" type="checkbox"/>		Reconnect ancillary functions (off site connections)?
<input checked="" type="checkbox"/>		Reconnect signal power?
<input checked="" type="checkbox"/>		Advise fire department the testing is completed?
<input checked="" type="checkbox"/>		Ensure that the alarm system is functional?

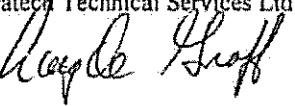
### Comments

Tested system on battery backup. Electrical panel is in basement panel E #2 breaker in red and locked.

Note: The circuit strip that allows the bell wires to be screwed down is showing wear and does not hold the wires tight. The wires can be pulled out with out undoing the screws.

See also that 3 manual PS didn't not go into general alarm using the manual key.

I state that the information on this form is correct at the time and place of my inspection, and that all equipment was tested in conformance with applicable codes and the Manufacturers requirements and at this time was left in operational condition upon completion of this inspection except as noted in comments.

Centratech Technical Services Ltd.  Craig De Graff CFAA # 11-995092	July 23, 2013	0900 hrs.	
Technician	Date	Time	Owner or Authorized Agent

# Inspection and Testing of Fire Alarm Systems

Date July 16, 2014

Building Name: K311 RCMP Innisfail

"Yes" - Tested correctly "No" - Did not test correctly (Explain NO answers in comments) "NA" Not applicable

<b>2.1 Control Unit or Transponder Tests</b>	<b>yes</b>	Termination points from wiring to field devices secure
<b>yes</b> Power on visual indicator operates.	<b>yes</b>	<b>2.6 Annunciator &amp; Remote Trouble Test &amp; Inspection</b>
<b>yes</b> Common visual trouble signal operates.	<b>yes</b>	Power on indicator operates.
<b>yes</b> Common audible trouble signal operates.	<b>yes</b>	Individual alarm and supervisory input zone clearly
<b>yes</b> Trouble signal silence switch operates.		Indicated and separately designated?
<b>yes</b> Main Power supply failure trouble signal operates.	<b>yes</b>	Individual alarm and supervisory zone labels identified.
<b>yes</b> Ground fault tested on positive and negative trouble signal	<b>yes</b>	Common trouble signal operates.
<b>yes</b> Alert signal operation operates.	<b>yes</b>	Visual indicator test - Lamp test operates.
<b>yes</b> Alarm signal operation operates.	<b>yes</b>	Input wiring from control unit/transponder is supervised.
<b>yes</b> Automatic transfer from alert to alarm signal operates.	<b>yes</b>	Alarm signal silence visual indicator operates.
<b>yes</b> Manual transfer from alert signal to alarm signal operates.	<b>yes</b>	Switches for ancillary function operate as per design.
<b>yes</b> Auto transfer from alert to alarm signal cancel operates	<b>yes</b>	Other ancillary function visual indicators operate.
<b>yes</b> Alarm signal silence inhibit function operates?	<b>yes</b>	Manual activation of alarm signal and indication operates.
<b>yes</b> Alarm signal manual silence operates.	<b>yes</b>	Displays are visible in installed location operates?
<b>yes</b> Alarm signal silence visual indication operates.	<b>yes</b>	Operates on emergency power?
<b>yes</b> Alarm signal when silenced automatically reinitiates on		<b>2.4 Power Supply Inspection</b>
subsequent alarm?	<b>yes</b>	Fused with mfgs marked rating of the system?
<b>yes</b> Alarm signal silence automatic cut-out timer.	<b>yes</b>	Adequate to meet the requirements of the system?
<b>yes</b> Audible visual and alert and alarm signals programmed	<b>na</b>	<b>2.8 Remote Trouble Signal Unit Test and Inspection</b>
and operate as per design & specification. (app C)		Input wiring from control/transponder is supervised.
<b>yes</b> Input circuit alarm and supervisory operation including		Visual trouble signal operates.
audible and visual indication operates.		Audible trouble signal operates.
<b>yes</b> Input circuit supervision fault causes a trouble indication.		Audible trouble signal silence operates.
<b>yes</b> Output circuit alarm indicators operate.		<b>2.5 Emergency Power Supply Test and Inspection</b>
<b>yes</b> Output circuit supervision fault causes a trouble indication.	<b>yes</b>	Correct battery type as recommend by manufacturer?
<b>yes</b> Visual indicator test (lamp test).	<b>yes</b>	Correct rating as determined by battery calculations
<b>na</b> Coded signal sequence operate not less than the required		based on full system load?
number of times and the correct alarm signal thereafter.	<b>yes</b>	Battery voltage main power on? 27.9 Vdc / 300ma
<b>na</b> Coded signal sequences are not interrupted by	<b>yes</b>	Battery voltage and current with main power supply "off"
subsequent alarms?		and fire alarm in supervisory condition?
<b>yes</b> Ancillary circuit by-pass will result in a trouble signal.		Voltage 25.9 Vdc Current 400ma
<b>yes</b> Input circuit to output circuit operation including	<b>yes</b>	Battery voltage and current with main power supply "off"
ancillary device circuits, for correct program operation		and fire alarm in full load alarm condition?
as per design & spec. (App "C")		Voltage 25.4 Vdc Current 400 ma
<b>yes</b> Fire alarm Reset operates.	<b>yes</b>	Charging current is 400ma
<b>yes</b> Main power to emergency power supply transfer operates.	<b>yes</b>	Inspected for physical damage?
<b>na</b> Status change confirmation (smoke detectors) verified	<b>yes</b>	Terminal cleaned and lubricated?
<b>na</b> Receipt of alarm transmission to signal receiving center?	<b>yes</b>	Terminals clamped tightly.
<b>na</b> Receipt of supervisory trans to signal receiving center?	<b>na</b>	Correct Electrolyte level?
<b>na</b> Receipt of trouble transmission to signal receiving center?	<b>na</b>	Specific gravity within mfg specifications?
<b>na</b> Operation of the fire signal receiving center disconnect	<b>no</b>	Electrolyte leaks.
results in a specific trouble indication at control unit?	<b>yes</b>	Adequately ventilated?
<b>2.3 Control Unit or Transponder Inspection</b>	<b>yes</b>	Battery mfg's date code or in-service date 07/2012
<b>yes</b> Input circuit designations, correctly identified in relation	<b>yes</b>	Disconnection causes trouble signal.
to connected field devices		Indicate type of Battery Test Performed?
<b>yes</b> Output circuit designations correctly identified in relation		(1) supervisory load for 24h followed by full load operation.
to connected field devices.		(2) silent test by using load resistor method -App F1
<b>yes</b> Correct designations-common control functions / indicators		(3) Silent accelerated test - App F2
<b>yes</b> Plug-in components and modules securely in place?	<b>yes</b>	(4) A battery capacity meter test App F3
<b>yes</b> Plug-in cables securely in place	<b>yes</b>	(5) In lieu of battery tests, Replace with new set
<b>na</b> Record date, revision and version of Firmware & software		having current date code, as per mfg
Date: Rev: Ver:	<b>na</b>	Record calculated battery capacity App F4 A h
<b>yes</b> Clean and free of dust and dirt?	<b>yes</b>	Record battery terminal voltage after tests 25.6 V dc
<b>yes</b> Fuses in accordance with MFGs specification?	<b>yes</b>	Battery voltage not less than 85% of its rating after tests.
<b>yes</b> Control Unit or transponder lock functional?	<b>na</b>	Generator provides power to the AC circuit for FA syst.

# **Inspection and Testing of Fire Alarm Systems**

Date July 16, 2014

Building Name: K311 RCMP Innisfail

"Yes" - Tested correctly "No" - Did not test correctly (Explain NO answers in comments) "NA" Not applicable

<p><u>na</u> <b>2.5 Emergency Power Supply Test and Inspection</b>                  Trouble condition at the em gen shall result in an audible common trouble signal and a visual indication at the required annunciator?</p> <p><u>yes</u> <b>2.7 Annunciator or Sequential Displays</b>                  Power on indicator operates.  <u>yes</u> Individual alarm, supervisory zone indication operates.                  ( Exception: operation of each individual alarm and supervisory zone indication, or lights the identical indicators at the other annunciators and sequential display) Specify method of confirmation</p> <p><u>yes</u> Minimum of 1 alarm zone and one supervisory zone tested per annunciator or sequential display to confirm operation. Individual alarm and supervisory zone labels identified.  <u>yes</u> Common trouble signal operates.  <u>yes</u> Visual indicator test (lamp test) operates.  <u>yes</u> Input wiring form control unit/transponder supervised  <u>yes</u> Alarm signal silence visual indicator operates.  <u>yes</u> Switches for ancillary function operate as per design.  <u>yes</u> Other ancillary functions visual indicators operate.  <u>yes</u> Manual activation of alarm signal and indication operate.  <u>yes</u> Displays are visible in installed location.</p> <p><u>na</u> <b>2.9 Printer Testing</b>                  Operation as per design and specification?                  Zone of each alarm initiating device is correctly printed.                  Rated voltage is present.</p> <p><u>na</u> <b>2.10 Data Communication Link Test (DCL)</b>                  Confirm that a trouble signal is receive at the control unit or transponder under an open loop fault for each DCL                  Where fault isolation modules are installed in DCL serving field devices, wiring shall be shorted on the isolated side, annunciation of the fault confirmed, and then a field device on the source side shall be operated, and activation confirmed at the control unit or transponder.                  Where a fault isolation in DCL is provided between control units/transponders and between Transponders, introduce a short circuit fault and confirm                  Continued.....</p>	<p>Annunciation of the fault and operation outside the shorted section between each pair of :  <u>      </u> (i) Control unit to control unit  <u>      </u> (ii) Control unit to transponder  <u>      </u> (iii) Transponder to transponder</p> <p><u>na</u> <b>2.2 Voice Communication Inspection/Tests</b>                  Power "ON" operates?                  Common visual trouble signal operates.                  Common audible trouble signal operates.                  Trouble signal silence switch operates.                  All call voice paging including visual indicator operates?                  Output circuits for selective voice paging including visual indication operates.                  Output circuits for selective voice paging trouble operation including visual indication operates.                  Microphone including press to talk switch operates.                  Operation of voice paging does interfere with initial inhibit time of alert and alarm signal?                  All call voice paging operates on emergency power?                  Upon failure of one amplifier, system automatically transfers to backup amplifier.                  Circuits for emergency telephone call in operation including audible and visual indication operates                  Circuits for emergency telephone for operation, including two way voice communication operates.                  Circuits for emergency telephones trouble operation including visual indication operates.                  Emergency telephone verbal communication operates.                  Emergency telephone operable or in-use tone at handset.</p> <p><b>2.11 Ancillary Device Circuit Test</b>  <u>yes</u> Circuit confirmed HVAC  <u>yes</u> Circuit confirmed Doors                  Circuit confirmed                  Circuit confirmed</p>
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**Additional Comments:**

# Inspection and Testing of Fire Alarm Systems Individual Device Record

Date: July 16, 2014	Annual Inspection
Building Name: K311 RCMP Innisfail	Address: 4904-45 Avenue Innisfail

- |   |   |
|---|---|
| A. Correctly installed.<br>B. Requires Service, Repairs, missing, or cleaning<br>C. Alarm operation confirmed | D. Annunciator indication confirmed.<br>E. Zone circuit number or address |
|---|---|

“Y” - Acceptable “N” – Unacceptable (Explain NO answers in comments) “NA” Not applicable

Device	Location	A	B	C	D	E	Remarks
	<b>ZONE 1</b>						
M	Main Entrance	Y	NA	Y	Y	1	Did not go into general alarm using key.
RHT	Front Foyer	Y	NA	Y	Y	1	
RHT	Staff Room	Y	NA	Y	Y	1	
RHT	South Office	Y	NA	Y	Y	1	
RHT	South Office	Y	NA	Y	Y	1	
RHT	South Office	Y	NA	Y	Y	1	
RHT	South Office #1	Y	NA	Y	Y	1	
RHT	Radio Room	Y	NA	Y	Y	1	Replaced July 2014
RHT	South office #2	Y	NA	Y	Y	1	
RHT	Dispatch 105	Y	NA	Y	Y	1	
RHT	Office Family Room	Y	Y	N	N	1	
RHT	Interview Room north	Y	NA	Y	Y	1	
RHT	North Office Area	Y	NA	Y	Y	1	
RHT	North Office #1	Y	NA	Y	Y	1	
RHT	North Office #2	Y	NA	Y	Y	1	
RHT	File Room	Y	Y	N	N	1	
RHT	Janitor Room	Y	NA	Y	Y	1	Replaced July 2014
RHT	Men's Locker Room	Y	NA	Y	Y	1	
RHT	Ladies Locker Room	Y	NA	Y	Y	1	
RHT	Storage room off lockers	Y	NA	Y	Y	1	
RHT	Visitor waiting Room	Y	NA	Y	Y	1	
M	Back Exit	Y	NA	Y	Y	1	Did not go into general alarm using key.
EOL	1						
	<b>ZONE 2</b>	Y	NA	Y	Y	2	
RHT	Exhibit Room #1	Y	NA	Y	Y	2	
RHT	Exhibit room #2	NA	NA	NA	NA	2	No access

M. Manual Pull station	DS Duct smoke detector	B Bell	AD Ancillary device
HT Heat detector, non restorable	SFD Supporting field device - monitor	II Horn	ET Emergency Telephone
RHT Heat detector, Restorable	FS Sprinkler flow switch	V Visual signal appliance	EOL End of line resistor
S Smoke detector	SS Sprinkler supervisory device	SP Cone type speaker	Other supervisory devices
RI Remote indicator unit	EM Fault isolation module	HSP Horn type speaker	Other type of detector
PS Pressure switch			

# Inspection and Testing of Fire Alarm Systems

## Individual Device Record

Date: July 16, 2014	Annual Inspection	
Building Name: K311 RCMP Innisfail	Address: 4904-45 Ave, Innisfail Ab.	

- |   |   |
|---|---|
| A. Correctly installed.<br>B. Requires Service, Repairs, missing, or cleaning<br>C. Alarm operation confirmed | D. Annunciator indication confirmed.<br>E. Zone circuit number or address |
|---|---|

"Y" - Acceptable "N" - Unacceptable (Explain NO answers in comments) "NA" Not applicable

Device	Location	A	B	C	D	E	Remarks
	<b>ZONE 3</b>						
S	Room 128 Cell	Y	NA	Y	Y	3	LOCKED
	<b>ZONE 4</b>						
S	Room 129 Cell	Y	NA	Y	Y	4	
	<b>Zone 5</b>						
S	ROOM 130 Cell	Y	NA	Y	Y	5	Replaced July 2014
	<b>ZONE 6</b>						
S	Room 131 Cell	Y	NA	Y	Y	6	
	<b>ZONE 7</b>						
T	Main water tamper	Y	NA	Y	Y	7	
T	Backflow #1 tamper	Y	NA	Y	Y	7	
T	Backflow #2 tamper	Y	NA	Y	Y	7	
FS	Sprinkler tree Flow switch	Y	NA	Y	Y	7	
	<b>ZONE 8</b>						
S	Room 134 Cell	Y	NA	Y	Y	8	EOL in detector
	<b>Zone 9</b>						
S	Main Desk cell area	Y	NA	Y	Y	9	
PS	Main Desk cell area	Y	NA	Y	Y	9	
S	Locker room	Y	NA	Y	Y	9	
S	Wash room	Y	NA	Y	Y	9	
S	North exit	Y	NA	Y	Y	9	
PS	North exit	Y	NA	Y	Y	9	
S	Hall by Rm 129	Y	NA	Y	Y	9	
S	Hall by Rm 131	Y	NA	Y	Y	9	
S	Room 141	Y	NA	Y	Y	9	Locked
S	Room 144	Y	NA	Y	Y	9	

- |                                  |                                       |                           |                           |
|----------------------------------|---------------------------------------|---------------------------|---------------------------|
| M. Manual Pull station           | DS Duct smoke detector                | B Bell                    | AD Ancillary device       |
| HT Heat detector, non restorable | SFD Supporting field device - monitor | H Horn                    | ET Emergency Telephone    |
| RHT Heat detector, Restorable    | FS Sprinkler flow switch              | V Visual signal appliance | EOL End of line resistor  |
| S Smoke detector                 | SS Sprinkler supervisory device       | SP Cone type speaker      | Other supervisory devices |
| RI Remote indicator unit         | EM Fault isolation module             | HSP Horn type speaker     | Other type of detector    |
| PS Pressure switch               | T Tamper Switch Sprinkler             | FS Flow Switch Sprinkler  |                           |

# **Inspection and Testing of Fire Alarm Systems**

Date: July16, 2014	Annual Inspection	
Building Name: K311 RCMP Innisfail	Address: 4904-45 Ave, Innisfail, Ab	

- |  |                                      |
|--|--------------------------------------|
| A. Correctly installed.                            | D. Annunciator indication confirmed. |
| B. Requires Service, Repairs, missing, or cleaning | E. Zone circuit number or address    |
| C. Alarm operation confirmed                       |                                      |

“Y” - Acceptable “N” - Unacceptable (Explain NO answers in comments) “NA” Not applicable

Device	Location	A	B	C	D	E	Remarks
	<b>ZONE 9</b>						
S	Room 132	Y	NA	Y	Y	9	
S	Hall By 133	Y	NA	Y	Y	9	
M	Hall by 133 east end	Y	NA	Y	Y	9	Did not go into general alarm using key.
EOL	9						
	<b>ZONE 10</b>						
S	Sally Port	Y	NA	Y	Y	10	
EOL	garage						
	<b>Zone 11</b>						
M	Garage SE	Y	NA	Y	Y	11	
RHT	Garage SE	Y	NA	Y	Y	11	
RHT	Garage storage Rm #1	Y	NA	Y	Y	11	
RHT	Garage storage Rm #2	Y	NA	Y	Y	11	
EOL	11 by PS						
	<b>ZONE 12</b>						
S	North stairwell	Y	NA	Y	Y	12	
EOL	TOS						
	<b>Zone 13</b>						
S	Back Stairwell	Y	NA	Y	Y	13	
EOL	TOS						
	<b>ZONE 14</b>						
M	Basement entrance East	Y	NA	Y	Y	14	
RHT	Furnace room	Y	NA	Y	Y	14	
RHT	Telephone room	Y	NA	Y	Y	14	
RHT	Electrical room	Y	NA	Y	Y	14	
M	Basement hallway	Y	NA	Y	Y	14	
EOL	Exit to south stairs						

M. Manual Pull station	DS Duct smoke detector	B Bell	AD Ancillary device
HT Heat detector, non restorable	SFD Supporting field device - monitor	H Horn	ET Emergency Telephone
RHT Heat detector, Restorable	FS Sprinkler flow switch	V Visual signal appliance	EOL End of line resistor
S Smoke detector	SS Sprinkler supervisory device	SP Cone type speaker	Other supervisory devices
RI Remote indicator unit	EM Fault isolation module	HSP Horn type speaker	Other type of detector
PS Pressure switch			

## Inspection and Testing of Fire Alarm Systems

Date: July 16, 2014	Annual Inspection
Building Name: K311 RCMP Innisfail	Address: 4904-45 Ave, Innisfail, Ab

A. Correctly installed.	D. Annunciator indication confirmed.
B. Requires Service, Repairs, missing, or cleaning	E. Zone circuit number or address
C. Alarm operation confirmed	

"Y" - Acceptable "N" - Unacceptable (Explain NO answers in comments) "NA" Not applicable

Device	Location	A	B	C	D	E	Remarks
	<b>Zone 14</b>						
RHT	Basement main room	Y	NA	Y	Y	14	
RHT	Basement main room	Y	NA	Y	Y	14	
RHT	Basement main room	Y	NA	Y	Y	14	
RHT	File storage room	Y	NA	Y	Y	14	
RHT	Storage room	Y	NA	Y	Y	14	Locked
S	Crawl space	Y	NA	Y	Y	14	
S	Crawl space	Y	NA	Y	Y	14	
	<b>ZONE 15</b>						
HDF	Main Mechanical Room	Y	NA	Y	Y	15	
EOL	North wall						
	<b>Zone 16</b>						
DS	F1 HVAC	Y	NA	Y	Y	16	
DS	F1 HVAC	Y	NA	Y	Y	16	
	<b>ZONE 17</b>						
DS	F2 HVAC	Y	Y	N	N	17	
DS	F2 HVAC	Y	NA	Y	Y	17	
	<b>ZONE 18</b>						
M	Main Ent to Attic	Y	NA	Y	Y	18	
RHT	West side	Y	NA	Y	Y	18	
RHT	West side	Y	NA	Y	Y	18	
HDF	West side	Y	NA	Y	Y	18	
RHT	East side	Y	NA	Y	Y	18	
RHT	East side	Y	NA	Y	Y	18	
RHT	East side	Y	NA	Y	Y	18	
EOL	By PS, top of ladder						

M. Manual Pull station	DS Duct smoke detector	B Bell	AD Ancillary device
HT Heat detector, non restorable	SFD Supporting field device - monitor	H Horn	ET Emergency Telephone
RHT Heat detector, Restorable	FS Sprinkler flow switch	V Visual signal appliance	EOL End of line resistor
S Smoke detector	SS Sprinkler supervisory device	SP Cone type speaker	Other supervisory devices
RI Remote indicator unit	EM Fault isolation module	HSP Horn type speaker	Other type of detector
PS Pressure switch			

## Individual Device Record



## Signal Devices Record

A. Correctly installed.  
B. Requires Service, Repairs, missing, or cleaning  
C. Alarm operation confirmed

[illegible]

M.	Manual Pull station	DS	Duct smoke detector	B	Bell	AD	Ancillary device
HT	Heat detector, non restorable	SFD	Supporting field device - monitor	H	Horn	ET	Emergency Telephone
RHT	Heat detector, Restorable	FS	Sprinkler flow switch	V	Visual signal appliance	EOL	End of line resistor
S	Smoke detector	SS	Sprinkler supervisory device	SP	Cone type speaker		Other supervisory devices
RI	Remote indicator unit	EM	Fault isolation module	HSP	Horn type speaker		Other type of detector
PS	Pressure switch			BS	Bell and strobe		

### 3.1 Field Device Testing – Legend and Notes

10 of 10

# REPORT OF INSPECTION AND TESTING

OF WATER BASED FIRE PROTECTION SYSTEMS

ANNUAL ITEMS TO BE REVIEWED

ALL QUESTIONS ARE TO BE FULLY ANSWERED AND ALL BLANKS ARE TO BE FILLED

INSPECTED BY: CENTRATECH

DATE: July 16, 2014

LOCATION: INNISFAIL R.C.M.P DETACHMENT

TECHNICIAN: KOREY CAMPBELL

INSPECTION FREQUENCY: MONTHLY QUARTERLY ANNUALLY X OTHER

## ANNUAL REPORT OF INSPECTION OF WET SPRINKLER SYSTEM

- B-1.1 HYDRAULIC NAMEPLATE ATTACHED  
B-1.2 STRAINERS AND FILTERS CLEANED  
B-1.3 EXTERIOR ALARMS PROPERLY IDENTIFIED  
B-2.0 ALARM PANEL CLEAR  
B-3.0 SYSTEM LEFT IN SERVICE  
B-20.0 COMMENTS: SYSTEM HAS THREE TAMPER SWITCHES

YES	N/A	NO
X		
	X	
X		
X		
X		

ALL SPRINKLER HEADS APPEAR TO BE DAMAGE FREE, NO LEAKS DETECTED  
MINOR RUST IS PRESENT ON SPRINKLER ALARM LINE

## ANNUAL TESTING REQUIREMENTS FOR WET SPRINKLER SYSTEM

- C-1.1 MAIN DRAIN FLOW TEST WITH 3 INCH VALVE OPEN  
C-2.1 SPRINKLER SUPPLY GAUGE -  
C-2.2 SPRINKLER SUPPLY GAUGE MAIN DRAIN FLOW  
C-3.1 SPRINKLER GAUGE  
C-3.2 SPRINKLER GAUGE WITH MAIN DRAIN FLOW  
C-4.1 WATER FLOW ALARM DEVICES ACTIVATED  
C-4.2 INTERIOR BUILDING ALARMS OPERATING  
C-4.3 EXTERIOR ALARMS OPERATING  
C-5.1 INSPECTOR'S TEST FLOW On main drain.

Zone 7
X
62 psi
58 psi
110 psi
62 psi
YES
YES
YES
1/2"

- C-6.1 TIME TO RING ALARM FROM CHECK VALVE  
C-7.1 TIME TO RING ALARM FROM FLOW SWITCH  
C-8.1 TIME TO RING ALARM FROM PRESSURE SWITCH

Main flr
NA
30 secs
NA

- C-9.1 GAUGES OPERATING PROPERLY  
C-10.1 DID SUPERVISORY COMPANY RECEIVE SIGNAL PROPERLY  
C-10.2 DID ALARM PANEL RESET PROPERLY  
C-11.0 ALARM PANEL CLEAR  
C-12.0 SYSTEM LEFT IN SERVICE  
C-20.0 COMMENTS: JOCKEY PUMPS ACTIVATES AT 70 PSI. TURNS OFF AT 125 PSI  
TAMPER SWITCHES COME IN AS TROUBLES ON ZONE 17  
BACK FLOW DEVICES TESTED

YES	N/A	NO
X		
	X	
X		
X		
X		

KOREY CAMPBELL  
INSPECTOR SIGNATURE

JULY 16, 2014  
DATE

CUSTOMER SIGNATURE



# CENTRATECH TECHNICAL SERVICES LTD. ANNUAL MAINTENANCE RECORD

Hydrostatic Testing - Breathing Air - Fire Extinguisher Sales, Service, Recharging  
"Your Fire and Safety Specialists"

CUSTOMER: R.C.M.P Detachment  
ADDRESS: K311 Innisfail, Alberta  
4904 - 45th Ave  
CONTACT: Alyssa  
PHONE: (403) 716-4323

JOB TICKET/INVOICE: \_\_\_\_\_  
DATE: July 16, 2014  
TECHNICIAN: Gilbert  
CASH/ACCOUNT: Account/PO Required  
PO# (if required): \_\_\_\_\_

#	EXTINGUISHER LOCATION	EXT. SERIAL #	EXT. MAKE	CO	EXT. TYPE	HP	SP	YR MFG	YR HT	YR 6YR	YRHT CART	COMMENTS
1	Mech Room	30600	Flag		10 ABC		X	93	06	12		Inspection
2	Basement	606006	Flag		10 ABC		X	93	06	12		Inspection
3	By Janitor Room	20861	Flag		5 ABC		X	93	06	12		Inspection
4	Detention Desk	778985	Ansul		10 ABC		X	04		11		Inspection
5	Sally Port	76175	Ansul		10 ABC		X	08		14		6 Year 2014
6	Front Entrance	20863	Flag		5 ABC		X	93	06	12		Inspection
7	Garage	20859	Flag		5 ABC		X	93	06	12		Inspection
8	Exhibit Room	790463	Ansul	X	4 ABC			76	09			Inspection
9	Outside Garage	20871	Flag		5 ABC		X	93	06	12		Inspection
10	Janitor Room	773129	Amerex		5 ABC		X	11				Inspection
11	Server Room	308027	Amerex		2.5 Hal		X	12				Inspection
12												
13												
14												
15												
16												
17												
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21												
22												
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29												
30												

COMMENTS: \_\_\_\_\_



Centratech Technical Services Ltd.  
Bay 1, 7644 - 49th. Avenue  
Red Deer, AB. T4P 0A9  
403-343-1119

TESTING AND INSPECTION REPORT  
Reduced Pressure Principle Backflow Prevention Assembly  
Double Check Valve Assembly and Pressure Vacuum Breaker

Address Location 4904 - 45th ave Innisfail, Alberta		Occupant K311 RCMP		Contact Stan Scott		Phone # 403-716-4323	
Type of Assembly <input type="checkbox"/> RP <input checked="" type="checkbox"/> X DCVA <input type="checkbox"/> PVB		Make of Assembly Ames		Model # 2000 SS		Serial # 2G 10481	
Location of Assembly MECH ROOM - Fire sprinkler feed		Name of Tester Gilbert Dault		Business Name Centratech Technical Services Ltd.		Phone # 403-343-1119	
Testers AWWA Number 13087		Testers Equipment Number 132634		Type of Test Initial X Annual		Line Pressure at Time of Test 62 psi	
Business Address 1, 7644 - 49th. Ave Red Deer, AB.		Postal Code T4P 1M4		Name of Tester Gilbert Dault		Business Name Centratech Technical Services Ltd.	
Test Reduced Pressure Principle Backflow Prevention Assembly		Double Check Valve Assembly		Differential Pressure Relief Valve		Pressure Differential Across First Check Valve No Flow Test	
Check Valve # 2		Shut Off Valve # 2		Check Valve # 1		Air Inlet Valve	
<input type="checkbox"/> Leaked <input checked="" type="checkbox"/> Closed		<input type="checkbox"/> Leaked <input checked="" type="checkbox"/> Closed		<input type="checkbox"/> Leaked <input checked="" type="checkbox"/> Closed		<input type="checkbox"/> Failed <input type="checkbox"/> Leaked <input type="checkbox"/> Closed	
Test Date 16/07/2014		If The Assembly Fails The Initial Test For Any Reason, Complete This Section And Note Repair Below		Differential Pressure Relief Valve		Air Inlet Valve	
Results		Results		Results		Results	
1 <input type="checkbox"/> Cleaned Replaced		20 <input type="checkbox"/> Cleaned Replaced		30 <input type="checkbox"/> Cleaned Replaced		50 <input type="checkbox"/> Cleaned Replaced	
2 <input type="checkbox"/> Disc		21 <input type="checkbox"/> Disc		31 <input type="checkbox"/> Disc		51 <input type="checkbox"/> Disc Upper	
3 <input type="checkbox"/> Spring		22 <input type="checkbox"/> Seat		32 <input type="checkbox"/> Spring		52 <input type="checkbox"/> Disc Lower	
4 <input type="checkbox"/> Guide		23 <input type="checkbox"/> Other		33 <input type="checkbox"/> Guide		53 <input type="checkbox"/> Spring	
5 <input type="checkbox"/> Pin Retainer		Describe		34 <input type="checkbox"/> Pin Retainer		54 <input type="checkbox"/> Diaphragm	
6 <input type="checkbox"/> Hinge Pin				35 <input type="checkbox"/> Hinge Pin		55 <input type="checkbox"/> Large	
7 <input type="checkbox"/> Seat				36 <input type="checkbox"/> Seat		56 <input type="checkbox"/> Upper	
8 <input type="checkbox"/> Diaphragm				37 <input type="checkbox"/> Diaphragm		57 <input type="checkbox"/> Lower	
9 <input type="checkbox"/> Other, Describe				38 <input type="checkbox"/> Other, Describe		58 <input type="checkbox"/> Small	
						59 <input type="checkbox"/> Upper	
						60 <input type="checkbox"/> Lower	
						61 <input type="checkbox"/> Spacer, Lower	
						62 <input type="checkbox"/> Other	
Re-Test Date		Pressure Differential Across First Check Valve No Flow Re-Test		KPA		KPA	
<input type="checkbox"/> Leaked <input type="checkbox"/> Closed		<input type="checkbox"/> Leaked <input type="checkbox"/> Closed		<input type="checkbox"/> Failed to Open		<input type="checkbox"/> Failed to Open	
Tight		Tight		PSI		PSI	
Remarks:							
I certify that I have tested the above assembly.		Signature of Certified Tester		Date: 16/07/2014			



Centrattech Technical Services Ltd.  
Bay 1, 7644 - 49th. Avenue  
Red Deer, AB. T4P 0A9  
403-343-1119

TESTING AND INSPECTION REPORT  
Reduced Pressure Principle Backflow Prevention Assembly  
Double Check Valve Assembly and Pressure Vacuum Breaker

Address Location		4904 - 45th ave Innisfail, Alberta		Occupant	K311 RCMP		Contact	Stan Scott		Phone #	403-716-4323										
Type of Assembly	<input checked="" type="checkbox"/> RP <input checked="" type="checkbox"/> DCVA <input type="checkbox"/> PVB		Make of Assembly	Watts		Model #	007 m1		Serial #	8000		Size	2"		Install Date	1993					
Location of Assembly																					
MECH ROOM - Main water feed																					
Testers AWWA Number		13087		Testers Equipment Number		132634		Name of Tester		Gilbert Dault		Business Name		Centrattech Technical Services Ltd.		Phone #		403-343-1119			
Business Address		1, 7644 - 49th. Ave Red Deer, AB.		Postal Code		T4P 1M4		Type of Test		<input type="checkbox"/> Initial <input checked="" type="checkbox"/> Annual		Line Pressure at Time of Test		62 psi		Pressure Differential Across First Check Valve No Flow Test		Pressure Vacuum Breaker			
Test																					
Reduced Pressure Principle Backflow Prevention Assembly																					
Double Check Valve Assembly																					
Shut Off Valve # 2																					
Check Valve # 2		<input type="checkbox"/> With Flow <input type="checkbox"/> Against Flow		<input type="checkbox"/> Leaked <input checked="" type="checkbox"/> Closed		<input type="checkbox"/> Leaked <input checked="" type="checkbox"/> Closed		Check Valve # 1		<input type="checkbox"/> With Flow <input type="checkbox"/> Against Flow		<input type="checkbox"/> Leaked <input checked="" type="checkbox"/> Closed		<input type="checkbox"/> Failed to Open <input type="checkbox"/> Opened at		Air Inlet Valve		<input type="checkbox"/> Failed <input type="checkbox"/> Leaked <input type="checkbox"/> Closed Tight		Test Results	
Test Date		16/07/2014		If The Assembly Fails The Initial Test For Any Reason, Complete This Section And Note Repair Below																	
Results		1 <input type="checkbox"/> Cleaned Replaced		20 <input type="checkbox"/> Cleaned Replaced		30 <input type="checkbox"/> Cleaned Replaced		50 <input type="checkbox"/> Cleaned Replaced		70 <input type="checkbox"/> Cleaned Replaced		Results									
2 <input type="checkbox"/> Disc		21 <input type="checkbox"/> Disc		31 <input type="checkbox"/> Disc		51 <input type="checkbox"/> Disc Upper		71 <input type="checkbox"/> Vent Disc													
3 <input type="checkbox"/> Spring		22 <input type="checkbox"/> Seat		32 <input type="checkbox"/> Spring		52 <input type="checkbox"/> Disc Lower		72 <input type="checkbox"/> Vent Spring													
4 <input type="checkbox"/> Guide		23 <input type="checkbox"/> Other Describe		33 <input type="checkbox"/> Guide		53 <input type="checkbox"/> Spring		73 <input type="checkbox"/> Poppet													
5 <input type="checkbox"/> Pin Retainer				34 <input type="checkbox"/> Pin Retainer		54 <input type="checkbox"/> Diaphragm		74 <input type="checkbox"/> Retainer													
6 <input type="checkbox"/> Hinge Pin				35 <input type="checkbox"/> Hinge Pin		55 <input type="checkbox"/> Large		75 <input type="checkbox"/> Spring													
7 <input type="checkbox"/> Seat				36 <input type="checkbox"/> Seat		56 <input type="checkbox"/> Upper		76 <input type="checkbox"/> Disc													
8 <input type="checkbox"/> Diaphragm				37 <input type="checkbox"/> Diaphragm		57 <input type="checkbox"/> Lower		77 <input type="checkbox"/> Guide													
9 <input type="checkbox"/> Other, Describe				38 <input type="checkbox"/> Other, Describe		58 <input type="checkbox"/> Small		78 <input type="checkbox"/> Other, Describe													
						59 <input type="checkbox"/> Upper															
						60 <input type="checkbox"/> Lower															
						61 <input type="checkbox"/> Spacer, Lower															
						62 <input type="checkbox"/> Other															
Re-Test Date		<input type="checkbox"/> Leaked <input type="checkbox"/> Closed		<input type="checkbox"/> Leaked <input type="checkbox"/> Closed		<input type="checkbox"/> Leaked <input type="checkbox"/> Closed		<input type="checkbox"/> Leaked <input type="checkbox"/> Closed		<input type="checkbox"/> Failed to Open <input type="checkbox"/> Opened at		<input type="checkbox"/> Failed to Open <input type="checkbox"/> Opened		<input type="checkbox"/> Leaked <input type="checkbox"/> Closed		<input type="checkbox"/> Failed					
		<input type="checkbox"/> Tight		<input type="checkbox"/> Tight		<input type="checkbox"/> Tight		<input type="checkbox"/> Tight						<input type="checkbox"/> Tight							
Remarks: Shut off valves one and two are very stiff and hard to close.																					
I certify that I have tested the above assembly.																					
Signature of Certified Tester																					
Date: 16/07/2014																					



Centratech Technical Services Ltd.  
Bay 1, 7644 - 49th, Avenue  
Red Deer, AB. T4P 0A9  
403-343-1119

TESTING AND INSPECTION REPORT  
Reduced Pressure Principle Backflow Prevention Assembly  
Double Check Valve Assembly and Pressure Vacuum Breaker

