### 14-047 Addendum 4 EXHIBIT B - 2013 Fire Inspection Reports PART 1

Location / Buildings include:

- City Dock
- Warehouse
- Facility Maintenance
- Police and Fire
- Community Services department
- Community Development
- Utilities Maintenance
- Car Wash
- Tennis Center
- 8<sup>th</sup> Ave Garage

Serial #	Location	DOM	6YR	TYPE	MANUF	SERVICE
1 373344	TACP ROOM	OYou	01/09	ABC	Badger	TAL
2 317049	Dock	2008	NA	chem	Ansil Senty	TAC
3 930711	Fire (abiret)	0802	°9/08	ABC	Ansil Senty Ansul Senty	TAL
400166631	Fire Cobinst Z	11/13	11/13	ABC	Bucheye	6-41
5 690308	Fire Cabinet 3	2008	MA	XBC	Amerex	TAG
6 502382	Fine Cabinet 4	14/13	1/13	ABC	Buckeye	6-4r
, 256037	Fire Cabinet 5	11/13	1/13	ABC	Ansu) Sentry	6-40
8 9C1887	Fix Cabinet C	4/08	108	ABC	Badger	TAS
9 373482	Fine Cabinet 7	10/11	10/11	ABC	America	Tay
10 205849	Five Cabinet 8	11/13	1/13	ABL	Buter	Wh
11 266941	wasterlarger Area	2008	N/A	Chem	Ansul Severy	TAG
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Invoice Number:

Date:

Condition	Poss	poson	6000	Good																					
Pass/Fail	Pass	PASS	Piss	Ples																					
Battery Size					35																				
Type	Sately light	Ext 1:207	Ext Ruly	Safety 1: At																					
Location	1 Thurs C.R.	2 Nuns el	3 Womans Re	4 Womens RR	5	9	7	8	6	10	11	12	13	14	15	16	17	18	19	20	. 21	22	23	24	25



# Report of Inspection, Testing & Maintenance of Water Based Fire Protection Systems



Date of Last Inspection:  Prior inspection reports, logs and test data are available for review:  Prior inspection reports, logs and test data are available for review:  Prior inspection reports, logs and test data are available for review:  Prior inspection reports, logs and test data are available for review:  Prior inspection reports, logs and test data are available for review:  Prior inspection reports, logs and test data are available for review:  Prior inspection reports, logs and test data are available for review:  Prior inspection reports in site for review?  Modifications made to systems on site for reviewed and documented?  Response of systems on site for reviewed and documented?  Resports of sprinkler activation reviewed and documented?  Resports of sprinkler activation reviewed and documented?  Meetity logs of inspections required by NFPA #25 on file?  Meetity logs of inspections required by NFPA #25 on file?  Meetity logs of inspections required by nFPA #25 on file?  Meetity logs of inspections required by nFPA #25 on file?  Meetity logs of inspections required by nFPA #25 on file?  Meetity logs of inspection reviewed and hazards to inspector removed?  Meetity logs of inspection at last inspection?  Metity logs of inspection at last inspection?  Metity logs of inspection at last inspection?  Metity logs of inspection at last inspection?  Meetity logs of inspection at last inspection or last inspection and provided to the owner.  Meetity logs of inspection at last inspection or last inspection and provided to the owner.	Inspecting Firm (Contractor):, Space Coast Fire & Safety	Inspector: 1	ack inspectio	n Contr	act#	
Street Address:  City: Nat City of Contact Person Name:  Contact Person Name:  Contact Person Name:  Position:  Authority to Approve Work?  Y N/A I Property Owner:  City:  State:  Zip:  Phone:  Fax:  Responsible Party Name:  Position:  Name of Supervisory Alarm Company:  Phone:  Date of Last Inspection:  Prior Inspector's Name:  Prior Inspector's Name:  1. Prior inspection reports, logs and test data are available for review:  2. Plans of systems on site for review?  3. Modifications made to systems reviewed and documented?  4. Reports of sprinkler activation reviewed and documented?  5. Copy of NFPA #25 on file?  6. Weekly logs of inspections required by NFPA #25 on file?  6. Weekly logs of inspections required by NFPA #25 on file?  8. All deficiencies reported at last inspection?  8. All deficiencies reported at last inspection corrected?  9. Material Safety Data Sheets reviewed and hazards to inspector removed?  (Use separate sheet for additional information as may be needed. All "NO" answers to be explained.)  AFSA Form 104A should be completed by the inspecting Firm/Contractor and provided to the Owner.  COMMENTS: THIS IS NOT AN ENGINEERING REVIEW  All Supposed to the inspection or service provided by the contractor as prescribed herein is limited to performing a visual inspection and/or routine testing, and any investigation or unscheduled sesting, modification, maintenance, repair, etc., of the component parts as in knowledge of the party providing such information.  OWNER/DESIGNATED REPRESENTATIVE:  DATE:		Completed by	Bullock			
State: Zip: Phone: Fax: Contact Person Name: Position: Authority to Approve Work? Y N/A North Property Owner. City: Property Owner.	Name of Property: City Boat Dock					
Phone: Fax: Contact Person Name: Position: Authority to Approve Work? Y N/A N Property Owner: City of North Contact Property Owner: City: State: Zip: Phone: Fax: Responsible Party Name: Position: Name of Supervisory Alarm Company: Phone:  Date of Last Inspection: Prior Inspector's Name:  1. Prior Inspection reports, logs and test data are available for review: 2. Plans of systems on site for review? 3. Modifications made to systems reviewed and documented? 4. Reports of syntheir activation reviewed and documented? 5. Copy of NFPA #25 on file? 6. Weekly logs of inspections required by NFPA #25 on file? 7. Owner/Owner's Representative verifies that the occupancy and hazard are the same as reported on last inspection? 8. All deficiencies reported at last inspection corrected? 9. Material Safety Data Sheets reviewed and hazards to inspector removed? (Use separate sheet for additional information as may be needed. All "No" answers to be explained.)  AFSA Form 104A should be completed by the Inspecting Firm/Contractor and provided to the Owner.  COMMENTS: THIS IS NOT AN ENGINEERING REVIEW  All Cquip Cut In Place Aud Hassard to inspection and/or routine testing, and any investigation or unscheduled testing, modification, maintenance, repair, etc., of the component parts at the knowledge of the party providing such information.  OWNER/DESIGNATED REPRESENTAILYE:  DATE:	Street Address:			,		
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Property Owner: City Floral Co.  Address:  City: State: Zip: Phone: Fax:  Responsible Party Name: Position: Name of Supervisory Alarm Company: Phone:  Date of Last Inspection: Prior Inspector's Name:  1. Prior inspection reports, logs and test data are available for review: 2. Plans of systems on site for review? 3. Modifications made to systems reviewed and documented? 4. Reports of sprinkler activation reviewed and documented? 5. Copy of NFPA #25 on file? 6. Weekly logs of inspections required by NFPA #25 on file? 7. Owner/Owner's Representative verifies that the occupancy and hazard are the same as reported on last inspection? 8. All deficiencies reported at last inspection corrected? 9. Material Safety Data Sheets reviewed and hazards to inspector removed? (Use separate sheet for additional information as may be needed. All "NO" answers to be explained.)  AFSA Form 104A should be completed by the Inspecting Firm/Contractor and provided to the Owner.  COMMENTS: THIS IS NOT AN ENGINEERING REVIEW  All Capip Capital Capita	Contact Person Name:					
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are the same as reported on last inspection?  8. All deficiencies reported at last inspection corrected?  9. Material Safety Data Sheets reviewed and hazards to inspector removed?  (Use separate sheet for additional information as may be needed. All "NO" answers to be explained.)  AFSA Form 104A should be completed by the Inspecting Firm/Contractor and provided to the Owner.  COMMENTS: THIS IS NOT AN ENGINEERING REVIEW  All Equipment in Place. All Hoses Due For hyposofatic test.  The owner and/or designated representative acknowledges the responsibility of the operating condition of the component parts at the time of this inspection. It is agreed that the inspection service provided by the contractor as prescribed herein is limited to performing a visual inspection and/or routine testing, and any investigation or unscheduled testing, modification, maintenance, repair, etc., of the component parts is not included as part of the inspection work performed. It is further understood that all information contained herein is provided to the best of the knowledge of the party providing such information.  OWNER/DESIGNATED REPRESENTATIVE:  DATE:	6. Weekly logs of inspections required by NFPA #25 on file?			T		T
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(Use separate sheet for additional information as may be needed. All "NO" answers to be explained.)  AFSA Form 104A should be completed by the Inspecting Firm/Contractor and provided to the Owner.  COMMENTS: THIS IS NOT AN ENGINEERING REVIEW  All Equipment in place. All Hoses Dee For hypeostatic test  The owner and/or designated representative acknowledges the responsibility of the operating condition of the component parts at the time of this inspection. It is agreed that the inspection service provided by the contractor as prescribed herein is limited to performing a visual inspection and/or routine testing, and any investigation or unscheduled testing, modification, maintenance, repair, etc., of the component parts is no included as part of the inspection work performed. It is further understood that all information contained herein is provided to the best of the knowledge of the party providing such information.  OWNER/DESIGNATED REPRESENTATIVE:  DATE:	8. All deficiencies reported at last inspection corrected?					
AFSA Form 104A should be completed by the Inspecting Firm/Contractor and provided to the Owner.  COMMENTS: THIS IS NOT AN ENGINEERING REVIEW  All Equipment in place. All Hoses Due For hy Deosfatic test  The owner and/or designated representative acknowledges the responsibility of the operating condition of the component parts at the time of this inspection. It is agreed that the inspection service provided by the contractor as prescribed herein is limited to performing a visual inspection and/or routine testing, and any investigation or unscheduled testing, modification, maintenance, repair, etc., of the component parts is not included as part of the inspection work performed. It is further understood that all information contained herein is provided to the best of the knowledge of the party providing such information.  OWNER/DESIGNATED REPRESENTATIVE:  DATE:	9. Material Safety Data Sheets reviewed and hazards to inspector remo-	ved?		H		
The owner and/or designated representative acknowledges the responsibility of the operating condition of the component parts at the time of this inspection. It is agreed that the inspection service provided by the contractor as prescribed herein is limited to performing a visual inspection and/or routine testing, and any investigation or unscheduled testing, modification, maintenance, repair, etc., of the component parts is no included as part of the inspection work performed. It is further understood that all information contained herein is provided to the best of the knowledge of the party providing such information.  OWNER/DESIGNATED REPRESENTATIVE:  DATE:	AFSA Form 104A should be completed by the Inspecting Firm/Contractor and p  COMMENTS: THIS IS NOT AN ENGINEERING REVIEW	provided to the Own	er.	<b>53</b> T	***************************************	
this inspection. It is agreed that the inspection service provided by the contractor as prescribed herein is limited to performing a visual inspection and/or routine testing, and any investigation or unscheduled testing, modification, maintenance, repair, etc., of the component parts is no included as part of the inspection work performed. It is further understood that all information contained herein is provided to the best of the knowledge of the party providing such information.  OWNER/DESIGNATED REPRESENTATIVE:  DATE:	* *					
this inspection. It is agreed that the inspection service provided by the contractor as prescribed herein is limited to performing a visual inspection and/or routine testing, and any investigation or unscheduled testing, modification, maintenance, repair, etc., of the component parts is no included as part of the inspection work performed. It is further understood that all information contained herein is provided to the best of the knowledge of the party providing such information.  OWNER/DESIGNATED REPRESENTATIVE:  DATE:						
OWNER/DESIGNATED REPRESENTATIVE: DATE:	this inspection. It is agreed that the inspection service provided by the contraction and/or routine testing, and any investigation or unscheduled testing, modificulted as part of the inspection work performed. It is further understood that	or as prescribed her fication, maintenance	rein is limited to perform	ning a vis	narte i	pec-
580 1	knowledge of the party providing such information.					
INSPECTOR'S SIGNATURE DATE: \1/2 1/13	OWNER/DESIGNATED REPRESENTATIVE:		DATE	:		
DATE: \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	INSPECTOR'S SIGNATURE THE THE			1.	1,5	10.1
	INGE COLON & SIGNAL DICE.		DATE	11/2	413	