Address Location		4904 - 45th ave Innisfail, Alberta		Occupant	K311 RCMP		Contact	Stan Scott		Phone #	403-716-4323						
Type of Assembly	<input type="checkbox"/> RP <input checked="" type="checkbox"/> X DCVA	Make of Assembly	Watts	Model #	007m2 QT		Serial #	104197		Size	1 1/2"						
Location of Assembly		MECH ROOM - Irrigation feed															
Testers AWWA Number		13087		Testers Equipment Number		132634		Name of Tester		Gilbert Dault		Business Name	Centratech Technical Services Ltd.		Phone #	403-343-1119	
Business Address		1, 7644 - 49th, Ave Red Deer, AB.		Postal Code		T4P 1M4		Type of Test		<input type="checkbox"/> Initial <input checked="" type="checkbox"/> X Annual		Line Pressure at Time of Test		62 psi		Pressure Differential Across First Check Valve No Flow Test	
Test		Reduced Pressure Principle Backflow Prevention Assembly										Pressure Vacuum Breaker		Test Results			
Test Date		16/07/2014		Check Valve # 2		Shut Off Valve # 2		Check Valve # 1		Differential Pressure Relief Valve		Air Inlet Valve		Check Valve		Test Results	
<input type="checkbox"/> With Flow <input type="checkbox"/> Leaked <input checked="" type="checkbox"/> Closed		<input type="checkbox"/> Against Flow <input type="checkbox"/> Leaked <input checked="" type="checkbox"/> Closed		<input type="checkbox"/> With Flow <input type="checkbox"/> Leaked <input checked="" type="checkbox"/> Closed		<input type="checkbox"/> Against Flow <input type="checkbox"/> Leaked <input checked="" type="checkbox"/> Closed		<input type="checkbox"/> With Flow <input type="checkbox"/> Leaked <input checked="" type="checkbox"/> Closed		<input type="checkbox"/> Against Flow <input type="checkbox"/> Leaked <input checked="" type="checkbox"/> Closed		<input type="checkbox"/> Failed <input type="checkbox"/> Opened		<input type="checkbox"/> Failed <input type="checkbox"/> Opened		<input type="checkbox"/> Failed <input type="checkbox"/> Opened	
Results		If The Assembly Fails The Initial Test For Any Reason, Complete This Section And Note Repair Below										Results					
1 <input type="checkbox"/> Cleaned		20 <input type="checkbox"/> Cleaned		30 <input type="checkbox"/> Cleaned		50 <input type="checkbox"/> Cleaned		70 <input type="checkbox"/> Cleaned		Results							
2 <input type="checkbox"/> Replaced		21 <input type="checkbox"/> Replaced		31 <input type="checkbox"/> Replaced		51 <input type="checkbox"/> Replaced		71 <input type="checkbox"/> Replaced									
3 <input type="checkbox"/> Disc		22 <input type="checkbox"/> Disc		32 <input type="checkbox"/> Disc		52 <input type="checkbox"/> Disc		72 <input type="checkbox"/> Disc									
4 <input type="checkbox"/> Spring		23 <input type="checkbox"/> Spring		33 <input type="checkbox"/> Spring		53 <input type="checkbox"/> Spring		73 <input type="checkbox"/> Spring									
5 <input type="checkbox"/> Guide		23 <input type="checkbox"/> Guide		33 <input type="checkbox"/> Guide		53 <input type="checkbox"/> Guide		73 <input type="checkbox"/> Guide									
6 <input type="checkbox"/> Pin Retainer		Describe		34 <input type="checkbox"/> Pin Retainer		54 <input type="checkbox"/> Diaphragm		74 <input type="checkbox"/> Retainer									
7 <input type="checkbox"/> Hinge Pin				35 <input type="checkbox"/> Hinge Pin		55 <input type="checkbox"/> Large		75 <input type="checkbox"/> Spring									
8 <input type="checkbox"/> Seat				36 <input type="checkbox"/> Seat		56 <input type="checkbox"/> Upper		76 <input type="checkbox"/> Disc									
9 <input type="checkbox"/> Diaphragm				37 <input type="checkbox"/> Diaphragm		57 <input type="checkbox"/> Lower		77 <input type="checkbox"/> Guide									
Other, Describe				38 <input type="checkbox"/> Other, Describe		58 <input type="checkbox"/> Small		78 <input type="checkbox"/> Other, Describe									
58 <input type="checkbox"/> Upper						59 <input type="checkbox"/> Upper											
59 <input type="checkbox"/> Lower						60 <input type="checkbox"/> Lower											
60 <input type="checkbox"/> Spacer, Lower						61 <input type="checkbox"/> Other											
61 <input type="checkbox"/> Other																	
Re-Test Date		Pressure Differential Across First Check Valve No Flow Re-Test										KPA		KPA		Re-Test Results	
<input type="checkbox"/> Leaked <input type="checkbox"/> Closed		<input type="checkbox"/> Leaked <input type="checkbox"/> Closed		<input type="checkbox"/> Leaked <input type="checkbox"/> Closed		<input type="checkbox"/> Leaked <input type="checkbox"/> Closed		<input type="checkbox"/> Leaked <input type="checkbox"/> Closed		<input type="checkbox"/> Failed to Open <input type="checkbox"/> Opened at		<input type="checkbox"/> Failed to Open <input type="checkbox"/> Opened		<input type="checkbox"/> Leaked <input type="checkbox"/> Closed		<input type="checkbox"/> Passed <input type="checkbox"/> Failed	
Tight		Tight		Tight		Tight		Tight		PSI		PSI		Tight		Tight	
Remarks: Shut off valves one and two are very stiff and hard to close.																	
I certify that I have tested the above assembly.																	
Signature of Certified Tester																	
Date: 16/07/2014																	



Centratech Technical Services Ltd.  
Bay 1, 7644 - 49th. Avenue  
Red Deer, AB. T4P 0A9  
403-343-1119

TESTING AND INSPECTION REPORT  
Reduced Pressure Principle Backflow Prevention Assembly  
Double Check Valve Assembly and Pressure Vacuum Breaker

Address location 4904 - 45th Ave Innisfail, Alberta		Occupant K311 RCMP		Contact Stan Scott		Phone number 403-716-4323	
Type of Assembly X RP DCVA <input type="checkbox"/> PVB		Make of Assembly Watts		Model # 0009 m3 QT		Serial # 269100	
Location of Assembly Mech room - boiler feed		Name of Tester Gilbert Dault		Business Name Centratech Technical Services Ltd.		Phone # 403-343-1119	
Testers AWWA Number 13087		Testers Equipment Number 132634		Postal Code T4P 1M4		Type of Test Initial X Annual	
Business Address 1, 7644 - 49th. Ave Red Deer, AB.		Initial X Annual		Line Pressure at Time of Test 63 psi		Pressure Differential Across First Check Valve No Flow Test 6.4 psi	
Test		Reduced Pressure Principle Backflow Prevention Assembly		Pressure Vacuum Breaker		Test Results	
Check Valve # 2		Shut Off Valve # 2		Check Valve # 1		Differential Pressure Relief Valve	
With Flow <input type="checkbox"/> Leaked <input type="checkbox"/> Against Flow <input type="checkbox"/> Leaked <input type="checkbox"/> X Closed <input checked="" type="checkbox"/> X Closed		With Flow <input type="checkbox"/> Leaked <input type="checkbox"/> Against Flow <input type="checkbox"/> Leaked <input type="checkbox"/> X Closed <input checked="" type="checkbox"/> X Closed		Failed to Open <input type="checkbox"/> X Opened at 2.4 psi		Air Inlet Valve <input type="checkbox"/> Failed <input type="checkbox"/> Leaked <input type="checkbox"/> X Passed <input checked="" type="checkbox"/> Closed Tight	
Test Date 16-Jul-14		If The Assembly Fails The Initial Test For Any Reason, Complete This Section And Note Repair Below		Results		Results	
Results		1 <input type="checkbox"/> Cleaned Replaced		20 <input type="checkbox"/> Cleaned Replaced		30 <input type="checkbox"/> Cleaned Replaced	
2 <input type="checkbox"/> Disc		21 <input type="checkbox"/> Disc		31 <input type="checkbox"/> Disc		51 <input type="checkbox"/> Disc Upper	
3 <input type="checkbox"/> Spring		22 <input type="checkbox"/> Seat		32 <input type="checkbox"/> Spring		52 <input type="checkbox"/> Disc Lower	
4 <input type="checkbox"/> Guide		23 <input type="checkbox"/> Other Describe		33 <input type="checkbox"/> Guide		53 <input type="checkbox"/> Spring	
5 <input type="checkbox"/> Pin Retainer				34 <input type="checkbox"/> Pin Retainer		54 <input type="checkbox"/> Diaphragm	
6 <input type="checkbox"/> Hinge Pin				35 <input type="checkbox"/> Hinge Pin		55 <input type="checkbox"/> Large	
7 <input type="checkbox"/> Seat				36 <input type="checkbox"/> Seat		56 <input type="checkbox"/> Upper	
8 <input type="checkbox"/> Diaphragm				37 <input type="checkbox"/> Diaphragm		57 <input type="checkbox"/> Lower	
9 <input type="checkbox"/> Other, Describe				38 <input type="checkbox"/> Other, Describe		58 <input type="checkbox"/> Diaphragm Small	
						59 <input type="checkbox"/> Upper	
						60 <input type="checkbox"/> Lower	
						61 <input type="checkbox"/> Spacer, Lower	
						62 <input type="checkbox"/> Other	
Re-Test Date		Pressure Differential Across First Check Valve No Flow Re-Test		KPA		KPA	
<input type="checkbox"/> Leaked <input type="checkbox"/> Closed		<input type="checkbox"/> Leaked <input type="checkbox"/> Closed		<input type="checkbox"/> Failed to Open		<input type="checkbox"/> Opened at	
Tight		Tight		PSI		PSI	
Re-Test Results		Re-Test Results		Re-Test Results		Re-Test Results	
<input type="checkbox"/> Passed <input type="checkbox"/> Failed		<input type="checkbox"/> Passed <input type="checkbox"/> Failed		<input type="checkbox"/> Passed <input type="checkbox"/> Failed		<input type="checkbox"/> Passed <input type="checkbox"/> Failed	
Remarks:		I certify that I have tested the above assembly.		Signature of Certified Tester		16-Jul-14	



# Banff Fire and Safety

## Fire Alarm Inspection Report

**Customer:** ROYAL CANADIAN MOUNTED POLICE  
**Location:** KANANASKIS DETACHMENT  
**Address:** #2 Boundary Road, Kananaskis, AB  
**Date:** July 17, 2014  
**Contact:** SNC Lavalin - Stan (403) 888-3605  
**Contact:** On-site -  
**Inspected By:** Dennis Olsen/Paul Marinelli

**Make of Panel:** Edwards IO500  
**Make of Smoke Detectors:** SIGA PS & IPHS  
**Make of Heat Detectors:** SIGA HRS  
**Make of Alarm Pull Box:** SIGA 270  
**Make of Alarm Signal:** Edwards Horn/strobe Red

### Bell Zones:

**Z1** ~ Main Floor  
**Z2** ~ Basement  
**Z3** ~ Main Floor EOL  
**Z4** ~ Basement EOL

### Zones: Addressable

**Z1** ~ Basement  
**Z2** ~ Crawl Space  
**Z3** ~ Stairwell  
**Z4** ~ Main Office Area  
**Z5** ~ Cell Area  
**Z6** ~ East Cell  
**Z7** ~ West Cell

EOL:	Location:	Device:	Address:	Operation:	Comments:
<b>Main Floor</b>					
	Front Entry	Pull	127	OK	
	Entry	Smoke	13	OK	
	Main Area Office	Smoke	19	OK	
	Office North West	Smoke	12	OK	
	Office North East	Smoke	20	OK	
	Main Office	Horn/strobe	1	OK	
	Lunch Room	Smoke	11	OK	
	Filing Room	Smoke	9	OK	
	Office Rear Stairs	Smoke	6	OK	
	Office Area	Pull	130	OK	
	Equipment Room	Heat	30	OK	

	Equipment Room	Pull	133	OK	
	Stairwell	Smoke	7	OK	
	Women's Toilet	Heat	26	OK	
	Toilet Hall	Smoke	18	OK	
	Men's Toilet	Heat	22	OK	
	Cell Hall North	Smoke	14	OK	
	Janitor Room	Heat	21	OK	
	Exhibit Room West	Heat	25	OK	
	Exhibit Room East	Heat	23	OK	By exhibit room
	Cell Area	Horn/strobe	1	OK	
	Cell Shower	Heat	27	OK	
	Cell Hall South	Smoke	17	OK	
	Cell Block Office	Pull	126	OK	
	Cell Block Office	Smoke	10	OK	
	Garage	Heat	5	OK	
	East Cell	Smoke	4	OK	
	West Cell	Smoke	32	OK	
	Crawl Space East	Heat	29	OK	
<b>Basement</b>					
	Basement	Pull	128	OK	
	Basement Area	Horn/strobe	2	OK	
	Basement Main Area	Heat	24	OK	
	Basement Spare Room NE	Heat	28	OK	
	Basement Furnace Room	Fixed Heat	129	OK	
	Basement Electrical Room	Smoke	15	OK	
	Basement Generator Room	Fixed Heat	132	OK	
	Ammunition Room	Smoke	16	OK	Basement key code
	Crawl Space West	Heat	8	OK	
	Furnace Shutdown	Relay	131	OK	

<b>Annunciator:</b>	Location:	N/A
<b>Main Panel Power Supply Test:</b>	Circuit Breaker Location:	Basement Elec Rm - CCT #31
	Circuit Breaker Model:	Square 'D'
	Protected:	YES
	Locked and Red:	YES
<b>Main Panel Batteries Test:</b>	Damage?	NO

Protected?	YES
Ventilated?	YES
Fused Charging Tested at:	26.6 volts
Load Cycle Tested to:	26.1 volts
Battery Date	Jul 13
Battery Size	(2) 12volt 7amp

<b>Control Panel:</b>	Functioning:	YES
	Lamps/Indicators:	YES
	Supervisory:	YES

<b>Security Monitoring:</b>	System Monitored:	YES
	Security Company	Reliance Protection Security
	Contact Number	1-800-653-9111
	Account Number	#G8D1485
	Password	(Require password to put on test)

**Comments:**

1. Device in cell telephone room is labelled "Cell Shower Room", it should be changed.
2. The emergency light packs were tested. Please see individual report.
3. As a building owner or property manager, we recommend that you conduct a monthly fire alarm test as per CAN/ULC – 5536 – 04 4.2.1. "While on the emergency power supply, inspect and test the fire alarm system monthly to confirm it is operating properly." Should you require assistance or training to perform this task, please call our office for further information.
4. There are dampers located in Locker Room (2), Furnace Room (3), Generator Room (4), Server Room (4), Carpet Room (7) and Gym (3). All OK.

The fire alarm system, located at **R.C.M.P. ~ KANANASKIS**, has been tested in accordance with CAN/ULC-S536-04 on **July 17, 2014**. The above report clearly defines items that are satisfactory as well as identifying deficiencies. All deficiencies must be corrected for the system to be certified.

  
\_\_\_\_\_  
Signature of Inspector: Dennis Olsen/Paul Marinelli  
17 Jul 14 PKX4413/996796

# Banff Fire and Safety

## Deficiencies Exist

### Fire Extinguisher & Emergency Lighting Inspection Report

**Customer:** ROYAL CANADIAN MOUNTED POLICE  
**Location:** KANANASKIS DETACHMENT  
**Contact:** SNC Lavalin - Stan (403) 888-3605  
**Contact:** On-site - Tim Chamarney/Constable Hildebrandt 403-591-7708 Jenny  
**Month:** July 17, 2014

#### Fire Extinguishers:

Location	Serial #	Type	D.O.M.	History	2013	2014	2015	Comments
Office Area	564416	10 ABC	2013		New	A		
Guard Room	564527	10 ABC	2013		New	A		
By Bsmnt. Furnace Room	564987	10 ABC	2013		New	A		
Evidence Room	738671	10 ABC	1987	6yr'93, HT'04 6yr'11	X	A		
By Generator Room	129423	10 ABC	2013		New	A		
Lunch Room	996530	5 ABC	2010			A		
Vehicle #2A59	912858	5 ABC	2007	RC'11	A	A		
Truck A58	32187	5 ABC	2002	6yr'09	X	X		Condemned

#### Staff Housing:

*Separate Invoice*

Residence #9	23895033	5 ABC	2014			New		Aug'14
Residence #6	412466	5 ABC	1991	6yr'01, HT'04	X	6yr		


#### Emergency Lights:

Location	Device	MT	2013	2014	2015	Comments
Office Area	12volt 36watt	2	OK	OK		
Office Area	Exit Sign		OK	OK		
Basement Electrical Room	12volt 36watt	2	OK	OK		Replaced batteries - Aug'14
Basement Gym	Exit Sign		OK	OK		
Cell Block Office	12volt 100watt	2	OK	OK		Replaced batteries - Aug'14

#### Comments:

1. (1) fire extinguisher was condemned and requires replacement. See report for location.
2. Supplied and installed (4) batteries as per Stan.
3. Supplied and installed (1) new fire extinguisher located in Residence #9 as per Stan.

## Inspection and Testing of Fire Alarm Systems

 <b>Centratech Technical Services Ltd</b> # 1 – 7644 – 49 <sup>th</sup> Ave Red Deer, Alberta	Date of Service: July 17, 2014		Time: 1:00pm
	Annual Inspection <b>YES</b>		Last Service Date 2013
	Single Stage <b>YES</b>	Two Stage	Direct Connection
	Manufacturer: 4008 simplex		Model: simplex
Building Name: K064 R.C.M.P Detachment		Contact Person: Stan Scott	Phone: Fax:
Address: 4915 – 49 <sup>th</sup> Ave		Owner:	Phone: Fax:
City: Killam, AB	Postal Code: T0B 2L0	Fire Signal Receiving Centre: 1-800-653-9111	Phone: Fax:

“Yes”- Acceptable    “No” - Unacceptable    (Explain No answers in comments)

Yes	No	Summary
<input checked="" type="checkbox"/>	<input type="checkbox"/>	The entire fire alarm system has been inspected and tested in accordance with CAN/ULC S536
<input checked="" type="checkbox"/>	<input type="checkbox"/>	The fire alarm system documentation is on site and includes a description of the system.
<input checked="" type="checkbox"/>	<input type="checkbox"/>	The fire alarm system is fully functional.
<input type="checkbox"/>	<input checked="" type="checkbox"/>	The fire alarm system has deficiencies noted.
<input checked="" type="checkbox"/>	<input type="checkbox"/>	A copy of this report is given to the Owner or the owner's representative.

	Technicians After-test Checklist
NA	Reconnect time limit cutouts?
YES	Reconnect ancillary functions?
NA	Reconnect ancillary functions (off site connections)?
YES	Reconnect signal power?
NA	Advise fire department the testing is completed?
YES	Ensure that the alarm system is functional?

### Comments

System in good working order.

I state that the information on this form is correct at the time and place of my inspection, and that all equipment was tested in conformance with applicable codes and the Manufacturers requirements and at this time was left in operational condition upon completion of this inspection except as noted in comments.

Korey Campbell CFA 11-996672	July 17, 2014	1:00 pm	
Technician	Date	Time	Owner or Authorized Agent

# Inspection and Testing of Fire Alarm Systems

**Date July 17, 2014**

**Building Name: K064 Killam R.C.M.P**

**"Yes" - Tested correctly "No" - Did not test correctly (Explain NO answers in comments) "NA" Not applicable**

<b>2.1 Control Unit or Transponder Tests</b>	<b>yes</b>	Termination points from wiring to field devices secure
<b>yes</b> Power on visual indicator operates.	<b>na</b>	<b>2.6 Annunciator &amp; Remote Trouble Test &amp; Inspection</b>
<b>yes</b> Common visual trouble signal operates.	<b>na</b>	Power on indicator operates.
<b>yes</b> Common audible trouble signal operates.	<b>na</b>	Individual alarm and supervisory input zone clearly
<b>yes</b> Trouble signal silence switch operates.	<b>na</b>	Indicated and separately designated?
<b>yes</b> Main Power supply failure trouble signal operates.	<b>na</b>	Individual alarm and supervisory zone labels identified.
<b>yes</b> Ground fault tested on positive and negative trouble signal	<b>na</b>	Common trouble signal operates.
<b>na</b> Alert signal operation operates.	<b>na</b>	Visual indicator test - Lamp test operates.
<b>yes</b> Alarm signal operation operates.	<b>na</b>	Input wiring from control unit/transponder is supervised.
<b>yes</b> Automatic transfer from alert to alarm signal operates.	<b>na</b>	Alarm signal silence visual indicator operates.
<b>na</b> Manual transfer from alert signal to alarm signal operates.	<b>na</b>	Switches for ancillary function operate as per design.
<b>na</b> Auto transfer from alert to alarm signal cancel operates	<b>na</b>	Other ancillary function visual indicators operate.
<b>yes</b> Alarm signal silence inhibit function operates?	<b>na</b>	Manual activation of alarm signal and indication operates.
<b>yes</b> Alarm signal manual silence operates.	<b>na</b>	Displays are visible in installed location operates?
<b>yes</b> Alarm signal silence visual indication operates.	<b>na</b>	Operates on emergency power?
<b>yes</b> Alarm signal when silenced automatically reinitiates on subsequent alarm?	<b>yes</b>	<b>2.4 Power Supply Inspection</b>
<b>na</b> Alarm signal silence automatic cut-out timer.	<b>yes</b>	Fused with mfgs marked rating of the system?
<b>yes</b> Audible visual and alert and alarm signals programmed and operate as per design & specification. (app C)	<b>yes</b>	Adequate to meet the requirements of the system?
<b>yes</b> Input circuit alarm and supervisory operation including audible and visual indication operates.	<b>na</b>	<b>2.8 Remote Trouble Signal Unit Test and Inspection</b>
<b>yes</b> Input circuit supervision fault causes a trouble indication.	<b>na</b>	Input wiring form control/transponder is supervised.
<b>yes</b> Output circuit alarm indicators operate.	<b>na</b>	Visual trouble signal operates.
<b>yes</b> Output circuit supervision fault causes a trouble indication.	<b>na</b>	Audible trouble signal operates.
<b>yes</b> Visual indicator test (lamp test).	<b>na</b>	Audible trouble signal silence operates.
<b>yes</b> Coded signal sequence operate not less than the required number of times and the correct alarm signal thereafter.	<b>yes</b>	<b>2.5 Emergency Power Supply Test and Inspection</b>
<b>yes</b> Coded signal sequences are not interrupted by subsequent alarms?	<b>yes</b>	Correct battery type as recommend by manufacturer?
<b>yes</b> Ancillary circuit by-pass will result in a trouble signal.	<b>yes</b>	Correct rating as determined by battery calculations based on full system load?
<b>yes</b> Input circuit to output circuit operation including ancillary device circuits, for correct program operation as per design & spec. (App "C")	<b>yes</b>	Battery voltage main power on? <b>27.1VDC</b>
<b>yes</b> Fire alarm Reset operates.	<b>yes</b>	Battery voltage and current with main power supply "off" and fire alarm in supervisory condition?
<b>yes</b> Main power to emergency power supply transfer operates.	<b>yes</b>	Voltage <b>25.5VDC</b> Current <b>300MA</b>
<b>yes</b> Status change confirmation (smoke detectors) verified	<b>yes</b>	Battery voltage and current with main power supply "off" and fire alarm in full load alarm condition?
<b>yes</b> Receipt of alarm transmission to signal receiving center?	<b>yes</b>	Voltage <b>25VDC</b> Current <b>300MA</b>
<b>na</b> Receipt of supervisory trans to signal receiving center?	<b>yes</b>	Charging current is <b>600MA</b>
<b>yes</b> Receipt of trouble transmission to signal receiving center?	<b>yes</b>	Inspected for physical damage?
<b>yes</b> Operation of the fire signal receiving center disconnect results in a specific trouble indication at control unit?	<b>na</b>	Terminal cleaned and lubricated?
<b>2.3 Control Unit or Transponder Inspection</b>	<b>yes</b>	Terminals clamped tightly.
<b>yes</b> Input circuit designations, correctly identified in relation to connected field devices	<b>na</b>	Correct Electrolyte level?
<b>yes</b> Output circuit designations correctly identified in relation to connected field devices.	<b>na</b>	Specific gravity within mfg specifications?
<b>yes</b> Correct designations-common control functions / indicators	<b>no</b>	Electrolyte leaks.
<b>yes</b> Plug-in components and modules securely in place?	<b>yes</b>	Adequately ventilated?
<b>yes</b> Plug-in cables securely in place	<b>yes</b>	Battery mfg's date code or in-service date
<b>na</b> Record date, revision and version of Firmware & software	<b>yes</b>	Disconnection causes trouble signal.
Date:      Rev:      Ver:		Indicate type of Battery Test Performed?
<b>yes</b> Clean and free of dust and dirt?		(1) supervisory load for 24h followed by full load operation.
<b>yes</b> Fuses in accordance with MFGs specification?	<b>yes</b>	(2) silent test by using load resister method -App F1
Control Unit or transponder lock functional?		(3) Silent accelerated test - App F2
		(4) A battery capacity meter test App F3
		(5) In lieu of battery tests, Replace with new set having current date code, as per mfg
	<b>na</b>	Record calculated battery capacity App F4      A h
	<b>na</b>	Record battery terminal voltage after tests      V dc
	<b>na</b>	Battery voltage not less than 85% of its rating after tests.
	<b>na</b>	Generator provides power to the AC circuit for FA syst.

# **Inspection and Testing of Fire Alarm Systems**

Date July 17, 2014

Building Name: K064 Killam R.C.M.P

**"Yes" - Tested correctly    "No" - Did not test correctly (Explain NO answers in comments)    "NA" Not applicable**

<b>2.5 Emergency Power Supply Test and Inspection</b>		Annunciation of the fault and operation outside the shorted section between each pair of :
<u>na</u>	Trouble condition at the em gen shall result in an audible common trouble signal and a visual indication at the required annunciator?	<u>na</u> (i) Control unit to control unit
		<u>na</u> (ii) Control unit to transponder
		<u>na</u> (iii) Transponder to transponder
<b>2.7 Annunciator or Sequential Displays</b>		<b>2.2 Voice Communication Inspection/Tests</b>
<u>na</u>	Power on indicator operates.	<u>na</u> Power "ON" operates?
<u>na</u>	Individual alarm, supervisory zone indication operates.	<u>na</u> Common visual trouble signal operates.
<u>na</u>	( Exception: operation of each individual alarm and supervisory zone indication, or lights the identical indicators at the other annunciators and sequential display) Specify method of confirmation	<u>na</u> Common audible trouble signal operates.
		<u>na</u> Trouble signal silence switch operates.
		<u>na</u> All call voice paging including visual indicator operates?
		Output circuits for selective voice paging including visual
<u>na</u>	Minimum of 1 alarm zone and one supervisory zone tested per annunciator or sequential display to confirm operation. Individual alarm and supervisory zone labels identified.	indication operates.
<u>na</u>	Common trouble signal operates.	<u>na</u> Output circuits for selective voice paging trouble operation including visual indication operates.
<u>na</u>	Visual indicator test (lamp test) operates.	<u>na</u> Microphone including press to talk switch operates.
<u>na</u>	Input wiring form control unit/transponder supervised	<u>na</u> Operation of voice paging does interfere with initial inhibit time of alert and alarm signal?
<u>na</u>	Alarm signal silence visual indicator operates.	<u>na</u> All call voice paging operates on emergency power?
<u>na</u>	Switches for ancillary function operate as per design.	<u>na</u> Upon failure of one amplifier, system automatically transfers to backup amplifier.
<u>na</u>	Other ancillary functions visual indicators operate.	<u>na</u> Circuits for emergency telephone call in operation including audible and visual indication operates
<u>na</u>	Manual activation of alarm signal and indication operate.	<u>na</u> Circuits for emergency telephone for operation, including two way voice communication operates.
<u>na</u>	Displays are visible in installed location.	<u>na</u> Circuits for emergency telephones trouble operation including visual indication operates.
	<b>2.9 Printer Testing</b>	<u>na</u> Emergency telephone verbal communication operates.
<u>na</u>	Operation as per design and specification?	<u>na</u> Emergency telephone operable or in-use tone at handset.
<u>na</u>	Zone of each alarm initiating device is correctly printed.	
<u>na</u>	Rated voltage is present.	
	<b>2.10 Data Communication Link Test (DCL)</b>	
<u>na</u>	Confirm that a trouble signal is receive at the control unit or transponder under an open loop fault for each DCL	<b>2.11 Ancillary Device Circuit Test</b>
<u>na</u>	Where fault isolation modules are installed in DCL serving field devices, wiring shall be shorted on the isolated side, annunciation of the fault confirmed, and then a field device on the source side shall be operated, and activation confirmed at the control unit or transponder.	<u>na</u> Circuit confirmed
<u>na</u>	Where a fault isolation in DCL is provided between control units/transponders and between	<u>na</u> Circuit confirmed
<u>na</u>	Transponders, introduce a short circuit fault and confirm Continued.....	<u>na</u> Circuit confirmed
		<u>na</u> Circuit confirmed

## **Additional Comments:**

**Tested all devices on battery back up**

# Inspection and Testing of Fire Alarm Systems Individual Device Record

Date July 17, 2014	Building Name: K064 Killam R.C.M.P	
--------------------	------------------------------------	--

- |  |                                      |
|--|--------------------------------------|
| A. Correctly installed.                            | D. Annunciator indication confirmed. |
| B. Requires Service, Repairs, missing, or cleaning | E. Zone circuit number or address    |
| C. Alarm operation confirmed                       |                                      |

“Y” - Acceptable “N” – Unacceptable (Explain NO answers in comments) “NA” Not applicable

Device	Location	A	B	C	D	E	Remarks
M	Main entrance	Y	NA	Y	Y	Y	
S	Exit by panel	Y	NA	Y	Y	Y	
S	Overnight storage	Y	NA	Y	Y	Y	
S	CPL office	Y	NA	Y	Y	Y	
S	West general office	Y	NA	Y	Y	Y	
S	Cell booking area	Y	NA	Y	Y	Y	
M	Cell booking area	Y	NA	Y	Y	Y	
S	Cell # 2	Y	NA	Y	Y	Y	
S	Cell # 1	Y	NA	Y	Y	Y	
RHT	1 <sup>st</sup> floor men's room	Y	NA	Y	Y	Y	
S	Interview room	Y	NA	Y	Y	Y	
S	General office hall	Y	NA	Y	Y	Y	
S	East general office	Y	NA	Y	Y	Y	
S	NCO office	Y	NA	Y	Y	Y	
S	Front vestibule	Y	NA	Y	Y	Y	
M	Front vestibule	Y	NA	Y	Y	Y	
S	Top of stairs	Y	NA	Y	Y	Y	
S	2 <sup>nd</sup> floor S/E office	Y	NA	Y	Y	Y	
S	2 <sup>nd</sup> floor N/W office	Y	NA	Y	Y	Y	
S	2 <sup>nd</sup> floor N/E office	Y	NA	Y	Y	Y	
M	2 <sup>nd</sup> floor hall	Y	NA	Y	Y	Y	
RHT	2 <sup>nd</sup> floor washroom	Y	NA	Y	Y	Y	
S	Kitchen	Y	NA	Y	Y	Y	
M	Rear exit	Y	NA	Y	Y	Y	
RHT	Basement N/W	Y	NA	Y	Y	Y	
RHT	Basement S/E	Y	NA	Y	Y	Y	
RHT	Basement S/W	Y	NA	Y	Y	Y	
RHT	Boiler room	Y	NA	Y	Y	Y	
DS	Boiler room	Y	NA	Y	Y	Y	

M. Manual Pull station	DS Duct smoke detector	B Bell	AD Ancillary device
HT Heat detector, non restorable	SFD Supporting field device - monitor	H Horn	ET Emergency Telephone
RHT Heat detector, Restorable	FS Sprinkler flow switch	V Visual signal appliance	EOL End of line resistor
S Smoke detector	SS Sprinkler supervisory device	SP Cone type speaker	Other supervisory devices
RI Remote indicator unit	EM Fault isolation module	HSP Horn type speaker	Other type of detector
PS Pressure switch	BS Bell & Strobe		



## Inspection and Testing of Fire Alarm Systems

Date July 17, 2014	Building Name: K064 Killam R.C.M.P	
--------------------	------------------------------------	--

- |  |                                      |
|--|--------------------------------------|
| A. Correctly installed.                            | D. Annunciator indication confirmed. |
| B. Requires Service, Repairs, missing, or cleaning | E. Zone circuit number or address    |
| C. Alarm operation confirmed                       |                                      |

**“Y” - Acceptable “N” – Unacceptable (Explain NO answers in comments) “NA” Not applicable**

[illegible]

M.	Manual Pull station	DS	Duct smoke detector	B	Bell	AD	Ancillary device
HT	Heat detector, non restorable	SFD	Supporting field device - monitor	H	Horn	ET	Emergency Telephone
RHT	Heat detector, Restorable	FS	Sprinkler flow switch	V	Visual signal appliance	EOL	End of line resistor
S	Smoke detector	SS	Sprinkler supervisory device	SP	Cone type speaker		Other supervisory devices
RI	Remote indicator unit	EM	Fault isolation module	HSP	Horn type speaker		Other type of detector
PS	Pressure switch	BS	Bell & Strobe				

## Inspection and Testing of Fire Alarm Systems Signal Devices Record

**Date July 17, 2014**

**Building Name: K064 Killam R.C.M.P**

- A. Correctly installed.  
B. Requires Service, Repairs, missing, or cleaning  
C. Alarm operation confirmed

**“Y” - Acceptable “N” – Unacceptable (Explain NO answers in comments) “NA” Not applicable**

[illegible]

M.	Manual Pull station	DS	Duct smoke detector	B	Bell	AD	Ancillary device
HT	Heat detector, non restorable	SFD	Supporting field device - monitor	H	Horn	ET	Emergency Telephone
RHT	Heat detector, Restorable	FS	Sprinkler flow switch	V	Visual signal appliance	EOL	End of line resistor
S	Smoke detector	SS	Sprinkler supervisory device	SP	Cone type speaker		Other supervisory devices
RI	Remote indicator unit	EM	Fault isolation module	HSP	Horn type speaker		Other type of detector
PS	Pressure switch	BS	Bell & Strobe				



# CENTRATECH TECHNICAL SERVICES LTD.

## ANNUAL MAINTENANCE RECORD

Hydrostatic Testing - Breathing Air - Fire Extinguisher Sales, Service, Recharging  
"Your Fire and Safety Specialists"

CUSTOMER: K064 Killam R.C.M.P

JOB TICKET/INVOICE: \_\_\_\_\_

ADDRESS: 4915 - 49th Ave

DATE: July 17, 2014

Killam, Alberta

TECHNICIAN: Korey

CONTACT: Alyssa

CASH/ACCOUNT: Account/PO Required

PHONE: (403) 716-4323

PO# (if required): \_\_\_\_\_

#	EXTINGUISHER LOCATION	EXT. SERIAL #	EXT. MAKE	CO	EXT. TYPE	HP	SP	YR MFG	YR HT	YR 6YR	YRHT CART	COMMENTS
1	Back Door	23981551	Amerex		5 ABC		X	14				New 2014
2	Basement	98831	Amerex		10 ABC		X	04				Inspection
3	Upstairs	344952	Strike		5 ABC		X	08		14		6 Year 2014
4	Holding Area	101541	Amerex		10 ABC		X	05		11		Inspection
5	Guard Station	869524	Strike		5 ABC		X	06		12		Inspection
6	Basement Server	834893	Ansul		5 Halotron		X	10				Inspection
7												
8												
9												
10												
11												
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28												
29												
30												

COMMENTS: \_\_\_\_\_



# Banff Fire and Safety

## Fire Alarm Inspection Report

**Customer:** ROYAL CANADIAN MOUNTED POLICE  
**LAKE LOUISE DETACHMENT**

**Location:** 102 Village Road, Lake Louise

**Date:** July 18, 2014

**Contact:** SNC Lavalin - Stan (403) 888-3605

**Contact:**

**Inspected By:** Dennis Olsen/Paul Marinelli

**Make of Panel:** Edwards 2280

**Make of Smoke Detectors:** Edwards 6249 C & 1400A

**Make of Heat Detectors:** Edwards 283 C

**Make of Alarm Pull Box:** Edwards 270 SPO

**Make of Alarm Signal:** Edwards 6" Bell

### Bell Zones:

**Z1** ~ Whole Building

### Zones:

**Z1** ~ Main Floor Office Area

**Z2** ~ Secure Exhibit & Overnight Exhibit

**Z3** ~ Cold Storage & Secure Bay

**Z4** ~ Cell Block Area

**Z5** ~ Cell # 2

**Z6** ~ Cell # 3

**Z7** ~ Hard Interview Room

**Z8** ~ Basement Area

<b>EOL:</b>	<b>Location:</b>	<b>Device:</b>	<b>Zone:</b>	<b>Operation:</b>	<b>Comments:</b>
	Main Entrance	Pull	1	OK	
	Administration	Fixed Heat	1	OK	
	Administration	Bell	1	OK	
	Soft Interview Room	Fixed Heat	1	OK	
	NCO Office	Fixed Heat	1	OK	
	File Room	Fixed Heat	1	OK	
	Rear Exit	Pull	1	OK	
	Lunch Room	Fixed Heat	1	OK	
	Men's Washroom	Fixed Heat	1	OK	
	Ladies Washroom	Fixed Heat	1	OK	
	Exhibit Locker Room - outer	Fixed Heat	1	OK	
	Exhibit Locker Room - inner	Fixed Heat	2	OK	
	Garage Area	Bell	1	OK	
	Garage Area	Pull	3	OK	

	Garage Area	Fixed Heat	3	OK	
	Garage Storage Room	Heat Fixed	3	OK	
	Cell Block Hallway	Smoke	4	OK	
	Cell Block Hallway	Smoke	4	OK	
	Cell Block Hallway	Smoke	4	OK	
✓	Finger Print Room	Fixed Heat	4	OK	
	Guard Room	Pull	4	OK	
	Guard Room	Fixed Heat	4	OK	
	Guard Room - Storage	Fixed Heat	4	OK	
	Top of Basement Stairs	Smoke	8	OK	should be on it's own zone
	Basement Entrance	Pull	8	OK	
	Weight Room	Bell	1	OK	
	Weight Room	Fixed Heat	8	OK	
	Weight Room	Fixed Heat	8	OK	
	Gun Room	Fixed Heat	8	OK	
	Janitor's Room	Fixed Heat	8	OK	
	Furnace Room	Fixed Heat	8	OK	
	Electrical Room	Fixed Heat	8	OK	
Fire Dampers - Check that all dampers are free to close (no obstructions) and in the open position					
	LOCATION:	DEVICE:	LOCATION	OPERATION	COMMENTS:
Basement					
	Gun Room	Damper	Door	165°F	
	Janitor Room	Damper	Door	165°F	
	Electrical Room	Damper	Door	165°F	
	Mechanical Room (#1)	Heating Damper			Operated by Building Heating System
	Mechanical Room (#2)	Heating Damper			
Main Floor					
	Inner Evidence Room	Damper	Ceiling	165°F	
	Outer Evidence Room	Damper	Door	165°F	
	Interrogation Room	Damper	Ceiling	165°F	
	Prisoner Shower Room	Damper	Ceiling	165°F	
	Cell #1	Damper	Ceiling	165°F	
	Breathalyzer Room	Damper	Ceiling	165°F	
	Cell #2	Damper	Ceiling	115°F	

**Annunciator:**

Location:

N/A

**Main Panel Power Supply Test:**

Circuit Breaker Location:

Bsmnt Elec Rm - Panel E CCT#1

Circuit Breaker Model:

Sylvania

	Protected:	YES
	Locked and Red:	YES
<b>Main Panel Batteries Test:</b>	Damage?	NO
	Protected?	YES
	Ventilated?	YES
	Fused Charging Tested at:	27.9 volts
	Load Cycle Tested to:	27.3 volts
	Battery Date	Jul 13
	Battery Size	(2) 12volt 7amp
<b>Control Panel:</b>	Functioning:	OK
	Lamps/Indicators:	OK
	Supervisory:	OK
<b>Security Monitoring:</b>	System Monitored:	YES
	Security Company	Reliance Protection Security
	Contact Number	1-800-653-9111
	Account Number	#G8D-1303
	Password	N/A

**Comments:**

1. The emergency light packs were tested. Please see individual report.
2. As a building owner or property manager, we recommend that you conduct a monthly fire alarm test as per CAN/ULC – 5536 – 04 4.2.1. "While on the emergency power supply, inspect and test the fire alarm system monthly to confirm it is operating properly." Should you require assistance or training to perform this task, please call our office for further information.

The fire alarm system, located at **R.C.M.P. – LAKE LOUISE DETACHMENT**, has been tested in accordance with CAN/ULC-S536-04 on **July 18, 2014**. The above report clearly defines items that are satisfactory as well as identifying deficiencies. All deficiencies must be corrected for the system to be certified.



Signature of Inspector: Dennis Olsen/Paul Marinelli

18 Jul 14

PKX4413/996796

# Banff Fire and Safety

## Emergency Light Test Report

**Customer:** ROYAL CANADIAN MOUNTED POLICE  
**LAKE LOUISE DETACHMENT**

**Location:** 102 Village Road, Lake Louise

**Date:** July 18, 2014

**Contact:** SNC Lavalin - Stan (403) 888-3605

**Contact:** Cpl Vendenbrink/Howard 403-522-3812

LOCATION:	DEVICE:	MT	OPERATION:	COMMENTS:
Administration Area	6volt 100watt	6	OK	
Weight Room	6volt 36watt	2	OK	

**Comments:**



# Banff Fire and Safety

## Fire Extinguisher Inspection Report

**Deficiencies Exist**

**Company Name:** ROYAL CANADIAN MOUNTED POLICE  
LAKE LOUISE DETACHMENT

**Street Address:** 102 Village Road, Lake Louise

**Contact:** SNC Lavalin - Stan (403) 888-3605

**Contact:** Cpl Vendenbrink/Howard 403-522-3812

**Month:** July 18, 2014

Location	Serial #	Type	D.O.M.	History	2013	2014	2015	Comments
<b>Detachment</b>								
Computer Room	869522	5 Halotron	2012		A	A		
Office Area	664007	5 ABC	2009		A	A		
Lunch Room	664018	5 ABC	2009		A	A		
Guard Room	664021	5 ABC	2009		A	A		
Back Door	664001	5 ABC	2009		A	A		
Basement	222359	5 ABC	2001	6yr'07, RC'08	HT	A		
Garage	14023	5ABC	2001	RC'03, 6yr'09 RC'10	HT	A		
<b>Vehicles</b>								
Car 2A53	221170	5 ABC	2001	6yr'08	X	X		Not Available
Car 2A40	116121	5 ABC	1998	RC'02, 6yr'07 HT'10	A	X		Not Available
Car 2E52	14025	5ABC	2001	RC'02, 6yr'08 RC'10		X		Not Available
Truck	204639	5ABC	2000	HT'12		A		
<b>Housing</b>								
5-A	664009	5 ABC	2008			X		Not Available
5-A	664002	5 ABC	2008			X		Not Available
5-A	664004	5 ABC	2008			X		Not Available
5-A	368562	5 ABC	2008		A	X		Not Available
5-B	835919	5 C02	1982	HT'99, HT'09		X		Not Available
5-B	835982	5 C02	1982	HT'94, HT'99 HT'07, HT'12		X		Not Available

7-A	664006	5 ABC	2009		A	<b>X</b>		<b>Not Available</b>
7-A	204639	5 ABC	2000	RC'01, 6yr'07, HT'12	A	<b>X</b>		<b>Not Available</b>
7-B	835930	<b>5 C02</b>	1982	HT'99, HT'02 HT'07, HT'12		<b>X</b>		<b>Not Available</b>
7-B	661534	5 ABC	2009		A	<b>X</b>		<b>Not Available</b>
7-B	664003	5 ABC	2009		A	<b>X</b>		<b>Not Available</b>
Mount Temple	23892163	5 ABC	2014			<b>New</b>		

**Comments:**

1. Several fire extinguishers were not available to complete testing. All fire extinguishers require testing annually to ensure operation in the event of an emergency.
2. Supplied and installed (1) new fire extinguisher in the Mount Temple Staff Accomodation.

# K KOST

## FIRE - SAFETY

1710A - 31 St. N., Lethbridge, AB T1H 5H1  
Phone: 403-331-5678 Fax: 403-331-5679

Pg 1 of 4

Barry

### PORTABLE FIRE EXTINGUISHER SERVICE REPORT

CUSTOMER NAME: <i>RCMP.</i>	DATE: <i>Feb 18, 2014</i>
OWNER'S NAME & ADDRESS: <i>Lethbridge</i>	LOCATION: <i>Lethbridge AB.</i>
BILL TO ADDRESS:	TIME IN:
SHIP TO ADDRESS:	TIME OUT:

PHONE # FAX # P.O. #

LOCATION	MAKE	TYPE	SIZE	SERIAL #	SERVICE	6 YEAR MAINT. RECH.	HYDRO	RECH.	YEAR MADE	LAST HYDRO TEST	LAST 6 YEAR MAINT.	HYDRO TEST N2CART	MISC. & PARTS TOTAL
Emergency Power	Ame	Co2	10	✓ 473530	✓				08	12			
Basement Hall	Ame	ABC	10	✓ 223102	✓	✓			08				
Mens Change Rm	Ame	ABC	5	✓ 092419	✓				97	09			
Telephone Rm	Ame	Co2	10	✓ 1788096	✓				11				
Boiler Room <sup>outside</sup>	Ame	Co2	10	✓ 473532	✓				08	13			
Boiler Room	Ame	ABC	10	✓ 224657	✓	✓			08				
Conference Room	Ame	ABC	5	✓ 1909356	✓				07	13			
<del>Rm 112A</del>	<del>Ame</del>	<del>ABC</del>	<del>5</del>	<del>092410</del>	<del>2</del>	<del>replaced</del>	✓	✓	<del>77</del>	<del>03</del>			
Main Hall	Ame	ABC	10	✓ 221652	✓	✓			08				
Garage Basement	Ame	ABC	10	95836	✓				10				
Garage Basement	Ame	ABC	10	247305	✓				10				
Garage E	Ame	ABC	10	✓ 222983	✓	✓			08				
Garage M	Ame	ABC	10	✓ 222658	✓	✓			08				
Garage M	Ame	ABC	5	✓ 312500	✓				09				
Garage M	Ame	ABC	10	✓ 222201	✓	✓			08				
Garage M	Pyrone	Co2	15	✓ 374775	✓				00	10			
Garage Electrical	Ame	Co2	5	✓	✓	Couldn't get into							
Outside Garage	Ame	ABC	10	✓ 631252	✓				07	13			
2nd Floor <sup>Boiler Room</sup>	Ame	Co2	5	✓ 561441			✓	✓	09				

PARTS

EACH

TIMES

TOTALS

SIGNATURE

*A.C. Genesis*

# K KOST

## FIRE - SAFETY

1710A - 31 St. N., Lethbridge, AB T1H 5H1  
Phone: 403-331-5678 Fax: 403-331-5679

### PORTABLE FIRE EXTINGUISHER SERVICE REPORT

By 2014

Barry

CUSTOMER NAME: <i>RCMP</i>	DATE: <i>Feb 18, 2014</i>
OWNER'S NAME & ADDRESS:	LOCATION: <i>Lethbridge, AB.</i>
BILL TO ADDRESS:	TIME IN:
SHIP TO ADDRESS:	TIME OUT:

PHONE #		FAX #		P.O. #								
LOCATION	MAKE	SIZE	SERIAL #	SERVICE	6 YEAR MAINT. RECH.	HYDRO RECH.	YEAR MADE	LAST HYDRO TEST	LAST 6 YEAR MAINT.	HYDRO TEST N2CART	MISC. & PARTS TOTAL	
2 <sup>ND</sup> Floor File Rm	AME	5	321743		✓		08					
2 <sup>ND</sup> Floor Middle	AME	10	221757		✓		08					
2 <sup>ND</sup> Floor Mail Room	Pirene	15	374827	✓			00	12				
2 <sup>ND</sup> Floor Room 204	AME	5	562082			✓	09					
2 <sup>ND</sup> Floor HALL	AME	10	221846		✓		08					
1 <sup>ST</sup> Floor Room 112A	AME	5	697913	NEW			13					
Rm 305 Chemical Room	Sentry	5	182168	✓			91	03	09			
Rm 305 Chemical Room	Flag	10	138236	✓			90	03	09			
Rm 305 Chemical Room	AME	5	138469	✓			06	12				
Rm 305 Chemical Rm	Sentry	5	182145	✓			91	03	09			
Please note Could Not Get into the Electrical Room in the Garage												
Emergency Lights 1 Hr tested (Barry)												
Fire Alarm Inspection Fire Doors Etc (Kyle)												

*please note Could Not Get into the Electrical Room in the Garage*

*Emergency Lights 1 Hr tested (Barry)*

*Fire Alarm Inspection Fire Doors Etc (Kyle)*

PARTS

EACH

TIMES

TOTALS

SIGNATURE \_\_\_\_\_

## EMERGENCY LIGHTING & PARTS SERVICE REPORT

CUSTOMER NAME: <u>R.C.M.P.</u>		DATE: <u>Feb 18, 2014</u>	
OWNERS NAME & ADDRESS:		LOCATION: <u>Lethbridge</u>	
BILL TO ADDRESS:		TIME IN:	
SHIP TO ADDRESS:		TIME OUT:	
PHONE#	FAX#	PO#	

EMERGENCY LIGHTING LOCATION	UNIT, MAKE & MODEL	TYPE (EXIT, SINGLE REMOTE, DOUBLE REMOTE, POWER)	COMMENT
1 Basement Hall	Lumacell II	Power Unit	GREEN
2 Basement NE Exit		Exit	GOOD
3 Basement N Stairs		Single Remote	GREEN
4 Basement S Exit		Exit	GREEN
5 Basement S Stairs		Single Remote	GOOD
6 Main Floor Hall	Lumacell	Power Unit	GOOD
7 Main Floor NE Exit		Exit	GREEN
8 Main Floor N Exit		Exit	GREEN
9 Main Floor N Stairs		Double Remote	GOOD
10 Main Entrance Middle		Exit	GOOD
11 Main Floor S Exit		Exit	GOOD
12 Main Floor Exit		Exit	GOOD
13 Main Floor S Stairs		Double Remote	GOOD
14 Conference Room Emergency Lit.		Power Unit	GOOD
15 2nd Floor Middle	Lumacell	Power Unit	GOOD
EMERGENCY LIGHTING TOTALS			

PARTS #	QUANTITY	PARTS #

SIGNATURE:

# K KOST

FIRE - SAFETY

Kost Fire Equipment Ltd. (O/A Kost Fire Safety)  
1710A - 31 St North, Lethbridge, AB T1H 5H1  
PH: 403-331-5678 FAX: 403-331-5679

BARRY,

## EMERGENCY LIGHTING & PARTS SERVICE REPORT

CUSTOMER NAME: <i>RCMP</i>	DATE: <i>Feb 18, 2014</i>
OWNERS NAME & ADDRESS:	LOCATION: <i>Lethbridge A</i>
BILL TO ADDRESS:	TIME IN:
SHIP TO ADDRESS:	TIME OUT:

PHONE#	FAX#	PO#
--------	------	-----

EMERGENCY LIGHTING LOCATION	UNIT MAKE & MODEL	TYPE (EXIT, SINGLE REMOTE, DOUBLE REMOTE, POWER)	COMMENT
1 <i>1st Floor NE Exit</i>		<i>Exit</i>	<i>Good</i>
2 <i>2nd Floor N Stairs</i>		<i>Double Remote</i>	<i>Good</i>
3 <i>2nd Floor S Exit</i>		<i>Exit</i>	<i>Good</i>
4 <i>2nd Floor S Stairs</i>		<i>Double Remote</i>	<i>Good</i>
5 <i>3rd Floor Hall</i>	<i>Lumacell</i>	<i>Power Unit</i>	<i>Good</i>
6 <i>3rd Floor NE Exit</i>		<i>Exit</i>	<i>Good</i>
7 <i>3rd Floor S Stairs</i>		<i>Single Remote</i>	<i>Good</i>
8 <i>3rd Floor S Exit</i>		<i>Exit</i>	<i>Good</i>
9 <i>3rd Floor S Stairs</i>		<i>Single Remote</i>	<i>Good</i>
10 <i>3rd Floor S Stairs</i>	<i>EDWARDS</i>	<i>Power Unit</i>	<i>Good</i>
11 <i>Generator Room Basement</i>		<i>Power Unit</i>	<i>Good</i>
12			
13			
14			
15			

*Row 305*

EMERGENCY LIGHTING TOTALS	<i>21</i>	<i>1 1/2 Hr labour</i>
---------------------------	-----------	------------------------

PARTS #	QUANTITY	PARTS #

SIGNATURE:

# FIRE ALARM SYSTEM ANNUAL TEST AND INSPECTION REPORT

BUILDING NAME AND ADDRESS: <u>Lethbridge RCMP. 427-Stafford Dr. S.</u>	
BUILDING NUMBER _____	PROP. NO. _____ DATE: <u>Feb-18/14</u>
PERSON CONTACTED <u>Callahan</u>	PHONE NO. <u>329-5080</u> <u>329-5045</u>
SYSTEM MANUFACTURER <u>Notifier</u>	MODEL # <u>AFP-200</u> OPERATION SINGLE <input checked="" type="checkbox"/> DOUBLE _____

## TEST RESULTS (Every line must have the appropriate marking in the space provided)

1. The fire alarm system functioned correctly under general alarm condition Yes ☒ No \_\_\_\_\_

2. Location of 6 most remote alarm initiating devices operated with main A.C. power off

- |                             |                       |
|-----------------------------|-----------------------|
| 1. <u>Room #214 west</u>    | <u>Smoke detector</u> |
| 2. <u>Room #305</u>         | <u>Heat detector</u>  |
| 3. <u>Rm. #112 Closet</u>   | <u>Heat detector</u>  |
| 4. <u>Traffic Unit</u>      | <u>Smoke detector</u> |
| 5. <u>Garage Northeast</u>  | <u>Heat detector</u>  |
| 6. <u>Boiler Room North</u> | <u>Heat detector</u>  |

The fire alarm system functioned correctly during the above test Yes ☒ No \_\_\_\_\_

- |  |                                     |                          |
|--|-------------------------------------|--------------------------|
| 3. Each manual alarm initiating device has been individually tested. *(Note 1) | <input checked="" type="checkbox"/> | No. of devices <u>12</u> |
| 4. Each automatic alarm initiating device has been tested. *(Note 1)           | <input checked="" type="checkbox"/> | No. of devices <u>30</u> |
| 5. Each audible and visual signaling device has been tested. *(Note 1)         | <input checked="" type="checkbox"/> | No. of devices <u>14</u> |
| 6. Correct annunciation has been confirmed for each device tested. *(Note 1)   | <input checked="" type="checkbox"/> |                          |

\*Note 1 - Details of these tests including all initiating and signaling field devices shall be recorded on the accompanying forms.

## SUMMARY

- |   |  |
|---|--|
| 1. The fire alarm system is now full functional. OR   | Yes <input checked="" type="checkbox"/> No _____ |
| 2. The fire alarm system is operational with minor deficiencies noted on the pages attached.                                | Yes _____ No <input checked="" type="checkbox"/> |
| 3. The fire alarm system has major deficiencies noted on the pages attached.  | Yes _____ No <input checked="" type="checkbox"/> |
| 4. A copy of this report has been given to <u>Callahan</u><br>who is the owner or owner's representative for this building. | Yes <input checked="" type="checkbox"/> No _____ |

Kyle Heitman  
Printed Name & Signature of  
Supervising Technician Conducting the Test

KOST Fire-Safety  
Company

403-894-5953  
Telephone Number

Alberta Fire Code requires that this record be maintained by the building owner for a minimum of two (2) years.

This is to certify that the fire alarm system has been tested in accordance with Section 4. Periodic Testing of Fire Alarm System ULC S536-96 and these records document the result of testing performed.

TECHNICIANS PRE-TEST CHECK LIST

1. Do you have a city tie? If so, take necessary steps to alert Central Station/Fire Department, etc.

Do not use the fire department emergency telephone number.

No  
N/A

Name of Person Contacted at the Central Station or Fire Department \_\_\_\_\_

Title \_\_\_\_\_

Time Out: \_\_\_\_\_

Time In: \_\_\_\_\_ Date: \_\_\_\_\_

Time Out: \_\_\_\_\_

Time In: \_\_\_\_\_ Date: \_\_\_\_\_

Time Out: \_\_\_\_\_

Time In: \_\_\_\_\_ Date: \_\_\_\_\_

2. Do you have auxiliary functions that can impair building functions such as elevator capture fan shutdown, door holders, etc.? yes

Can these be disabled and tested by groups? yes

3. Have building occupants been made aware of fire alarm testing? yes

4. Has a pre-determined time been established for testing signaling devices? yes

5. Have provisions been made for acquiring access to the secured areas of the building? Are spare reset and panel keys available? yes

6. Has an alternative plan been established to alert occupants and local fire department should an actual fire condition occur during testing? yes

JOB NAME: Leth. Remp. TECHNICIAN: Kyle Heston

PROP NO: \_\_\_\_\_



## CONTROL EQUIPMENT TEST RECORD

Every line must have the appropriate marking in the box provided

☒ Yes, Tested Correctly

☒ No, Did Not Test Correctly  
(See Remarks)

☐ N/A Not Applicable, Function  
Or Feature Not Provided  
This Fire Alarm System

### CONTROL PANEL TESTS

"Power on" indicator	/
Common trouble lamp	/
Common trouble signal	/
Trouble silence switch	/
A.C. power failure trouble	/
Ground detection lamp	/
Ground detection trouble	/
General alarm operation	/
General alarm automatic cut-out timer          minutes	N/A
Control panel interconnection to fire department confirmed	N/A
Alarm signal silence operation	/
Alarm signal silence lamp	/
Alarm signal silence inhibit 1 minute	N/A
Alarm initiating circuits individually tested for alarm	/
Alarm lamp operation (individually tested)	/
Alarm lamp designation checked	/
All audible alarm signals operated on A.C. power	/
Audible alarm signals programmed per specifications	/
All audible alarm signal circuits operate on general alarm when powered by battery stand-by or stand-by emergency power	/
Auxiliary relays operate	/
Auxiliary relays programmed per specifications	/
Emergency voice paging interface operation	N/A
Trouble lamps (initiating circuits)	/
Trouble lamps (signal circuits)	/
Lamp test	/
Module alignment	/
Plug in components securely in place	/
Clean exposed electrical contacts	/
Designation indications for common control and indicators	/
Reset operation	/
Clean glass and door	/
Control panel lock	/
Cleanliness	/

### BATTERY TESTS

Battery type	12 Volt 7.2 amp/hr x 2	
Battery voltage (A.C. power on)	27.1	VDC
Battery charging current	8	mA
Battery voltage (A.C. power off – supervisory condition)	25.3	VDC
Battery voltage (A.C. power off – general alarm condition) full load	24.8	VDC
Battery inspected for physical damage		✓
Battery terminals cleaned and lubricated		✓
Battery terminals clamped tightly		✓
Electrolyte level checked		N/A
Specific gravity of electrolyte per manufacturer's specifications		N/A
The above tests have been conducted in accordance with the manufacturers literature		✓

### VOICE COMMUNICATION TESTS

Indicate N/A here if no voice communications system	N/A
"Power on" indicator	
Communication system trouble lamp	
Communication system trouble signal	
Communication system trouble silence switch	
Paging all call switch	
Paging all call lamp	
Individual paging zone select switches (individually tested)	
Individual paging zone select indicators	
Trouble lamps voice paging	
Microphone press to talk switch	
Operation of voice communication system does not interfere with first minute of alarm signaling	
Emergency voice paging loudness level	
Emergency voice paging operates on all call when powered by emergency stand-by power	
Fire-fighters telephone call-in lamp	
Fire-fighters telephone call-in audible signal	
Individual telephone zone select switches (individually tested)	
Individual telephone zone select indicators	
Fire-fighters telephone verbal communication	
Module alignment:	
Plug in components securely in place	
Clean exposed electrical contacts	
Designation indicators for common control and indicators	
Clean glass and door	
Control panel lock	
Cleanliness	
The above tests have been conducted in accordance with the manufacturers literature	

REMOTE TROUBLE UNIT

Trouble lamp	
Trouble signal	

ANNUNCIATOR TESTS

Annunciator alarm lamp operation (individually tested)	/
Annunciator alarm lamp designation checked (as per attached list)	/
Trouble lamp	/
Trouble signal	/
"Power on" lamp	/
Lamp test	/
Lamp supervision	/
Signal silence lamp	/
Annunciator (auxiliary functions)	/
Cleanliness	/

ANCILLARY DEVICES TESTS

Specific Device	
Fan shut down	/

## TECHNICIANS AFTER TEST CHECK LIST

Reconnect auxiliary functions ( off-site connections)	✓
Reconnect ancillary functions .	✓
Reconnect time limit cut – outs	N/A
Reconnect signal power	✓
Advise building management work completed	✓
Advise fire department work completed	✓
Ensure that the alarm system is functional	✓

## DEVICE TESTING – LEGEND AND NOTES

DEVICE	DESCRIPTION	TYPE	MODEL #	DEVICE	DESCRIPTION	TYPE	MODEL#
M	Manual Pull Station	Notifier		B	Bell		
HT	Heat detector fixed temp.			K	Horn (klaxon type)	Notifier	
RHT	Heat detector rate of rise	Notifier		C	Chime		
S	Smoke detector	Notifier		V	Visual alarm appliance	Notifier	
DS	Duct smoke detector			SP	Loudspeaker		
FS	Sprinkler flow switch (Note 2)			HSP	Horn Loudspeaker		
TS	Sprinkler tamper switch (Note 3)			T	Fire-fighters telephone		
SA	Smoke alarm single-station Type (Note 4)			AD	Ancillary devices		

NOTE 1 – Confirmation of wiring supervision to each individual device is only required during installation verification or a complete building audit of the system and is not required at the annual test.

NOTE 2 – For sprinkler flow switches indicate the time delay of flow indicator in the remarks column.

NOTE 3 – Sprinkler tamper switches cause a trouble condition to be annunciated but not an alarm condition.

NOTE 4 – Single-station smoke alarms are not part of the fire alarm system but testing of such devices may be required by the authority having jurisdiction.

NOTE 5 – Identify the specific ancillary devices in the remarks column.

### Remarks

Smoke detectors are still OK, but sensitivity  
~~is~~ is becoming an issue, due to age of sensors.  
 Rm #108 has a strobe that is not working

# FIRE ALARM ANNUAL TEST AND INSPECTION REPORT

PAGE    OF   

BUILDING NAME:		CORRECTLY INSTALLED	MISSING	REQUIRES SERVICE OR REPAIRS	ALARM OPERATION CONFIRMED	CIRCUIT NUMBER	ANNUNCIATION INDICATION CONFIRMED	SUPERVISION CIRCUIT CONFIRMED
PROP NO.								
LOCATION	DEVICE							
Garage S. Exit	P.S.	/			/	5		
Generator Rm. W.	H.D.	/			/	1		
Generator Rm. E.	H.D.	/			/	1		
North Boiler Rm.	H.D.	/			/	1		
Rm. #206	S.D.	/			/	3		
Rm. #214 W.	S.D.	/			/	3		
Rm. #214 E.	S.D.	/			/	3		
Rm. #213A	S.D.	/			/	3		
3 <sup>rd</sup> flr. Lab N.	H.D.	/			/	4		
3 <sup>rd</sup> flr. Lab S.	H.D.	/			/	4		
Studio	H.D.	/			/	4		
Rm. #305	H.D.	/			/	4		
Rm. #303	S.D.	/			/	4		
3 <sup>rd</sup> flr. N. Storage	H.D.	/			/	4		
Garage Basement	H.D.	/			/	5		
" " "	H.D.	/			/	5		
Basement Garage Car Ports	H.D.	/			/	5		
Rm. #112 Closet	H.D.	/			/	2		
Traffic Unit	S.D.	/			/	3		
Traffic Unit	S.D.	/			/	3		
Basement Garage Air Compressor	H.D.	/			/	5		
Garage Basement Gun Range	H.D.	/			/	5		
" " "	H.D.	/			/	5		
" " "	H.D.	/			/	5		

INSPECTION A

TECHNICIAN:

DATE:

# FIRE ALARM ANNUAL TEST AND INSPECTION REPORT

PAGE    OF   

BUILDING NAME: <u>Lehigh Valley RmP.</u>		CORRECTLY INSTALLED	MISSING	REQUIRES SERVICE OR REPAIRS	ALARM OPERATION CONFIRMED	CIRCUIT NUMBER	ANNUNCIATION INDICATION CONFIRMED	SUPERVISION CIRCUIT CONFIRMED
PROP NO. 								
LOCATION	DEVICE							
N. Corridor Exit	P.S.	/			/	2		
S. Corridor Exit	P.S.	/			/	2		
Main Entrance	P.S.	/			/	2		
2nd fl. N. Exit	P.S.	/			/	3		
2nd fl. S. Exit	P.S.	/			/	3		
3rd fl. N. Exit	P.S.	/			/	4		
3rd fl. S. Exit	P.S.	/			/	4		
N. Stairwell	S.D.	/			/	4		
S. Stairwell	S.D.	/			/	4		
Basement N. Exit	P.S.	/			/	1		
Basement S. Exit	P.S.	/			/	1		
Telephone Rm.	H.D.	/			/	1		
Boiler Rm. W.	H.D.	/			/	1		
Boiler Rm. E.	H.D.	/			/	1		
Furnace Rm.	H.D.	/			/	1		
Garage N.W.	H.D.	/			/	5		
Garage N.E.	H.D.	/			/	5		
Garage S.W.	H.D.	/			/	5		
Garage S.E.	H.D.	/			/	5		
Garage Tech Rm	H.D.	/			/	5		
Garage Parts Rm.	H.D.	/			/	5		
Garage Boiler Rm	H.D.	/			/	5		
Garage Basement	H.D.	/			/	5		
Garage Basement Exit	P.S.	/			/	5		
Garage N. Exit	P.S.	/			/	5		

INSPECTION A

TECHNICIAN:

DATE:

PAGE  OF [illegible]





## APPENDIX E (INFORMATIVE) – ANNUAL FIRE ALARM SYSTEM TEST AND INSPECTION RECORDS

(Reference: 3.7, 5.1.1, 5.1.2)

### E1. FIRE ALARM SYSTEM ANNUAL TEST AND INSPECTION REPORT

(Reference: 5.1.2)

Building name: <u>Milk River RCMP</u>		Date: <u>Aug. 21/14</u>	
Address: <u>605 Main Street North</u>			
System manufacturer: <u>Simpler</u>		Model number: <u>4008</u>	

A	System provides single-stage operation.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	–
B	System provides two-stage operation.	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	--
C	The entire fire alarm system has been inspected and tested in accordance with CAN/ULC-S536, Inspection and Testing of Fire Alarm Systems.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	–
D	The fire alarm system documentation is on site and includes a description of the system.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
E	The fire alarm system is fully functional.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
F	The fire alarm system has deficiencies noted on the pages attached.	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>
G	Comments			
H	A copy of this report will be given to the following, who is the owner or owner's representative for this building: <u>SNC Lavalin</u>	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	--

This is to certify that the information contained in this Fire Alarm System Annual Test and Inspection Report is correct and complete.

Kyle Heimer  
Printed Name of Primary or Supervising  
Technician Conducting the Test and Inspection

[Signature]  
Signature of Primary or Supervising Technician  
Conducting the Test and Inspection

KOST Fire-Safety  
Company

4998  
Identification Number of Primary or Supervising  
Technician Conducting the Test and Inspection

403-894-5953  
Telephone

Printed Name of Technician Conducting the Test  
and Inspection

Company

Telephone

Signature of Technician Conducting the Test and  
Inspection

Identification Number of Technician Conducting  
the Test and Inspection

## E2. CONTROL UNIT OR TRANSPONDER TEST RECORD

YES ☐ = Tested Correctly NO ☐ = Did not test correctly N/A ☐ = Not applicable

(REFER TO REMARKS, E2.12)

FUNCTION OR FEATURE NOT PROVIDED ON THIS FIRE  
ALARM SYSTEM

## E2.1 CONTROL UNIT OR TRANSPONDER TEST

(Reference: Clauses 5.1.3, 5.2.2.1)

Control unit or transponder location: <u>Main Entrance</u>
Control unit or transponder identification: <u>4008</u>

A	Power 'ON' visual indicator operates.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
B	Common visual <i>trouble signal</i> operates.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
C	Common audible <i>trouble signal</i> operates.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
D	<i>Trouble signal</i> silence switch operates.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
E	<i>Main power supply failure trouble signal</i> operates.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
F	Ground fault tested on positive and negative initiates <i>trouble signal</i> .	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
G	<i>Alert signal</i> operates.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
H	<i>Alarm signal</i> operates.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
I	Automatic transfer from <i>alert signal</i> to <i>alarm signal</i> operates.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
J	Manual transfer from <i>alert signal</i> to <i>alarm signal</i> operates.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
K	Automatic transfer from <i>alert signal</i> to <i>alarm signal</i> cancel (acknowledge) feature operates on a two-stage system.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
L	<i>Alarm signal</i> silence inhibit function operates.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
M	<i>Alarm signal</i> manual silence operates.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
N	<i>Alarm signal</i> silence visual indication operates.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
O	<i>Alarm signal</i> , when silenced, automatically reinitiates upon subsequent alarm.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
P	<i>Alarm signal</i> silence automatic cut-out timer.	Time: <u>1 min</u>		
Q	Audible and visual <i>alert signals</i> and <i>alarm signals</i> programmed and operate per <i>design</i> and <i>specification</i> ; or documentation as detailed in Appendix C, Description of Fire Alarm System for Inspection and Test Procedures.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
R	<i>Input circuit</i> , alarm and supervisory operation, including audible and visual indication operates.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
S	<i>Input circuit</i> supervision fault causes a trouble indication.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
T	<i>Output circuit</i> alarm indicators operate.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>

E2.1 continued...

...Continued E2.1

U	Output circuit supervision fault causes a trouble indication.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
V	Visual indicator test (lamp test).	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
W	Coded signal sequences operate not less than the required number of times and the correct alarm signal operates thereafter.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
X	Coded signal sequences are not interrupted by subsequent alarms.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
Y	Ancillary device by-pass will result in a trouble signal.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
Z	Input circuit to output circuit operation, including ancillary device circuits, for correct program operation, as per design and specification, or documentation as detailed in Appendix C, Description of Fire Alarm System for Inspection and Test Procedures.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
AA	Fire alarm system reset operates.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
BB	Main power supply to emergency power supply transfer operates.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
CC	Status change confirmation (smoke detectors only) verified. (Refer Subsection 5.7.4.3, Status Change Confirmation (Alarm Verification Feature)).	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
DD	Receipt of the alarm transmission to the fire signal receiving centre.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
EE	Receipt of the supervisory transmission to the fire signal receiving centre.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
FF	Receipt of the trouble transmission to the fire signal receiving centre.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
GG	Record the name and telephone number of the fire signal receiving centre.	Name: <u>Reliance Protection</u> Telephone: <u>1800 653 9111</u>		
HH	Operation of the fire signal receiving centre disconnect means results in a specific trouble indication at the control unit or transponder and transmits a trouble signal to the fire signal receiving centre.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>

## E2.2 VOICE COMMUNICATION TEST

(Reference: Clause 5.1.3, 5.2.3.1)

N/A

A	Power 'ON' Indicator operates.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
B	Common visual <i>trouble signal</i> operates.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
C	Common audible <i>trouble signal</i> operates.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
D	<i>Trouble signal</i> silence switch operates.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
E	All-call voice paging, including visual indicator, operates.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
F	<i>Output circuits</i> for selective voice paging, including visual indication, operates.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
G	<i>Output circuits</i> for selective voice paging trouble operation, including visual indication, operates.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
H	Microphone, including press to talk switch, operates.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
I	Operation of voice paging does not interfere with initial inhibit time of <i>alert signal</i> or <i>alarm signal</i> .	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
J	All-call voice paging operates (on <i>emergency power supply</i> ).	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
K	Upon failure of one amplifier, system automatically transfers to backup amplifier(s).	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
L	Circuits for emergency telephone call-in operation, including audible and visual indication, operates.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
M	Circuits for emergency telephones for operation, including two-way voice communication, operates.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
N	Circuits for emergency telephone trouble operation, including visual indication, operates.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
O	Emergency telephone verbal communication operates.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
P	Emergency telephone operable or in-use tone at handset operates.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>

### E2.3 CONTROL UNIT OR TRANSPONDER INSPECTION

(Reference: Clauses 5.1.3, 5.2.4.1)

N/A

Control unit or transponder location:				
Control unit or transponder identification:				
A	Input circuit designations correctly identified in relation to connected field devices.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
B	Output circuit designations correctly identified in relation to connected field devices.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
C	Correct designations for common control functions and indicators.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
D	Plug-in components and modules securely in place.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
E	Plug-in cables securely in place.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
F	Record the date, revision and version of firmware and software program.	Date: _____ Rev: _____ Ver: _____		
G	Clean and free of dust and dirt.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
H	Fuses in accordance with manufacturer's specification.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
I	Control unit or transponder lock functional.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
J	Termination points from wiring to field devices secure.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>

### E2.4 POWER SUPPLY INSPECTION

(Reference: Clauses 5.1.3, 5.3.1)

Control unit or transponder location: Main Entrance				
Control unit or transponder identification: 4008				
A	Fused in accordance with the manufacturer's marked rating of the system.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
B	Adequate to meet the requirements of the system.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>

## E2.5 EMERGENCY POWER SUPPLY TEST AND INSPECTION

(Reference: Clauses 5.1.3, 5.3.2, 5.3.3)

Control unit or transponder location: <u>Main Entrance</u>				
Control unit or transponder identification: <u>4008</u>				
A	Correct battery type as recommended by manufacturer.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
B	Correct battery rating as determined by battery calculations based on full system load.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
C	Battery voltage with <i>main power supply</i> 'ON'.	<u>27.4</u> V dc		
D	Battery voltage and current with <i>main power supply</i> 'OFF' and <i>fire alarm system</i> in supervisory condition.	Voltage: <u>26.5</u> V dc Current: <u>—</u> A		
E	Battery voltage and current with <i>main power supply</i> 'OFF' and <i>fire alarm system</i> in full load alarm condition.	Voltage: <u>26</u> V dc Current: <u>—</u> A		
F	Charging current.	<u>—</u> A		
G	Physical damage.	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>
H	Terminals cleaned and lubricated.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
I	Terminals clamped tightly.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
J	Correct electrolyte level.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
K	Specific gravity of electrolyte is within manufacturer's specifications.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
L	Electrolyte leakage.	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>
M	Adequate ventilation.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
N	Battery manufacturer's date code or in-service date.	Date: <u>—</u>		
O	Disconnection causes <i>trouble signal</i> .	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
P	Indicate type of battery <i>tests</i> performed: (i) Required supervisory load for 24 h followed by the required full load operation; or (ii) A silent <i>test</i> by using the load resistor method may be used for the full duration <i>test</i> (Refer to Appendix F1, Silent Test); or (iii) Silent accelerated <i>test</i> . (Refer to Appendix F2, Silent Accelerated Test); or (iv) A battery capacity meter <i>test</i> . (Refer to Appendix F3, Battery Capacity Meter Test); or (v) In lieu of the above battery <i>tests</i> , replace the battery with a new set having a current date code, amp-hour capacity and type as recommended by the manufacturer.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
		Yes <input type="checkbox"/>	No <input type="checkbox"/>	
		Yes <input type="checkbox"/>	No <input type="checkbox"/>	
		Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	
		Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Q	Record calculated battery capacity (Refer to Appendix F4.1-C).	<u>7</u> A·h		
R	Record battery terminal voltage after completion of <i>tests</i> .	<u>26</u> V dc		

E2.5 continued...