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(AFSA Form 103A) Page 1 of 1

Describe special procedures:	×				8
					* *
System tested 100%				4	35
System partially tested (specify):					
Completion notification after testing:	· · · · · · · · · · · · · · · · · · ·				
Monitoring entity					V.,
Building occupants:		*			
Building management					
Others (specify)					2
The following did not operate properly:					
The second secon					
System was restored to normal operation and taken off test statu	ıs at:		1		
Times: 12:30 am. By: 7 R 11					
J. D. B. Wook					
-					
Control of the North Nor	ED 4 stondondo				
This testing was performed in accordance with applicable N	FPA standards.				
Inspected by: D. Bolo (C)					
Signature:					
16 XCDV					
1 1/ CCC					
Jr/ Coco		(4)			
Owner of warranger to tive:	M. E. C.	<i>E</i> 1			
Owner of representative:	W. H	(*)		<del></del>	
Owner of representative: Signature:		- 1			
Signature:					
Signature:  A.H.J. or representative::					
Signature:					

Systems Tests and Inspections:		· · · · · · · · · · · · · · · · · · ·
"Journa was and makeriones		
	Visual	Functional
Control Panel		/
Interface / shutdown equipment		7
Indicator lamps / LEDs		1/1
Fuses		
Primary Power		$\leq$
Trouble signals		
Disconnect means	~	
Ground fault monitor		
Batteries		
		12,8 Load voltage:
		12.6 Discharge test
140		2. 2 Charger test
		N/A Specific gravity
Surge suppression	***************************************	1
Remote annunciators		
Notification Appliance		Audible
• "		Visual
* *		Volume
		Message clarity
*		Wiessage clarity
(Emergency communications equip)	Not applicable	
Phone set		-
Phone jacks		
Off-hook indication	·	
Amplifiers	***	
Tone generators		-
Call-in signal		
Monitoring (on or off premises)	Not applicable	
Alarm signal		
Alarm restoral		
Trouble signal		
Trouble restoral		
Supervisory alarm		
Supervisory restoral		
	37 5	
System Performance	Non Functional	Functional
Comments:		

#### Initiating Device and Circuit Information:

	uits (See NFPA 72, Table 3-5) ing Device Circuits (I.D.C.'s) on	
Circuit Styles.	Style D (Ch	is 11) chount
	See NFPA 72, Table 3-6) Line Circuits (I.D.C.'s) on syste Style 6a (Cl	em: ass A) circuits Style 4 (Class B) circuits
Quantity	Circuit Style	Devices
2	3	Manual Stations
		Ionization smoke detectors
		Photo electric smoke detectors
		Duct smoke detectors, ionization
		Duct smoke detectors, photoelectric
	3	Heat detectors, temp, R/R
		Waterflow switches: pres vane
	* .	Other, specify:
	¥	
		Supervisory tamper switches
*	•	Generator condition:
		Fire pump condition:
		Other, specify
Alarm Notification A	ppliance and Circuit Informat	tion
	cation Appliance Circuits (N.A.	
Circuit Styles:	10.47	ass A) circuits Style Y (Class B) circuits
Quantity	Circuit Style	Notification Appliances
	Y	Bells
1	<u> </u>	Horns + Strobe
		Chimes
	Υ	Strobes
		Speakers
		Apartment Sounders
T E		Other, specify:

### Fire Alarm Test and Inspection Record

Space Coast Fire and Safety, Inc.

420 Manor Drive

Panel Mfgr: Naxo Model number: Magnum 6000

Date / scope of last software change:

Software:

Date of last service:

License # EC-13001156 Merritt Island, FL 32952 EF-20000623 Property: Naples Dock Time: 12; Date: 11/21/13 Monitored by: All American Phone: 800 3/89486 Account Number: 4443-60 Contact: Phone: On test until: Owner/Mgr: Jurisdiction: Notes FIRP Phone: Phone: Contact: Phone: Inspection Interval: Inspection Conducted by: D.B. Wock Annua Testing notification prior to testing: By: P.Bullow Monitoring Entity Building Occupants **Building Management** Others (Specify) System Description: Primary Power Voltage: Transmission Type: Digital Rated Current: ' Communication Model: DACT

> Capacity: 20 Panel: Breaker Number: | 8 Secondary (standby) power supply 24 Hour stby/5 min. alarm 12 V Batteries: Type & location: Panel Sealed

Over Current Protection: BREAKER

Phone: (321) 783-1040

am

Fax: (321) 783-1516

City Wasehouse / Robrds

INVOICE#\_\_\_\_522618

Serial #	Location	DOM	6YR	TYPE 10#	MANUF	SERVICE
1258317	office	04	05	ABC	Badg	er Tag
2 428 273	Bay door	80		70-4 Halati	on Ans	al Tag
3772614	office	12	12	175C	BUCK	
4 6 38 365	4P Stairs	11	11	10 th AOC	AX	Tag
5465331	Bay 0001	09		10 H	Ax	Tag
6420283	Bay Joor	13	13	Ple	AX	H4000
7 13 7441	Back Bay	07	13	10#	Ansa/	Tag
8 441 135	Office	13	13		Badger	Hydea
9 73/515	Office	13	13	ABC.	Bargel	Horo
10					7	/
11 14294	Lockup	12	12	10 ABC	Book '	Vag
12	Ì					,
13.						
14						
15						
16			,			
17						
18						
19						
20						
21		:				-
22						
23						
24						
25	1.0					
26						
27						
28						
29						
					Test a	

### Fire Alarm Test and Inspection Record

Space Coast Fire and Safety, Inc. 420 Manor Drive Merritt Island, FL 32952

Property: City of Naples Eity Workhouse Address: 270 Riverside Dr
Negles, PC Contact: Phone:
Owner/Mgr:
Phone:
Contact: Phone:
Inspection Conducted by:
Robbie
Testing notification prior to testing:  Time: Am By:
Monitoring Entity
Building Occupants
Building Management
Others (Specify)

Phone: (321) 783-1040 Fax: (321) 783-1516 License # EC-13001156 EF-20000623

Date: 11/18/13

Time:

I'm

Monitored by: All America Phone: 1-800-318 9486 Account Number: 4439-60 On test until: 3 am 8

Jurisdiction: Noyles

Phone:

Inspection Interval: Anny or

#### System Description:

Transmission Type: Dix (120)
Communication Model:

Panel Mfgr: Redionics Model number: P7024

Software:

Date of last service: 11/12

Date / scope of last software change:

Primary Power Voltage: 1200nc

Rated Current: 5

Over Current Protection: Broke

Capacity: 2つ Panel: いし

Breaker Number: 41

Secondary (standby) power supply

24 Hour stby/5 min. alarm

Batteries: Z x 12.00 < 7 Ph
Type & location: Secret / pone 1

#### Initiating Device and Circuit Information:

		its (See NFPA 72, Table 3-5) g Device Circuits (I.D.C.'s) on	system: 4
(	Circuit Styles:	g Style D (Class	ss A) circuits Style B (Class B) circuits
3		ee NFPA 72, Table 3-6) Line Circuits (I.D.C.'s) on system Style 6a (Cla	m: 1 ss A) circuits Style 4 (Class B) circuits
20	Quantity	Circuit Style	Devices
	1	B	Manual Stations
			Ion zation smoke detectors
	t	B	Photo electric smoke detectors
			Duct smoke detectors, ionization
			Duct smoke detectors, photoelectric
			Heat detectors, temp, R/R
	1	\$	Waterflow switches: presvane
			Other, specify:
	<b>)</b> .	B	Supervisory tamper switches
	9	(8)	Generator condition:
			Fire pump condition:
*			Other, specify
	Notification An	pliance and Circuit Informati	on
	845	ation Appliance Circuits (N.A.C	
	Circuit Styles:	Style Z (Class	
	Quantity	Circuit Style	Notification Appliances
			Bells
	1.	Y	Homs/stale/
			Chimes
	¥		Strobes
			Speakers
			Apartment Sounders
	3		Other, specify:

Systems Tests and Inspections:		
	Visual	Functional
Control Panel	¥ 15441	
		- Puller MPS
Interface / shutdown equipment		
Indicator lamps / LEDs		Visual
Fuses		Visual
Primary Power		Discourse NAC  Flopped Breoker
Trouble signals		Discourse NITE
Disconnect means		Elipped Breeker
Ground fault monitor		
Batteries		Jandanham 2 V 5VDC
		Load voltage: 24.500c
a		Discharge test  Charger test  Z7.7VPC
		Specific gravity
Surge suppression	~ 1/0	
Remote annunciators	TO MA	-
Notification Appliance		Audible Pull -1 PS
•		Visual
		Volume
Taga,		Message clarity
		Tricosage clarity
(Emergency communications equip)	Not applicable	
Phone set	and the second s	•
Phone jacks		
Off-hook indication	-	
Amplifiers		
Tone generators		
Call-in signal		
	Name and the second	,
Monitoring (on or off premises)	Not applicable	
Alarm signal		
Alarm restoral		
Trouble signal		
Trouble restoral		
Supervisory alarm		
Supervisory restoral		
, a		
System Performance	Non Functional	Eunctional
Comments:		

Describe special procedures:			
System tested 100% System partially tested (specify):		8	
		9	
Completion notification after testing:			
Time: 1:30 dm. By: Ke			
Monitoring entity			
Building occupants:  Building management			
Others (specify)			
The following did not operate properly:			4
Fire Alarm and Cletrical boxes need 3ft of	Clevonic	Cy C 1 0 0 1	THER
		S	
System was restored to normal operation and taken off test status at:  Times: / : 3 - a.m. By: /-			
Times: 7,30 anti- by: 7			
This testing was performed in accordance with applicable NFPA standards.			
Inspected by: R. Charbert			
Signature:			
Owner of representative:			
Signature:			-,
A.H.J. or representative:: Signature:			

# Report of Inspection, Testing & Maintenance of Water Based Fire Protection Systems



3.6	- 17			
Inspecting Firm (Contractor): Space Coast Fire & Safety	Inspector: M.D.	Inspection (	Contract#	
Date of This Inspection: 1/19/13	Completed by: MUC	/		
Name of Property: City Watchass / Still				
Street Address: 279 Killerside Circle				
City: Nagles	State: ///	Zip:		
Phone:	Fax:			
Contact Person Name: Health				
Position: Confort Selvices May	Authority to Approve Work?	)	Y N/	AN
Property Owner:				
Address:				
City:	State:	Zip:		
Phone:	Fax:			
Responsible Party Name:		Position	n:	
Name of Supervisory Alarm Company: All American		Phone:		2
2/22/2		11 >2	-011	
Date of Last Inspection: 8/2013	Prior Inspector's Name:	Mr. Oc	24	
,				
			Y , N//	A N
1. Prior inspection reports, logs and test data are available for review:			1211	Ш
Plans of systems on site for review?	· · · · · · · · · · · · · · · · · · ·			Щ
Modifications made to systems reviewed and documented?				
Reports of sprinkler activation reviewed and documented?				
5. Copy of NFPA #25 on file?				Щ
Weekly logs of inspections required by NFPA #25 on file?				ЩЦ
7. Owner/Owner's Representative verifies that the occupancy and hazar are the same as reported on last inspection?	rd .			
All deficiencies reported at last inspection corrected?			HE	Im
9. Material Safety Data Sheets reviewed and hazards to inspector remo	ved?		17	
			1 house	odL_brownpd_
(Use separate sheet for additional information as may be needed. All "NO" ans	wers to be explained.)			
AFSA Form 104A should be completed by the Inspecting Firm/Contractor and	provided to the Owner.			
COMMENTS. THIS IS NOT AN ENGINEEDING DEVIEW				
THIS IS NOT AN ENGINEERING REVIEW				
New Care or 1. 121.	* .			
			7	
			and the second second second	
The owner and/or designated representative acknowledges the responsibility o				
this inspection. It is agreed that the inspection service provided by the contract				
tion and/or routine testing, and any investigation or unscheduled testing, modificulted as part of the inspection work performed. It is further understood that	all information contained herein	is provided to	the best o	f the
knowledge of the party providing such information.				
OWNER/DESIGNATED REPRESENTATIVE		DATE:		
MINISTRATION OF THE PROPERTY O			11/1/11	10
INSPECTOR'S SIGNATURE:		DATE:	14.4	4



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(AFSA Form 103A) Page 1 of 1

Report of Inspection, Testing & Maintena	ince of V	Vet Pipe	Fire Sprinkler Systemscontinu	ed
Inspecting Firm: Space Coast Fire & Safety	/		Inspection Contract#	
Name of Inspected Property: C.+y Waltehouse	2/ Re	word 5	Horage	
Inspector Name: M. D. Paris			Date: 11/18/13	
	Quarterly		Annually Other	
Annual Inspect	tion for V	Vet Pipe	Sprinkler Systems	Frankling and a second
	Y NA N			Y N/A N
E.1.0 System in service on inspection	1/1/	E.4.7	Glass bulbs appear full of liquid	+L $+$ L $+$ L $+$
E.2.0 Hangers and seismic bracing appears undamaged and tightly attached	300	E.4.8	Spare sprinklers are of proper number (at least 6), type and temperature rating	
E.3.0 Piping appears free of mechanical damage		E.4.9	Spare sprinklers stored where temperature maximum is 100°F	
E.S.1 Philip appears nee of leakage		E.4.10		
E.3.2 Piping appears free of corrosion		12.11.10	PRIOR TO FREEZING WEATHER:	
E.3.3 Piping appears properly aligned	<del>31-11-1</del>	E.5.0	Building is secure such as not to expose	
E.3.4 Piping appears free of external loading E.4.0 Sprinklers appear free of leakage	1		piping to freezing conditions	
E.4.0 Sprinklers appear free of corrosion		E.5.1	Adequate heat is provided maintaining temperatures at 40°F or higher	
E.4.2 Sprinklers appear free of foreign materials	100	E.6.0	ALARM PANEL CLEAR	
E.4.3 Sprinklers appear free of paint		E.7.0	COMMENTS:	
E.4.4 Sprinklers appear free of physical damage			He: New (harst on Isen	
E.4.5 Sprinklers appear properly oriented			7	
E.4.6 Sprinkler spray patterns appear free of unacceptable obstructions	100		V	
Annual Testii	ng for W	et Pipe S	prinkler Systems	
F.1.0 System in service before testing	MOIO	F.5.2	Forward flow test conducted at maximum	
F.1.1 Pertinent parties notified before testing	700	250000000000000000000000000000000000000	rate possible (only where connections do	
F.1.2 Adequate drainage provided before flow testing		F.5.3	not permit full flow test)  Forward flow test conducted without	
F.2.0 Main drain test conducted		1.0.0	measuring flow (device =2" and outlet</td <td></td>	
F.2.1 Supply water gauge reading before flow (static)	UO psi	F- F- A	sized to flow system demand)	
F.2.2 Gauge reading during stable flow (residual)	570 psi	F.5.4	Backflow prevention assembly internal inspection conducted (where shortages last	1911
F.2.3 Time for supply pressure to return to normal	\ sec		more than 1 year and rationing enforced by AHJ	
F.3.0 Antifreeze solution tested and freezing point determined		F.5.5	Forward flow test satisfied by annual fire pump flow test	
F.3.1 Antifreeze solution freezing point	°F	F.5.6	Backflow preventer performance test conducted as required by the AHJ	
F.3.2 Antifreeze solution freezing point after adjustment	t °F	F.6.0	PRV control valves partial flow test	
F.4.0 Control valves (including backflow and PIVs) operated through full range and returned to	760		conducted and adequate to unseat valve	
normal position		F.7.0	Pertinent parties notified of test conclusion	
F.4.1 PIVs opened until spring or torsion felt in rod		F.8.0	ALARM PANEL CLEAR	
F.4.2 PIVs and OS&Ys backed 1/4 turn from full open	200	F.9.0	SYSTEM RETURNED TO SERVICE	
F.4.3 Main drain test conducted (see F.2.0)		F.10.0	COMMENTS:	
F.5.0 Backflow prevention assembly forward flow test conducted				
F.5.1 System demand flow was achieved through the device				
Annual Maintena	ance for	Wet Pipe	Sprinkler Systems	j
G.1.0 System in service before conducting maintenance			Time for supply pressure to return to normal	sec
G.2.0 Pertinent parties notified before conducting maintenance		G.5.0	Pertinent parties notified after conclusion of maintenance	
G.3.0 Operating stems of OS&Y (including backflow) valves lubricated			ALARM PANEL CLEAR	
G.3.1 Valve completely closed and reopened	100		SYSTEM RETURNED TO SERVICE COMMENTS:	الحاالا الحا
G.4.0 Adequate drainage provided before flow testing		9,0,0		
G.4.1 Main drain test conducted				
G.4.2 Supply water gauge reading before flow (static)	GQ psi			
G.4.3 Gauge reading during stable flow (residual)	50 psi		-	