Continued E2.5 ...

S	Battery voltage not less than 85% of its rating after the tests.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
T	Generator provides power to the AC circuit serving the fire alarm system.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
U	Trouble condition at the emergency generator shall result in an audible common trouble signal and a visual indication at the required annunciator.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>

**E2.6 ANNUNCIATOR AND REMOTE TROUBLE SIGNAL UNIT TEST AND INSPECTION**

(Reference: Clauses 5.1.4, 5.4.1)

N/A

Annunciator or remote trouble signal unit location:
Annunciator or remote trouble signal unit identification:

A	Power 'on' indicator operates.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
B	Individual alarm, and supervisory input zones are clearly indicated and separately designated.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
C	Individual alarm and supervisory zone designation labels are properly identified.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
D	Common trouble signal operates.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
E	Visual indicator test (lamp test) operates.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
F	Input wiring from control unit or transponder is supervised.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
G	Alarm signal silence visual indicator operates.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
H	Switches for ancillary functions operate as per design and specification, or documentation as detailed in Appendix C, Description of Fire Alarm System for Inspection and Test Procedures.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
I	Other ancillary function visual indicators operate.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
J	Manual activation of alarm signal and indication operates.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
K	Displays are visible in installed location operates.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
L	Operates on emergency power.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>

## E2.7 ANNUNCIATORS OR SEQUENTIAL DISPLAYS

(Reference: Clauses 5.1.4, 5.4.2)

N/A

Annunciator or sequential display location:
Annunciator or sequential display identification:

A	Power 'on' indicator operates.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
B	Individual alarm and supervisory zone indication operates.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/> (See exception)
	Exception: Operation of each individual alarm and supervisory zone indication gives the identical indication, or lights the identical indicators at the other annunciator(s) and sequential display(s).	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	Specify Method of confirmation: _____ _____			
	Minimum of one alarm zone and one supervisory zone tested per annunciator or sequential display to confirm operation.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
C	Individual alarm and supervisory zone designation labels are properly identified.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
D	Common trouble signal operates.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
E	Visual indicator test (lamp test) operates.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
F	Input wiring from control unit or transponder is supervised.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
G	Alarm signal silence visual indicator operates.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
H	Switches for ancillary functions operate as per design and specification, or documentation as detailed in Appendix C, Description of Fire Alarm System for Inspection and Test Procedures.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
I	Other ancillary functions visual indicators operate.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
J	Manual activation of alarm signal and indication operates.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
K	Displays are visible in installed location.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>



**E2.8 REMOTE TROUBLE SIGNAL UNIT TEST AND INSPECTION**

(Reference: Clauses 5.1.4, 5.4.3)

N/A

Remote <i>trouble signal</i> unit location:
Remote <i>trouble signal</i> unit identification:

A	Input wiring from <i>control unit</i> or <i>transponder</i> is supervised.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
B	Visual <i>trouble signal</i> operates.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
C	Audible <i>trouble signal</i> operates.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
D	Audible <i>trouble signal</i> silence operates.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>

**E2.9 PRINTER TEST**

(Reference Clauses 5.1.4, 5.5.1)

N/A

Printer location:
Printer identification:

A	Operates as per <i>design</i> and <i>specification</i> , or documentation as detailed in Appendix C, Description of Fire Alarm System for Inspection and Test Procedures.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
B	Zone of each alarm initiating device is correctly printed.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
C	Rated voltage is present.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>

**E2.10 DATA COMMUNICATION LINK TEST**

(Reference: Subsection 5.1.5, 5.6-Note)

Control unit or transponder location:	N/A
Control unit or transponder Identification:	
Data communication link Identification:	

A	Confirm that a <i>trouble signal</i> is received at the <i>control unit</i> or <i>transponder</i> under an open loop fault for each <i>data communication link</i> (DCL).	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
B	Where <i>fault isolation modules</i> are installed in <i>data communication links</i> serving <i>field devices</i> , wiring shall be shorted on the isolated side, <i>annunciation</i> of the fault confirmed, and then a <i>field device</i> on the source side shall be operated, and activation confirmed at the <i>control unit</i> or <i>transponder</i> .	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
C	Where fault isolation in <i>data communication links</i> is provided between <i>control units</i> or <i>transponders</i> and between <i>transponders</i> , introduce a <i>short circuit fault</i> and confirm <i>annunciation</i> of the fault and operation outside the shorted section between each pair of:			
	(i) <i>Control unit</i> to <i>control unit</i>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	(ii) <i>Control unit</i> to <i>transponder</i>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	(iii) <i>Transponder</i> to <i>transponder</i>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>

**E2.11 ANCILLARY DEVICE CIRCUIT TEST**

(Reference: Clause 5.2.2.1-Z)

RECORD SPECIFIC TYPE OF ANCILLARY CIRCUIT	OPERATION OF ANCILLARY CIRCUIT CONFIRMED		
Fan Shutdown	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>

Note: The tests reported on this Form do not include the actual operational test of ancillary devices.

**E2.12 REMARKS**

(Reference: E2)

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(Attach additional sheets if further remarks are required)

### E3. FIELD DEVICE RECORD

(Reference: Clause 5.1.6)

#### E3.1 FIELD DEVICE TESTING — LEGEND AND NOTES

(Reference: Clauses 5.7.4.1.3, 5.7.4.1.4, 5.7.4.1.5, 5.7.4.3.1, 5.7.4.5.1, 5.7.8.1.1, 5.7.8.2.2, 5.7.8.2.4)

DEVICE	DESCRIPTION	TYPE	MODEL NO.
M	Manual Pull Station	Simple	Smoke stage
RHT	Heat Detector, Restorable	Simple	R.R.
HT	Heat Detector, Non-restorable	Simple	Fixed
S	Smoke Detector		
	Sensitivity Test Method or Test Equipment: Model/Method: <u>Smoke Check</u>	Not applicable	Not applicable
	Manufacturer Sensitivity Range: Sensitivity Range: _____		
RI	Remote Indicator Unit		
DS	Duct Smoke Detector		
--	Other Type of Detector		
SFD	Supporting Field Device (Monitor)		
FS	Sprinkler Flow Switch		
SS	Sprinkler Supervisory Device		
--	Other Supervisory Devices (Low Pressure, Low Water, Low Temperature, Power Loss, etc.)		
EM	Fault Isolation Module		
B	Bell		
H	Horn	Simple	
V	Visible Signal Device	Simple	
SP	Cone Type Speaker		
HSP	Horn Type Speaker		
AD	Ancillary Device		
ET	Emergency Telephone		
EOL	End-of-Line Resistor		

The following notes apply to Appendix E3.2, Individual Device Record:

- NOTE 1: Smoke detector sensitivity confirmation or measurement should be recorded in the remarks column.
- NOTE 2: Smoke detector cleaning or replacement date should also be recorded in the remarks column.
- NOTE 3: Status Change, including time delay, should be recorded in the remarks column.
- NOTE 4: Duct smoke detector pressure differential should be confirmed and recorded in the remarks column.

E3.1 continued...

Continued E3.1 ...

- NOTE 5: Time delay setting of water flow switch should be recorded in the remarks column.
- NOTE 6: Sprinkler supervisory switches cause trouble condition to be annunciated but not an alarm condition.
- NOTE 7: Upper and lower pressure setting of *supervisory devices* should be recorded in the remarks column.
- NOTE 8: Low temperature setting should be recorded in the remarks column.
- NOTE 9: Identify the specific *ancillary devices* in the remarks column.
- NOTE 10: Identify date *field device* changed in the remarks column.
- NOTE 11: Identify correct *field device* operation (e.g., alarm, trouble, supervisory, annunciation indication).
- NOTE 12: Identify *zone*, circuit number, or address.
- NOTE 13: Identify *conventional field device* locations.
- NOTE 14: Identify *active field device* and *supporting field device*, *data communication link (DCL)*, address and location.
- NOTE 15: *Test* and confirm *conventional field device* supervision of wiring.
- NOTE 16: Confirm *field device* free of damage.
- NOTE 17: Confirm *field device* free of foreign substance (e.g. paint).
- NOTE 18: Confirm *field device* mechanically supported independently of the wiring.
- NOTE 19: Confirm *field device* protective dust shields or covers removed.

CAUTION: The *tests* reported on this Form do not include the actual operational *test* of *ancillary devices*.

## E3.2 INDIVIDUAL DEVICE RECORD

(Reference: Clauses 5.7.1.3, E3.1)

BUILDING NAME: Milk Run Camp


PAGE \_\_\_\_ OF \_\_\_\_

DATE: Aug 21/14

Device Legends And Notes Are Listed In Appendix E3.1, Field Device Testing – Legend and Notes

LOCATION	DEVICE	CORRECTLY INSTALLED	REQUIRES SERVICE, REPAIRS, CLEANING OR MISSING	ALARM OPERATION CONFIRMED	ANNUNCIATION INDICATION CONFIRMED	ZONE CIRCUIT NUMBER OR ADDRESS	REMARKS
Front Entrance	P.S.	/		/	/		
EXHIBIT Room	Smoke	/		/	/		
Guard Room	Smoke	/		/	/		
Cell	Smoke	/		/	/		
Smokers Closet	Heat Det	/		/	/		
Office Entrance	Smoke	/		/	/		
General Storage	Smoke	/		/	/		
Lunch Room	Smoke	/		/	/		
Interview Room	Smoke	/		/	/		
Garage Exit	P.S.	/		/	/		
Garage Storage	Smoke	/		/	/		
Security Bay	Heat Det	/		/	/		
Weight Room	Heat Det	/		/	/		
attached House Exit	P.S.	/		/	/		
attached House Basement	P.S.	/		/	/		
attached House Basement	Smoke	/		/	/		
attached House Bedroom Hall	Smoke	/		/	/		
Rear House Exit	P.S.	/		/	/		
Office	Home Storage	/		/			
Garage	Home Storage	/		/			
Weight Room	Home Storage	/		/			
attached House Basement	Home Storage	/		/			
attached House - upstairs	Home Storage	/		/			

## Inspection and Testing of Fire Alarm Systems

 <b>Centratech Technical Services Ltd</b> # 1 – 7644 – 49 <sup>th</sup> Ave Red Deer, Alberta	Date of Service: June 17, 2014		Time: 1:00 pm
	Annual Inspection <b>YES</b>		Last Service Date 2013
	Single Stage <b>YES</b>	Two Stage	Direct Connection
	Manufacturer: EST Quick Start		Model: Edwards
Building Name: K052 R.C.M.P Detachment	Contact Person: Stan Scott		Phone: Fax:
Address: 317/319 – 1 <sup>st</sup> AVE	Owner:		Phone: Fax:
City: Oyen, AB                      Postal Code:	Fire Signal Receiving Centre: Yes		Phone: Fax:

“Yes” - Acceptable    “No” - Unacceptable    (Explain No answers in comments)

Yes	No	Summary
<input checked="" type="checkbox"/>	<input type="checkbox"/>	The entire fire alarm system has been inspected and tested in accordance with CAN/ULC S536
<input checked="" type="checkbox"/>	<input type="checkbox"/>	The fire alarm system documentation is on site and includes a description of the system.
<input checked="" type="checkbox"/>	<input type="checkbox"/>	The fire alarm system is fully functional.
<input type="checkbox"/>	<input checked="" type="checkbox"/>	The fire alarm system has deficiencies noted.
<input checked="" type="checkbox"/>	<input type="checkbox"/>	A copy of this report is given to the Owner or the owner's representative.

	Technicians After-test Checklist
NA	Reconnect time limit cutouts?
YES	Reconnect ancillary functions?
YES	Reconnect ancillary functions (off site connections)?
YES	Reconnect signal power?
NA	Advise fire department the testing is completed?
YES	Ensure that the alarm system is functional?

### Comments

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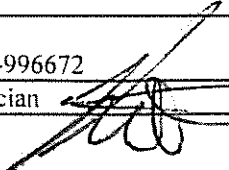
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I state that the information on this form is correct at the time and place of my inspection, and that all equipment was tested in conformance with applicable codes and the Manufacturers requirements and at this time was left in operational condition upon completion of this inspection except as noted in comments.			
Korey Campbell CFFA 11-996672 <div style="text-align: center;"></div>	June 17, 2014 Date	1:00 pm Time	 Owner or Authorized Agent

# Inspection and Testing of Fire Alarm Systems

**Date June 17, 2014**

**Building Name: K052 Oyen R.C.M.P**

**"Yes" - Tested correctly "No" - Did not test correctly (Explain NO answers in comments) "NA" Not applicable**

<b>2.1 Control Unit or Transponder Tests</b>	<b>yes</b>	Termination points from wiring to field devices secure
<b>yes</b> Power on visual indicator operates.	<b>na</b>	<b>2.6 Annunciator &amp; Remote Trouble Test &amp; Inspection</b>
<b>yes</b> Common visual trouble signal operates.	<b>na</b>	Power on indicator operates.
<b>yes</b> Common audible trouble signal operates.	<b>na</b>	Individual alarm and supervisory input zone clearly
<b>yes</b> Trouble signal silence switch operates.	<b>na</b>	Indicated and separately designated?
<b>yes</b> Main Power supply failure trouble signal operates.	<b>na</b>	Individual alarm and supervisory zone labels identified.
<b>yes</b> Ground fault tested on positive and negative trouble signal	<b>na</b>	Common trouble signal operates.
<b>na</b> Alert signal operation operates.	<b>na</b>	Visual indicator test - Lamp test operates.
<b>yes</b> Alarm signal operation operates.	<b>na</b>	Input wiring from control unit/transponder is supervised.
<b>na</b> Automatic transfer from alert to alarm signal operates.	<b>na</b>	Alarm signal silence visual indicator operates.
<b>na</b> Manual transfer from alert signal to alarm signal operates.	<b>na</b>	Switches for ancillary function operate as per design.
<b>na</b> Auto transfer from alert to alarm signal cancel operates	<b>na</b>	Other ancillary function visual indicators operate.
<b>yes</b> Alarm signal silence inhibit function operates?	<b>na</b>	Manual activation of alarm signal and indication operates.
<b>yes</b> Alarm signal manual silence operates.	<b>na</b>	Displays are visible in installed location operates?
<b>yes</b> Alarm signal silence visual indication operates.	<b>na</b>	Operates on emergency power?
<b>yes</b> Alarm signal when silenced automatically reinitiates on subsequent alarm?	<b>yes</b>	<b>2.4 Power Supply Inspection</b>
<b>na</b> Alarm signal silence automatic cut-out timer.	<b>yes</b>	Fused with mfgs marked rating of the system?
<b>yes</b> Audible visual and alert and alarm signals programmed and operate as per design & specification. (app C)	<b>yes</b>	Adequate to meet the requirements of the system?
<b>yes</b> Input circuit alarm and supervisory operation including audible and visual indication operates.	<b>na</b>	<b>2.8 Remote Trouble Signal Unit Test and Inspection</b>
<b>yes</b> Input circuit supervision fault causes a trouble indication.	<b>na</b>	Input wiring from control/transponder is supervised.
<b>yes</b> Output circuit alarm indicators operate.	<b>na</b>	Visual trouble signal operates.
<b>yes</b> Output circuit supervision fault causes a trouble indication.	<b>na</b>	Audible trouble signal operates.
<b>yes</b> Visual indicator test (lamp test).	<b>na</b>	Audible trouble signal silence operates.
<b>yes</b> Coded signal sequence operate not less than the required number of times and the correct alarm signal thereafter.	<b>yes</b>	<b>2.5 Emergency Power Supply Test and Inspection</b>
<b>yes</b> Coded signal sequences are not interrupted by subsequent alarms?	<b>yes</b>	Correct battery type as recommend by manufacturer?
<b>yes</b> Ancillary circuit by-pass will result in a trouble signal.	<b>yes</b>	Correct rating as determined by battery calculations based on full system load?
<b>yes</b> Input circuit to output circuit operation including ancillary device circuits, for correct program operation as per design & spec. (App "C")	<b>yes</b>	Battery voltage main power on? <b>27.1VDC</b>
<b>yes</b> Fire alarm Reset operates.	<b>yes</b>	Battery voltage and current with main power supply "off" and fire alarm in supervisory condition?
<b>yes</b> Main power to emergency power supply transfer operates.	<b>yes</b>	Voltage <b>25.6VDC</b> Current <b>200MA</b>
<b>yes</b> Status change confirmation (smoke detectors) verified	<b>yes</b>	Battery voltage and current with main power supply "off" and fire alarm in full load alarm condition?
<b>yes</b> Receipt of alarm transmission to signal receiving center?	<b>yes</b>	Voltage <b>25VDC</b> Current <b>300MA</b>
<b>na</b> Receipt of supervisory trans to signal receiving center?	<b>yes</b>	Charging current is <b>200MA</b>
<b>yes</b> Receipt of trouble transmission to signal receiving center?	<b>yes</b>	Inspected for physical damage?
<b>yes</b> Operation of the fire signal receiving center disconnect results in a specific trouble indication at control unit?	<b>na</b>	Terminal cleaned and lubricated?
<b>2.3 Control Unit or Transponder Inspection</b>	<b>yes</b>	Terminals clamped tightly.
<b>yes</b> Input circuit designations, correctly identified in relation to connected field devices	<b>na</b>	Correct Electrolyte level?
<b>yes</b> Output circuit designations correctly identified in relation to connected field devices.	<b>na</b>	Specific gravity within mfg specifications?
<b>yes</b> Correct designations-common control functions / indicators	<b>no</b>	Electrolyte leaks.
<b>yes</b> Plug-in components and modules securely in place?	<b>yes</b>	Adequately ventilated?
<b>yes</b> Plug-in cables securely in place	<b>yes</b>	Battery mfg's date code or in-service date
<b>na</b> Record date, revision and version of Firmware & software	<b>yes</b>	Disconnection causes trouble signal.
Date:      Rev:      Ver:	<b>yes</b>	Indicate type of Battery Test Performed?
<b>yes</b> Clean and free of dust and dirt?		(1) supervisory load for 24h followed by full load operation.
<b>yes</b> Fuses in accordance with MFGs specification?	<b>yes</b>	(2) silent test by using load resistor method -App F1
Control Unit or transponder lock functional?		(3) Silent accelerated test - App F2
		(4) A battery capacity meter test App F3
		(5) In lieu of battery tests, Replace with new set having current date code, as per mfg
	<b>na</b>	Record calculated battery capacity App F4      A h
	<b>na</b>	Record battery terminal voltage after tests      V dc
	<b>na</b>	Battery voltage not less than 85% of its rating after tests.
	<b>na</b>	Generator provides power to the AC circuit for F/A syst.



# Inspection and Testing of Fire Alarm Systems

Date June 17, 2014

Building Name: K052 Oyen R.C.M.P

"Yes" - Tested correctly "No" - Did not test correctly (Explain NO answers in comments) "NA" Not applicable

<u>na</u>	<b>2.5 Emergency Power Supply Test and Inspection</b> Trouble condition at the em gen shall result in an audible common trouble signal and a visual indication at the required annunciator?	<u>na</u>	Annunciation of the fault and operation outside the shorted section between each pair of :
<u>na</u>	<b>2.7 Annunciator or Sequential Displays</b> Power on indicator operates.	<u>na</u>	(i) Control unit to control unit
<u>na</u>	Individual alarm, supervisory zone indication operates.	<u>na</u>	(ii) Control unit to transponder
<u>na</u>	( <b>Exception:</b> operation of each individual alarm and supervisory zone indication, or lights the identical indicators at the other annunciators and sequential display ) Specify method of confirmation	<u>na</u>	(iii) Transponder to transponder
<u>na</u>		<u>na</u>	<b>2.2 Voice Communication Inspection/Tests</b>
<u>na</u>		<u>na</u>	Power "ON" operates?
<u>na</u>		<u>na</u>	Common visual trouble signal operates.
<u>na</u>		<u>na</u>	Common audible trouble signal operates.
<u>na</u>		<u>na</u>	Trouble signal silence switch operates.
<u>na</u>		<u>na</u>	All call voice paging including visual indicator operates?
<u>na</u>		<u>na</u>	Output circuits for selective voice paging including visual indication operates.
<u>na</u>	Minimum of 1 alarm zone and one supervisory zone tested per annunciator or sequential display to confirm operation. Individual alarm and supervisory zone labels identified.	<u>na</u>	Output circuits for selective voice paging trouble operation including visual indication operates.
<u>na</u>	Common trouble signal operates.	<u>na</u>	Microphone including press to talk switch operates.
<u>na</u>	Visual indicator test (lamp test) operates.	<u>na</u>	Operation of voice paging does interfere with initial inhibit time of alert and alarm signal?
<u>na</u>	Input wiring from control unit/transponder supervised	<u>na</u>	All call voice paging operates on emergency power?
<u>na</u>	Alarm signal silence visual indicator operates.	<u>na</u>	Upon failure of one amplifier, system automatically transfers to backup amplifier.
<u>na</u>	Switches for ancillary function operate as per design.	<u>na</u>	Circuits for emergency telephone call in operation including audible and visual indication operates
<u>na</u>	Other ancillary functions visual indicators operate.	<u>na</u>	Circuits for emergency telephone for operation, including two way voice communication operates.
<u>na</u>	Manual activation of alarm signal and indication operate.	<u>na</u>	Circuits for emergency telephones trouble operation including visual indication operates.
<u>na</u>	Displays are visible in installed location.	<u>na</u>	Emergency telephone verbal communication operates.
<u>na</u>	<b>2.9 Printer Testing</b> Operation as per design and specification?	<u>na</u>	Emergency telephone operable or in-use tone at handset.
<u>na</u>	Zone of each alarm initiating device is correctly printed.		
<u>na</u>	Rated voltage is present.		
<u>na</u>	<b>2.10 Data Communication Link Test (DCL)</b> Confirm that a trouble signal is receive at the control unit or transponder under an open loop fault for each DCL		
<u>na</u>	Where fault isolation modules are installed in DCL serving field devices, wiring shall be shorted on the isolated side, annunciation of the fault confirmed, and then a field device on the source side shall be operated, and activation confirmed at the control unit or transponder.		
<u>na</u>	Where a fault isolation in DCL is provided between control units/transponders and between		
<u>na</u>	Transponders, introduce a short circuit fault and confirm		
<u>na</u>	Continued.....		
		<u>na</u>	<b>2.11 Ancillary Device Circuit Test</b>
		<u>na</u>	Circuit confirmed
		<u>na</u>	Circuit confirmed
		<u>na</u>	Circuit confirmed
		<u>na</u>	Circuit confirmed

## Additional Comments:

Tested all devices on battery back up.

## Inspection and Testing of Fire Alarm Systems

### Individual Device Record

Date June 17, 2014	Building Name: K052 Oyen R.C.M.P
--------------------	----------------------------------

- |  |                                      |
|--|--------------------------------------|
| A. Correctly installed.                            | D. Annunciator indication confirmed. |
| B. Requires Service, Repairs, missing, or cleaning | E. Zone circuit number or address    |
| C. Alarm operation confirmed                       |                                      |

**“Y” - Acceptable “N” – Unacceptable (Explain NO answers in comments) “NA” Not applicable**

[illegible]

M.	Manual Pull station	DS	Duct smoke detector	B	Bell	AD	Ancillary device
HT	Heat detector, non restorable	SFD	Supporting field device - monitor	H	Horn	ET	Emergency Telephone
RHT	Heat detector, Restorable	FS	Sprinkler flow switch	V	Visual signal appliance	EOL	End of line resistor
S	Smoke detector	SS	Sprinkler supervisory device	SP	Cone type speaker		Other supervisory devices
RI	Remote indicator unit	EM	Fault isolation module	HSP	Horn type speaker		Other type of detector
PS	Pressure switch	BS	Bell & Strobe				

### Signal Devices Record

A. Correctly installed.  
B. Requires Service, Repairs, missing, or cleaning  
C. Alarm operation confirmed

**"Y" - Acceptable    "N" – Unacceptable (Explain NO answers in comments)    "NA" Not applicable**

[illegible]

M.	Manual Pull station	DS	Duct smoke detector	B	Bell	AD	Ancillary device
HT	Heat detector, non restorable	SFD	Supporting field device - monitor	H	Horn	ET	Emergency Telephone
RHT	Heat detector, Restorable	FS	Sprinkler flow switch	V	Visual signal appliance	EOL	End of line resistor
S	Smoke detector	SS	Sprinkler supervisory device	SP	Cone type speaker		Other supervisory devices
RI	Remote indicator unit	EM	Fault isolation module	HSP	Horn type speaker		Other type of detector
PS	Pressure switch	BS	Bell & Strobe				



# CENTRATECH TECHNICAL SERVICES LTD.

## ANNUAL MAINTENANCE RECORD

Hydrostatic Testing - Breathing Air - Fire Extinguisher Sales, Service, Recharging  
"Your Fire and Safety Specialists"

CUSTOMER: K052 OYEN R.C.MP

JOB TICKET/INVOICE: \_\_\_\_\_

ADDRESS: 317 1st Ave

DATE: June 17, 2014

Oyen, Alberta

TECHNICIAN: Korey

CONTACT: Stan Scott


CASH/ACCOUNT: Account/PO Required

PHONE: (403) 716-4323

PO# (if required): \_\_\_\_\_

#	EXTINGUISHER LOCATION	EXT. SERIAL #	EXT. MAKE	CO	EXT. TYPE	HP	SP	YR MFG	YR HT	YR 6YR	YRHT CART	COMMENTS
1	317 - 1st Ave											
2	Basement	219966	Amerex		10 ABC		X	10				Inspection
3	Main office	886066	Amerex		5 ABC		X	10				Inspection
4	Residence	841605	Amerex		10 ABC		X	13				Inspection
5	Back office area	045601	Amerex		10 ABC		X	96	09			Inspection
6	Garage	372274	Amerex		10 ABC		X	08		14		6 Year 2014
7												
8												
9	#12 Byler Place											
10	Garage	87184	Pryene		5 ABC		X	95	07	14		6 Year 2014
11	Kitchen	969120	Amerex		10 ABC		X	08		14		6 Year 2014
12												
13												
14	#402 1st West											
15	Garage	631687	Amerex		10 ABC		X	07		13		Inspection
16	Kitchen	585408	Amerex		5 ABC		X	07		13		Inspection
17												
18												
19												
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30												

COMMENTS: \_\_\_\_\_

<b>Centratech Technical Services Ltd</b>  # 1 – 7644 – 49 <sup>th</sup> Ave Red Deer, Alberta	Date of Service: June 17, 2014		Time: 1:00 pm
	<b>EMERGENCY LIGHT INSPECTION FORM</b>		Last Service Date 2013
Building Name: K052 R.C.M.P	Contact Person: Stan Scott		Phone: Fax:
Address: 317 – 319 1 <sup>st</sup> Ave	Owner:		Phone: Fax:
City: Oyen , Alberta			

**“Yes” - Acceptable    “No” - Unacceptable    (Explain No answers in comments)**

Yes	No	Summary
<input checked="" type="checkbox"/>	<input type="checkbox"/>	All emergency lights have been tested to National Fire Code - 2005
<input checked="" type="checkbox"/>	<input type="checkbox"/>	The emergency light documentation is on site.
<input checked="" type="checkbox"/>	<input type="checkbox"/>	All emergency lights are fully functional.
<input checked="" type="checkbox"/>	<input type="checkbox"/>	A copy of this report is given to the Owner or the owner's representative.

**Comments:**

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I state that the information on this form is correct at the time and place of my inspection, and that all equipment was tested in conformance with applicable codes and the Manufacturers requirements and at this time was left in operational condition upon completion of this inspection except as noted in comments.			
Korey Campbell	June 17, 2014	1:00 pm	
Technician Stamp	Date	Time	Owner or Authorized Agent


**Inspection checklist**

**“Y” - Acceptable “N” – Unacceptable (Explain NO answers in comments) “NA” Not applicable**

<b>Y</b>	Operate units by disconnecting power supply
<b>Y</b>	Verify pilot light operation and is not damaged or obstructed
<b>Y</b>	Verify terminal connections are clean, free of corrosion
<b>Y</b>	Verify terminal clamps are clean and tight
<b>Y</b>	Verify battery surface is dry and clean
<b>Y</b>	Check battery expiry dates on dry cell batteries replace every 5 years
<b>Y</b>	Check that exit signs are illuminated, clean and legible if applicable
<b>B</b>	Test to ensure the unit will provide emergency lighting for a duration equal to the following: A) two (2) hours for high buildings; and B) one (1) hour for buildings where persons are detained or care for C) one-half (1/2) hour for all other buildings
<b>Y</b>	Check dry cell battery operation of cells by observing brightness of lamps

<u><b>Locations</b></u>	<u><b>Battery</b></u>	<u><b>Satellites</b></u>	<u><b>Condition</b></u>
<b>Office</b>	<b>6 volt</b>	<b>2</b>	<b>Replaced battery</b>
<b>Back office</b>	<b>6 volt</b>	<b>3</b>	<b>Good</b>
<b>Bath room</b>	<b>6 volt</b>	<b>2</b>	<b>Good</b>
<b>Front entrance</b>	<b>6 volt</b>	<b>2</b>	<b>Good</b>

## Inspection and Testing of Fire Alarm Systems

 <b>Centratech Technical Services Ltd</b> # 1 – 7644 – 49 <sup>th</sup> Ave Red Deer, Alberta	Date of Service: July 17, 2014		Time: 8:00 am
	Annual Inspection <b>YES</b>		Last Service Date 2013
	Single Stage <b>YES</b>	Two Stage	Direct Connection
	Manufacturer: EST Quick Start		Model: Edwards
Building Name: K081 R.C.M.P Detachment	Contact Person: Stan Scott		Phone: Fax:
Address: 5012 – 53 <sup>rd</sup> Ave	Owner:		Phone: Fax:
City: Provost, AB                      Postal Code: T0B 3S0	Fire Signal Receiving Centre: 1-800-653-9111		Phone: Fax:

“Yes” - Acceptable    “No” - Unacceptable    (Explain No answers in comments)

Yes	No	Summary
<input checked="" type="checkbox"/>	<input type="checkbox"/>	The entire fire alarm system has been inspected and tested in accordance with CAN/ULC S536
<input checked="" type="checkbox"/>	<input type="checkbox"/>	The fire alarm system documentation is on site and includes a description of the system.
<input checked="" type="checkbox"/>	<input type="checkbox"/>	The fire alarm system is fully functional.
<input type="checkbox"/>	<input checked="" type="checkbox"/>	The fire alarm system has deficiencies noted.
<input checked="" type="checkbox"/>	<input type="checkbox"/>	A copy of this report is given to the Owner or the owner's representative.

	Technicians After-test Checklist
NA	Reconnect time limit cutouts?
YES	Reconnect ancillary functions?
NA	Reconnect ancillary functions (off site connections)?
YES	Reconnect signal power?
NA	Advise fire department the testing is completed?
YES	Ensure that the alarm system is functional?

### Comments

System in good working order.

I state that the information on this form is correct at the time and place of my inspection, and that all equipment was tested in conformance with applicable codes and the Manufacturers requirements and at this time was left in operational condition upon completion of this inspection except as noted in comments.

Korey Campbell CFA 11-996672	July 17, 2014	8:00 am	
Technician	Date	Time	Owner or Authorized Agent

# Inspection and Testing of Fire Alarm Systems

**Date July 17, 2014**

**Building Name: K081 Provost R.C.M.P**

**"Yes" - Tested correctly "No" - Did not test correctly (Explain NO answers in comments) "NA" Not applicable**

## 2.1 Control Unit or Transponder Tests

- yes Power on visual indicator operates.
- yes Common visual trouble signal operates.
- yes Common audible trouble signal operates.
- yes Trouble signal silence switch operates.
- yes Main Power supply failure trouble signal operates.
- yes Ground fault tested on positive and negative trouble signal
- na Alert signal operation operates.
- yes Alarm signal operation operates.
- na Automatic transfer from alert to alarm signal operates.
- na Manual transfer from alert signal to alarm signal operates.
- na Auto transfer from alert to alarm signal cancel operates
- yes Alarm signal silence inhibit function operates?
- yes Alarm signal manual silence operates.
- yes Alarm signal silence visual indication operates.
- yes Alarm signal when silenced automatically reinitiates on subsequent alarm?
- na Alarm signal silence automatic cut-out timer.
- yes Audible visual and alert and alarm signals programmed and operate as per design & specification. (app C)
- yes Input circuit alarm and supervisory operation including audible and visual indication operates.
- yes Input circuit supervision fault causes a trouble indication.
- yes Output circuit alarm indicators operate.
- yes Output circuit supervision fault causes a trouble indication.
- yes Visual indicator test (lamp test).
- yes Coded signal sequence operate not less than the required number of times and the correct alarm signal thereafter.
- yes Coded signal sequences are not interrupted by subsequent alarms?
- yes Ancillary circuit by-pass will result in a trouble signal.
- yes Input circuit to output circuit operation including ancillary device circuits, for correct program operation as per design & spec. (App "C")
- yes Fire alarm Reset operates.
- yes Main power to emergency power supply transfer operates.
- na Status change confirmation (smoke detectors) verified
- yes Receipt of alarm transmission to signal receiving center?
- na Receipt of supervisory trans to signal receiving center?
- yes Receipt of trouble transmission to signal receiving center?
- yes Operation of the fire signal receiving center disconnect results in a specific trouble indication at control unit?
- 2.3 Control Unit or Transponder Inspection**
- yes Input circuit designations, correctly identified in relation to connected field devices
- yes Output circuit designations correctly identified in relation to connected field devices.
- yes Correct designations-common control functions / indicators
- yes Plug-in components and modules securely in place?
- yes Plug-in cables securely in place
- na Record date, revision and version of Firmware & software
- Date:      Rev:      Ver:
- yes Clean and free of dust and dirt?
- yes Fuses in accordance with MFGs specification?
- Control Unit or transponder lock functional?

- yes Termination points from wiring to field devices secure
- 2.6 Annunciator & Remote Trouble Test & Inspection**
- na Power on indicator operates.
- na Individual alarm and supervisory input zone clearly
- na Indicated and separately designated?
- na Individual alarm and supervisory zone labels identified.
- na Common trouble signal operates.
- na Visual indicator test - Lamp test operates.
- na Input wiring from control unit/transponder is supervised.
- na Alarm signal silence visual indicator operates.
- na Switches for ancillary function operate as per design.
- na Other ancillary function visual indicators operate.
- na Manual activation of alarm signal and indication operates.
- na Displays are visible in installed location operates?
- na Operates on emergency power?
- 2.4 Power Supply Inspection**
- yes Fused with mfgs marked rating of the system?
- yes Adequate to meet the requirements of the system?
- 2.8 Remote Trouble Signal Unit Test and Inspection**
- na Input wiring from control/transponder is supervised.
- na Visual trouble signal operates.
- na Audible trouble signal operates.
- na Audible trouble signal silence operates.
- 2.5 Emergency Power Supply Test and Inspection**
- yes Correct battery type as recommend by manufacturer?
- yes Correct rating as determined by battery calculations based on full system load?
- yes Battery voltage main power on? **27.2VDC**
- yes Battery voltage and current with main power supply "off" and fire alarm in supervisory condition?
- Voltage **25VDC** Current **200MA**
- yes Battery voltage and current with main power supply "off" and fire alarm in full load alarm condition?
- Voltage **25VDC** Current **400MA**
- yes Charging current is **500ma**
- yes Inspected for physical damage?
- na Terminal cleaned and lubricated?
- yes Terminals clamped tightly.
- na Correct Electrolyte level?
- na Specific gravity within mfg specifications?
- no Electrolyte leaks.
- yes Adequately ventilated?
- yes Battery mfg's date code or in-service date
- yes Disconnection causes trouble signal.
- Indicate type of Battery Test Performed?
- (1) supervisory load for 24h followed by full load operation.
- (2) silent test by using load resistor method -App F1
- (3) Silent accelerated test - App F2
- yes (4) A battery capacity meter test App F3
- (5) In lieu of battery tests, Replace with new set having current date code, as per mfg
- na Record calculated battery capacity App F4      A h
- na Record battery terminal voltage after tests      V dc
- na Battery voltage not less than 85% of its rating after tests.
- na Generator provides power to the AC circuit for FA syst.