Invoice Number: Date:

25	24	23	22	21	20	19	18	17	16	15	14	13	12	11	10	9	00		workhause office		Workhouse ONEY H	morehouse/ E	CK Bay/	1-1-56/K-C16	Location
																		Em C	Cxit	4123	m /	EM.	ナバナ	rom BO	Туре
																				£		GUTAL			Battery Size
																			Fail		Failed	Perss	PRSS	Pass	Pass/Fail
																			No Test Button		Cornided	Good	Cood	BICKEN EMODERS CISAD	Condition



Report of Inspection, Testing & Maintenance of W	et Pipe Fire Sprinkler Systemscontinued
Inspecting Firm: Space Coast Fire & Safety	Inspection Contract# 527483
Name of Inspected Property: FAC, MAINT	Inspection Contractif 7 CC (C)
Inspector Name: D. B - llock	Date: 11/20/13
Inspection Frequency: Monthly Quarterly	Annually Other
Annual Inspection for W	et Pipe Sprinkler Systems
Y N/A N	Y N/A N
E.1.0 System in service on inspection	E.4.7 Glass bulbs appear full of liquid
E.2.0 Hangers and seismic bracing appears undamaged and tightly attached	E.4.8 Spare sprinklers are of proper number (at least 6), type and temperature rating
E.3.0 Piping appears free of mechanical damage	E.4.9 Spare sprinklers stored where temperature
E.3.1 Piping appears free of leakage	maximum is 100°F
E.3.2 Piping appears free of corrosion	E.4.10 Wrench available for each type of sprinkler PRIOR TO FREEZING WEATHER:
E.3.3 Piping appears properly aligned E.3.4 Piping appears free of external loading	E.5.0 Building is secure such as not to expose
E.4.0 Sprinklers appear free of leakage	piping to freezing conditions
E.4.1 Sprinklers appear free of corrosion	E.5.1 Adequate heat is provided maintaining temperatures at 40°F or higher
E.4.2 Sprinklers appear free of foreign materials	E.6.0 ALARM PANEL CLEAR
E.4.3 Sprinklers appear free of paint	E.7.0 COMMENTS:
E.4.4 Sprinklers appear free of physical damage	
E.4.5 Sprinklers appear properly oriented E.4.6 Sprinkler spray patterns appear free of	
unacceptable obstructions	
Annual Testing for Wei	Pipe Sprinkler Systems
F.1.0 System in service before testing	
F.1.1 Pertinent parties notified before testing	F.5.2 Forward flow test conducted at maximum rate possible (only where connections do
F.1.2 Adequate drainage provided before flow testing	not permit full flow test)
F.2.0 Main drain test conducted	F.5.3 Forward flow test conducted without measuring flow (device =2" and outlet</td
F.2.1 Supply water gauge reading before flow (static) 8> psi	sized to flow system demand)
F.2.2 Gauge reading during stable flow (residual) 78 psi	F.5.4 Backflow prevention assembly internal inspection conducted (where shortages last
F.2.3 Time for supply pressure to return to normal 2 sec	more than 1 year and rationing enforced by AHJ)
F.3.0 Antifreeze solution tested and freezing	F.5.5 Forward flow test satisfied by annual fire
point determined	pump flow test F.5.6 Backflow preventer performance test
F.3.1 Antifreeze solution freezing point °F	conducted as required by the AHJ
F.3.2 Antifreeze solution freezing point after adjustment °F F.4.0 Control valves (including backflow and PIVs)	F.6.0 PRV control valves partial flow test
operated through full range and returned to	conducted and adequate to unseat valve  F.7.0 Pertinent parties notified of test conclusion
normal position	F.8.0 ALARM PANEL CLEAR
F.4.1 PIVs opened until spring or torsion felt in rod	F.9.0 SYSTEM RETURNED TO SERVICE
F.4.2 PIVs and OS&Ys backed 1/4 turn from full open F.4.3 Main drain test conducted (see F.2.0)	F.10.0 COMMENTS:
F.5.0 Backflow prevention assembly forward	
flow test conducted	
F.5.1 System demand flow was achieved through the device	
Annual Maintenance for W	at Dina Sprinklar Systems
G.1.0 System in service before conducting maintenance	G.4.4 Time for supply pressure to return to normal Z sec
G.2.0 Pertinent parties notified before	G.5.0 Pertinent parties notified after conclusion
conducting maintenance G.3.0 Operating stems of OS&Y (including backflow)	of maintenance
valves lubricated valves represented valves represe	G.6.0 ALARM PANEL CLEAR
G.3.1 Valve completely closed and reopened	G.7.0 SYSTEM RETURNED TO SERVICE
G.4.0 Adequate drainage provided before flow testing	G.8.0 COMMENTS:
G.4.1 Main drain test conducted	
G.4.2 Supply water gauge reading before flow (static) 82 psi	
G.4.3 Gauge reading during stable flow (residual)	

INSPECTOR'S INITIAL 3

(All "NO" answers to be explained.)
OWNER/DESIGNATED REP. INITIAL.

DATE 11/20/13

(AFSA Form 106A) Page 3 of 4

Job site: Fac Maint

Invoice Number: Date:

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7.00													,								£					Battery Size
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																						Sowel	Broken 120 Cip	8	Corl	Condition



Fac Maint

INVOICE#\_\_\_\_\_

C1#	Location	DOM	6YR	TYPE	MANUF	SERVICE
Serial#	Location V E 0 Discus	10/11	19/11	ARL	Cosmic	A
2 213220	By F.P. liser Warehouse back Exit	2/9	2/9	ABC	Amerey	TAC
3 883870		8/9	8/4	ABC	Badge/	
3 883010	Out is the	W.	YMAR .	ASSO	Ameter	
4	Part wardose	2/1	2/8	ABL	sentry	
5 665979	Park Wasehouse	2/12	2/10	MBC	BARGER	***************************************
6 N42787		8/10	8/3	Coe		
771d 165	Pack Warehouse	713	15	-0	Hrerex	Hydro
8		/				
9	2011	3				
10	2016002 - Deeds LYV					
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15						
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17						***************************************
18		43°				
19 Extra						
20 104276	Warehouse	Yu.	411	ABC	Ameror	TAG
21 817872	Warehouse	1/9	8/9	ABC	Buckeye	TAC
22 514117	Watchouse	Y/99	8/01	ABC	Amere	TAG
23 720993	Warehouse	1/8	48	ABC	Buchey	6-Yr
24 363610	Parle Warehouse	2007	NA	ASC	Amerex	TAG
25 NBOW &	Noth Whichwar 1	358	402	船之	SHOUTE	,
26 365007	for warehouse	2001	MA	ABL	Amerex	TAL
27 367114	Park Warehouse	2009	NIK	AVX	Amerey	TAC
28	F. C.	9		rive Pres		e
29	2 JW					
20		L	L			

Γ	0.11		DOM	0)/D	TVDE	MANUE	SERVICE
ŀ	Serial # LE 711 034	and floor Hallway @South	DOM 99	6YR	ABC	MANUF Duckeye	
ŀ			1 /	1/11	ABC	Pyro	TA6
1	2 PX 706855	2nd floor Hallway North	98				
	3 NY 77960U	2nd floor stailwell	97	8/2009	ABC	Amerex	TAS
-	4 810430	and floor FALP Room	1/2013	1/2013	SID	General LOZ	Hydro
	5 NY 767092	and fir all call (Ar	8/09	809	ABC	Amerex	Tag
*	6 X 427750	3rd fly Anone Room	2007	N.e e des	2016	Ansu! Cleanguly	1 Ceyr *
	, 266547	and floor	2008	VIA	516	Ansut Soutry	T.AG
	894972	1st floor Central Stein Entrum	11/1	1/11	ABL	Buckeye	TAG
	, 394944	19 fle Eles. Mech Loom	711	1/11	ABC	Budueye	
Ì	10 905086	1st fl/ bakthill Worth	1/1	1/11	ADC	Buckey	
Ī	11 266623	1st floor water heater loan	08	NA	COL	Ansul Senty	TAG
	12 443,297	1st floor cid	1/11	1/11	ABC	Ansil	TAG
Ī	13 923736	1st floor bade Entrance	40	1/6	ABC	Bickeys	A C
	14 946 989	1st floor Fine Operations	1/11	1/11	ARC	Ansul Senta	Thi
	15 422906	1st floor Fire Rept Hallway	1/11	1	ABC	ANSU	TAG
- 1	16 916 943	1st floor Buck Kikhen	1/11	ly <sub>11</sub>	ABC	Ansui	TAG
Ī	17 YM 597348	1st floor Equipment Room	C 5	8/08	ABC	America	TAG
	187691427	2nd FIX Gen Room	07	13	Priple	Sentry	Gyeor
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## Report of Inspection, Testing & Maintenance of Water Based Fire Protection Systems



	Inspecting Firm (Contractor): Space Coast Fire & Safety	Inspector: M O Ball	A	^t		
	Date of This Inspection: 11/18/13	Completed by: M ()	Inspection (	Contrac	<del>(#</del>	
	Name of Property: () 6 A) c S Police and Fill S	January. William	/	A 10000		
	Street Address: 355 hiveviale Circle	DHICK OV				
	City: No ales	State: FI	7in:			
	Phone:	Fax:	Zip:			
	Contact Person Name: Heather	ı ax.				
	Position: Contact Services Mar	Authority to Approve Work?		Y	N/A	NI.
	Property Owner:	radiony to approve work:			IVA	- 14
	Address:					
	City:	State:	Zip:	***************************************		
	Phone:	Fax:				-
	Responsible Party Name:		Position	n.	A	
	Name of Supervisory Alarm Company: 1 / A		Phone:		-#	
			1 1101101		1/	
	Date of Last Inspection: 8/20/3	Prior Inspector's Name:	M. DE	sau	1 /	
	•				/	
7				Y	N/A	N
Section	1. Prior inspection reports, logs and test data are available for review:			H		
7	Plans of systems on site for review?			M		
1000	3. Modifications made to systems reviewed and documented?					7
3	Reports of sprinkler activation reviewed and documented?					7
general miormation	5. Copy of NFPA #25 on file?			H		
-	Weekly logs of inspections required by NFPA #25 on file?			H		
=	7. Owner/Owner's Representative verifies that the occupancy and hazard are the same as reported on last inspection?	i		THI		
	All deficiencies reported at last inspection corrected?				<b>H</b>	=
3	Material Safety Data Sheets reviewed and hazards to inspector remove	ed?		1311	4#	-
=	The state of the s	<del>,</del>			l_L	
H	(Use separate sheet for additional information as may be needed. All "NO" answ	vers to be explained.)				
4	AFSA Form 104A should be completed by the Inspecting Firm/Contractor and page 1045.	rovided to the Owner.				
<b>b</b>	COMMENTS: THIS IS NOT AN ENGINEERING REVIEW					
	No Annual Repencies Noted					
	no minum organics projeg			-		-
	Note: Silenced troubles on FA	CP Upon arri	11011	1		
	The state of the s	ci pon arii	Jal of	Repare	core	1
	The owner and/or designated representative acknowledges the responsibility of	the operating condition of the or	mpopont por	to at the	tima	of
	this inspection, it is agreed that the inspection service provided by the contractor	r as prescribed berein is limited	to norforming	n vierre	1 inama	~~
	tion and/or routine testing, and any investigation or unscheduled testing, modific included as part of the inspection work performed. It is further understood that a	ation, maintenance, repair, etc.,	of the comp	onent p	arts is	not
	knowledge of the party providing such information.	A)	provided to	, ; /	. 01 1110	1.
	OWNER/DESIGNATED REPRESENTATIVE:	21	DATE:	11/1	18	113
	MATORIA	/		1/1	2/1.	
	INSPECTOR'S SIGNATURE:		DATE:	1//	8/1	5_
4	. —					



ATTENTION: The American Fire Sprinkler Association (AFSA) is a non-profit trade association. AFSA does not guarantee, certify, underwrite, or pre-approve any services provided by those who use forms produced by AFSA. Our logo is only an advertisement. Warnings, disclaimers, and update information exist on the back of the form. It is your responsibility to read these statements.

(AFSA Form 103A) Page 1 of 1

**REV. 3/03** Report of Inspection, Testing & Maintenance of Wet Pipe Fire Sprinkler Systems...continued Inspecting Firm: Space Coast Fire & Safety inspection Contract# Name of Inspected Property: and Inspector Name: Date: Inspection Frequency: ☐ Monthly Quarterly Annually Other Annual Inspection for Wet Pipe Sprinkler Systems Y NA N N E.4.7 E.1.0 System in service on inspection Glass bulbs appear full of liquid E.2.0 Hangers and seismic bracing appears E.4.8 Spare sprinklers are of proper number undamaged and tightly attached (at least 6), type and temperature rating E.4.9 E.3.0 Spare sprinklers stored where temperature Piping appears free of mechanical damage maximum is 100°F Piping appears free of leakage E.3.1 Wrench available for each type of sprinkler E.3.2 Piping appears free of corrosion L PRIOR TO FREEZING WEATHER: E.3.3 Piping appears properly aligned Building is secure such as not to expose E.3.4 Piping appears free of external loading piping to freezing conditions E.4.0 Sprinklers appear free of leakage E.5.1 Adequate heat is provided maintaining E.4.1 Sprinklers appear free of corrosion temperatures at 40°F or higher E.4.2 Sprinklers appear free of foreign materials E.6.0 ALARM PANEL CLEAR E.4.3 Sprinklers appear free of paint COMMENTS: E.7.0 E.4.4 Sprinklers appear free of physical damage Silenied trouble & E.4.5 Sprinklers appear properly oriented assival + depositiv E.4.6 Sprinkler spray patterns appear free of unacceptable obstructions **Annual Testing for Wet Pipe Sprinkler Systems** System in service before testing Forward flow test conducted at maximum rate possible (only where connections do F.1.1 Pertinent parties notified before testing not permit full flow test) F.1.2 Adequate drainage provided before flow testing F.5.3 Forward flow test conducted without F.2.0 Main drain test conducted measuring flow (device</=2" and outlet sized to flow system demand) F.2.1 Supply water gauge reading before flow (static) Backflow prevention assembly internal F.2.2 Gauge reading during stable flow (residual) psi inspection conducted (where shortages last more than 1 year and rationing enforced by AHJ Time for supply pressure to return to normal F.5.5 Forward flow test satisfied by annual fire F.3.0 Antifreeze solution tested and freezing point determined pump flow test F.5.6 Backflow preventer performance test F.3.1 Antifreeze solution freezing point conducted as required by the AHJ F.3.2 Antifreeze solution freezing point after adjustment F.6.0 PRV control valves partial flow test F.4.0 Control valves (including backflow and PIVs) conducted and adequate to unseat valve operated through full range and returned to F.7.0 Pertinent parties notified of test conclusion normal position ALARM PANEL CLEAR F.4.1 PIVs opened until spring or torsion felt in rod F.9.0 SYSTEM RETURNED TO SERVICE F.4.2 PIVs and OS&Ys backed 1/4 turn from full open F.10.0 COMMENTS: F.4.3 Main drain test conducted (see F.2.0) F.5.0 Backflow prevention assembly forward flow test conducted F.5.1 System demand flow was achieved through the device Annual Maintenance for Wet Pipe Sprinkler Systems G.1.0 System in service before conducting maintenance G.4.4 Time for supply pressure to return to normal sec Pertinent parties notified before Pertinent parties notified after conclusion conducting maintenance of maintenance G.3.0 Operating stems of OS&Y (including backflow) G.6.0 ALARM PANEL CLEAR valves lubricated G.7.0 SYSTEM RETURNED TO SERVICE G.3.1 Valve completely closed and reopened G.8.0 COMMENTS: G.4.0 Adequate drainage provided before flow testing

NSPECTOR'S INIT	TAL COMO
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Main drain test conducted

G.4.2 Supply water gauge reading before flow (static)
G.4.3 Gauge reading during stable flow (residual)

G.4.1

Spsi

Invoice Number: Date:

25	24	23	22	21	20	19	18	17	16	15	14		12 2 no Fl Trains Ebr Emergence		10 I STEL BACKNOON EX	9 259C HW Exit	8 I SHEC Weight   Exit	72 Ster Breakin Exit	62SIFI FIREHUL FXIT	575tfl cio Exit	Erit	M Exit	Stairs FXIT	12 ST FL Front dood Exit	Location
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Invoice Number: Date:

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### Fire Alarm Test and Inspection Record

Phone: (321) 783-1040

Space Coast Fire and Safety, Inc.