# **Inspection and Testing of Fire Alarm Systems**

Date July 17, 2014

Building Name: K081 Provost R.C.M.P

**"Yes" - Tested correctly "No" - Did not test correctly (Explain NO answers in comments) "NA" Not applicable**

<u>na</u>	<b>2.5 Emergency Power Supply Test and Inspection</b> Trouble condition at the em gen shall result in an audible common trouble signal and a visual indication at the required annunciator?	<u>na</u>	Annunciation of the fault and operation outside the shorted section between each pair of :
<u>na</u>	<b>2.7 Annunciator or Sequential Displays</b>	<u>na</u>	(i) Control unit to control unit
<u>na</u>	Power on indicator operates.	<u>na</u>	(ii) Control unit to transponder
<u>na</u>	Individual alarm, supervisory zone indication operates.	<u>na</u>	(iii) Transponder to transponder
<u>na</u>	<b>( Exception: operation of each individual alarm and supervisory zone indication, or lights the identical indicators at the other annunciators and sequential display) Specify method of confirmation</b>	<u>na</u>	<b>2.2 Voice Communication Inspection/Tests</b>
<u>na</u>	Minimum of 1 alarm zone and one supervisory zone tested per annunciator or sequential display to confirm operation. Individual alarm and supervisory zone labels identified.	<u>na</u>	Power "ON" operates?
<u>na</u>	Common trouble signal operates.	<u>na</u>	Common visual trouble signal operates.
<u>na</u>	Visual indicator test (lamp test) operates.	<u>na</u>	Common audible trouble signal operates.
<u>na</u>	Input wiring form control unit/transponder supervised	<u>na</u>	Trouble signal silence switch operates.
<u>na</u>	Alarm signal silence visual indicator operates.	<u>na</u>	All call voice paging including visual indicator operates?
<u>na</u>	Switches for ancillary function operate as per design.	<u>na</u>	Output circuits for selective voice paging including visual
<u>na</u>	Other ancillary functions visual indicators operate.	<u>na</u>	indication operates.
<u>na</u>	Manual activation of alarm signal and indication operate.	<u>na</u>	Output circuits for selective voice paging trouble operation including visual indication operates.
<u>na</u>	Displays are visible in installed location.	<u>na</u>	Microphone including press to talk switch operates.
<u>na</u>	<b>2.9 Printer Testing</b>	<u>na</u>	Operation of voice paging does interfere with initial inhibit time of alert and alarm signal?
<u>na</u>	Operation as per design and specification?	<u>na</u>	All call voice paging operates on emergency power?
<u>na</u>	Zone of each alarm initiating device is correctly printed.	<u>na</u>	Upon failure of one amplifier, system automatically transfers to backup amplifier.
<u>na</u>	Rated voltage is present.	<u>na</u>	Circuits for emergency telephone call in operation including audible and visual indication operates
<u>na</u>	<b>2.10 Data Communication Link Test (DCL)</b>	<u>na</u>	Circuits for emergency telephone for operation, including two way voice communication operates.
<u>na</u>	Confirm that a trouble signal is receive at the control unit or transponder under an open loop fault for each DCL.	<u>na</u>	Circuits for emergency telephones trouble operation including visual indication operates.
<u>na</u>	Where fault isolation modules are installed in DCL serving field devices, wiring shall be shorted on the isolated side, annunciation of the fault confirmed, and then a field device on the source side shall be operated, and activation confirmed at the control unit or transponder.	<u>na</u>	Emergency telephone verbal communication operates.
<u>na</u>	Where a fault isolation in DCL is provided between control units/transponders and between	<u>na</u>	Emergency telephone operable or in-use tone at handset.
<u>na</u>	Transponders, introduce a short circuit fault and confirm	<u>na</u>	<b>2.11 Ancillary Device Circuit Test</b>
<u>na</u>	Continued.....	<u>na</u>	Circuit confirmed
<u>na</u>		<u>na</u>	Circuit confirmed
<u>na</u>		<u>na</u>	Circuit confirmed
<u>na</u>		<u>na</u>	Circuit confirmed

## **Additional Comments:**

**Tested all devices on battery back up.**

# Inspection and Testing of Fire Alarm Systems

## Individual Device Record

Date July 17, 2014	Building Name: K081 Provost R.C.M.P
--------------------	-------------------------------------

A. Correctly installed.	D. Annunciator indication confirmed.
B. Requires Service, Repairs, missing, or cleaning	E. Zone circuit number or address
C. Alarm operation confirmed	

“Y” - Acceptable “N” – Unacceptable (Explain NO answers in comments) “NA” Not applicable

Device	Location	A	B	C	D	E	Remarks
	<u>Zone 1</u>	Y	NA	Y	Y	Y	
M	Main floor stairs well	Y	NA	Y	Y	Y	
	<u>Zone 2</u>	Y	NA	Y	Y	Y	
M	2 <sup>nd</sup> floor	Y	NA	Y	Y	Y	
	<u>Zone 3</u>	Y	NA	Y	Y	Y	
M	Basement entrance	Y	NA	Y	Y	Y	
S	Basement utility area	Y	NA	Y	Y	Y	
	<u>Zone 4</u>	Y	NA	Y	Y	Y	
S	Basement furnace	Y	NA	Y	Y	Y	
	<u>Zone 5</u>	Y	NA	Y	Y	Y	
S	Top of stairs 2 <sup>nd</sup> floor	Y	NA	Y	Y	Y	
	<u>Zone 6</u>	Y	NA	Y	Y	Y	
S	Basement stairwell	Y	NA	Y	Y	Y	
	<u>Zone 7</u>	Y	NA	Y	Y	Y	
S	Office area east	Y	NA	Y	Y	Y	
M	Office area	Y	NA	Y	Y	Y	
S	Interview	Y	NA	Y	Y	Y	
S	Monitor room	Y	NA	Y	Y	Y	
M	Cell hallway	Y	NA	Y	Y	Y	
S	Cell corridor	Y	NA	Y	Y	Y	
S	Garage storage	Y	NA	Y	Y	Y	
RHT	Secure records	Y	NA	Y	Y	Y	
RHT	Mech room	Y	NA	Y	Y	Y	
RHT	Secure bay	Y	NA	Y	Y	Y	
S	Zone 8 – cell # 1	Y	NA	Y	Y	Y	
S	Zone 9 – cell # 2	Y	NA	Y	Y	Y	
S	Furnance room	Y	NA	Y	Y	Y	

M. Manual Pull station	DS Duct smoke detector	B Bell	AD Ancillary device
HT Heat detector, non restorable	SFD Supporting field device - monitor	H Horn	ET Emergency Telephone
RHT Heat detector, Restorable	FS Sprinkler flow switch	V Visual signal appliance	EOL End of line resistor
S Smoke detector	SS Sprinkler supervisory device	SP Cone type speaker	Other supervisory devices
RI Remote indicator unit	EM Fault isolation module	HSP Horn type speaker	Other type of detector
PS Pressure switch	BS Bell & Strobe		

### Signal Devices Record

# **Inspection and Testing of Fire Alarm Systems**

**Date July 14, 2014**

**Building Name: K302 Bashaw R.C.M.P**

**“Yes” - Tested correctly “No” - Did not test correctly (Explain NO answers in comments) “NA” Not applicable**

<u>na</u>	<b>2.5 Emergency Power Supply Test and Inspection</b> Trouble condition at the em gen shall result in an audible common trouble signal and a visual indication at the required annunciator?			Annunciation of the fault and operation outside the shorted section between each pair of :
<u>na</u>	<b>2.7 Annunciator or Sequential Displays</b> Power on indicator operates.	<u>na</u>	(i)	Control unit to control unit
<u>na</u>	Individual alarm, supervisory zone indication operates.	<u>na</u>	(ii)	Control unit to transponder
<u>na</u>	( Exception: operation of each individual alarm and supervisory zone indication, or lights the identical indicators at the other annunciators and sequential display) Specify method of confirmation	<u>na</u>	(iii)	Transponder to transponder
<u>na</u>	Minimum of 1 alarm zone and one supervisory zone tested per annunciator or sequential display to confirm operation.			<b>2.2 Voice Communication Inspection/Tests</b>
<u>na</u>	Individual alarm and supervisory zone labels identified.	<u>na</u>		Power “ON” operates?
<u>na</u>	Common trouble signal operates.	<u>na</u>		Common visual trouble signal operates.
<u>na</u>	Visual indicator test (lamp test) operates.	<u>na</u>		Common audible trouble signal operates.
<u>na</u>	Input wiring from control unit/transponder supervised	<u>na</u>		Trouble signal silence switch operates.
<u>na</u>	Alarm signal silence visual indicator operates.	<u>na</u>		All call voice paging including visual indicator operates?
<u>na</u>	Switches for ancillary function operate as per design.			Output circuits for selective voice paging including visual indication operates.
<u>na</u>	Other ancillary functions visual indicators operate.	<u>na</u>		Output circuits for selective voice paging trouble operation including visual indication operates.
<u>na</u>	Manual activation of alarm signal and indication operate.	<u>na</u>		Microphone including press to talk switch operates.
<u>na</u>	Displays are visible in installed location.	<u>na</u>		Operation of voice paging does interfere with initial inhibit time of alert and alarm signal?
	<b>2.9 Printer Testing</b>	<u>na</u>		All call voice paging operates on emergency power?
<u>na</u>	Operation as per design and specification?	<u>na</u>		Upon failure of one amplifier, system automatically transfers to backup amplifier.
<u>na</u>	Zone of each alarm initiating device is correctly printed.	<u>na</u>		Circuits for emergency telephone call in operation including audible and visual indication operates
<u>na</u>	Rated voltage is present.	<u>na</u>		Circuits for emergency telephone for operation, including two way voice communication operates.
	<b>2.10 Data Communication Link Test (DCL)</b>	<u>na</u>		Circuits for emergency telephones trouble operation including visual indication operates.
<u>na</u>	Confirm that a trouble signal is receive at the control unit or transponder under an open loop fault for each DCL	<u>na</u>		Emergency telephone verbal communication operates.
<u>na</u>	Where fault isolation modules are installed in DCL. serving field devices, wiring shall be shorted on the isolated side, annunciation of the fault confirmed, and then a field device on the source side shall be operated, and activation confirmed at the control unit or transponder.	<u>na</u>		Emergency telephone operable or in-use tone at handset.
<u>na</u>	Where a fault isolation in DCL is provided between control units/transponders and between			<b>2.11 Ancillary Device Circuit Test</b>
<u>na</u>	Transponders, introduce a short circuit fault and confirm	<u>yes</u>	Circuit	HVAC shut down
	Continued.....	<u>na</u>	Circuit	confirmed
		<u>na</u>	Circuit	confirmed
		<u>na</u>	Circuit	confirmed

## **Additional Comments:**

**Annunciator panel in guard room needs a pass code to work.**



# CENTRATECH TECHNICAL SERVICES LTD.

## ANNUAL MAINTENANCE RECORD

Hydrostatic Testing - Breathing Air - Fire Extinguisher Sales, Service, Recharging  
"Your Fire and Safety Specialists"

CUSTOMER: K081 Provost Detachment

JOB TICKET/INVOICE: \_\_\_\_\_

ADDRESS: 5012 - 53rd Street

DATE: July 17, 2014

Provost, Alberta

TECHNICIAN: Korey

CONTACT: Stan Scott

CASH/ACCOUNT: Account/PO Required

PHONE: (403) 716-4323


PO# (if required): \_\_\_\_\_

#	EXTINGUISHER LOCATION	EXT. SERIAL #	EXT. MAKE	CO	EXT. TYPE	HP	SP	YR MFG	YR HT	YR 6YR	YRHT CART	COMMENTS
1	Front Entrance	939008	Amerex		5 ABC		X	09				Inspection
2	Upstairs	939009	Amerex		5 ABC		X	09				Inspection
3	Cell Area	842527	Amerex		10 ABC		X	13				Inspection
4	Downstairs	002435	Flag		5 ABC		X	95	10			Inspection
5												
6	House #5320	939016	Amerex		5 ABC		X	09				Inspection
7	House #5318	939031	Amerex		5 ABC		X	09				Inspection
8	House #4112	592165	Amerex		5 ABC		X	05		11		Inspection
9	House #4114	400631	Strike		5 ABC		X	09				Inspection
10												
11												
12												
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COMMENTS: \_\_\_\_\_



## Inspection and Testing of Fire Alarm Systems

 <b>Centratech Technical Services Ltd</b> # 1 – 7644 – 49 <sup>th</sup> Ave Red Deer, Alberta	Date of Service: August 14, 2014		Time: 9:00 am
	Annual Inspection <b>YES</b>		Last Service Date 2013
	Single Stage <b>YES</b>	Two Stage <b>NA</b>	Direct Connection None
	Manufacturer: Edwards 450098		Model: Edwards
Building Name: K110 Red Deer Distract Office		Contact Person: Donna Alyssa	Phone: Fax:
Address: 4300 – 55 <sup>th</sup> Street		Owner:	Phone: Fax:
City: Red Deer, AB		Fire Signal Receiving Centre: NA	Phone: Fax:

“Yes” - Acceptable    “No” - Unacceptable    (Explain No answers in comments)

Yes	No	Summary
<input checked="" type="checkbox"/>	<input type="checkbox"/>	The entire fire alarm system has been inspected and tested in accordance with CAN/ULC S536
<input checked="" type="checkbox"/>	<input type="checkbox"/>	The fire alarm system documentation is on site and includes a description of the system.
<input checked="" type="checkbox"/>	<input type="checkbox"/>	The fire alarm system is fully functional.
<input type="checkbox"/>	<input checked="" type="checkbox"/>	The fire alarm system has deficiencies noted.
<input checked="" type="checkbox"/>	<input type="checkbox"/>	A copy of this report is given to the Owner or the owner's representative.

		Technicians After-test Checklist
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Reconnect time limit cutouts?
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Reconnect ancillary functions?
<input type="checkbox"/>	<input type="checkbox"/>	Reconnect ancillary functions (off site connections)?
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Reconnect signal power?
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Advise fire department the testing is completed?
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Ensure that the alarm system is functional?

### Comments

Note; Transformer that charges the batteries is starting to fail.

I state that the information on this form is correct at the time and place of my inspection, and that all equipment was tested in conformance with applicable codes and the Manufacturers requirements and at this time was left in operational condition upon completion of this inspection except as noted in comments.

Korey Campbell CFFA 11-996672	Aug 14, 2014	9:00 am	
Technician	Date	Time	Owner or Authorized Agent

# Inspection and Testing of Fire Alarm Systems

**Date:** Aug 14, 2014

**Building Name:** K110 Red Deer R.C.M.P

**"Yes" - Tested correctly "No" - Did not test correctly (Explain NO answers in comments) "NA" Not applicable**

## 2.1 Control Unit or Transponder Tests

- yes Power on visual indicator operates.
- yes Common visual trouble signal operates.
- yes Common audible trouble signal operates.
- yes Trouble signal silence switch operates.
- yes Main Power supply failure trouble signal operates.
- yes Ground fault tested on positive and negative trouble signal
- na Alert signal operation operates.
- yes Alarm signal operation operates.
- na Automatic transfer from alert to alarm signal operates.
- na Manual transfer from alert signal to alarm signal operates.
- na Auto transfer from alert to alarm signal cancel operates
- yes Alarm signal silence inhibit function operates?
- yes Alarm signal manual silence operates.
- yes Alarm signal silence visual indication operates.
- yes Alarm signal when silenced automatically reinitiates on subsequent alarm?
- na Alarm signal silence automatic cut-out timer.
- yes Audible visual and alert and alarm signals programmed and operate as per design & specification. (app C)
- yes Input circuit alarm and supervisory operation including audible and visual indication operates.
- yes Input circuit supervision fault causes a trouble indication.
- yes Output circuit alarm indicators operate.
- yes Output circuit supervision fault causes a trouble indication.
- yes Visual indicator test (lamp test).
- na Coded signal sequence operate not less than the required number of times and the correct alarm signal thereafter.
- na Coded signal sequences are not interrupted by subsequent alarms?
- yes Ancillary circuit by-pass will result in a trouble signal.
- yes Input circuit to output circuit operation including ancillary device circuits, for correct program operation as per design & spec. (App "C")
- yes Fire alarm Reset operates.
- yes Main power to emergency power supply transfer operates.
- na Status change confirmation (smoke detectors) verified
- na Receipt of alarm transmission to signal receiving center?
- na Receipt of supervisory trans to signal receiving center?
- na Receipt of trouble transmission to signal receiving center?
- na Operation of the fire signal receiving center disconnect results in a specific trouble indication at control unit?

## 2.3 Control Unit or Transponder Inspection

- yes Input circuit designations, correctly identified in relation to connected field devices
- yes Output circuit designations correctly identified in relation to connected field devices.
- yes Correct designations-common control functions / indicators
- yes Plug-in components and modules securely in place?
- yes Plug-in cables securely in place
- na Record date, revision and version of Firmware & software
- na Date:      Rev:      Ver:
- yes Clean and free of dust and dirt?
- yes Fuses in accordance with MFGs specification?
- Control Unit or transponder lock functional?

- yes Termination points from wiring to field devices secure
- 2.6 Annunciator & Remote Trouble Test & Inspection**
- yes Power on indicator operates.
- yes Individual alarm and supervisory input zone clearly
- yes Indicated and separately designated?
- yes Individual alarm and supervisory zone labels identified.
- yes Common trouble signal operates.
- yes Visual indicator test - Lamp test operates.
- yes Input wiring from control unit/transponder is supervised.
- yes Alarm signal silence visual indicator operates.
- na Switches for ancillary function operate as per design.
- yes Other ancillary function visual indicators operate.
- na Manual activation of alarm signal and indication operates.
- yes Displays are visible in installed location operates?
- yes Operates on emergency power?

## 2.4 Power Supply Inspection

- yes Fused with mfgs marked rating of the system?
- yes Adequate to meet the requirements of the system?

## 2.8 Remote Trouble Signal Unit Test and Inspection

- na Input wiring from control/transponder is supervised.
- na Visual trouble signal operates.
- na Audible trouble signal operates.
- na Audible trouble signal silence operates.

## 2.5 Emergency Power Supply Test and Inspection

- yes Correct battery type as recommend by manufacturer?
- yes Correct rating as determined by battery calculations based on full system load?
- yes Battery voltage main power on? **28 Vdc / 300 ma**
- yes Battery voltage and current with main power supply "off" and fire alarm in supervisory condition?

Voltage **25.2 Vdc** Current **300ma**

- yes Battery voltage and current with main power supply "off" and fire alarm in full load alarm condition?

Voltage **25 Vdc** Current **500ma**

- yes Charging current is **400ma**
- yes Inspected for physical damage?
- na Terminal cleaned and lubricated?
- yes Terminals clamped tightly.
- na Correct Electrolyte level?
- na Specific gravity within mfg specifications?
- no Electrolyte leaks.
- yes Adequately ventilated?
- yes Battery mfg's date code or in-service date
- yes Disconnection causes trouble signal.

Indicate type of Battery Test Performed?

- (1) supervisory load for 24h followed by full load operation.
- (2) silent test by using load resistor method -App F1
- (3) Silent accelerated test - App F2
- yes (4) A battery capacity meter test App F3
- (5) In lieu of battery tests, Replace with new set having current date code, as per mfg

na Record calculated battery capacity App F4      A h

yes Record battery terminal voltage after tests 25.3 V dc

yes Battery voltage not less than 85% of its rating after tests.

na Generator provides power to the AC circuit for FA syst.



# Inspection and Testing of Fire Alarm Systems

Date: Aug 14, 2014

Building Name: K110 Red Deer R.C.M.P

"Yes" - Tested correctly "No" - Did not test correctly (Explain NO answers in comments) "NA" Not applicable

<p><u>na</u> <b>2.5 Emergency Power Supply Test and Inspection</b> Trouble condition at the em gen shall result in an audible common trouble signal and a visual indication at the required annunciator?</p> <p><u>Na</u> <b>2.7 Annunciator or Sequential Displays</b> Power on indicator operates. <u>Na</u> Individual alarm, supervisory zone indication operates. <u>Na</u> ( Exception: operation of each individual alarm and supervisory zone indication, or lights the identical indicators at the other annunciators and sequential display) Specify method of confirmation</p>	<p><u>na</u> Annunciation of the fault and operation outside the shorted section between each pair of : <u>na</u> (i) Control unit to control unit <u>na</u> (ii) Control unit to transponder <u>na</u> (iii) Transponder to transponder</p> <p><b>2.2 Voice Communication Inspection/Tests</b> <u>na</u> Power "ON" operates? <u>na</u> Common visual trouble signal operates. <u>na</u> Common audible trouble signal operates. <u>na</u> Trouble signal silence switch operates. <u>na</u> All call voice paging including visual indicator operates? <u>na</u> Output circuits for selective voice paging including visual</p>
<p><u>Na</u> Minimum of 1 alarm zone and one supervisory zone tested per annunciator or sequential display to confirm operation. <u>Na</u> Individual alarm and supervisory zone labels identified. <u>Na</u> Common trouble signal operates. <u>Na</u> Visual indicator test (lamp test) operates. <u>Na</u> Input wiring form control unit/transponder supervised <u>Na</u> Alarm signal silence visual indicator operates. <u>Na</u> Switches for ancillary function operate as per design. <u>Na</u> Other ancillary functions visual indicators operate. <u>Na</u> Manual activation of alarm signal and indication operate. <u>Na</u> Displays are visible in installed location.</p>	<p>indication operates. <u>na</u> Output circuits for selective voice paging trouble operation including visual indication operates. <u>na</u> Microphone including press to talk switch operates. <u>na</u> Operation of voice paging does interfere with initial inhibit time of alert and alarm signal? <u>na</u> All call voice paging operates on emergency power? <u>na</u> Upon failure of one amplifier, system automatically transfers to backup amplifier. <u>na</u> Circuits for emergency telephone call in operation including audible and visual indication operates <u>na</u> Circuits for emergency telephone for operation, including two way voice communication operates. <u>na</u> Circuits for emergency telephones trouble operation including visual indication operates. <u>na</u> Emergency telephone verbal communication operates. <u>na</u> Emergency telephone operable or in-use tone at handset.</p>
<p><b>2.9 Printer Testing</b> <u>na</u> Operation as per design and specification? <u>na</u> Zone of each alarm initiating device is correctly printed. <u>na</u> Rated voltage is present.</p> <p><b>2.10 Data Communication Link Test (DCL)</b> <u>na</u> Confirm that a trouble signal is receive at the control unit or transponder under an open loop fault for each DCL <u>na</u> Where fault isolation modules are installed in DCL serving field devices, wiring shall be shorted on the isolated side, annunciation of the fault confirmed, and then a field device on the source side shall be operated, and activation confirmed at the control unit or transponder. <u>na</u> Where a fault isolation in DCL is provided between control units/transponders and between <u>na</u> Transponders, introduce a short circuit fault and confirm Continued.....</p>	<p><b>2.11 Ancillary Device Circuit Test</b> <u>Y</u> Circuit HVAC confirmed <u>na</u> Circuit confirmed <u>na</u> Circuit confirmed <u>na</u> Circuit confirmed</p>

## Additional Comments:

All smoke detectors require replacement due to age.

# Inspection and Testing of Fire Alarm Systems Individual Device Record

Date: Aug 14, 2014	Building Name: K110 Red Deer R.C.M.P
--------------------	--------------------------------------

A. Correctly installed.	D. Annunciator indication confirmed.
B. Requires Service, Repairs, missing, or cleaning	E. Zone circuit number or address
C. Alarm operation confirmed	

“Y” - Acceptable “N” – Unacceptable (Explain NO answers in comments) “NA” Not applicable

Device	Location	A	B	C	D	E	Remarks
HT	Meter room	Y	NA	Y	Y	1	
HT	Generator room	Y	NA	Y	Y	1	
EOL	Meter room entrance	Y	NA	Y	Y	1	
M	Entrance	Y	NA	Y	Y	1	
M	Entrance east	Y	NA	Y	Y	2	
EOL	Basement entrance west	Y	NA	Y	Y	2	
M	Entrance west	Y	NA	Y	Y	2	
HT	Gun range	Y	NA	Y	Y	2	
HT	Gun range file storage	Y	NA	Y	Y	2	
RHT	Gun range janitor room	Y	NA	Y	Y	2	
HT	Ammo storage	Y	NA	Y	Y	2	
HT	Mech room	Y	NA	Y	Y	2	
HT	Mech room	Y	NA	Y	Y	2	
HT	Mech room	Y	NA	Y	Y	2	
HT	Mech room	Y	NA	Y	Y	2	
RHT	Mech storage room	Y	NA	Y	Y	2	
HT	Elevator room	Y	NA	Y	Y	2	
S	Electrical room	Y	NA	Y	Y	2	
RHT	Janitor room	Y	NA	Y	Y	2	
RHT	Male locker room	Y	NA	Y	Y	2	
RHT	Women locker room	Y	NA	Y	Y	2	
	Spare (not in use)					3	
M	Public entrance	Y	NA	Y	Y	4	
M	East stair well entrance	Y	NA	Y	Y	4	
M	West exit	Y	NA	Y	Y	4	
RHT	ERT locker room	Y	NA	Y	Y	4	Replaced 2014
RHT	Electrical room	Y	NA	Y	Y	4	
M	ERT room exit	Y	NA	Y	Y	4	
RHT	ERT room	Y	NA	Y	Y	4	
RHT	ERT garage	Y	NA	Y	Y	4	

M. Manual Pull station	DS Duct smoke detector	B Bell	AD Ancillary device
HT Heat detector, non restorable	SFD Supporting field device - monitor	H Horn	ET Emergency Telephone
RHT Heat detector, Restorable	FS Sprinkler flow switch	V Visual signal appliance	EOL End of line resistor
S Smoke detector	SS Sprinkler supervisory device	SP Cone type speaker	Other supervisory devices
RI Remote indicator unit	EM Fault isolation module	HSP Horn type speaker	Other type of detector
PS Pressure switch	BS Bell & Strobe		

# Inspection and Testing of Fire Alarm Systems Individual Device Record

Date: Aug 14, 2014

Building Name: K110 Red Deer R.C.M.P

A. Correctly installed. D. Annunciator indication confirmed.  
B. Requires Service, Repairs, missing, or cleaning E. Zone circuit number or address  
C. Alarm operation confirmed

“Y” - Acceptable “N” – Unacceptable (Explain NO answers in comments) “NA” Not applicable

Device	Location	A	B	C	D	E	Remarks
RHT	Storage room	Y	NA	Y	Y	4	
RHT	Outer exhibit room	Y	NA	Y	Y	4	NAC
RHT	Inner exhibit room	Y	NA	Y	Y	4	NAC
M	Secure bay exit	Y	NA	Y	Y	4	
RHT	Secure bay	Y	NA	Y	Y	4	
RHT	Secure bay south	Y	NA	Y	Y	4	
M	Secure bay south	Y	NA	Y	Y	4	
HT	Storage room	Y	NA	Y	Y	4	
RHT	Janitors room	Y	NA	Y	Y	4	
HT	ATS garage	Y	NA	Y	Y	5	
HT	ATS garage	Y	NA	Y	Y	5	
HT	ATS room	Y	NA	Y	Y	5	
HT	ATS room	Y	NA	Y	Y	5	
HT	ATS storage room	Y	NA	Y	Y	5	
HT	ATS storage room # 2	Y	NA	Y	Y	5	
M	ATS garage exit	Y	NA	Y	Y	5	
M	ATS entrance	Y	NA	Y	Y	5	
EOL	ATS entrance	Y	NA	Y	Y	5	
HT	Major crime kitchen	Y	NA	Y	Y	5	
HT	Serious crime kitchen	Y	NA	Y	Y	5	
M	Serious crime exit	Y	NA	Y	Y	5	
M	2 <sup>nd</sup> floor east stair exit	Y	NA	Y	Y	6	
EOL	2 <sup>nd</sup> floor east stair exit	Y	NA	Y	Y	6	
HT	Major crime kitchen	Y	NA	Y	Y	6	
S	Major crime room 226	Y	NA	Y	Y	6	
HT	Major crime storage room	Y	NA	Y	Y	6	
HT	Major crime locker room	Y	NA	Y	Y	6	
HT	2 <sup>nd</sup> floor janitor room	Y	NA	Y	Y	6	
RHT	2 <sup>nd</sup> floor file room	Y	NA	Y	Y	6	
HT	2 <sup>nd</sup> floor lab office	Y	NA	Y	Y	6	
HT	2 <sup>nd</sup> floor lab kitchen	Y	NA	Y	Y	6	
HT	2 <sup>nd</sup> floor lab	Y	NA	Y	Y	6	
M	2 <sup>nd</sup> floor west exit	Y	NA	Y	Y	6	

M. Manual Pull station	DS Duct smoke detector	B Bell	AD Ancillary device
HT Heat detector, non restorable	SFD Supporting field device - monitor	H Horn	ET Emergency Telephone
RHT Heat detector, Restorable	FS Sprinkler flow switch	V Visual signal appliance	EOL End of line resistor
S Smoke detector	SS Sprinkler supervisory device	SP Cone type speaker	Other supervisory devices
RI Remote indicator unit	EM Fault isolation module	HSP Horn type speaker	Other type of detector
PS Pressure switch	BS Bell & Strobe		

## Inspection and Testing of Fire Alarm Systems

### Individual Device Record

Date: Aug 14, 2014	Building Name: K110 Red Deer R.C.M.P
--------------------	--------------------------------------

- |  |                                      |
|--|--------------------------------------|
| A. Correctly installed.                            | D. Annunciator indication confirmed. |
| B. Requires Service, Repairs, missing, or cleaning | E. Zone circuit number or address    |
| C. Alarm operation confirmed                       |                                      |

**“Y” - Acceptable    “N” – Unacceptable (Explain NO answers in comments)    “NA” Not applicable**

[illegible]

M.	Manual Pull station	DS	Duct smoke detector	B	Bell	AD	Ancillary device
HT	Heat detector, non restorable	SFD	Supporting field device - monitor	H	Horn	ET	Emergency Telephone
RIIT	Heat detector, Restorable	FS	Sprinkler flow switch	V	Visual signal appliance	EOL	End of line resistor
S	Smoke detector	SS	Sprinkler supervisory device	SP	Cone type speaker		Other supervisory devices
RI	Remote indicator unit	EM	Fault isolation module	HSP	Horn type speaker		Other type of detector
PS	Pressure switch	BS	Bell & Strobe				

## Inspection and Testing of Fire Alarm Systems Signal Devices Record

**Date: Aug 14, 2014**

**Building Name: K11 Red Deer R.C.M.P**

- A. Correctly installed.**  
**B. Requires Service, Repairs, missing, or cleaning**  
**C. Alarm operation confirmed**

**“Y” - Acceptable “N” – Unacceptable (Explain NO answers in comments) “NA” Not applicable**

[illegible]

M.	Manual Pull station	DS	Duct smoke detector	B	Bell	AD	Ancillary device
HT	Heat detector, non restorable	SFD	Supporting field device - monitor	H	Horn	ET	Emergency Telephone
RIFT	Heat detector, Restorable	FS	Sprinkler flow switch	V	Visual signal appliance	EOI	End of line resistor
S	Smoke detector	SS	Sprinkler supervisory device	SP	Cone type speaker		Other supervisory devices
RI	Remote indicator unit	EM	Fault isolation module	IISP	Horn type speaker		Other type of detector
PS	Pressure switch	BS	Bell & Strobe				



# CENTRATECH TECHNICAL SERVICES LTD.

## ANNUAL MAINTENANCE RECORD

Hydrostatic Testing - Breathing Air - Fire Extinguisher Sales, Service, Recharging  
"Your Fire and Safety Specialists"

CUSTOMER: Red Deer Rural RCMP

JOB TICKET/INVOICE: \_\_\_\_\_

ADDRESS: 4300 - 53rd Street

DATE: August 14, 2014

Red Deer, AB

TECHNICIAN: Gilbert

CONTACT: Donna Moore

CASH/ACCOUNT: Account

PHONE: 403-343-5500

PO# (if required): \_\_\_\_\_

#	EXTINGUISHER LOCATION	EXT. SERIAL #	EXT. MAKE	CO	EXT. TYPE	HP	SP	YR MFG	YR HT	YR 6YR	YRHT CART	COMMENTS
1	Range	230083	Amerex		15 CO2		X	09	14			Hydro 2014
2	Lower Hall	334841	Ansul		5 ABC		X	07		13		Inspection
3	Boiler Room	334843	Ansul		5 ABC		X	07		13		Inspection
4	Elec Room	334849	Ansul		5 ABC		X	07		13		Inspection
5	Lower Hall	334837	Ansul		5 ABC		X	07		13		Inspection
6	Generator room	650912	Ansul		5 ABC		X	89	05	11		Inspection
7	Telephone Exchange	282001	Badger		5 CO2		X	06	11			Inspection
8	ERT	136997	Amerex		10 ABC		X	10				Inspection
9	ERT Garage	334860	Ansul		5 ABC		X	07		13		Inspection
10	Exhibit Room	279228	Amerex		5 ABC		X	05		11		Locked
11	By Telephone room	334779	Ansul		5 ABC		X	07		14		6 Year 2014
12	HP Bay	334850	Ansul		5 ABC		X	07		13		Inspection
13	Indent Bay	251739	Ansul		5 ABC		X	07		13		Inspection
14	Comp Tech Bay	334838	Ansul		5 ABC		X	07		13		Inspection
15	Workshop Bay	650914	Ansul		5 ABC		X	07		13		Inspection
16	Informatics Back Store	253298	Pyrene		5 ABC		X	08		14		6 Year 2014
17	Sea Can Outside	939217	Amerex		5 ABC		X	09				Inspection
18	Drugs/MCU	648260	Pyrene		5 ABC		X	89	13	07		Inspection
19	CIS	136036	Amerex		10 ABC		X	10				Inspection
20	Upper Hall	650936	Pyrene		5 ABC		X	89	13	07		Inspection
21	Telecom	282171	Badger		5 CO2		X	06	11			Inspection
22	Telecom	132339	Badger		5 CO2		X	06	11			Inspection
23	Telecom	282172	Badger		5 CO2		X	06	11			Inspection
24	MCU Kitchen	939137	Amerex		5 ABC		X	09				Inspection
25	Telecom	291271	Badger		5 CO2		X	06	11			Inspection
26	Upper Hall	650921	Pyrene		5 ABC		X	89	14			Hydro 2014
27	Ident	334870	Ansul		5 ABC		X	07		13		Inspection
28	Ident	334854	Ansul		5 ABC		X	07		13		Inspection
29	Ident	230085	Amerex		10 CO2		X	09	14			Hydro 2014
30	Spare in ITS	613751	Amerex		20 ABC		X	05		13		Inspection
31												

COMMENTS: \_\_\_\_\_



# CENTRATECH TECHNICAL SERVICES LTD.

## ANNUAL MAINTENANCE RECORD

Hydrostatic Testing - Breathing Air - Fire Extinguisher Sales, Service, Recharging  
"Your Fire and Safety Specialists"

CUSTOMER: Red Deer Rural RCMP

JOB TICKET/INVOICE: \_\_\_\_\_

ADDRESS: 4300 - 53rd Street

DATE: August 14, 2014

Red Deer, AB

TECHNICIAN: Gilbert

CONTACT: Donna Moore

CASH/ACCOUNT: Account

PHONE: 403-343-5500

PO# (if required): \_\_\_\_\_


#	EXTINGUISHER LOCATION	EXT. SERIAL #	EXT. MAKE	CO	EXT. TYPE	HP	SP	YR MFG	YR HT	YR 6YR	YRHT CART	COMMENTS
1	Range	230083	Amerex		15 CO2		X	09	14			Hydro 2014
2	Lower Hall	334841	Ansul		5 ABC		X	07		13		Inspection
3	Boiler Room	334843	Ansul		5 ABC		X	07		13		Inspection
4	Elec Room	334849	Ansul		5 ABC		X	07		13		Inspection
5	Lower Hall	334837	Ansul		5 ABC		X	07		13		Inspection
6	Generator room	650912	Ansul		5 ABC		X	89	05	11		Inspection
7	Telephone Exchange	282001	Badger		5 CO2		X	06	11			Inspection
8	ERT	136997	Amerex		10 ABC		X	10				Inspection
9	ERT Garage	334860	Ansul		5 ABC		X	07		13		Inspection
10	Exhibit Room	279228	Amerex		5 ABC		X	05		11		Locked
11	By Telephone room	334779	Ansul		5 ABC		X	07		14		6 Year 2014
12	HP Bay	334850	Ansul		5 ABC		X	07		13		Inspection
13	Indent Bay	251739	Ansul		5 ABC		X	07		13		Inspection
14	Comp Tech Bay	334838	Ansul		5 ABC		X	07		13		Inspection
15	Workshop Bay	650914	Ansul		5 ABC		X	07		13		Inspection
16	Informatics Back Store	253298	Pyrene		5 ABC		X	08		14		6 Year 2014
17	Sea Can Outside	939217	Amerex		5 ABC		X	09				Inspection
18	Drugs/MCU	648260	Pyrene		5 ABC		X	89	13	07		Inspection
19	CIS	136036	Amerex		10 ABC		X	10				Inspection
20	Upper Hall	650936	Pyrene		5 ABC		X	89	13	07		Inspection
21	Telecom	282171	Badger		5 CO2		X	06	11			Inspection
22	Telecom	132339	Badger		5 CO2		X	06	11			Inspection
23	Telecom	282172	Badger		5 CO2		X	06	11			Inspection
24	MCU Kitchen	939137	Amerex		5 ABC		X	09				Inspection
25	Telecom	291271	Badger		5 CO2		X	06	11			Inspection
26	Upper Hall	650921	Pyrene		5 ABC		X	89	14			Hydro 2014
27	Ident	334870	Ansul		5 ABC		X	07		13		Inspection
28	Ident	334854	Ansul		5 ABC		X	07		13		Inspection
29	Ident	230085	Amerex		10 CO2		X	09	14			Hydro 2014
30	Spare in ITS	613751	Amerex		20 ABC		X	05		13		Inspection
31												

COMMENTS: \_\_\_\_\_





## Inspection and Testing of Fire Alarm Systems

 <b>Centratech Technical Services Ltd</b> # 1 - 7644 - 49 <sup>th</sup> Ave Red Deer, Alberta	Date of Service: July 17, 2014		Time: 9:00 am
	Annual Inspection <b>YES</b>		Last Service Date July 2013
	Single Stage NA	Two Stage YES	Direct Connection Reliance YES
	Manufacturer: Simplex		Model: Simplex 4002
Building Name: K309 R.C.M.P Detachment		Contact Person: Alyssa	Phone: Fax:
Address: 4428 45 <sup>th</sup> Street		Owner:	Phone: Fax:
City: Rocky Mountain House , AB		Fire Signal Receiving Centre:	Phone: Fax:


"Yes"- Acceptable "No" - Unacceptable (Explain No answers in comments)

Yes	No	Summary
<input checked="" type="checkbox"/>	<input type="checkbox"/>	The entire fire alarm system has been inspected and tested in accordance with CAN/ULC S536-04
<input checked="" type="checkbox"/>	<input type="checkbox"/>	The fire alarm system documentation is on site and includes a description of the system.
<input checked="" type="checkbox"/>	<input type="checkbox"/>	The fire alarm system is fully functional.
<input checked="" type="checkbox"/>	<input type="checkbox"/>	The fire alarm system has deficiencies. See notes / comments.
<input checked="" type="checkbox"/>	<input type="checkbox"/>	A copy of this report is given to the Owner or the owner's representative.