420 Manor drive Fax: (321) 783-1516 DATE: 11-18-13 Merritt Island, FL 32952 License # EC-13001156 EF-20000623 8 AM CUSTOMER: Nacles PD OWNER: Birriside Circle ADDRESS: CONTACT: CONTACT: APPROVING AGENCY MONITORING ENTITY CONTACT: CONTACT: TELEPHONE: TELEPHONE: MONITORING ACCOUNT REF. NO .: TYPE TRANSMISSION SERVICE ☐ McCullough ☐ Multiplex ☐ Digital ☐ Reverse Polarity ☐ Weekly ☐ Monthly ☐ Quarterly ☐ Semi-Annually Loca RF Other (Specify) Other (Specify) 1005 PANEL MANUFACTURER: MODEL NO .: CIRCUIT STYLES: LAST DAY OF SENSITIVITY TESTING: NO. OF CIRCUITS: 16 SOFTWARE REV .: 11-12 LAST DATE SYSTEM HAD ANY SERVICE PERFORMED: LAST DATE THAT ANY SOFTWARE OR CONFIGURATION WAS REVISED: PRIOR TO ANY TEST-WHO TIME NOTIFICATIONS ARE MADE: YES NO MONITORING ENTITY 0 8 An BUILDING OCCUPANTS BUILDING MANAGEMENT O. OTHER (SPECIFY) AHJ (NOTIFIED) OF ANY IMPAIRMENTS ALARM INITIATING DEVICES AND CIRCUIT INFORMATION QTY. OF CIRCUIT STYLE CIRCUIT STYLE MANUAL STATIONS HEAT DETECTORS ION DETECTORS WATERFLOW SWITCHES PHOTO DETECTORS OTHER (SPECIFY) **DUCT DETECTORS** B QTY, OF CIRCUIT STYLE ALARM INDICATING APPLIANCES AND CIRCUIT INFORMATION BELLS OTHER (SPECIFY) HORNS LST robes NO. OF ALARMS INDICATING CHIMES STROBES **SPEAKERS** ARE CIRCUITS SUPERVISED? YES ONO CIRCUIT STYLE SUPERVISORY SIGNAL INITIATING DEVICES AND CIRCUIT INFORMATION QTY, OF CO2 DET SUPERVISORY SWITCHES CO DET OTHER LOW AIR PSL HI AIR PSL GENERATOR ENGINE RUNNING FIRE PUMP OR PUMP CONTROLLER TROUBLE OTHER SIGNALING LINE CIRCUITS TYPE BATTERY Quantity and system: Quantity and style (See NFPA 72. Table 3-6:1 of signaling line circuits Dry Cell ☐ Nickel Cadmium Sealed Lead Acid SYSTEM POWER SUPPLIES ☐ Lead Acid 120VAC a. Primary (Main): Normal Voltage Other (Specify) Overcorrect Protection: Type, 3766 Kc. Emergency or standby system used as a backup to primary power supply. Location (Panel Number): instead of using a secondary power supply: Emergency system described in NFPA 70, Article 700 Legally required standby described in NFPA 70, Article 701 Disconnecting Means Location: Secondary (Standby): 10.5 Optional standby system described in NFPA 70, Article 702, which Storage Battery: Amp-Hr. Rating Calculated capacity to operate system, in hours: 24 60 Engine-driven generator dedicated to fire alarm system: also meets the performance requirements of Article 700 of 701. Location of fuel storage: Customer Signature:

							200	
to a			SYSTEM TE	STS AND INSPECTIONS				
TYPE	VISUAL	FUNCTIONAL C	OMMENTS	SECONDARY POWER				
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			Vicuci	Battery Condition	15		40,00	
Lamps/Leds	18	e _	V B G C I	Load Voltage				-
Fuses	. 2	9.00	Vivua	Discharge Test		T		
Primary Power Supply	8	<b>D</b>	Meterral 1200Ac	Charger Test		8		
Trouble Signals	and a	8	DURANTEC NAC	Specific Gravity		8		
Disconnect Switches			Flipped Breake	TRANSIENT SUPPRESSORS	0			
Ground Fault Monitorin	5-19 Telescope	-	MACHO Ground	REMOTE ANNUNCIATORS	4	-		-
Power Supply Quality				1.5.1.5.1.5.1.5.1.5.1.5.1.5.1.5				
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Off-Hook Indicator			10-113	SPECIAL HAZARD SYSTEMS		0		. 🗖
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Job Site: Comm DRY

Invoice Number: 52765000 Date: 11/19/13

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No Rush Button	Lightsareonpos		Exitlight	1 atside an book
Condition	Pass/Fail	Battery Size	Туре	Location



**REV. 3/03** Report of Inspection, Testing & Maintenance of Wet Pipe Fire Sprinkler Systems...continued Inspecting Firm: Space Coast Fire & Safety Inspection Contract# SZZ 463 Name of Inspected Property: Comm Peu. Inspector Name: D.B. Jock Date: Inspection Frequency: Quarterly Monthly Annually Other Annual Inspection for Wet Pipe Sprinkler Systems Y N/A N N/A N E.1.0 System in service on inspection E.4.7 Glass bulbs appear full of liquid E.2.0 Hangers and seismic bracing appears E.4.8 Spare sprinklers are of proper number (at least 6), type and temperature rating undamaged and tightly attached E.3.0 E.4.9 Piping appears free of mechanical damage Spare sprinklers stored where temperature E.3.1 Piping appears free of leakage maximum is 100°F E.4.10 Wrench available for each type of sprinkler E.3.2 Piping appears free of corrosion PRIOR TO FREEZING WEATHER: E.3.3 Piping appears properly aligned E.5.0 E.3.4 Building is secure such as not to expose Piping appears free of external loading piping to freezing conditions E.4.0 Sprinklers appear free of leakage E.5.1 Adequate heat is provided maintaining E.4.1 Sprinklers appear free of corrosion temperatures at 40°F or higher E.4.2 Sprinklers appear free of foreign materials E.6.0 ALARM PANEL CLEAR E.4.3 Sprinklers appear free of paint E.7.0 COMMENTS: E.4.4 Sprinklers appear free of physical damage E.4.5 Sprinklers appear properly oriented E.4.6 Sprinkler spray patterns appear free of unacceptable obstructions **Annual Testing for Wet Pipe Sprinkler Systems** System in service before testing Forward flow test conducted at maximum F.1.1 Pertinent parties notified before testing rate possible (only where connections do not permit full flow test) F.1.2 Adequate drainage provided before flow testing Forward flow test conducted without F.2.0 Main drain test conducted measuring flow (device</=2" and outlet F.2.1 80 sized to flow system demand) Supply water gauge reading before flow (static) Backflow prevention assembly internal F.2.2 Gauge reading during stable flow (residual) psi inspection conducted (where shortages last F.2.3 Time for supply pressure to return to normal more than 1 year and rationing enforced by AHJ sec Antifreeze solution tested and freezing F.3.0 F.5.5 Forward flow test satisfied by annual fire point determined pump flow test F.5.6 Backflow preventer performance test F.3.1 Antifreeze solution freezing point conducted as required by the AHJ F.3.2 Antifreeze solution freezing point after adjustment F.6.0 PRV control valves partial flow test Control valves (including backflow and PIVs) F.4.0 conducted and adequate to unseat valve operated through full range and returned to F.7.0 Pertinent parties notified of test conclusion normal position F.8.0 ALARM PANEL CLEAR F.4.1 PIVs opened until spring or torsion felt in rod F.9.0 SYSTEM RETURNED TO SERVICE PIVs and OS&Ys backed 1/4 turn from full open F.4.2 F.10.0 COMMENTS: F.4.3 Main drain test conducted (see F.2.0) F.5.0 Backflow prevention assembly forward flow test conducted F.5.1 System demand flow was achieved through the device Annual Maintenance for Wet Pipe Sprinkler Systems G.1.0 System in service before conducting maintenance G.4.4 Time for supply pressure to return to normal G 20 Pertinent parties notified before G.5.0 Pertinent parties notified after conclusion conducting maintenance of maintenance G.3.0 Operating stems of OS&Y (including backflow) G.6.0 ALARM PANEL CLEAR valves lubricated G.7.0 SYSTEM RETURNED TO SERVICE G.3.1 Valve completely closed and reopened G.8.0 COMMENTS: G.4.0 Adequate drainage provided before flow testing G.4.1 Main drain test conducted G.4.2 Supply water gauge reading before flow (static) DS G.4.3 Gauge reading during stable flow (residual) psi

INSPECTOR'S INITIAL	720
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(All "NO" answers to be explained.)
OWNER/DESIGNATED REP. INITIAL

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DATE_	U	19	13

## Report of Inspection, Testing & Maintenance of Water Based Fire Protection Systems

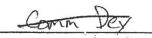


	70 11 1	(
Inspecting Firm (Contractor); Space Coast Fire & Safety	Inspector: D. Bullock Ins	pection Contract# 522
Date of This Inspection: 1 1913	Completed by: D.B. Nock	
Name of Property: Comm Dev		
Street Address: Riverside C'8		
city: Naples	State:FL Zip	
Phone:	Fax:	
Contact Person Name: Heather Shield)		
Position: Pazks + Rec	Authority to Approve Work?	(Y) N/A N
Property Owner: City of Noples		
Address:		
City:	State:	Zip:
Phone:	Fax:	<u> </u>
Responsible Party Name:		Position:
Name of Supervisory Alarm Company:		Phone:
	-	ritorie.
Date of Last Inspection:	Prior Inspector's Name:	
	Thormspectors warne.	· · · · · · · · · · · · · · · · · · ·
		[
Prior inspection reports, logs and test data are available for review		Y N/A N
	w.	
O Madisania		
Reports of sprinkler activation reviewed and documented?		
5. Copy of NFPA #25 on file?		
6. Weekly logs of inspections required by NFPA #25 on file?		
Weekly logs of inspections required by NFPA #25 on file?     Owner/Owner's Representative verifies that the occupancy and h	ozord	
are the same as reported on last inspection?	azaiu	
All deficiencies reported at last inspection corrected?		
9. Material Safety Data Sheets reviewed and hazards to inspector re	emoved?	
3. Introdifications made to systems reviewed and documented?  4. Reports of sprinkler activation reviewed and documented?  5. Copy of NFPA #25 on file?  6. Weekly logs of inspections required by NFPA #25 on file?  7. Owner/Owner's Representative verifies that the occupancy and hare the same as reported on last inspection?  8. All deficiencies reported at last inspection corrected?  9. Material Safety Data Sheets reviewed and hazards to inspector refused to the second of th	answers to be explained.) and provided to the Owner.	
COMMENTS: THIS IS NOT AN ENGINEERING REVIEW		
	*	
The owner and/or designated representative acknowledges the responsibilithis inspection. It is agreed that the inspection service provided by the contion and/or routine testing, and any investigation or unscheduled testing, included as part of the inspection work performed. It is further understood to knowledge of the party providing such information.	tractor as prescribed herein is limited to prodification, maintenance, repair, etc. of	erforming a visual inspec-
OWNER/DESIGNATED REPRESENTATIVE:		DATE: 1 1
72010	*	1/19/12
INSPECTOR'S SIGNATURE: ///		DATE: 1// 1/15
		1 1