	Technicians After-test Checklist
<input checked="" type="checkbox"/>	Reconnect time limit cutouts?
<input checked="" type="checkbox"/>	Reconnect ancillary functions?
<input type="checkbox"/>	Reconnect ancillary functions (off site connections)?
<input checked="" type="checkbox"/>	Reconnect signal power?
<input checked="" type="checkbox"/>	Advise fire department the testing is completed?
<input checked="" type="checkbox"/>	Ensure that the alarm system is functional?

### Comments

All the smoke detectors seem to be original to the system and thus are over 10 years old and should be replaced as per the Alberta Fire Code AFC 6.3.1.2.(1).

The information on this form (and in the documents attached hereto) attests to the fact that the equipment listed herein has been tested/inspected in conformance with applicable codes, bylaws, standards, and the manufacturer's requirements by a qualified technician. The equipment was left in an operational condition except as noted in the spaces marked "comments."			
Centratech technical Services Ltd.  Craig De Graff CFAA#11-995092 Technician	July 17, 2014 Date	1700 Hrs. Time	
Owner or Authorized Agent			

# Inspection and Testing of Fire Alarm Systems

Date July 17, 2014

Building Name: K309 Rocky Mountain House R.C.M.P

"Yes" - Tested correctly "No" - Did not test correctly (Explain NO answers in comments) "NA" Not applicable

## 2.1 Control Unit or Transponder Tests

- yes Power on visual indicator operates.
  - yes Common visual trouble signal operates.
  - yes Common audible trouble signal operates.
  - yes Trouble signal silence switch operates.
  - yes Main Power supply failure trouble signal operates.
  - yes Ground fault tested on positive and negative trouble signal
  - yes Alert signal operation operates.
  - yes Alarm signal operation operates.
  - yes Automatic transfer from alert to alarm signal operates.
  - yes Manual transfer from alert signal to alarm signal operates.
  - yes Auto transfer from alert to alarm signal cancel operates
  - yes Alarm signal silence inhibit function operates?
  - yes Alarm signal manual silence operates.
  - yes Alarm signal silence visual indication operates.
  - yes Alarm signal when silenced automatically reinitiates on subsequent alarm?
  - na Alarm signal silence automatic cut-out timer.
  - yes Audible visual and alert and alarm signals programmed and operate as per design & specification. (app C)
  - yes Input circuit alarm and supervisory operation including audible and visual indication operates.
  - yes Input circuit supervision fault causes a trouble indication.
  - yes Output circuit alarm indicators operate.
  - yes Output circuit supervision fault causes a trouble indication.
  - yes Visual indicator test (lamp test).
  - na Coded signal sequence operate not less than the required number of times and the correct alarm signal thereafter.
  - na Coded signal sequences are not interrupted by subsequent alarms?
  - yes Ancillary circuit by-pass will result in a trouble signal.
  - yes Input circuit to output circuit operation including ancillary device circuits, for correct program operation as per design & spec. (App "C")
  - yes Fire alarm Reset operates.
  - yes Main power to emergency power supply transfer operates.
  - na Status change confirmation (smoke detectors) verified
  - Na Receipt of alarm transmission to signal receiving center?
  - Na Receipt of supervisory trans to signal receiving center?
  - Na Receipt of trouble transmission to signal receiving center?
  - Na Operation of the fire signal receiving center disconnect results in a specific trouble indication at control unit?
- ## 2.3 Control Unit or Transponder Inspection
- yes Input circuit designations, correctly identified in relation to connected field devices
  - yes Output circuit designations correctly identified in relation to connected field devices.
  - yes Correct designations-common control functions / indicators
  - yes Plug-in components and modules securely in place?
  - yes Plug-in cables securely in place
  - na Record date, revision and version of Firmware & software  
Date:      Rev:      Ver:
  - yes Clean and free of dust and dirt?
  - yes Fuses in accordance with MFGs specification?
  - yes Control Unit or transponder lock functional?

- yes Termination points from wiring to field devices secure
- ## 2.6 Annunciator & Remote Trouble Test & Inspection
- yes Power on indicator operates.
  - yes Individual alarm and supervisory input zone clearly indicated and separately designated?
  - yes Individual alarm and supervisory zone labels identified.
  - yes Common trouble signal operates.
  - yes Visual indicator test - Lamp test operates.
  - yes Input wiring from control unit/transponder is supervised.
  - yes Alarm signal silence visual indicator operates.
  - yes Switches for ancillary function operate as per design.
  - yes Other ancillary function visual indicators operate.
  - yes Manual activation of alarm signal and indication operates.
  - yes Displays are visible in installed location operates?
  - yes Operates on emergency power?
- ## 2.4 Power Supply Inspection
- yes Fused with mfgs marked rating of the system?
  - yes Adequate to meet the requirements of the system?
- ## 2.8 Remote Trouble Signal Unit Test and Inspection
- na Input wiring from control/transponder is supervised.
  - na Visual trouble signal operates.
  - na Audible trouble signal operates.
  - na Audible trouble signal silence operates.
- ## 2.5 Emergency Power Supply Test and Inspection
- yes Correct battery type as recommend by manufacturer?
  - yes Correct rating as determined by battery calculations based on full system load?
  - No Battery voltage main power on? 27.2 Vdc / 300 mA
  - No Battery voltage and current with main power supply "off" and fire alarm in supervisory condition?  
Voltage 25.4 Vdc Current 300 mA
  - No Battery voltage and current with main power supply "off" and fire alarm in full load alarm condition?  
Voltage 24.8Vdc Current 500 mA
  - No Charging current is 1.2 A
  - yes Inspected for physical damage?
  - na Terminal cleaned and lubricated?
  - yes Terminals clamped tightly.
  - na Correct Electrolyte level?
  - na Specific gravity within mfg specifications?
  - no Electrolyte leaks.
  - yes Adequately ventilated?
  - yes Battery mfg's date code or in-service date 2013
  - yes Disconnection causes trouble signal.
  - Indicate type of Battery Test Performed?  
(1) supervisory load for 24h followed by full load operation.  
(2) silent test by using load resistor method -App F1  
(3) Silent accelerated test - App F2  
(4) A battery capacity meter test App F3  
(5) In lieu of battery tests, Replace with new set having current date code, as per mfg
  - na Record calculated battery capacity App F4      A h
  - yes Record battery terminal voltage after tests 25.1 V dc
  - yes Battery voltage not less than 85% of its rating after tests.
  - na Generator provides power to the AC circuit for FA syst.

# **Inspection and Testing of Fire Alarm Systems**

Date July 17, 2014

Building Name: K309 Rocky Mountain House R.C.M.P

**"Yes" - Tested correctly "No" - Did not test correctly (Explain NO answers in comments) "NA" Not applicable**

<u>na</u>	<b>2.5 Emergency Power Supply Test and Inspection</b> Trouble condition at the em gen shall result in an audible common trouble signal and a visual indication at the required annunciator?			Annunciation of the fault and operation outside the shorted section between each pair of :
<u>na</u>	<b>2.7 Annunciator or Sequential Displays</b> Power on indicator operates.	<u>na</u>	(i)	Control unit to control unit
<u>na</u>	Individual alarm, supervisory zone indication operates.	<u>na</u>	(ii)	Control unit to transponder
<u>na</u>	( Exception: operation of each individual alarm and supervisory zone indication, or lights the identical indicators at the other annunciators and sequential display) Specify method of confirmation	<u>na</u>	(iii)	Transponder to transponder
<u>na</u>	Minimum of 1 alarm zone and one supervisory zone tested per annunciator or sequential display to confirm operation. Individual alarm and supervisory zone labels identified.	<u>na</u>		<b>2.2 Voice Communication Inspection/Tests</b> Power "ON" operates?
<u>na</u>	Common trouble signal operates.	<u>na</u>		Common visual trouble signal operates.
<u>na</u>	Visual indicator test (lamp test) operates.	<u>na</u>		Common audible trouble signal operates.
<u>na</u>	Input wiring from control unit/transponder supervised	<u>na</u>		Trouble signal silence switch operates.
<u>na</u>	Alarm signal silence visual indicator operates.	<u>na</u>		All call voice paging including visual indicator operates?
<u>na</u>	Switches for ancillary function operate as per design.	<u>na</u>		Output circuits for selective voice paging including visual indication operates.
<u>na</u>	Other ancillary functions visual indicators operate.	<u>na</u>		Output circuits for selective voice paging trouble operation including visual indication operates.
<u>na</u>	Manual activation of alarm signal and indication operate.	<u>na</u>		Microphone including press to talk switch operates.
<u>na</u>	Displays are visible in installed location.	<u>na</u>		Operation of voice paging does interfere with initial inhibit time of alert and alarm signal?
<u>na</u>	<b>2.9 Printer Testing</b> Operation as per design and specification?	<u>na</u>		All call voice paging operates on emergency power?
<u>na</u>	Zone of each alarm initiating device is correctly printed.	<u>na</u>		Upon failure of one amplifier, system automatically transfers to backup amplifier.
<u>na</u>	Rated voltage is present.	<u>na</u>		Circuits for emergency telephone call in operation including audible and visual indication operates
<u>na</u>	<b>2.10 Data Communication Link Test (DCL)</b> Confirm that a trouble signal is receive at the control unit or transponder under an open loop fault for each DCL	<u>na</u>		Circuits for emergency telephone for operation, including two way voice communication operates.
<u>na</u>	Where fault isolation modules are installed in DCL serving field devices, wiring shall be shorted on the isolated side, annunciation of the fault confirmed, and then a field device on the source side shall be operated, and activation confirmed at the control unit or transponder.	<u>na</u>		Circuits for emergency telephones trouble operation including visual indication operates.
<u>na</u>	Where a fault isolation in DCL is provided between control units/transponders and between	<u>na</u>		Emergency telephone verbal communication operates.
<u>na</u>	Transponders, introduce a short circuit fault and confirm Continued....	<u>na</u>		Emergency telephone operable or in-use tone at handset.
		<u>Y</u>		<b>2.11 Ancillary Device Circuit Test</b>
		<u>na</u>	Circuit	HVAC confirmed
		<u>na</u>	Circuit	confirmed
		<u>na</u>	Circuit	confirmed
		<u>na</u>	Circuit	confirmed

## **Additional Comments:**

There are two annunciators on system 1 in main guard post, second in other guard post across from cell 127.

Tested FA system on battery backup, breaker is in basement server room east wall marked in red.

# Inspection and Testing of Fire Alarm Systems Individual Device Record

Date July 17, 2014	Building Name: K309 Rocky Mountain House R.C.M.P
--------------------	--

A. Correctly installed.	D. Annunciator indication confirmed.
B. Requires Service, Repairs, missing, or cleaning	E. Zone circuit number or address
C. Alarm operation confirmed	

“Y” - Acceptable “N” – Unacceptable (Explain NO answers in comments) “NA” Not applicable

Device	Location	A	B	C	D	E	Remarks
	<b>Zone 1</b>						
S	Stair well south	Y	NA	Y	Y	Y	EOL 1 top of south stairs
	<b>Zone 2</b>						
M	Front entrance	Y	NA	Y	Y	Y	
M	Back door	Y	NA	Y	Y	Y	
HT	Men washroom	Y	NA	Y	Y	Y	
HT	Lunch room	Y	NA	Y	Y	Y	
HT	Lunch room	Y	NA	Y	Y	Y	
HT	Office	Y	NA	Y	Y	Y	
HT	Office	Y	NA	Y	Y	Y	
HT	Victim services office	Y	NA	Y	Y	Y	
HT	File storage room	Y	NA	Y	Y	Y	
HT	Office	Y	NA	Y	Y	Y	
HT	Reception	Y	NA	Y	Y	Y	
HT	Main office	Y	NA	Y	Y	Y	
HT	Main office	Y	NA	Y	Y	Y	
HT	Main office	Y	NA	Y	Y	Y	
HT	Main office	Y	NA	Y	Y	Y	
HT	Office # 1	Y	NA	Y	Y	Y	
HT	Office # 2	Y	NA	Y	Y	Y	
HT	Office # 3	Y	NA	Y	Y	Y	
	<b>Zone 3</b>						
M	Garage	Y	NA	Y	Y	Y	
RHT	Garage	Y	NA	Y	Y	Y	

M. Manual Pull station	DS Duct smoke detector	B Bell	AD Ancillary device
HT Heat detector, non restorable	SFD Supporting field device - monitor	H Horn	ET Emergency Telephone
RHT Heat detector, Restorable	FS Sprinkler flow switch	V Visual signal appliance	EOL End of line resistor
S Smoke detector	SS Sprinkler supervisory device	SP Cone type speaker	Other supervisory devices
RI Remote indicator unit	EM Fault isolation module	HSP Horn type speaker	Other type of detector
PS Pressure switch	BS Bell & Strobe		

# Inspection and Testing of Fire Alarm Systems

## Individual Device Record

Date July 17, 2014	Building Name: K309 Rocky Mountain House R.C.M.P
--------------------	--

A. Correctly installed.	D. Annunciator indication confirmed.
B. Requires Service, Repairs, missing, or cleaning	E. Zone circuit number or address
C. Alarm operation confirmed	

"Y" - Acceptable "N" - Unacceptable (Explain NO answers in comments) "NA" Not applicable

Device	Location	A	B	C	D	E	Remarks
	<u>Zone 4</u>						
M	North exit	Y	NA	Y	Y	Y	
S	Outside cell 127	Y	NA	Y	Y	Y	
M	North guard station	Y	NA	Y	Y	Y	
HT	North guard station	Y	NA	Y	Y	Y	
S	In hall by guard station	Y	NA	Y	Y	Y	
S	Outside guard station	Y	NA	Y	Y	Y	
S	Outside cell 139	Y	NA	Y	Y	Y	
HT	Booking room	Y	NA	Y	Y	Y	
HT	Guard station	Y	NA	Y	Y	Y	
HT	Guard station	Y	NA	Y	Y	Y	
M	Guard station	Y	NA	Y	Y	Y	EOL 4 west wall
	<u>Zone 5</u>						
HT	Closed storage exhibit	Y	NA	Y	Y	Y	
HT	Closed storage exhibit	Y	NA	Y	Y	Y	No access locked
	<u>Zone 6</u>						
S	Holding cell 118	Y	NA	Y	Y	Y	Did not respond to smoke
	<u>Zone 7</u>						
S	Holding cell 139	Y	NA	Y	Y	Y	Did not respond to smoke
	<u>Zone 8</u>						
S	Holding cell 128	Y	NA	Y	Y	Y	
	<u>Zone 9</u>						
S	Holding cell 135	Y	NA	Y	Y	Y	Did not respond to smoke
	<u>Zone 10</u>						
S	Holding cell 134	Y	NA	Y	Y	Y	Did not respond to smoke
	<u>Zone 11</u>						
S	Holding cell 133	Y	NA	Y	Y	Y	
	<u>Zone 12</u>						
S	Holding cell 130	Y	NA	Y	Y	Y	Did not respond to smoke

M. Manual Pull station	DS Duet smoke detector	B Bell	AD Ancillary device
HT Heat detector, non restorable	SFD Supporting field device - monitor	H Horn	ET Emergency Telephone
RHT Heat detector, Restorable	FS Sprinkler flow switch	V Visual signal appliance	EOL End of line resistor
S Smoke detector	SS Sprinkler supervisory device	SP Cone type speaker	Other supervisory devices
RI Remote indicator unit	EM Fault isolation module	HSP Horn type speaker	Other type of detector
PS Pressure switch	BS Bell & Strobe		

## Inspection and Testing of Fire Alarm Systems

## Individual Device Record

Date July 17, 2014	Building Name: K309 Rocky Mountain House R.C.M.P
--------------------	--

A. Correctly installed.	D. Annunciator indication confirmed.
B. Requires Service, Repairs, missing, or cleaning	E. Zone circuit number or address
C. Alarm operation confirmed	

**“Y” - Acceptable    “N” – Unacceptable (Explain NO answers in comments)    “NA” Not applicable**

[illegible]

M.	Manual Pull station	DS	Duct smoke detector	B	Bell	AD	Ancillary device
HT	Heat detector, non restorable	SFD	Supporting field device - monitor	H	Horn	ET	Emergency Telephone
RHT	Heat detector, Restorable	FS	Sprinkler flow switch	V	Visual signal appliance	EOL	End of line resistor
S	Smoke detector	SS	Sprinkler supervisory device	SP	Cone type speaker		Other supervisory devices
RI	Remote indicator unit	EM	Fault isolation module	HSP	Horn type speaker		Other type of detector
PS	Pressure switch	BS	Bell & Strobe				

## Inspection and Testing of Fire Alarm Systems

### Signal Devices Record

Date July 17, 2014	Building Name: K309 Rocky Mountain House R.C.M.P
--------------------	--

- A. Correctly installed.  
B. Requires Service, Repairs, missing, or cleaning  
C. Alarm operation confirmed

**"Y" - Acceptable    "N" – Unacceptable (Explain NO answers in comments)    "NA" Not applicable**

[illegible]

M.	Manual Pull station	DS	Duct smoke detector	B	Bell	AD	Ancillary device
HT	Heat detector, non restorable	SFD	Supporting field device - monitor	H	Horn	ET	Emergency Telephone
RHT	Heat detector, Restorable	FS	Sprinkler flow switch	V	Visual signal appliance	EOL	End of line resistor
S	Smoke detector	SS	Sprinkler supervisory device	SP	Cone type speaker		Other supervisory devices
RI	Remote indicator unit	EM	Fault isolation module	HSP	Horn type speaker		Other type of detector
PS	Pressure switch	BS	Bell & Strobe				

### 3.1 Field Device Testing – Legend and Notes

[illegible]





# CENTRATECH TECHNICAL SERVICES LTD. ANNUAL MAINTENANCE RECORD

Hydrostatic Testing - Breathing Air - Fire Extinguisher Sales, Service, Recharging  
"Your Fire and Safety Specialists"

CUSTOMER: K309 RMH R.C.M.P

ADDRESS: 4428 - 45th Street

Rocky Mountain House, AB

CONTACT: Stan Scott

PHONE: 403-776-7144

DATE: July 17, 2014

TECHNICIAN: Craig & Gilbert


PO#: 1467244XW

#	EXTINGUISHER LOCATION	EXT. SERIAL #	EXT. MAKE	CO	EXT. TYPE	HP	SP	YR MFG	YR HT	YR 6YR	YRHT CART	COMMENTS
1	Office	939039	Amerex		5 ABC		X	09				Inspection
2	Office Hallway	939017	Amerex		5 ABC		X	09				Inspection
3	Server Room	276662	Flag		5 CO2		X	06	11			Inspection
4	Guard Station	86584	Amerex		10 ABC		X	09				Inspection
5	Guard Station # 2	87608	Amerex		10 ABC		X	10				Inspection
6	Mech Room	87097	Amerex		10 ABC		X	10				Inspection
7	Evidence Room	939018	Amerex		5 ABC		X	09				Inspection
8												
9												
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COMMENTS: \_\_\_\_\_



## Inspection and Testing of Fire Alarm Systems

 <b>Centratech Technical Services Ltd</b> # 1 – 7644 – 49 <sup>th</sup> Ave Red Deer, Alberta	Date of Service: July 14, 2014		Time: 1:00 pm
	Annual Inspection YES		Last Service Date 2013
	Single Stage YES	Two Stage	Direct Connection
	Manufacturer: Edwards		Model: Edwards 2280
Building Name: K224 R.C.M.P Detachment		Contact Person: Stan Scott	Phone: Fax:
Address: 5902 44 <sup>th</sup> ave		Owner:	Phone: 403-742-3382 Fax:
City: Stettler , AB	Postal Code: T0C 2L1	Fire Signal Receiving Centre: 1-800-653-3382 Phone: Fax:	

“Yes”- Acceptable “No” - Unacceptable (Explain No answers in comments)

Yes	No	Summary
<input checked="" type="checkbox"/>	<input type="checkbox"/>	The entire fire alarm system has been inspected and tested in accordance with CAN/ULC S536
<input checked="" type="checkbox"/>	<input type="checkbox"/>	The fire alarm system documentation is on site and includes a description of the system.
<input checked="" type="checkbox"/>	<input type="checkbox"/>	The fire alarm system is fully functional.
<input type="checkbox"/>	<input checked="" type="checkbox"/>	The fire alarm system has deficiencies noted.
<input checked="" type="checkbox"/>	<input type="checkbox"/>	A copy of this report is given to the Owner or the owner's representative.

	Technicians After-test Checklist
NA	Reconnect time limit cutouts?
YES	Reconnect ancillary functions?
NA	Reconnect ancillary functions (off site connections)?
YES	Reconnect signal power?
NA	Advise fire department the testing is completed?
YES	Ensure that the alarm system is functional?

### Comments

System in good working order.

I state that the information on this form is correct at the time and place of my inspection, and that all equipment was tested in conformance with applicable codes and the Manufacturers requirements and at this time was left in operational condition upon completion of this inspection except as noted in comments.

Korey Campbell CFA 996672	July 14, 2014	1:00 pm	
Technician	Date	Time	Owner or Authorized Agent

# Inspection and Testing of Fire Alarm Systems

**Date July 14, 2014**

**Building Name: K224 Stettler R.C.M.P**

**"Yes" - Tested correctly "No" - Did not test correctly (Explain NO answers in comments) "NA" Not applicable**

<b>2.1 Control Unit or Transponder Tests</b>	<b>yes</b>	Termination points from wiring to field devices secure
<b>yes</b> Power on visual indicator operates.	<b>na</b>	<b>2.6 Annunciator &amp; Remote Trouble Test &amp; Inspection</b>
<b>yes</b> Common visual trouble signal operates.	<b>na</b>	Power on indicator operates.
<b>yes</b> Common audible trouble signal operates.	<b>na</b>	Individual alarm and supervisory input zone clearly
<b>yes</b> Trouble signal silence switch operates.	<b>na</b>	Indicated and separately designated?
<b>yes</b> Main Power supply failure trouble signal operates.	<b>na</b>	Individual alarm and supervisory zone labels identified.
<b>yes</b> Ground fault tested on positive and negative trouble signal	<b>na</b>	Common trouble signal operates.
<b>na</b> Alert signal operation operates.	<b>na</b>	Visual indicator test - Lamp test operates.
<b>yes</b> Alarm signal operation operates.	<b>na</b>	Input wiring from control unit/transponder is supervised.
<b>na</b> Automatic transfer from alert to alarm signal operates.	<b>na</b>	Alarm signal silence visual indicator operates.
<b>na</b> Manual transfer from alert signal to alarm signal operates.	<b>na</b>	Switches for ancillary function operate as per design.
<b>na</b> Auto transfer from alert to alarm signal cancel operates	<b>na</b>	Other ancillary function visual indicators operate.
<b>yes</b> Alarm signal silence inhibit function operates?	<b>na</b>	Manual activation of alarm signal and indication operates.
<b>yes</b> Alarm signal manual silence operates.	<b>na</b>	Displays are visible in installed location operates?
<b>yes</b> Alarm signal silence visual indication operates.	<b>na</b>	Operates on emergency power?
<b>yes</b> Alarm signal when silenced automatically reinitiates on subsequent alarm?	<b>yes</b>	<b>2.4 Power Supply Inspection</b>
<b>na</b> Alarm signal silence automatic cut-out timer.	<b>yes</b>	Fused with mfgs marked rating of the system?
<b>na</b> Audible visual and alert and alarm signals programmed and operate as per design & specification. (app C)	<b>yes</b>	Adequate to meet the requirements of the system?
<b>yes</b> Input circuit alarm and supervisory operation including audible and visual indication operates.	<b>na</b>	<b>2.8 Remote Trouble Signal Unit Test and Inspection</b>
<b>yes</b> Input circuit supervision fault causes a trouble indication.	<b>na</b>	Input wiring from control/transponder is supervised.
<b>yes</b> Output circuit alarm indicators operate.	<b>na</b>	Visual trouble signal operates.
<b>yes</b> Output circuit supervision fault causes a trouble indication.	<b>na</b>	Audible trouble signal operates.
<b>yes</b> Visual indicator test (lamp test).	<b>na</b>	Audible trouble signal silence operates.
<b>yes</b> Coded signal sequence operate not less than the required number of times and the correct alarm signal thereafter.	<b>yes</b>	<b>2.5 Emergency Power Supply Test and Inspection</b>
<b>yes</b> Coded signal sequences are not interrupted by subsequent alarms?	<b>yes</b>	Correct battery type as recommend by manufacturer?
<b>yes</b> Ancillary circuit by-pass will result in a trouble signal.	<b>yes</b>	Correct rating as determined by battery calculations based on full system load?
<b>yes</b> Input circuit to output circuit operation including ancillary device circuits, for correct program operation as per design & spec. (App "C")	<b>yes</b>	Battery voltage main power on? <b>26.4VDC</b>
<b>yes</b> Fire alarm Reset operates.	<b>yes</b>	Battery voltage and current with main power supply "off" and fire alarm in supervisory condition?
<b>yes</b> Main power to emergency power supply transfer operates.	<b>yes</b>	Voltage <b>25.4VDC</b> Current <b>400MA</b>
<b>na</b> Status change confirmation (smoke detectors) verified	<b>yes</b>	Battery voltage and current with main power supply "off" and fire alarm in full load alarm condition?
<b>yes</b> Receipt of alarm transmission to signal receiving center?	<b>yes</b>	Voltage <b>25VDC</b> Current <b>400MA</b>
<b>na</b> Receipt of supervisory trans to signal receiving center?	<b>yes</b>	Charging current is <b>00MA</b>
<b>yes</b> Receipt of trouble transmission to signal receiving center?	<b>yes</b>	Inspected for physical damage?
<b>yes</b> Operation of the fire signal receiving center disconnect results in a specific trouble indication at control unit?	<b>na</b>	Terminal cleaned and lubricated?
<b>2.3 Control Unit or Transponder Inspection</b>	<b>yes</b>	Terminals clamped tightly.
<b>yes</b> Input circuit designations, correctly identified in relation to connected field devices	<b>na</b>	Correct Electrolyte level?
<b>yes</b> Output circuit designations correctly identified in relation to connected field devices.	<b>na</b>	Specific gravity within mfg specifications?
<b>yes</b> Correct designations-common control functions / indicators	<b>no</b>	Electrolyte leaks.
<b>yes</b> Plug-in components and modules securely in place?	<b>yes</b>	Adequately ventilated?
<b>yes</b> Plug-in cables securely in place	<b>yes</b>	Battery mfg's date code or in-service date
<b>na</b> Record date, revision and version of Firmware & software	<b>yes</b>	Disconnection causes trouble signal.
Date:      Rev:      Ver:		Indicate type of Battery Test Performed?
<b>yes</b> Clean and free of dust and dirt?		(1) supervisory load for 24h followed by full load operation.
<b>yes</b> Fuses in accordance with MFGs specification?	<b>yes</b>	(2) silent test by using load resister method -App F1
Control Unit or transponder lock functional?		(3) Silent accelerated test – App F2
		(4) A battery capacity meter test App F3
		(5) In lieu of battery tests, Replace with new set having current date code, as per mfg
	<b>na</b>	Record calculated battery capacity App F4      A h
	<b>na</b>	Record battery terminal voltage after tests      V dc
	<b>na</b>	Battery voltage not less than 85% of its rating after tests.
	<b>na</b>	Generator provides power to the AC circuit for FA syst.

# **Inspection and Testing of Fire Alarm Systems**

Date July14, 2014

Building Name: K224 Stettler R.C.M.P

**"Yes" - Tested correctly "No" - Did not test correctly (Explain NO answers in comments) "NA" Not applicable**

## **2.5 Emergency Power Supply Test and Inspection**

na Trouble condition at the em gen shall result in an audible common trouble signal and a visual indication at the required annunciator?

## **2.7 Annunciator or Sequential Displays**

na Power on indicator operates.

na Individual alarm, supervisory zone indication operates.

na ( Exception: operation of each individual alarm and supervisory zone indication, or lights the identical indicators at the other annunciators and sequential display) Specify method of confirmation

na Minimum of 1 alarm zone and one supervisory zone tested per annunciator or sequential display to confirm operation. Individual alarm and supervisory zone labels identified.

na Common trouble signal operates.

na Visual indicator test (lamp test) operates.

na Input wiring form control unit/transponder supervised

na Alarm signal silence visual indicator operates.

na Switches for ancillary function operate as per design.

na Other ancillary functions visual indicators operate.

na Manual activation of alarm signal and indication operate.

na Displays are visible in installed location.

## **2.9 Printer Testing**

na Operation as per design and specification?

na Zone of each alarm initiating device is correctly printed.

na Rated voltage is present.

## **2.10 Data Communication Link Test (DCL)**

na Confirm that a trouble signal is receive at the control unit or transponder under an open loop fault for each DCL

na Where fault isolation modules are installed in DCL serving field devices, wiring shall be shorted on the isolated side, annunciation of the fault confirmed, and then a field device on the source side shall be operated, and activation confirmed at the control unit or transponder.

na Where a fault isolation in DCL is provided between control units/transponders and between

na Transponders, introduce a short circuit fault and confirm Continued.....

Annunciation of the fault and operation outside the shorted section between each pair of :

na (i) Control unit to control unit

na (ii) Control unit to transponder

na (iii) Transponder to transponder

## **2.2 Voice Communication Inspection/Tests**

na Power "ON" operates?

na Common visual trouble signal operates.

na Common audible trouble signal operates.

na Trouble signal silence switch operates.

na All call voice paging including visual indicator operates? Output circuits for selective voice paging including visual

indication operates.

na Output circuits for selective voice paging trouble operation including visual indication operates.

na Microphone including press to talk switch operates.

na Operation of voice paging does interfere with initial inhibit time of alert and alarm signal?

na All call voice paging operates on emergency power?

na Upon failure of one amplifier, system automatically transfers to backup amplifier.

na Circuits for emergency telephone call in operation including audible and visual indication operates

na Circuits for emergency telephone for operation, including two way voice communication operates.

na Circuits for emergency telephones trouble operation including visual indication operates.

na Emergency telephone verbal communication operates.

na Emergency telephone operable or in-use tone at handset.

## **2.11 Ancillary Device Circuit Test**

na Circuit confirmed

na Circuit confirmed

na Circuit confirmed

na Circuit confirmed

## **Additional Comments:**

**Tested all devices on battery back up.**

# Inspection and Testing of Fire Alarm Systems Individual Device Record

Date July 14, 2014	Building Name: K224 Stettler R.C.M.P
--------------------	--------------------------------------

A. Correctly installed.	D. Annunciator indication confirmed.
B. Requires Service, Repairs, missing, or cleaning	E. Zone circuit number or address
C. Alarm operation confirmed	

“Y” - Acceptable “N” – Unacceptable (Explain NO answers in comments) “NA” Not applicable

Device	Location	A	B	C	D	E	Remarks
RHT	Gym	Y	NA	Y	Y	1	
RHT	Crawl space	Y	NA	Y	Y	1	
RHT	Crawl space	Y	NA	Y	Y	1	
RHT	Furnace room	Y	NA	Y	Y	1	
DS	Furnace room	Y	NA	Y	Y	1	
DS	Gym	Y	NA	Y	Y	1	
DS	Gym	Y	NA	Y	Y	1	
EOL	Crawl space	Y	NA	Y	Y	1	
S	Top of stairs	Y	NA	Y	Y	2	
M	Top of stairs	Y	NA	Y	Y	2	
RHT	Locker room	Y	NA	Y	Y	2	
M	West exit	Y	NA	Y	Y	2	
M	Front entrance	Y	NA	Y	Y	2	
RHT	File storage	Y	NA	Y	Y	2	
RHT	Janitors room	Y	NA	Y	Y	2	
RHT	Upstairs file room	Y	NA	Y	Y	2	
M	Detention area	Y	NA	Y	Y	2	
S	Detention area west	Y	NA	Y	Y	2	
S	Detention area east	Y	NA	Y	Y	2	
RHT	Exhibit room	Y	NA	Y	Y	2	
RHT	Garage	Y	NA	Y	Y	2	
M	Garage	Y	NA	Y	Y	2	
RHT	Garage storage room	Y	NA	Y	Y	2	
RHT	Exhibit room	Y	NA	Y	Y	2	Locked
EOL	Garage	Y	NA	Y	Y	2	
S	West cell	Y	NA	Y	Y	3	
EOL	West cell in detector	Y	NA	Y	Y	3	
S	Centre cell	Y	NA	Y	Y	4	
EOL	Centre cell in detector	Y	NA	Y	Y	4	
S	East cell	Y	NA	Y	Y	5	
EOL	East cell in detector	Y	NA	Y	Y	5	

M. Manual Pull station	DS Duct smoke detector	B Bell	AD Ancillary device
HT Heat detector, non restorable	SFD Supporting field device - monitor	H Horn	ET Emergency Telephone
RHT Heat detector, Restorable	FS Sprinkler flow switch	V Visual signal appliance	EOL End of line resistor
S Smoke detector	SS Sprinkler supervisory device	SP Cone type speaker	Other supervisory devices
RI Remote indicator unit	EM Fault isolation module	HSP Horn type speaker	Other type of detector
PS Pressure switch	BS Bell & Strobe		

## Inspection and Testing of Fire Alarm Systems

## Signal Devices Record

Date July 14, 2014	Building Name: K224 Stettler R.C.M.P
--------------------	--------------------------------------

- A. Correctly installed.  
B. Requires Service, Repairs, missing, or cleaning  
C. Alarm operation confirmed

**“Y” - Acceptable “N” – Unacceptable (Explain NO answers in comments) “NA” Not applicable**

[illegible]

M.	Manual Pull station	DS	Duct smoke detector	B	Bell	AD	Ancillary device
HT	Heat detector, non restorable	SFD	Supporting field device - monitor	H	Horn	ET	Emergency Telephone
RHT	Heat detector, Restorable	FS	Sprinkler flow switch	V	Visual signal appliance	EOL	End of line resistor
S	Smoke detector	SS	Sprinkler supervisory device	SP	Cone type speaker		Other supervisory devices
RI	Remote indicator unit	EM	Fault isolation module	HSP	Horn type speaker		Other type of detector
PS	Pressure switch	BS	Bell & Strobe				



# CENTRATECH TECHNICAL SERVICES LTD.

## ANNUAL MAINTENANCE RECORD

Hydrostatic Testing - Breathing Air - Fire Extinguisher Sales, Service, Recharging  
"Your Fire and Safety Specialists"

CUSTOMER: K224 Stettler R.C.M.P  
ADDRESS: 5902 - 44th Ave  
Stettler, Alberta  
CONTACT: Stan Scott  
PHONE: (403) 716-4323

JOB TICKET/INVOICE: \_\_\_\_\_  
DATE: July 14, 2014  
TECHNICIAN: Korey  
CASH/ACCOUNT: Account/PO Required  
PO# (if required): \_\_\_\_\_

#	EXTINGUISHER LOCATION	EXT. SERIAL #	EXT. MAKE	CO	EXT. TYPE	HP	SP	YR MFG	YR HT	YR 6YR	YRHT CART	COMMENTS
1	Front Entrance	377159	Flag		5 ABC		X	07		13		Annual inspection
2	Rear Exit	706695	Strike		20 ABC		X	08		14		6 Year 2014
3	Holding cells	917107	Pyrochem		10 ABC		X	07		13		Annual inspection
4	Garage	712037	Strike		20 ABC		X	08		14		6 Year 2014
5	Garage	917117	Pyrochem		20 ABC		X	07		13		Annual inspection
6	Office	917099	Pyrochem		20 ABC		X	07		13		Annual inspection
7	Spare	675079	Strike		10 ABC		X	09				Annual inspection
8	Upstairs Mech Room	569084	Amerex		10 ABC		X	13				Annual inspection
9	Top of Stairs	516752	Strike		5 CO2		X	10				Annual inspection
10	Coffee room	377151	Flag		5 ABC		X	07		14		6 Year 2014
11												
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COMMENTS: \_\_\_\_\_  
\_\_\_\_\_



# Metro Fire Protection Ltd.

## Sprinkler and Standpipe Inspection Report

Date of Inspection: 11-Jul-14

Inspection Address: 500 Westlake Rd Strathmore

Type of Building: Police

Inspection Completed by: Grant Readman

Date Inspection Complete: 11-Jul-14

Central Station Supervision: Yes ☐ No ☒ Company ☐

Fire Alarm Test In Conjunction With This Inspection ? Yes ☒ No ☐

Type Of Panel Notifier

Alarm Devices: Flow Switch 1 Pressure Switch 1 Tamper Switch 2

Water Motor Gong Yes ☐ No ☒ Operated Yes ☐ No ☐

Pressure: Static: 60 psi Residual: 55 psi

Reserve Head Cabinet: Yes ☒ No ☐ Head Wrench: Yes ☒ No ☐

Spare Heads: Yes ☒ No ☐ Type Required: ☐

Fire Department Connection: Quantity: 1 Size: 2 1/2" Caps: Yes ☒ No ☐

Fire Hydrants to be tested Yes ☐ No ☒ How Many: ☐

Backflow preventers on fire system: Type: DCVA Last Tester: 4/11/2014 By: Metro Fire

Wet Systems: Alarm Valves: Make & Year: Model: Size:

Flow Switches: Make & Model: Potter VSR-F

Excess Pressure Pump: Manual ☐ Auto ☒ psi on 90 psi off 100

Glycol System: Size: # of Heads Temperature Good For:

Dry Pipe System: Make & Year: Model & Size:

Preaction System: Yes ☐ No ☒ Location:

Stand Pipe: Yes ☐ No ☒ Size: Height:

Size Of Incoming Water: 8"

Fire Pump: Yes ☐ No ☒ Make & Model:

Is The Sprinkler Room Adequately Heated: Yes ☒

Are all valves left in proper working position at end of inspection: Yes ☒ No ☐

Sealed: Yes ☐ No ☒

# Metro Fire Protection Ltd.

# Fire Alarm Inspection Record

**TS - Tamper Switch**

**GV - Gate Valve**

**Date** 11-Jul-14

**FS - Flow Switch**

**BF - Butterfly Valve**

**Address** 500 Westlake Rd

**APS - Alarm Pressure Switch**

**WG - Water Motor Gong**

**Strathmore RCMP**

### Micro - Micro Switch

[illegible]

**SAFE BLU**  
**Strathmore, AB.**  
**Ph: 934 9387 Fax: 934 9344**

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**FIRE ALARM SYSTEM ANNUAL TEST AND INSPECTION REPORT**

BUILDING NAME: STRATHMORE RCMP DATE: JULY 14, 2014

ADDRESS: 500 WEST LAKE BLVD, STRATHMORE AB.

COMPANY: SAME

CONTACT PERSON: \_\_\_\_\_

TELEPHONE NO: 403 934 3968

SYSTEM MANUFACTURER: NOTIFIER MODEL NO: NFP 640

OPERATION: SINGLE STAGE: ☐ TWO STAGE: ☒

---

**TEST RESULTS**

(EVERY LINE MUST HAVE THE APPROPRIATE MARKING IN THE SPACE PROVIDED)

This is to certify that the Fire Alarm System has been tested and inspected in accordance with Section 5 periodic inspections and tests – daily and monthly; and Section 6, periodic inspections and tests – yearly, and these records document the results of testing performed.

1. The Fire Alarm System is now fully functional. Yes ☒ No ☐

OR

2. The Fire Alarm System has deficiencies noted on the pages attached. Yes ☒ No ☐

Comments: \_\_\_\_\_

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**ALL SMOKE DETECTORS OVER 10 YEARS OLD ARE REQUIRED TO BE REPLACED**

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A copy of this report will be given to: \_\_\_\_\_

Ken MacLean  
Signature of Technician

P0553  
Technician's Certification Number

24-7 Fire & Electrical Services Ltd.  
Company Name

**PRE-TEST CHECKLIST**

1.	Is there a fire department interconnection?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
If yes, take necessary steps to alert central station/fire department, etc.		
<b>DO NOT USE THE FIRE DEPARTMENT EMERGENCY TELEPHONE NUMBER. (IN CALGARY USE THE NON-EMERGENCY PHONE NUMBER 264-1022)</b>		
Name of person contacted at the central station or fire department:		
<hr/>		
Name _____ Title _____ Phone No. _____		
Date and time fire alarm system is out of service:		
<hr/>		
Date and time fire alarm is back in service:		
<hr/>		
2.	Do you have auxiliary functions that can impair building functions such as elevator capture, fan shutdown, door holders, etc.?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
2a.	Can these be disabled and tested by groups?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
3.	Have building occupants been made aware of fire alarm testing?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
4.	Has a pre-determined time been established for testing signaling devices?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
5.	Have provisions been made for acquiring access to the secured areas of the building?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
6.	Has an alternative plan been established to alert occupants and local fire department should an actual fire condition occur during testing?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
7.	The fire alarm system has emergency power provided by:	AC Generator <input type="checkbox"/> Rechargeable battery <input checked="" type="checkbox"/>

EVERY LINE MUST HAVE THE APPROPRIATE MARKING IN THE BOX PROVIDED

YES	NO	NOT APPLICABLE (NA)
Tested correctly	Did not test correctly (See Remarks Section)	Function or feature not provided on this fire alarm system.

<b>ALARM SIGNAL TESTS</b>	YES	NO	NA
All alarm signaling appliances sound simultaneously in the general alarm state powered by the emergency power supply (5 min. minimum duration).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
All audible alarm signals sound simultaneously in the evacuation alarm state powered by the emergency power supply (as per the Alberta Building Code 1990).	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Alarm signals are audible throughout the building.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Visual alarm signals clearly indicate a visual alarm to all points in the visual alarm area when operated on normal power supply.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Each audible and visual signaling device has been tested.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
NUMBER OF AUDIBLE / VISUAL DEVICES: 11			

<b>CONTROL UNIT TESTS</b>		YES	NO	NA
Power on Visual Indicator		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Common Visual Trouble Lamp		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Common Audible Trouble Signal		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Trouble Signal Silence Switch		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
AC Power Failure Trouble		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Main Power Supply Failure Trouble Signal		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ground Fault Tested on Positive and Negative Trouble Signal		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Control Panel Interconnection to Fire Department Confirmed		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Alert Signal Operation		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Alarm Signal Operation		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Automatic Transfer from Alert Signal to Alarm Signal		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Acknowledge Switch Operation		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alarm Signal Silence Inhibit		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Alarm Signal Silence Operation		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alarm Signal Silence Visual Indication		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alarm Signal, when silenced, Automatically Reinitiate Upon Subsequent Alarm		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alarm Signal Silence Automatic Cut – Out Timer		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Input Circuit, Alarm & Supervisory Operation Including Visual Indicator		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Input Circuit Trouble Operation		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Output Circuit Alarm Operation		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Output Circuit Trouble Operation		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Visual Indicator Test (Lamp Tests)		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reset Operation		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Main Power Supply to Emergency Power Supply Transfer		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Control Panel Locked		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Control Unit Interconnection to Monitoring Station		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Monitoring Company Name and Phone #	PROTECTRON			
Building System ID # and Pass Code ID #				

<b>BATTERY TESTS</b>		YES	NO	NA
Correct Battery Type as Recommended by Manufacturer	2 X 12V 20AH new 2011			
Correct Rating as Determined by Battery Calculations based on Full System Load	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>			
Battery Voltage (AC Power On)	27.5			
Battery Charging Current (AC Power On)	220 MA – 2 AMPS			
Battery Voltage (AC Power Off - Supervisory Condition)	25.8V – 486 MA			
Battery Voltage (AC Power Off - General Alarm Condition) Full Load	25.2 V - 1440 MA			
<b>BATTERY TESTS INSPECTIONS</b>		YES	NO	NA
Battery Inspected for Physical Damage		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Battery Terminals Cleaned and Lubricated		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Battery Terminals Clamped Tightly		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Within Manufacturer's Rated Life Date Code		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Disconnection Causes Trouble Signal		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

<b>REMOTE TROUBLE UNIT</b>		YES	NO	NA
Input Wiring from Control Unit is Supervised		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Visual Trouble Signal		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Audible Trouble Signal		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Audible Trouble Signal Silence		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

<b>POWER SUPPLY INSPECTION</b>		YES	NO	NA
Fused in Accordance with Manufacturer's Marked Rating of the System		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Adequate to Meet the Requirements of the System		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

ANNUNCIATOR TESTS	YES	NO	NA
Power On Indicator	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Individual Alarm & Supervisory Zone Indication	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Individual Alarm & Supervisory Zone Designation Labels are Properly Identified	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Common Trouble Signal	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Visual Indicator Test (Lamp Test)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Input Wiring from Control Unit is Supervised	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Switches for Ancillary Functions Operate as Intended	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Alarm Signal Silence Visual Indicator	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Other Ancillary Functions Visual Indicators	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Manual Activation of Alarm Signal & Indication	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

CONTROL UNIT INSPECTIONS	YES	NO	NA
Input Circuit Designations, Correctly Identified in Relation to Connected Field Devices	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Output Circuit Designations, Correctly Identified in Relation to Connected Field Devices	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Designations for Common Control Functions & Indicators	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cabinet, Plug-In Components, Modules, and Cables Securely in Place	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cleanliness	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fuses in Accordance with Manufacturer's Specification	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

ANCILLARY DEVICES	If no ancillary devices are present check here <input type="checkbox"/>	
TYPE OF DEVICE (List)	OPERATIONAL	
FURNACE FANS	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
MAG DOOR HOLDER & LOCK	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
	YES <input type="checkbox"/>	NO <input type="checkbox"/>
	YES <input type="checkbox"/>	NO <input type="checkbox"/>
	YES <input type="checkbox"/>	NO <input type="checkbox"/>

\*NOTE: Power supply for ancillary devices must not be from fire alarm power supply circuit.

AFTER TEST CHECKLIST	YES	NO	NA
Reconnect Auxiliary Functions (off site connections)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Reconnect Ancillary Functions	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reconnect Time Limit Cutouts	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Ensure Fire Alarm System is on Normal Power	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Advise Building Management Work Is Completed	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Advise Fire Department Work Is Completed	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ensure That the Alarm System Is Functional	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

SUMMARY		YES	NO
1. The fire alarm system is now <b>FULLY</b> functional.		<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. The fire alarm system is operational with minor deficiencies as noted in this report.		<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. The fire alarm system has major deficiencies as noted in this report.		<input type="checkbox"/>	<input checked="" type="checkbox"/>
4. A copy of this report will be given to:			
BUILDING OWNER / BUILDING OWNER'S REPRESENTATIVE			

TEST AND MAINTENANCE CODES REQUIRE THAT THE BUILDING OWNER FOR A MINIMUM OF TWO YEARS MAINTAIN THIS RECORD.

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**DEVICE LEGEND**

Bell	B	Pressure Switch	PS
Duct Smoke Detector	DS	Remote Relay	REL
Fire Phone	FP	Heat Detector, Rate of Rise	RHT
Sprinkler Flow Switch	FS	Smoke Detector	S
Horn	H	Smoke Alarm	SA
Horn/Strobe Combination	HS	Paging Speaker	SP
Heat Detector, Fixed Temperature	HT	Sprinkler Tamper Switch	TS
Manual Pull Station	M	Visual Appliance	V

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**TECHNICIANS REMARKS / DEFICIENCY FIRE ALARM / SPRINKLER SYSTEM**

DUCT SMOKE DETECTOR SUPPLY AIR FAN # 2 IS VERY DIRTY AND SHOULD BE REPLACED  
ALL SMOKE DETECTORS OVER 10 YEARS OLD ARE REQUIRED TO BE REPLACED

**EMERGENCY / EXIT LIGHTING:**

**FIRE EXTINGUISHERS / FIRE HOSES:**

LOCATION	DEVICE								NOTES
		Correctly Installed	Requires Repair	Alarm Operation	Amplification	Confirmed	Zone Circuit #	Ground Fault	
FRONT FOYER	M/GA						24		general alarm zone 1
FRONT FOYER	S						24		
FRONT FOYER WASHROOM	HT						24		
OFFICE FOYER	S						24		10 years old
VICTIM SERVICES OFFICE	HT						24		
INTERVIEW ROOM	HT						24		
RECEPTION AREA CEILING	S						24		10 years old
HALL TO LUNCH ROOM	S						24		10 years old
COMMUNICATIONS ROOM	HT						24		
HALL BY GUN ROOM	S						24		10 years old
FILE ROOM	HT						24		
OFFICE - BULL PEN	HT						24		
CORPORAL OFFICE	HT						24		
HYWAY CORPORAL OFFICE	HT						24		
OPERATIONS SARGENTS OFFICE	HT						24		
STAFF SARGENT OFFICE	HT						24		
LUNCH ROOM	HT						24		
LADIES WASHROOM N	HT						24		
LADIES WASHROOM S	HT						24		
JANITOR ROOM	HT						24		
CALGARY TRAFFIC SERVICES OFFICE	HT						24		
MENS WASHROOM N	HT						24		
MENS WASHROOM S	HT						24		
WEST HALL TO STAIRS	S						24		10 years old
WEST HALL TO STAIRS	M/GA						24		general alarm zone 1
STATIONARY ROOM	HT						24		
ARMOURY ROOM	HT						24		
WEST STAIRS ENTRANCE	S						2		10 years old
WEST STAIRS	S						2		FAILED 2013, 10 years old
CELL FOYER ENTRANCE	HT						8		
CELL FOYER ENTRANCE	M/GA						7		general alarm zone 1
CELL BLOCK DESK	HT						7		
VISITING ROOM	HT						7		
EXHIBIT ROOM W	RHT						8		
EXHIBIT ROOM E	HT						8		
INTERVIEW ROOM 130	HT						7		
STORAGE ROOM 125	HT						7		
STAFF WASHROOM	HT						7		
CELL BLOCK HALL E	S						7		10 years old
CELL BLOCK HALL W	S						7		10 years old
INTERVIEW ROOM 127	HT						7		
BREATH TEST ROOM 128	S						16		10 years old
CELL 134	S						15		CELL #7 10 years old
CELL 135	S						14		CELL #6 10 years old
CELL 136	S						13		CELL #5 10 years old
CELL 137	S						12		CELL #4 10 years old
CELL 138	S						11		CELL #3 10 years old
CELL 139	S						10		CELL #2 10 years old
CELL 140	S						9		CELL #1 10 years old



LOCATION	DEVICE								NOTES
		Connect	Initiated	Requires Repair	Alarm Operation	Annunciation Confirmed	Zone Circuit #	Ground Fault	
CELL EAST EXIT DOOR	M/GA					7			general alarm zone 1
SECURE BAY WEST	M/GA					4			general alarm zone 1
SECURE BAY WEST	HT					4			
SECURE BAY CENTRE	HT					5			
SECURE BAY EAST	HT					6			
SECURE BAY EAST STORAGE ROOM	FRHT					6			
SECURE BAY EAST	M/GA					6			general alarm zone 1
BASEMENT									
TELEPHONE ROOM	HT					18			
WEST FOYER	S					18			
WEST FOYER	M/GA					18			general alarm zone 1
SPRINKLER ROOM	HT					18			
ELECTRICAL ROOM	HT					18			
MECHANICAL ROOM E	HT					20			
MECHANICAL ROOM W	HT					20			
AC 1 SUPPLY FAN	DS					21			NO ACCESS 2014. 10 years old
AC 1 RETURN FAN	DS					21			10 years old
AC 2 SUPPLY FAN	DS					22			10 years old
WEIGHT ROOM	HT					17			
NEW MEN'S LOCKER AREA	HT					17			
NEW LADIES LOCKER AREA	HT					17			
MEETING AREA	HT					17			
MEETING AREA CLOSET STORAGE	HT					17			
EAST OFFICE AREA	HT					17			
EAST STAIRS EXIT	M/GA					17			general alarm zone 1
TOP OF EAST STAIRS	S					3			5 years old
MAIN FLOOR BULL PEN AREA	B/V					S2			
OFFICE HALL WEST	B/V					S2			
BASEMENT WEST FOYER	B/V					S1			
MECHANICAL ROOM	B/V					S1			
BASEMENT EAST EXIT	B/V					S1			
CELL BLOCK AREA	B/V					S3			
CELL BLOCK ENUNCIATOR	ANNUNC								
SECURE BAY WEST	B/V					S2			
SECURE BAY EAST	B/V					S2			
SECURE BAY CENTRE	B/V					S2			
SPRINKLERS									
DCVA 1	TS					23			
DCVA 2	TS					23			
PRESSURE SWITCH CAP	MS					23			
FLOW SWITCH CAP	MS					23			
LOW PRESSURE SWITCH	PS					23			LOW PRESS 60LBS
FLOW SWITCH	FS					23			



**SAFE BLU**  
**Strathmore, AB.**  
**Ph: 934 9387 Fax: 934 9344**

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**FIRE ALARM SYSTEM ANNUAL TEST AND INSPECTION REPORT**

BUILDING NAME: RCMP - SUNDRIE DATE: AUGUST 6, 2014

ADDRESS: 216 - 6<sup>TH</sup> AVENUE NE

COMPANY: SNC LAVALIN

CONTACT PERSON: \_\_\_\_\_

TELEPHONE NO: 403 638 3675

SYSTEM MANUFACTURER: EDWARDS MODEL NO: 10 500

OPERATION: SINGLE STAGE: ☒ TWO STAGE: ☐

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**TEST RESULTS**

(EVERY LINE MUST HAVE THE APPROPRIATE MARKING IN THE SPACE PROVIDED)

This is to certify that the Fire Alarm System has been tested and inspected in accordance with Section 5 periodic inspections and tests – daily and monthly; and Section 6, periodic inspections and tests – yearly, and these records document the results of testing performed.

1. The Fire Alarm System is now fully functional. Yes ☒ No ☐

OR

2. The Fire Alarm System has deficiencies noted on the pages attached. Yes ☐ No ☒

Comments:

NO FAULTS

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A copy of this report will be given to: \_\_\_\_\_

  
Ken MacLean

Signature of Technician

P0553

Technician's Certification Number

24-7 Fire & Electrical Services Ltd.

Company Name

PRE-TEST CHECKLIST		
1.	Is there a fire department interconnection?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
If yes, take necessary steps to alert central station/fire department, etc.		
<b>DO NOT USE THE FIRE DEPARTMENT EMERGENCY TELEPHONE NUMBER.</b> <b>(IN CALGARY USE THE NON-EMERGENCY PHONE NUMBER 264-1022)</b>		
Name of person contacted at the central station or fire department:		
<div style="display: flex; justify-content: space-between;"> <div>_____</div> <div>_____</div> <div>_____</div> </div> <div style="display: flex; justify-content: space-between;"> <div>Name</div> <div>Title</div> <div>Phone No.</div> </div>		
Date and time fire alarm system is out of service:		
Date and time fire alarm is back in service:		
2.	Do you have auxiliary functions that can impair building functions such as elevator capture, fan shutdown, door holders, etc.?	Yes <input type="checkbox"/> No <input type="checkbox"/>
2a.	Can these be disabled and tested by groups?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
3.	Have building occupants been made aware of fire alarm testing?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
4.	Has a pre-determined time been established for testing signaling devices?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
5.	Have provisions been made for acquiring access to the secured areas of the building?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
6.	Has an alternative plan been established to alert occupants and local fire department should an actual fire condition occur during testing?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
7.	The fire alarm system has emergency power provided by:	AC Generator <input type="checkbox"/> Rechargeable battery <input checked="" type="checkbox"/>

EVERY LINE MUST HAVE THE APPROPRIATE MARKING IN THE BOX PROVIDED

YES	NO	NOT APPLICABLE (NA)
Tested correctly	Did not test correctly (See Remarks Section)	Function or feature not provided on this fire alarm system.

ALARM SIGNAL TESTS	YES	NO	NA
All alarm signaling appliances sound simultaneously in the general alarm state powered by the emergency power supply (5 min. minimum duration).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
All audible alarm signals sound simultaneously in the evacuation alarm state powered by the emergency power supply (as per the Alberta Building Code 1990).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alarm signals are audible throughout the building.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Visual alarm signals clearly indicate a visual alarm to all points in the visual alarm area when operated on normal power supply.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Each audible and visual signaling device has been tested.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
NUMBER OF AUDIBLE / VISUAL DEVICES:			

<b>CONTROL UNIT TESTS</b>		YES	NO	NA
Power on Visual Indicator		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Common Visual Trouble Lamp		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Common Audible Trouble Signal		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Trouble Signal Silence Switch		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
AC Power Failure Trouble		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Main Power Supply Failure Trouble Signal		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ground Fault Tested on Positive and Negative Trouble Signal		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Control Panel Interconnection to Fire Department Confirmed		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Alert Signal Operation		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Alarm Signal Operation		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Automatic Transfer from Alert Signal to Alarm Signal		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Acknowledge Switch Operation		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alarm Signal Silence Inhibit		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alarm Signal Silence Operation		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alarm Signal Silence Visual Indication		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alarm Signal, when silenced, Automatically Reinitiate Upon Subsequent Alarm		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alarm Signal Silence Automatic Cut – Out Timer		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Input Circuit, Alarm & Supervisory Operation Including Visual Indicator		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Input Circuit Trouble Operation		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Output Circuit Alarm Operation		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Output Circuit Trouble Operation		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Visual Indicator Test (Lamp Tests)		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reset Operation		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Main Power Supply to Emergency Power Supply Transfer		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Control Panel Locked		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Control Unit Interconnection to Monitoring Station		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Monitoring Company Name and Phone #				
Building System ID # and Pass Code ID #				

<b>BATTERY TESTS</b>			
Correct Battery Type as Recommended by Manufacturer	2 X	18V AH	
Correct Rating as Determined by Battery Calculations based on Full System Load	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>		
Battery Voltage (AC Power On)	27.6		
Battery Charging Current (AC Power On)	200MA – 1.4 AMP		
Battery Voltage (AC Power Off - Supervisory Condition)	25.6V 140 MA		
Battery Voltage (AC Power Off - General Alarm Condition) Full Load	25.3V 240MA		
<b>BATTERY TESTS INSPECTIONS</b>			
	YES	NO	NA
Battery Inspected for Physical Damage	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Battery Terminals Cleaned and Lubricated	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Battery Terminals Clamped Tightly	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Within Manufacturer's Rated Life Date Code	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Disconnection Causes Trouble Signal	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

<b>REMOTE TROUBLE UNIT</b>		YES	NO	NA
Input Wiring from Control Unit is Supervised		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Visual Trouble Signal		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Audible Trouble Signal		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Audible Trouble Signal Silence		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

<b>POWER SUPPLY INSPECTION</b>		YES	NO	NA
Fused in Accordance with Manufacturer's Marked Rating of the System		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Adequate to Meet the Requirements of the System		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

<b>ANNUNCIATOR TESTS</b>	YES	NO	NA
Power On Indicator	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Individual Alarm & Supervisory Zone Indication	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Individual Alarm & Supervisory Zone Designation Labels are Properly Identified	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Common Trouble Signal	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Visual Indicator Test (Lamp Test)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Input Wiring from Control Unit is Supervised	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Switches for Ancillary Functions Operate as Intended	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Alarm Signal Silence Visual Indicator	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Other Ancillary Functions Visual Indicators	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Manual Activation of Alarm Signal & Indication	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

<b>CONTROL UNIT INSPECTIONS</b>	YES	NO	NA
Input Circuit Designations, Correctly Identified in Relation to Connected Field Devices	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Output Circuit Designations, Correctly Identified in Relation to Connected Field Devices	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Designations for Common Control Functions & Indicators	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cabinet, Plug-In Components, Modules, and Cables Securely in Place	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cleanliness	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fuses in Accordance with Manufacturer's Specification	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

<b>ANCILLARY DEVICES</b>	If no ancillary devices are present check here <input checked="" type="checkbox"/>	
TYPE OF DEVICE (List)	OPERATIONAL	
FURNACE ROOM 2 DEVICE 128	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
FURNACE ROOM 1 DEVICE 129	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
FURNACE ROOM GARAGE DEVICE 130	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
	YES <input type="checkbox"/>	NO <input type="checkbox"/>
	YES <input type="checkbox"/>	NO <input type="checkbox"/>

**\*NOTE:** Power supply for ancillary devices must not be from fire alarm power supply circuit.

<b>AFTER TEST CHECKLIST</b>	YES	NO	NA
Reconnect Auxiliary Functions (off site connections)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reconnect Ancillary Functions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reconnect Time Limit Cutouts	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Ensure Fire Alarm System is on Normal Power	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Advise Building Management Work Is Completed	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Advise Fire Department Work Is Completed	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ensure That the Alarm System Is Functional	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

SUMMARY		
1.	The fire alarm system is now <b>FULLY</b> functional.	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
2.	The fire alarm system is operational with minor deficiencies as noted in this report.	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
3.	The fire alarm system has major deficiencies as noted in this report.	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
4.	A copy of this report will be given to:	
BUILDING OWNER / BUILDING OWNER'S REPRESENTATIVE		

**TEST AND MAINTENANCE CODES REQUIRE THAT THE BUILDING OWNER FOR A MINIMUM OF TWO YEARS MAINTAIN THIS RECORD.**

**TECHNICIANS REMARKS / DEFICIENCY FIRE ALARM / SPRINKLER SYSTEM**

All devices tested OK.

**EMERGENCY / EXIT LIGHTING:**

**FIRE EXTINGUISHERS / FIRE HOSES:**

**SAFE BLU  
FIRE ALARM DEVICE LIST**

<b>Date: AUGUST 6, 2014</b>		<b>Location: RCMP - SUNDRIE 216 - 6TH AVE NE</b>				
		<b>Contact: CORPRAL RYAN HODGE - DONNA LYSSEL Phone: 403 638 3675</b>				
<b>LOCATION</b>	<b>ZONE</b>	<b>DEVICE</b>	<b>ALARM</b>	<b>TROUBLE</b>	<b>GROUND</b>	<b>NOTES</b>
<b>BASEMENT</b>						
FURNACE ROOM WEST	32	HT	✓			
FURNACE ROOM EAST	31	HT	✓			
LOCK UP ROOM 2	14	S	✓			
LOCKER ROOM 105	37	HT	✓			
RM 1 WEST STAIRS	135	M	✓			
RM 1 WEST STAIRS	S4	H/S	✓			
ROOM 1 SOUTH GYM	30	S	✓			
ROOM 1 NORTH GYM	34	S	✓			
ROOM 1 NORTH GYM	S4	H/S	✓			
EAST STAIRS	133	M	✓			
FURNACE #1	7	D/S	✓			
FURNACE #2	3	D/S	✓			
FURNACE #1	129	RELAY	✓			
FURNACE #2	128	RELAY	✓			
GARAGE FURNACE	130	RELAY	✓			
CRAWL SPACE HEAT	136	HT	✓			
CRAWL SPACE HEAT	136	HT	✓			
CRAWL SPACE HEAT	136	HT	✓			
CRAWL SPACE HEAT	136	HT	✓			
CRAWL SPACE HEAT	136	HT	✓			
CRAWL SPACE HEAT	136	HT	✓			
<b>MAIN FLOOR</b>						
FRONT ENTRANCE	126	M	✓			
RM 118 OFFICE WASHROOM	36	S	✓			
BY WASHROOM	S3	H/S	✓			
RM 119 CORPROAL OFFICE	20	S	✓			
RM 120 SARGEANT OFFICE	21	S	✓			
RM 121 HALL OFFICE	S3	H/S	✓			
RM 121 HALL OFFICE	25	S	✓			
RM 122 VSU OFFICE	13	S	✓			
RM 121 OFFICE HALL N.	26	S	✓			
RM 123 FILING ROOM	27	S	✓			
RM121 WEST EXIT	127	M	✓			
W. STAIRWELL SMOKE	24	S	✓			
RM 125 KITCHEN	29	S	✓			
RM 126 LUNCH ROOM	23	S	✓			
RM 126 E. LUNCH RM	1	S	✓			
ROOM 121 STAIRWELL EXIT	138	M	✓			
RM 117 SOUTH EXIT	134	M	✓			
RM 116 OFFICE SMOKE	17	S	✓			







## APPENDIX E (INFORMATIVE) – ANNUAL FIRE ALARM SYSTEM TEST AND INSPECTION RECORDS

(Reference: 3.7, 5.1.1, 5.1.2)

### E1. FIRE ALARM SYSTEM ANNUAL TEST AND INSPECTION REPORT

(Reference: 5.1.2)

Building name: <u>Taber RCMP</u>		Date: <u>Aug. 18/14</u>		
Address: <u>4021 Heckney Drive, Taber, Alberta</u>				
System manufacturer: <u>Simpler</u>		Model number: <u>4008</u>		

A	System provides single-stage operation.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	--
B	System provides two-stage operation.	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	--
C	The entire <i>fire alarm system</i> has been inspected and tested in accordance with CAN/ULC-S536, Inspection and Testing of Fire Alarm Systems.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	--
D	The <i>fire alarm system</i> documentation is on site and includes a description of the system.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
E	The <i>fire alarm system</i> is fully functional.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
F	The <i>fire alarm system</i> has deficiencies noted on the pages attached.	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>
G	Comments			
H	A copy of this report will be given to the following, who is the owner or owner's representative for this building: <u>SNC, Levalin OPM</u>	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	--

This is to certify that the information contained in this Fire Alarm System Annual Test and Inspection Report is correct and complete.

Kyle Hartman  
Printed Name of Primary or Supervising  
Technician Conducting the Test and Inspection

KOST Fire Safety  
Company

403-894-5953  
Telephone

[Signature]  
Signature of Primary or Supervising Technician  
Conducting the Test and Inspection

4998  
Identification Number of Primary or Supervising  
Technician Conducting the Test and Inspection

\_\_\_\_\_  
Printed Name of Technician Conducting the Test  
and Inspection

\_\_\_\_\_  
Company

\_\_\_\_\_  
Telephone

\_\_\_\_\_  
Signature of Technician Conducting the Test and  
Inspection

\_\_\_\_\_  
Identification Number of Technician Conducting  
the Test and Inspection

## E2. CONTROL UNIT OR TRANSPONDER TEST RECORD

YES ☐ = Tested Correctly    NO ☐ = Did not test correctly    N/A ☐ = Not applicable

(REFER TO REMARKS, E2.12)

FUNCTION OR FEATURE NOT PROVIDED ON THIS FIRE  
ALARM SYSTEM

### E2.1 CONTROL UNIT OR TRANSPONDER TEST

(Reference: Clauses 5.1.3, 5.2.2.1)

Control unit or transponder location: <u>Main Entrance</u>
Control unit or transponder identification: <u>Simplex 4008</u>

A	Power 'ON' visual indicator operates.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
B	Common visual <i>trouble signal</i> operates.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
C	Common audible <i>trouble signal</i> operates.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
D	<i>Trouble signal</i> silence switch operates.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
E	<i>Main power supply failure trouble signal</i> operates.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
F	<i>Ground fault tested on positive and negative initiates trouble signal.</i>	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
G	<i>Alert signal</i> operates.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
H	<i>Alarm signal</i> operates.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
I	Automatic transfer from <i>alert signal</i> to <i>alarm signal</i> operates.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
J	Manual transfer from <i>alert signal</i> to <i>alarm signal</i> operates.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
K	Automatic transfer from <i>alert signal</i> to <i>alarm signal</i> cancel (acknowledge) feature operates on a two-stage system.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
L	<i>Alarm signal</i> silence inhibit function operates.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
M	<i>Alarm signal</i> manual silence operates.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
N	<i>Alarm signal</i> silence visual indication operates.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
O	<i>Alarm signal</i> , when silenced, automatically reinitiates upon subsequent alarm.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
P	<i>Alarm signal</i> silence automatic cut-out timer.	Time: <u>1 min</u>		
Q	Audible and visual <i>alert signals</i> and <i>alarm signals</i> programmed and operate per <i>design and specification</i> ; or documentation as detailed in Appendix C, Description of Fire Alarm System for Inspection and Test Procedures.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
R	<i>Input circuit</i> , alarm and supervisory operation, including audible and visual indication operates.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
S	<i>Input circuit</i> supervision fault causes a trouble indication.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
T	<i>Output circuit</i> alarm indicators operate.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>

E2.1 continued...