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(AFSA Form 103A) Page 1 of 1



INVOICE# 522643

	T	1	T		T	T
Serial #	Location	DOM	6YR	TYPE	MANUF	SERVICE
1939359	Generalor Room	2/2013	2/2013	ABK	Chem	TAG
2 47 939417	South 1st flr Hallway	12013	2/2013	ABC	Chem Pyro Chem	TAS
3 43571	1st Fly Mech Com	2013	2/2013	ABC	Chen	TAG
4 939368	North 12 fly Hallway back	2013	2013	ALC	Chem	TAG
5 939 375	North 13th Hillway	2013	2/2012	ABC	Chem	TAG
5 934376	North another Hallway	2/2013		AQC	chem	TAK
7 574488	South 2nd fir Hallway	2010	NIA	ABC	Ansil Sentry	TAS
: 5 28457	Comp Rm	10		Coz	Amx	Tag
· 528 458	Comp Rm	10		Co2	Amo	_
10 355 728	Server	01		Co 2	Amx	Tag
11 784 876	Servee	10	_	Hab	Badgee	725
12 748013	Maint	11	_	ABC		Tan
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Invoice Number: 522 643
Date: 11//4//3

Condition Gracos Good G000 6000 6000 GOOD GOOD Pass/Fall Pass 7985 Pass Pass Pa 35 **Battery Size** Trit The Trit Type Exit Exi; Contract Office Ext Frat Deer 6 PK FPK-MS OR Contract NE Exit Recopps Location 19 20 15 16 18 10

Job Site: Comm. Dev.

### Wester Water Collections (Bldg 900)

Company: Util Maint.

Inv. 522697 522 468

	F					. 11119	524 106
Cnt		Location	DOM	6yr	Туре	ianufacture	Service
	Re 1117090	Front Door	19/1	10/11	All	1.	1-11
3	XR 799314		11/11	1/1	ABL	Budge	TAG Reccharge 101bs Tag 516 Recharge
	991088	WHSB	07	13	ABC.	Barreis	Resolution 10/hs
- 4	633690	WHSE	13	12	AAC	America	Tec
5	737 128	WASE	1//3	1/13	ARC	Amore	516 Re(1 22 - 2
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Report of Inspection, Testing & Maintenance of Wet Pipe Fire Sprinkler Systems...continued Inspecting Firm: Space Coast Fire & Safety Inspection Contract# Bldg 100 Mulita Name of Inspected Property: Waste M. O'Ban Inspector Name: Inspection Frequency: Monthly Quarterly ☐ Annually Other Annual Inspection for Wet Pipe Sprinkler Systems Y NA N E.4.7 Glass bulbs appear full of liquid E.1.0 System in service on inspection E.4.8 Spare sprinklers are of proper number E.2.0 Hangers and seismic bracing appears (at least 6), type and temperature rating undamaged and tightly attached E.4.9 Spare sprinklers stored where temperature E.3.0 Piping appears free of mechanical damage maximum is 100°F E.3.1 Piping appears free of leakage E.4.10 Wrench available for each type of sprinkler E.3.2 Piping appears free of corrosion PRIOR TO FREEZING WEATHER: E.3.3 Piping appears properly aligned E.5.0 Building is secure such as not to expose Piping appears free of external loading E.3.4 piping to freezing conditions Sprinklers appear free of leakage E.4.0 E.5.1 Adequate heat is provided maintaining E.4.1 Sprinklers appear free of corrosion temperatures at 40°F or higher E.4.2 Sprinklers appear free of foreign materials E.6.0 ALARM PANEL CLEAR E.4.3 Sprinklers appear free of paint COMMENTS: E.7.0 Sprinklers appear free of physical damage O.dleni E.4.4 E.4.5 Sprinklers appear properly oriented E.4.6 Sprinkler spray patterns appear free of unacceptable obstructions Annual Testing for Wet Pipe Sprinkler Systems System in service before testing Forward flow test conducted at maximum F.1.0 rate possible (only where connections do F.1.1 Pertinent parties notified before testing not permit full flow test) Adequate drainage provided before flow testing F.1.2 F.5.3 Forward flow test conducted without F.2.0 Main drain test conducted measuring flow (device</=2" and outlet sized to flow system demand) 90 F.2.1 Supply water gauge reading before flow (static) psi Backflow prevention assembly internal Gauge reading during stable flow (residual) F.2.2 psi inspection conducted (where shortages last 1 more than 1 year and rationing enforced by AHJ F.2.3 Time for supply pressure to return to normal F.5.5 Forward flow test satisfied by annual fire F.3.0 Antifreeze solution tested and freezing pump flow test point determined F.5.6 Backflow preventer performance test Antifreeze solution freezing point °F F.3.1 conducted as required by the AHJ F.3.2 Antifreeze solution freezing point after adjustment PRV control valves partial flow test F.6.0 Control valves (including backflow and PIVs) F.4.0 conducted and adequate to unseat valve operated through full range and returned to F.7.0 Pertinent parties notified of test conclusion normal position F.8.0 ALARM PANEL CLEAR PIVs opened until spring or torsion felt in rod F.4.1 SYSTEM RETURNED TO SERVICE F.9.0 PIVs and OS&Ys backed 1/4 turn from full open F.4.2 F.10.0 COMMENTS: F.4.3 Main drain test conducted (see F.2.0) F.5.0 Backflow prevention assembly forward flow test conducted F.5.1 System demand flow was achieved through the device **Annual Maintenance for Wet Pipe Sprinkler Systems** G.1.0 System in service before conducting maintenance G.4.4 Time for supply pressure to return to normal sec G.2.0 Pertinent parties notified before Pertinent parties notified after conclusion conducting maintenance of maintenance G.3.0 Operating stems of OS&Y (including backflow) ALARM PANEL CLEAR valves lubricated G.7.0 SYSTEM RETURNED TO SERVICE Valve completely closed and reopened G.3.1 G.8.0 COMMENTS: Adequate drainage provided before flow testing G.4.0 G.4.1 Main drain test conducted 96 G.4.2 Supply water gauge reading before flow (static) psi G.4.3 Gauge reading during stable flow (residual) 70 psi

INSPECTOR'S	INITTIAL	CLALLO
INSPECTORS	INITIAL	DVVVV

### Report of Inspection, Testing & Maintenance of Water Based Fire Protection Systems



Inspector: M. OLL	Inspection Contract#									
Completed by: MOBA	el									
900) Util Mais	4									
State:	Zip:									
Fax:										
Authority to Approve Work?	Y N/A N									
State:	Zip:									
Fax:										
	Position;									
	Phone: OCALA									
	in x									
Prior Inspector's Name:	M.001									
	Y NA N									
Prior inspection reports, logs and test data are available for review:										
Plans of systems on site for review?     Modifications made to systems reviewed and documented?										
5. Copy of NFPA #25 on file? 6. Weekly logs of inspections required by NFPA #25 on file?										
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or as prescribed herein is limited	d to performing a visual inspec-									
fication, maintenance, repair, etc	c., of the component parts is not									
all miormation contained herein	is provided to the pest of the									
	DATE:									
	ulialia									
	DATE: 1/18/15									
	Completed by: M OBJ 900) U+1 Mail State: Fax:  Authority to Approve Work?  State:									



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Report of Inspection, Testing & Maintenance of Wet Pipe Fire Sprinkler Systems...continued