...Continued E2.1

U	Output circuit supervision fault causes a trouble indication.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
V	Visual indicator test (lamp test).	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
W	Coded signal sequences operate not less than the required number of times and the correct alarm signal operates thereafter.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
X	Coded signal sequences are not interrupted by subsequent alarms.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
Y	Ancillary device by-pass will result in a trouble signal.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
Z	Input circuit to output circuit operation, including ancillary device circuits, for correct program operation, as per design and specification, or documentation as detailed in Appendix C, Description of Fire Alarm System for Inspection and Test Procedures.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
AA	Fire alarm system reset operates.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
BB	Main power supply to emergency power supply transfer operates.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
CC	Status change confirmation (smoke detectors only) verified. [Refer Subsection 5.7.4.3, Status Change Confirmation (Alarm Verification Feature)].	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
DD	Receipt of the alarm transmission to the fire signal receiving centre.	Yes <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>
EE	Receipt of the supervisory transmission to the fire signal receiving centre.	Yes <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>
FF	Receipt of the trouble transmission to the fire signal receiving centre.	Yes <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>
GG	Record the name and telephone number of the fire signal receiving centre.	Name: <u>Tabor Police / Reliance Protection</u> Telephone: <u>1800 653 9111</u>		
HH	Operation of the fire signal receiving centre disconnect means results in a specific trouble indication at the control unit or transponder and transmits a trouble signal to the fire signal receiving centre.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>

## E2.2 VOICE COMMUNICATION TEST

(Reference: Clause 5.1.3, 5.2.3.1)

N/A

A	Power 'ON' indicator operates.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
B	Common visual <i>trouble signal</i> operates.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
C	Common audible <i>trouble signal</i> operates.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
D	<i>Trouble signal</i> silence switch operates.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
E	All-call voice paging, including visual indicator, operates.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
F	<i>Output circuits</i> for selective voice paging, including visual indication, operates.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
G	<i>Output circuits</i> for selective voice paging trouble operation, including visual indication, operates.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
H	Microphone, including press to talk switch, operates.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
I	Operation of voice paging does not interfere with initial inhibit time of <i>alert signal</i> or <i>alarm signal</i> .	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
J	All-call voice paging operates (on <i>emergency power supply</i> ).	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
K	Upon failure of one amplifier, system automatically transfers to backup amplifier(s).	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
L	Circuits for emergency telephone call-in operation, including audible and visual indication, operates.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
M	Circuits for emergency telephones for operation, including two-way voice communication, operates.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
N	Circuits for emergency telephone trouble operation, including visual indication, operates.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
O	Emergency telephone verbal communication operates.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
P	Emergency telephone operable or in-use tone at handset operates.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>

### E2.3 CONTROL UNIT OR TRANSPONDER INSPECTION

(Reference: Clauses 5.1.3, 5.2.4.1)

Control unit or transponder location:	Main Entrance
Control unit or transponder identification:	4008

A	Input circuit designations correctly identified in relation to connected field devices.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
B	Output circuit designations correctly identified in relation to connected field devices.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
C	Correct designations for common control functions and indicators.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
D	Plug-in components and modules securely in place.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
E	Plug-in cables securely in place.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
F	Record the date, revision and version of firmware and software program.	Date: _____ Rev: _____ Ver: _____		
G	Clean and free of dust and dirt.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
H	Fuses in accordance with manufacturer's specification.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
I	Control unit or transponder lock functional.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
J	Termination points from wiring to field devices secure.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>

### E2.4 POWER SUPPLY INSPECTION

(Reference: Clauses 5.1.3, 5.3.1)

Control unit or transponder location:	Main Entrance
Control unit or transponder identification:	4008

A	Fused in accordance with the manufacturer's marked rating of the system.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
B	Adequate to meet the requirements of the system.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>

## E2.5 EMERGENCY POWER SUPPLY TEST AND INSPECTION

(Reference: Clauses 5.1.3, 5.3.2, 5.3.3)

Control unit or transponder location: <u>Main Entrance</u>				
Control unit or transponder identification: <u>4008</u>				
A	Correct battery type as recommended by manufacturer.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
B	Correct battery rating as determined by battery calculations based on full system load.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
C	Battery voltage with <i>main power supply</i> 'ON'.	<u>26.5</u> V dc		
D	Battery voltage and current with <i>main power supply</i> 'OFF' and <i>fire alarm system</i> in supervisory condition.	Voltage: <u>25.7</u> V dc Current: <u>—</u> A		
E	Battery voltage and current with <i>main power supply</i> 'OFF' and <i>fire alarm system</i> in full load alarm condition.	Voltage: <u>25.1</u> V dc Current: <u>—</u> A		
F	Charging current.	<u>—</u> A		
G	Physical damage.	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>
H	Terminals cleaned and lubricated.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
I	Terminals clamped tightly.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
J	Correct electrolyte level.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
K	Specific gravity of electrolyte is within manufacturer's specifications.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
L	Electrolyte leakage.	Yes <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>
M	Adequate ventilation.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
N	Battery manufacturer's date code or in-service date.	Date: _____		
O	Disconnection causes <i>trouble signal</i> .	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
P	Indicate type of battery <i>tests</i> performed: (i) Required supervisory load for 24 h followed by the required full load operation; or (ii) A silent <i>test</i> by using the load resistor method may be used for the full duration <i>test</i> (Refer to Appendix F1, Silent Test); or (iii) Silent accelerated <i>test</i> . (Refer to Appendix F2, Silent Accelerated Test); or (iv) A battery capacity meter <i>test</i> . (Refer to Appendix F3, Battery Capacity Meter Test); or (v) In lieu of the above battery <i>tests</i> , replace the battery with a new set having a current date code, amp-hour capacity and type as recommended by the manufacturer.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
		Yes <input type="checkbox"/>	No <input type="checkbox"/>	
		Yes <input type="checkbox"/>	No <input type="checkbox"/>	
		Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	
		Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Q	Record calculated battery capacity (Refer to Appendix F4.1-C).	<u>12</u> A•h		
R	Record battery terminal voltage after completion of <i>tests</i> .	<u>25.1</u> V dc		

E2.5 continued...



Continued E2.5 ...

S	Battery voltage not less than 85% of its rating after the tests.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
T	Generator provides power to the AC circuit serving the <i>fire alarm system</i> .	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
U	Trouble condition at the emergency generator shall result in an audible common <i>trouble signal</i> and a visual indication at the required <i>annunciator</i> .	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>

## E2.6 ANNUNCIATOR AND REMOTE TROUBLE SIGNAL UNIT TEST AND INSPECTION

(Reference: Clauses 5.1.4, 5.4.1)

N/A

Annunciator or remote trouble signal unit location:
Annunciator or remote trouble signal unit identification:

A	Power 'on' indicator operates.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
B	Individual alarm, and supervisory <i>input zones</i> are clearly indicated and separately designated.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
C	Individual alarm and supervisory <i>zone designation labels</i> are properly identified.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
D	Common <i>trouble signal</i> operates.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
E	Visual indicator <i>test (lamp test)</i> operates.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
F	Input wiring from <i>control unit</i> or <i>transponder</i> is supervised.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
G	<i>Alarm signal</i> silence visual indicator operates.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
H	Switches for ancillary functions operate as per <i>design and specification</i> , or documentation as detailed in Appendix C, Description of Fire Alarm System for Inspection and Test Procedures.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
I	Other ancillary function visual indicators operate.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
J	Manual activation of <i>alarm signal</i> and indication operates.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
K	Displays are visible in installed location operates.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
L	Operates on emergency power.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>

## E2.7 ANNUNCIATORS OR SEQUENTIAL DISPLAYS

(Reference: Clauses 5.1.4, 5.4.2)

N/A

Annunciator or sequential display location:

Annunciator or sequential display identification:

A	Power 'on' indicator operates.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
B	Individual alarm and supervisory zone indication operates.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/> (See exception)
	Exception: Operation of each individual alarm and supervisory zone indication gives the identical indication, or lights the identical indicators at the other annunciator(s) and sequential display(s).	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	Specify Method of confirmation: _____			
	Minimum of one alarm zone and one supervisory zone tested per annunciator or sequential display to confirm operation.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
C	Individual alarm and supervisory zone designation labels are properly identified.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
D	Common trouble signal operates.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
E	Visual indicator test (lamp test) operates.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
F	Input wiring from control unit or transponder is supervised.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
G	Alarm signal silence visual indicator operates.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
H	Switches for ancillary functions operate as per design and specification, or documentation as detailed in Appendix C, Description of Fire Alarm System for Inspection and Test Procedures.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
I	Other ancillary functions visual indicators operate.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
J	Manual activation of alarm signal and indication operates.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
K	Displays are visible in installed location.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>

**E2.8 REMOTE TROUBLE SIGNAL UNIT TEST AND INSPECTION**

(Reference: Clauses 5.1.4, 5.4.3)

N/A

Remote <i>trouble signal</i> unit location:
Remote <i>trouble signal</i> unit identification:

A	Input wiring from <i>control unit</i> or <i>transponder</i> is supervised.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
B	Visual <i>trouble signal</i> operates.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
C	Audible <i>trouble signal</i> operates.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
D	Audible <i>trouble signal</i> silence operates.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>

**E2.9 PRINTER TEST**

(Reference Clauses 5.1.4, 5.5.1)

N/A

Printer location:
Printer identification:

A	Operates as per <i>design</i> and <i>specification</i> , or documentation as detailed in Appendix C, Description of Fire Alarm System for Inspection and Test Procedures.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
B	Zone of each alarm initiating device is correctly printed.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
C	Rated voltage is present.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>

**E2.10 DATA COMMUNICATION LINK TEST**

(Reference: Subsection 5.1.5, 5.6-Note)

N/A

Control unit or transponder location:				
Control unit or transponder identification:				
Data communication link identification:				
A	Confirm that a <i>trouble signal</i> is received at the <i>control unit</i> or <i>transponder</i> under an open loop fault for each <i>data communication link</i> (DCL).	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
B	Where <i>fault isolation modules</i> are installed in <i>data communication links</i> serving <i>field devices</i> , wiring shall be shorted on the isolated side, <i>annunciation</i> of the fault confirmed, and then a <i>field device</i> on the source side shall be operated, and activation confirmed at the <i>control unit</i> or <i>transponder</i> .	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
C	Where fault isolation in <i>data communication links</i> is provided between <i>control units</i> or <i>transponders</i> and between <i>transponders</i> , introduce a <i>short circuit fault</i> and confirm <i>annunciation</i> of the fault and operation outside the shorted section between each pair of:			
	(i) <i>Control unit to control unit</i>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	(ii) <i>Control unit to transponder</i>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	(iii) <i>Transponder to transponder</i>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>

**E2.11 ANCILLARY DEVICE CIRCUIT TEST**

(Reference: Clause 5.2.2.1-Z)

RECORD SPECIFIC TYPE OF ANCILLARY CIRCUIT	OPERATION OF ANCILLARY CIRCUIT CONFIRMED		
Fan shut down	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>

Note: The *tests* reported on this Form do not include the actual operational *test* of *ancillary devices*.

**E2.12 REMARKS**

(Reference: E2)

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(Attach additional sheets if further remarks are required)

Continued E3.1 ...

- NOTE 5: Time delay setting of water flow switch should be recorded in the remarks column.
- NOTE 6: Sprinkler supervisory switches cause trouble condition to be annunciated but not an alarm condition.
- NOTE 7: Upper and lower pressure setting of *supervisory devices* should be recorded in the remarks column.
- NOTE 8: Low temperature setting should be recorded in the remarks column.
- NOTE 9: Identify the specific *ancillary devices* in the remarks column.
- NOTE 10: Identify date *field device* changed in the remarks column.
- NOTE 11: Identify correct *field device* operation (e.g., alarm, trouble, supervisory, annunciation indication).
- NOTE 12: Identify *zone*, circuit number, or address.
- NOTE 13: Identify *conventional field device* locations.
- NOTE 14: Identify *active field device* and *supporting field device*, *data communication link (DCL)*, address and location.
- NOTE 15: *Test* and confirm *conventional field device* supervision of wiring.
- NOTE 16: Confirm *field device* free of damage.
- NOTE 17: Confirm *field device* free of foreign substance (e.g. paint).
- NOTE 18: Confirm *field device* mechanically supported independently of the wiring.
- NOTE 19: Confirm *field device* protective dust shields or covers removed.

CAUTION: The *tests* reported on this Form do not include the actual operational *test* of *ancillary devices*.

### E3. FIELD DEVICE RECORD

(Reference: Clause 5.1.6)

#### E3.1 FIELD DEVICE TESTING — LEGEND AND NOTES

(Reference: Clauses 5.7.4.1.3, 5.7.4.1.4, 5.7.4.1.5, 5.7.4.3.1, 5.7.4.5.1, 5.7.8.1.1, 5.7.8.2.2, 5.7.8.2.4)

DEVICE	DESCRIPTION	TYPE	MODEL NO.
M	Manual Pull Station	Simplex	Single stage
RHT	Heat Detector, Restorable	Simplex	R.T.C.
HT	Heat Detector, Non-restorable	Simplex	fixed
S	Smoke Detector		
	Sensitivity Test Method or Test Equipment: Model/Method: <u>Smoke check</u>	Not applicable	Not applicable
	Manufacturer Sensitivity Range: Sensitivity Range: _____		
RI	Remote Indicator Unit		
DS	Duct Smoke Detector		
-	Other Type of Detector		
SFD	Supporting Field Device (Monitor)		
FS	Sprinkler Flow Switch		
SS	Sprinkler Supervisory Device		
-	Other Supervisory Devices (Low Pressure, Low Water, Low Temperature, Power Loss, etc.)		
EM	Fault Isolation Module		
B	Bell		
H	Horn	Simplex	24VDC
V	Visible Signal Device	Simplex	24VDC
SP	Cone Type Speaker		
HSP	Horn Type Speaker		
AD	Ancillary Device		
ET	Emergency Telephone		
EOL	End-of-Line Resistor		

#### The following notes apply to Appendix E3.2, Individual Device Record:

- NOTE 1: Smoke detector sensitivity confirmation or measurement should be recorded in the remarks column.
- NOTE 2: Smoke detector cleaning or replacement date should also be recorded in the remarks column.
- NOTE 3: Status Change, including time delay, should be recorded in the remarks column.
- NOTE 4: Duct smoke detector pressure differential should be confirmed and recorded in the remarks column.

E3.1 continued...

## E3.2 INDIVIDUAL DEVICE RECORD

(Reference: Clauses 5.7.1.3, E3.1)

BUILDING NAME: Taber RCMPPAGE 1 OF 2DATE: Aug. 18/14

Device Legends And Notes Are Listed In Appendix E3.1, Field Device Testing – Legend and Notes

LOCATION	DEVICE	CORRECTLY INSTALLED	REQUIRES SERVICE, REPAIRS, CLEANING OR MISSING	ALARM OPERATION CONFIRMED	ANNUNCIATION INDICATION CONFIRMED	ZONE CIRCUIT NUMBER OR ADDRESS	REMARKS
Main Entrance	Pull Station	/		/	/	2	
NE Office	Smoke Det	/		/	/	ZN2	
General Office	Smoke Det	/		/	/	ZN2	
Lunch Room	Smoke Det.	/		/	/	ZN2	
Main Entrance	Smoke	/		/	/	2	
Main Hall Office	Smoke	/		/	/	2	
Hall to Cell	Smoke	/		/	/	ZN1	
Cell By Hall	Smoke	/		/	/	ZN8	
Ground Wash Rm	Smoke	/		/	/	ZN8	
N.W. Jail Cell	Smoke	/		/	/	ZN6	
Ground Room	Smoke	/		/	/	ZN8	
SW Jail Cell	Smoke	/		/	/	ZN5	
West Exit Cell	Pull Station	/		/	/	ZN8	
Garage, Secured Exit	Pull Station	/		/	/	ZN1	
Interview Room	Smoke Det.	/		/	/	ZN2	
South Exit	Pull Station	/		/	/	ZN2	
Stairs E of Stairs	Smoke Det	/		/	/	ZN7	
Bottom of Stairs	Pull Station	/		/	/	ZN3	
Basement Bathrooms	Heat Det	/		/	/	<del>ZN3</del>	
Basement Bank Room	Heat Det	/		/	/	ZN3	
Basement Storage	Heat Det	/		/	/	<del>ZN3</del>	
Basement Food Rm	Smoke	/		/	/	ZN7	
Storage Room	Heat Det	/		/	/	ZN3	
Quartermaster Room	Heat Det.	/		/	/	ZN1	



### E3.2 INDIVIDUAL DEVICE RECORD

(Reference: Clauses 5.7.1.3, E3.1)

BUILDING NAME: Teber RCMP

PAGE 2 OF 2

DATE: Aug. 18/14

**Device Legends And Notes Are Listed In Appendix E3.1, Field Device Testing – Legend and Notes**

[illegible]



**SAFE BLU**  
**Strathmore, AB.**  
**Ph: 934 9387 Fax: 934 9344**

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**FIRE ALARM SYSTEM ANNUAL TEST AND INSPECTION REPORT**

BUILDING NAME: THREE HILL RCMP DATE: July 16, 2014  
ADDRESS: 719 2<sup>ND</sup> STREET - THREE HILL, AB  
COMPANY: SNC LAVALIN  
CONTACT PERSON: \_\_\_\_\_  
TELEPHONE NO: \_\_\_\_\_  
SYSTEM MANUFACTURER: EST MODEL NO: Io 500  
OPERATION: SINGLE STAGE: ☒ TWO STAGE: ☐

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**TEST RESULTS**

(EVERY LINE MUST HAVE THE APPROPRIATE MARKING IN THE SPACE PROVIDED)

This is to certify that the Fire Alarm System has been tested and inspected in accordance with Section 5 periodic inspections and tests – daily and monthly; and Section 6, periodic inspections and tests – yearly, and these records document the results of testing performed.

1. The Fire Alarm System is now fully functional. Yes ☒ No ☐

OR

2. The Fire Alarm System has deficiencies noted on the pages attached. Yes ☐ No ☒

Comments:

LED ANNUNCIATOR HAS NO LABELS BUT LAMPS WORK

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A copy of this report will be given to: \_\_\_\_\_



Ken MacLean

Signature of Technician

P0553

Technician's Certification Number

24-7 Fire & Electrical Services Ltd.

Company Name

PRE-TEST CHECKLIST		
1.	Is there a fire department interconnection?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
If yes, take necessary steps to alert central station/fire department, etc.		
<b>DO NOT USE THE FIRE DEPARTMENT EMERGENCY TELEPHONE NUMBER.</b> <b>(IN CALGARY USE THE NON-EMERGENCY PHONE NUMBER 264-1022)</b>		
Name of person contacted at the central station or fire department:		
Name	Title	Phone No.
Date and time fire alarm system is out of service:		
Date and time fire alarm is back in service:		
2.	Do you have auxiliary functions that can impair building functions such as elevator capture, fan shutdown, door holders, etc.?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
2a.	Can these be disabled and tested by groups?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
3.	Have building occupants been made aware of fire alarm testing?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
4.	Has a pre-determined time been established for testing signaling devices?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
5.	Have provisions been made for acquiring access to the secured areas of the building?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
6.	Has an alternative plan been established to alert occupants and local fire department should an actual fire condition occur during testing?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
7.	The fire alarm system has emergency power provided by:	AC Generator <input type="checkbox"/> Rechargeable battery <input type="checkbox"/>

EVERY LINE MUST HAVE THE APPROPRIATE MARKING IN THE BOX PROVIDED

YES	NO	NOT APPLICABLE (NA)
Tested correctly	Did not test correctly (See Remarks Section)	Function or feature not provided on this fire alarm system.

ALARM SIGNAL TESTS	YES	NO	NA
All alarm signaling appliances sound simultaneously in the general alarm state powered by the emergency power supply (5 min. minimum duration).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
All audible alarm signals sound simultaneously in the evacuation alarm state powered by the emergency power supply (as per the Alberta Building Code 1990).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alarm signals are audible throughout the building.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Visual alarm signals clearly indicate a visual alarm to all points in the visual alarm area when operated on normal power supply.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Each audible and visual signaling device has been tested.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
NUMBER OF AUDIBLE / VISUAL DEVICES: 9			

CONTROL UNIT TESTS		YES	NO	NA
Power on Visual Indicator		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Common Visual Trouble Lamp		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Common Audible Trouble Signal		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Trouble Signal Silence Switch		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
AC Power Failure Trouble		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Main Power Supply Failure Trouble Signal		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ground Fault Tested on Positive and Negative Trouble Signal		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Control Panel Interconnection to Fire Department Confirmed		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Alert Signal Operation		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Alarm Signal Operation		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Automatic Transfer from Alert Signal to Alarm Signal		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Acknowledge Switch Operation		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alarm Signal Silence Inhibit		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Alarm Signal Silence Operation		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alarm Signal Silence Visual Indication		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alarm Signal, when silenced, Automatically Reinitiate Upon Subsequent Alarm		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alarm Signal Silence Automatic Cut - Out Timer		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Input Circuit, Alarm & Supervisory Operation Including Visual Indicator		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Input Circuit Trouble Operation		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Output Circuit Alarm Operation		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Output Circuit Trouble Operation		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Visual Indicator Test (Lamp Tests)		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reset Operation		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Main Power Supply to Emergency Power Supply Transfer		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Control Panel Locked		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Control Unit Interconnection to Monitoring Station		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Monitoring Company Name and Phone #	Reliance Protectron 1800 661 3631			
Building System ID # and Pass Code ID #	Password KGU 286			

BATTERY TESTS			
Correct Battery Type as Recommended by Manufacturer	2 X	12V 18ah	
Correct Rating as Determined by Battery Calculations based on Full System Load	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>		
Battery Voltage (AC Power On)	27.53V		
Battery Charging Current (AC Power On)	100 MA - 1.3 AMP		
Battery Voltage (AC Power Off - Supervisory Condition)	25.8V 340MA		
Battery Voltage (AC Power Off - General Alarm Condition) Full Load	25.2V 1.3 AMP		
BATTERY TESTS INSPECTIONS	YES	NO	NA
Battery Inspected for Physical Damage	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Battery Terminals Cleaned and Lubricated	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Battery Terminals Clamped Tightly	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Within Manufacturer's Rated Life Date Code	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Disconnection Causes Trouble Signal	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

REMOTE TROUBLE UNIT	YES	NO	NA
Input Wiring from Control Unit is Supervised	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Visual Trouble Signal	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Audible Trouble Signal	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Audible Trouble Signal Silence	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

POWER SUPPLY INSPECTION	YES	NO	NA
Fused in Accordance with Manufacturer's Marked Rating of the System	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Adequate to Meet the Requirements of the System	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

<b>ANNUNCIATOR TESTS CELL BLOCK GAURDS STATION</b>	<b>YES</b>	<b>NO</b>	<b>NA</b>
Power On Indicator	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Individual Alarm & Supervisory Zone Indication	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Individual Alarm & Supervisory Zone Designation Labels are Properly Identified	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Common Trouble Signal	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Visual Indicator Test (Lamp Test)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Input Wiring from Control Unit is Supervised	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Switches for Ancillary Functions Operate as Intended	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alarm Signal Silence Visual Indicator	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other Ancillary Functions Visual Indicators	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Manual Activation of Alarm Signal & Indication	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

<b>CONTROL UNIT INSPECTIONS</b>	<b>YES</b>	<b>NO</b>	<b>NA</b>
Input Circuit Designations, Correctly Identified in Relation to Connected Field Devices	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Output Circuit Designations, Correctly Identified in Relation to Connected Field Devices	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Designations for Common Control Functions & Indicators	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cabinet, Plug-In Components, Modules, and Cables Securely in Place	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cleanliness	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fuses in Accordance with Manufacturer's Specification	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

<b>ANCILLARY DEVICES</b>	If no ancillary devices are present check here <input type="checkbox"/>	
TYPE OF DEVICE (List)	OPERATIONAL	
FURNACE OR MAU FAN	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
DOOR HOLDER MAGNET	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
	YES <input type="checkbox"/>	NO <input type="checkbox"/>
	YES <input type="checkbox"/>	NO <input type="checkbox"/>
	YES <input type="checkbox"/>	NO <input type="checkbox"/>

\*NOTE: Power supply for ancillary devices must not be from fire alarm power supply circuit.

<b>AFTER TEST CHECKLIST</b>	<b>YES</b>	<b>NO</b>	<b>NA</b>
Reconnect Auxiliary Functions (off site connections)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reconnect Ancillary Functions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reconnect Time Limit Cutouts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ensure Fire Alarm System is on Normal Power	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Advise Building Management Work Is Completed	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Advise Fire Department Work Is Completed	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ensure That the Alarm System Is Functional	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

<b>SUMMARY</b>		
1. The fire alarm system is now FULLY functional.	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
2. The fire alarm system is operational with minor deficiencies as noted in this report.	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>
3. The fire alarm system has major deficiencies as noted in this report.	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>
4. A copy of this report will be given to:	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>
BUILDING OWNER / BUILDING OWNER'S REPRESENTATIVE		

TEST AND MAINTENANCE CODES REQUIRE THAT THE BUILDING OWNER FOR A MINIMUM OF TWO YEARS MAINTAIN THIS RECORD.

### DEVICE LEGEND

Bell	B	Pressure Switch	PS
Duct Smoke Detector	DS	Remote Relay	REL
Fire Phone	FP	Heat Detector, Rate of Rise	RHT
Sprinkler Flow Switch	FS	Smoke Detector	S
Horn	H	Smoke Alarm	SA
Horn/Strobe Combination	HS	Paging Speaker	SP
Heat Detector, Fixed Temperature	HT	Sprinkler Tamper Switch	TS
Manual Pull Station	M	Visual Appliance	V

**TECHNICIANS REMARKS / DEFICIENCY FIRE ALARM / SPRINKLER SYSTEM**

All devices tested OK.

**EMERGENCY / EXIT LIGHTING:**

### **FIRE EXTINGUISHERS / FIRE HOSES:**

THREE HILLS RCMP

SAFE BLU

JULY 26, 2014

## FIRE ALARM DEVICE REPORT

LOCATION	DEVICE								NOTES
		Correctly Installed	Requires Repair	Alarm Operation	Association Confirmed	Zone Circuit #	Ground Fault	Power Sw. Delay	
MAIN FLOOR									
MAIN LOBBY	S		✓			44			
VESTIBULE ENTRANCE	M		✓			128			
SERGEANTS OFFICE 104	S		✓			20			
BULL PEN NORTH	S		✓			28			
BULL PEN SOUTH	S		✓			29			
INTERVIEW ROOM	S		✓			31			
FRONT HALL 105	M		✓			127			
FRONT HALLWAY NORTH 108	S		✓			32			
FRONT HALLWAY CENTRE 100	S		✓			33			
FRONT HALLWAY SOUTH 100	S		✓			38			
FRONT HALLWAY SOUTH 100	M		✓			130			
RECEPTION OFFICE 106	S		✓			18			
FILE ROOM 107	S		✓			45			
VSU OFFICE 113	S		✓			35			
LUNCH ROOM 112	S		✓			36			
TOP OF SOUTH STAIRS	S		✓			37			
MENS WASHROOM	RHT		✓			40			
WOMANS WASHROOM	RHT		✓			41			
OFFICE TO CELL HALL 118A	S		✓			14			
SECURE STORAGE 127	S		✓			27			
NIGHT LOCK UP 128	S		✓			26			
VISITORS ROOM 120	S		✓			12			
GAURDS WASHROOM	S		✓			8			
CELL BLOCK GAURDS DESK	M		✓			134			
HALLWAY 131	S		✓			46			
SECURE CORRIDOR 122 NORTH	S		✓			47			
SECURE CORRIDOR 122 CENTRE	S		✓			48			
SECURE CORRIDOR 122 SOUTH	S		✓			49			
SECURE GARAGE BAY EXIT	M		✓			141			
SECURE GARAGE BAY 115	RHT		✓			8			
SECURE GARAGE STORAGE RM 111	RHT		✓			9			
FINGER PRINT RM 117A	S		✓			6			
INTEREGATION ROOM 117	S		✓			5			
PRISONERS EFFECTS ROOM	S		✓			15			
CELL 1 ROOM 123	S		✓			4			
CELL 2 ROOM 130	S		✓			3			
CELL 3 ROOM 129	S		✓			2			
CELL 4 ROOM 128	S		✓			1			
GARAGE BAY 114	RHT		✓			11			
GARAGE BAY 114	M		✓			133			
BASEMENT AREA									

R=BELL

H=HORN

S=SPEAKER

V=STROBE LIGHT

M=MANUAL STATION  
S=SMOKE DETECTORRHT=RATE OF RISE HEAT  
HT=FIXED HEAT







**SAFE BLU**  
**Strathmore, AB.**  
**Ph: 934 9387 Fax: 934 9344**

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**FIRE ALARM SYSTEM ANNUAL TEST AND INSPECTION REPORT**

BUILDING NAME: TURNER VALLEY RCMP DATE: JULY 9, 2014

ADDRESS: 101 ROYAL AVENUE NE. TURNER VALLEY AB.

COMPANY: SAME

CONTACT PERSON: \_\_\_\_\_

TELEPHONE NO: 403 933 7227

SYSTEM MANUFACTURER: NOTIFIER MODEL NO: NFS-320C

OPERATION: SINGLE STAGE: ☐ TWO STAGE: ☒

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**TEST RESULTS**

(EVERY LINE MUST HAVE THE APPROPRIATE MARKING IN THE SPACE PROVIDED)

This is to certify that the Fire Alarm System has been tested and inspected in accordance with Section 5 periodic inspections and tests – daily and monthly; and Section 6, periodic inspections and tests – yearly, and these records document the results of testing performed.

1. The Fire Alarm System is now fully functional. Yes ☒ No ☐

OR

2. The Fire Alarm System has deficiencies noted on the pages attached. Yes ☐ No ☒

Comments:

ALL DEVICES TESTED OKAY

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

A copy of this report will be given to: SNC LAVALIN



Ken MacLean

Signature of Technician

P0553

Technician's Certification Number

24-7 Fire & Electrical Services Ltd.

Company Name

**PRE-TEST CHECKLIST**

1.	Is there a fire department interconnection?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>						
If yes, take necessary steps to alert central station/fire department, etc.								
<b>DO NOT USE THE FIRE DEPARTMENT EMERGENCY TELEPHONE NUMBER. (IN CALGARY USE THE NON-EMERGENCY PHONE NUMBER 264-1022)</b>								
Name of person contacted at the central station or fire department:								
<table border="0"> <tr> <td>_____</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>Name</td> <td>Title</td> <td>Phone No.</td> </tr> </table>			_____	_____	_____	Name	Title	Phone No.
_____	_____	_____						
Name	Title	Phone No.						
Date and time fire alarm system is out of service: July 9, 2014 8:00 AM								
Date and time fire alarm is back in service: July 9, 2014 12:00 PM								
2.	Do you have auxiliary functions that can impair building functions such as elevator capture, fan shutdown, door holders, etc.?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>						
2a.	Can these be disabled and tested by groups?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>						
3.	Have building occupants been made aware of fire alarm testing?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>						
4.	Has a pre-determined time been established for testing signaling devices?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>						
5.	Have provisions been made for acquiring access to the secured areas of the building?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>						
6.	Has an alternative plan been established to alert occupants and local fire department should an actual fire condition occur during testing?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>						
7.	The fire alarm system has emergency power provided by:	AC Generator <input type="checkbox"/> Rechargeable battery <input checked="" type="checkbox"/>						

**EVERY LINE MUST HAVE THE APPROPRIATE MARKING IN THE BOX PROVIDED**

YES	NO	NOT APPLICABLE (NA)
Tested correctly	Did not test correctly (See Remarks Section)	Function or feature not provided on this fire alarm system.

<b>ALARM SIGNAL TESTS</b>	YES	NO	NA
All alarm signaling appliances sound simultaneously in the general alarm state powered by the emergency power supply (5 min. minimum duration).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
All audible alarm signals sound simultaneously in the evacuation alarm state powered by the emergency power supply (as per the Alberta Building Code 1990).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alarm signals are audible throughout the building.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Visual alarm signals clearly indicate a visual alarm to all points in the visual alarm area when operated on normal power supply.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Each audible and visual signaling device has been tested.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
NUMBER OF AUDIBLE / VISUAL DEVICES: 4			

CONTROL UNIT TESTS		YES	NO	NA
Power on Visual Indicator		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Common Visual Trouble Lamp		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Common Audible Trouble Signal		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Trouble Signal Silence Switch		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
AC Power Failure Trouble		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Main Power Supply Failure Trouble Signal		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ground Fault Tested on Positive and Negative Trouble Signal		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Control Panel Interconnection to Fire Department Confirmed		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Alert Signal Operation		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alarm Signal Operation		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Automatic Transfer from Alert Signal to Alarm Signal		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Acknowledge Switch Operation		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alarm Signal Silence Inhibit		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Alarm Signal Silence Operation		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alarm Signal Silence Visual Indication		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alarm Signal, when silenced, Automatically Reinitiate Upon Subsequent Alarm		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alarm Signal Silence Automatic Cut – Out Timer		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Input Circuit, Alarm & Supervisory Operation Including Visual Indicator		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Input Circuit Trouble Operation		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Output Circuit Alarm Operation		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Output Circuit Trouble Operation		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Visual Indicator Test (Lamp Tests)		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reset Operation		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Main Power Supply to Emergency Power Supply Transfer		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Control Panel Locked		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Control Unit Interconnection to Monitoring Station		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Monitoring Company Name and Phone #	1 800 266 4155 #51202 RELIANCE PROTECTRON SECURITY			
Building System ID	#G8D0267 and Pass Code ID # TURNER VALLEY RCMP			

BATTERY TESTS			
Correct Battery Type as Recommended by Manufacturer	2 X	12V 18AH - 2013	
Correct Rating as Determined by Battery Calculations based on Full System Load	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>		
Battery Voltage (AC Power On)	27.41V		
Battery Charging Current (AC Power On)	220 MA – 1.7 AMPS		
Battery Voltage (AC Power Off - Supervisory Condition)	25.8V – 247 MA		
Battery Voltage (AC Power Off - General Alarm Condition) Full Load	25.75V		
BATTERY TESTS INSPECTIONS	YES	NO	NA
Battery Inspected for Physical Damage	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Battery Terminals Cleaned and Lubricated	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Battery Terminals Clamped Tightly	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Within Manufacturer's Rated Life Date Code	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Disconnection Causes Trouble Signal	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

REMOTE TROUBLE UNIT	YES	NO	NA
Input Wiring from Control Unit is Supervised	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Visual Trouble Signal	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Audible Trouble Signal	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Audible Trouble Signal Silence	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

POWER SUPPLY INSPECTION	YES	NO	NA
Fused in Accordance with Manufacturer's Marked Rating of the System	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Adequate to Meet the Requirements of the System	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

ANNUNCIATOR TESTS	YES	NO	NA
Power On Indicator	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Individual Alarm & Supervisory Zone Indication	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Individual Alarm & Supervisory Zone Designation Labels are Properly Identified	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Common Trouble Signal	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Visual Indicator Test (Lamp Test)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Input Wiring from Control Unit is Supervised	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Switches for Ancillary Functions Operate as Intended	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Alarm Signal Silence Visual Indicator	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Other Ancillary Functions Visual Indicators	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Manual Activation of Alarm Signal & Indication	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

CONTROL UNIT INSPECTIONS	YES	NO	NA
Input Circuit Designations, Correctly Identified in Relation to Connected Field Devices	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Output Circuit Designations, Correctly Identified in Relation to Connected Field Devices	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Designations for Common Control Functions & Indicators	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cabinet, Plug-In Components, Modules, and Cables Securely in Place	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cleanliness	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fuses in Accordance with Manufacturer's Specification	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

ANCILLARY DEVICES	If no ancillary devices are present check here <input type="checkbox"/>		
TYPE OF DEVICE (List)	OPERATIONAL		
FURNACE FANS	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>	
MAG DOOR LOCK	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>	
	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
	YES <input type="checkbox"/>	NO <input type="checkbox"/>	

\*NOTE: Power supply for ancillary devices must not be from fire alarm power supply circuit.

AFTER TEST CHECKLIST	YES	NO	NA
Reconnect Auxiliary Functions (off site connections)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reconnect Ancillary Functions	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reconnect Time Limit Cutouts	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Ensure Fire Alarm System is on Normal Power	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Advise Building Management Work Is Completed	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Advise Fire Department Work Is Completed	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ensure That the Alarm System Is Functional	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

SUMMARY			
1.	The fire alarm system is now <b>FULLY</b> functional.	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
2.	The fire alarm system is operational with minor deficiencies as noted in this report.	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>
3.	The fire alarm system has major deficiencies as noted in this report.	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>
4.	A copy of this report will be given to: SNC LAVALIN		

TEST AND MAINTENANCE CODES REQUIRE THAT THE BUILDING OWNER FOR A MINIMUM OF TWO YEARS MAINTAIN THIS RECORD.

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NO FAULTS

[illegible][illegible]

## FIRE ALARM DEVICE REPORT

LOCATION	DEVICE							NOTES
		Correctly Installed	Requires Repair	Alarm Operation	Annunciation Confirmed	Zone Circuit #	Ground Fault	
FRONT RECEPTION	CR135		✓		034			
FRONT ENTRANCE	M		✓		051			
FRONT ENTRANCE	G/A		✓		052			
MAIN WORK STATION	CR135		✓		026			
GENERAL OFFICE	S		✓		025			
GENERAL OFFICE	S		✓		024			
COMMANDERS OFFICE	CR135		✓		032			
SHIFT SUPERVISOR'S OFFICE	CR135		✓		033			
OPEN FILE STORAGE ROOM	CR135		✓		027			
INTERVIEW ROOM	CR135		✓		035			
PEACE OFFICER'S OFFICE	CR135		✓		036			
LUNCH ROOM	CR135		✓		037			
HALLWAY	H/S		✓		S1			STROBES S4
INTERVIEW ROOM	CHIME							DELETED
MEN'S WASHROOM	CR135		✓		029			
WOMENS WASHROOM	CR135		✓		028			
JANITOR'S CLOSET	CR135		✓		030			
NORTH CORRIDOR EXIT	M		✓		053			
NORTH CORRIDOR EXIT	G/A		✓		054			
EQUIPMENT ROOM - GUN STORAGE ROOM	CR135		✓		031			
OVERNIGHT EXHIBIT	S		✓		009			
SECURE EXHIBIT	S		✓		008			
VISITOR'S VIEWING ROOM	CR135		✓		010			
GUARD'S STATION	CR135		✓		012			
GUEST INTERVIEW ROOM	CR135		✓		018			
COLD STORAGE	CR135		✓		019			
GUEST INTERVIEW ROOM	CHIME							DELETED
BREATHALYZER ROOM	CR135		✓		013			
GUEST VIEWING ROOM	CR135		✓		011			
GUARD STATION	M		✓		063			
GUARD STATION	G/A		✓		064			
SECURE BAY	CR135		✓		020			
SECURE BAY EXIT	M		✓		057			
SECURE BAY EXIT	G/A		✓		058			
CELL 132	S				005			OCCUPIED, NO ACCESS
CELL 131	S		✓		004			
CELL 130	S		✓		002			
CELL 129	S		✓		006			
CELL 128	S		✓		007			
PRISONER'S EFFECTS ROOM	CR 135		✓		017			
CELL CORRIDOR NORTH	S		✓		016			
CELL CORRIDOR CENTER	S		✓		015			
CELL CORRIDOR SOUTH	S		✓		014			
CELL BLOCK HALLWAY	H/S		✓		S2			STROBE S3

M=MANUAL STATION  
S=SMOKE DETECTOR

RHT=RATE OF RISE HEAT  
HT=FIXED HEAT

B=BELL  
H=HORN  
S=SPEAKER  
V=STROBE LIGHT



[illegible]

B=BELL  
H=HORN  
S=SPEAKER  
V=STROBE LIGHT