Inspe	cting Firm: Space								Inspec	ction Contract#				
Name	of Inspected Pro	perty: Cost	1 West	}										
Inspe	ctor Name:	W.D	Sam			/			Date:	11/18/13				-
Inspe	ction Frequency:	☐ Monthly	7	26	uarte	rlv			Annually	Other				
		Æ	innual Inspe	ectio	on f	or I	Wet Pipe	e S	prinkler Syste	ms				
				Y	NA	N	1		× × × × × × × × × × × × × × × × × × ×			Y	N/A	N
E.1.0	System in serv	rice on inspecti	on	17			E.4.7	7	Glass bulbs appear	full of liquid		17	1	
E.2.0	Hangers and sundamaged ar	eismic bracing	appears		0		E.4.8		Spare sprinklers are				F	FI
E.3.0				17	1	$\vdash$	E.4.9		(at least 6), type and Spare sprinklers sto					
E.3.1	Piping appears			TI	右	Ħ		1	maximum is 100°F					
E.3.2	Piping appears	free of corrosi	ion	1	D		E.4.1		Wrench available fo		nkler	Ш	4	
E.3.3	Piping appears	properly align	ed	17	10			*******	PRIOR TO FREEZI	V4				
E.3.4	Piping appears						E.5.0		Building is secure so plping to freezing co		se	1 d		
E.4.0	Sprinklers appe			1	口		E.5.1	-	Adequate heat is pro		]		1	F
E.4.1	Sprinklers appe			11	1	닏			temperatures at 40°				旦	
E.4.2 E.4.3	Sprinklers appe		The state of the s	114	K	Н	E.6.0		ALARM PANEL CL	EAR				Ш
E.4.4	Sprinklers appe			#4	H	H	E.7.0	) (	COMMENTS:					
E.4.5	Sprinklers appe			17	H	H								
E.4.6	Sprinkler spray		~			ᆜ								
	unacceptable o	bstructions	ar 1100 01			Ш								
Annual Testing for Wet Pipe Sprinkler Systems														
				ring	_	991		17	7. Access		0	***************************************		
F.1.0	System in service		~	14	1	Ш	F.5.2		orward flow test con				-	
F.1.1	Pertinent parties							no	ate possible (only what permit full flow tes	nere connections o	10	L	Ш	
F.1.2	Adequate draina		ore flow testing	4			F.5.3	Fo	orward flow test con	ducted without			_	
F.2.0	Main drain test of			لِثال	ř				easuring flow (device			10		
F.2.1	Supply water ga				10	psi	F.5.4		zed to flow system of ackflow prevention a					2
F.2.2	Gauge reading of			L	40	psi	, 1011	in	spection conducted	(where shortages	last	П	7	
F.2.3	Time for supply			1	1	sec	₹.5.5	m	ore than 1 year and r	rationing enforced b	y AHJ)	$\dashv$		
F.3.0	Antifreeze solution point determined	<u> </u>						ρι	orward flow test sati		3		2	见
F.3.1	Antifreeze solution	on freezing poi	nt		_	°F	F.5.6	CO	ackflow preventer pe anducted as required	erformance test			Y	
F.3.2	Antifreeze solution			ent		°F	F.6.0	PF	RV control valves pa	artial flow test				
F.4.0	Control valves (in operated through				4			CO	nducted and adequ	ate to unseat valv	е	믜	7	Ш
	normal position	i iuli range and	returned to	4	$\sqcup$	4	F.7.0	Pe	ertinent parties notifi	ed of test conclus	ion		<u>.</u>	
F.4.1	PIVs opened unt	il spring or tors	sion felt in rod		P		F.8.0		LARM PANEL CLE					
F.4.2	PIVs and OS&Ys			П	H	门	F.9.0		STEM RETURNED	TO SERVICE		4		
F.4.3	Main drain test c	onducted (see	F.2.0)		7	П	F.10.0	CC	OMMENTS:					
F.5.0	Backflow prevention flow test conduct		forward			口				***************************************				-
F.5.1	System demand through the device	flow was achie	eved	d										
			ual Mainto	anc	0 6	ne li	Vat Dina	9 6	prinkler Syste	200				$\dashv$
G.1.0	System in service				7				5			İ		
G.2.0	Pertinent parties			9	1	Щ	G.4.4 G.5.0		me for supply pressu artinent parties notific			$\pm \tau$	1	sec
	conducting maint	tenance		M			0.0.0		maintenance	ed alter correlation	'	4		
G.3.0	Operating stems valves lubricated	of OS&Y (inclu	uding backflow)	H	2		Star Harrison Comment		ARM PANEL CLEA	······································			7	口
G.3.1	Valve completely	closed and rec	opened	M	1		G.7.0	-	STEM RETURNED	TO SERVICE				الك
G.4.0	Adequate drainag				7	П	G.8.0	U	DMMENTS:					
G.4.1	Main drain test co	onducted		M			turn.							
G.4.2	Supply water gau	ige reading bef	fore flow (static)	1	()	psi		•						
	Gauge reading di			1	107	psi				····				
					1/					1 /				

INSPECTOR'S INITIAL (MW)

(All "NO" answers to be explained.)
OWNER/DESIGNATED REP. INITIAL

DATE 11/8/17

### **REV. 3/03**

## Report of Inspection, Testing & Maintenance of Water Based Fire Protection Systems



Inspecting Firm (Contractor): Space Coast Fire & Safety	Inspector: M.O.B.K	Aspection Contract# 5726
Date of This Inspection: 1118113	Completed by: VIA DE	V
Name of Property: CAR WASIT	77-7	1
Street Address:		
City: Na 1105	State:	Zip:
Phone:	Fax:	<b>E</b> 101
Contact Person Name:	*	
Position:	Authority to Approve Work	? Y N/A N
Property Owner:	reality to applicate thank	· IT NA N
Address:		
City:	State:	Zip;
Phone:	Fax:	
Responsible Party Name:		Position:
Name of Supervisory Alarm Company:	- Table 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997	Phone:
Name of September 1		Thore.
Date of Last Inspection: 7/2013	Prior Inspector's Name:	IM DES
	Thormspectors Harre.	W. C. Carry
		Y N/A N
Prior inspection reports, logs and test data are available for review:		
Prior inspection reports, logs and test data are available for review:     Plans of systems on site for review?		
A A CONTRACTOR OF THE CONTRACT		
Reports of sprinkler activation reviewed and documented?		
Copy of NFPA #25 on file?		
Weekly logs of inspections required by NFPA #25 on file?		
7. Owner/Owner's Representative verifies that the occupancy and haz	rard	
are the same as reported on last inspection?		العرابات
All deficiencies reported at last inspection corrected?		
<ol> <li>Material Safety Data Sheets reviewed and hazards to inspector rem</li> </ol>	noved?	
<ol> <li>Modifications made to systems reviewed and documented?</li> <li>Reports of sprinkler activation reviewed and documented?</li> <li>Copy of NFPA #25 on file?</li> <li>Weekly logs of inspections required by NFPA #25 on file?</li> <li>Owner/Owner's Representative verifies that the occupancy and haz are the same as reported on last inspection?</li> <li>All deficiencies reported at last inspection corrected?</li> <li>Material Safety Data Sheets reviewed and hazards to inspector rem</li> <li>(Use separate sheet for additional information as may be needed. All "NO" at AFSA Form 104A should be completed by the Inspecting Firm/Contractor and COMMENTS: THIS IS NOT AN ENGINEERING REVIEW</li> </ol>		,
COMMENTS: THIS IS NOT AN ENGINEERING REVIEW		-
	2 0	
The owner and/or designated representative acknowledges the responsibility this inspection. It is agreed that the inspection service provided by the contration and/or routine testing, and any investigation or unscheduled testing, moincluded as part of the inspection work performed. It is further understood that knowledge of the party providing such information.	ctor as prescribed herein is limite dification, maintenance, repair, et	ed to performing a visual inspec- tc., of the component parts is not
OWNER/DESIGNATED REPRESENTATIVE:		DATE:
INSPECTOR'S SIGNATURE:		DATE:



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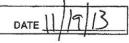
(AFSA Form 103A) Page 1 of 1

Report of Inspection, Testing & Maintenance of Wet Pipe Fire Sprinkler Systems...continued 467 Inspecting Firm: Space Coast Fire & Safety Inspection Contract# Center Name of Inspected Property: Chinis Date: 11 Inspector Name: Quarterly Inspection Frequency: ☐ Monthly Annually Other Annual Inspection for Wet Pipe Sprinkler Systems N Y NA N N/A E.4.7 Glass bulbs appear full of liquid E.1.0 System in service on inspection Hangers and seismic bracing appears E.4.8 Spare sprinklers are of proper number E.2.0 (at least 6), type and temperature rating undamaged and tightly attached E.4.9 Spare sprinklers stored where temperature E.3.0 Piping appears free of mechanical damage maximum is 100°F E.3.1 Piping appears free of leakage E.4.10 Wrench available for each type of sprinkler E.3.2 Piping appears free of corrosion PRIOR TO FREEZING WEATHER: Piping appears properly aligned E.3.3 E.5.0 Building is secure such as not to expose E.3.4 Piping appears free of external loading piping to freezing conditions E.4.0 Sprinklers appear free of leakage E.5.1 Adequate heat is provided maintaining Sprinklers appear free of corrosion E.4.1 temperatures at 40°F or higher E.4.2 Sprinklers appear free of foreign materials E.6.0 ALARM PANEL CLEAR E.4.3 Sprinklers appear free of paint E.7.0 COMMENTS: E.4.4 Sprinklers appear free of physical damage E.4.5 Sprinklers appear properly oriented E.4.6 Sprinkler spray patterns appear free of unacceptable obstructions Annual Testing for Wet Pipe Sprinkler Systems System in service before testing Forward flow test conducted at maximum rate possible (only where connections do F.1.1 Pertinent parties notified before testing not permit full flow test) F.1.2 Adequate drainage provided before flow testing Forward flow test conducted without F.2.0 Main drain test conducted measuring flow (device</=2" and outlet sized to flow system demand) 70 F.2.1 Supply water gauge reading before flow (static) ps Backflow prevention assembly internal F.2.2 Gauge reading during stable flow (residual) psi inspection conducted (where shortages last more than 1 year and rationing enforced by AH. F.2.3 Time for supply pressure to return to normal sec F.3.0 Antifreeze solution tested and freezing F.5.5 Forward flow test satisfied by annual fire pump flow test point determined F.5.6 Backflow preventer performance test F.3.1 Antifreeze solution freezing point °F conducted as required by the AHJ F.3.2 Antifreeze solution freezing point after adjustment F.6.0 PRV control valves partial flow test F.4.0 Control valves (including backflow and PIVs) conducted and adequate to unseat valve operated through full range and returned to F.7.0 Pertinent parties notified of test conclusion normal position F.8.0 ALARM PANEL CLEAR PIVs opened until spring or torsion felt in rod F.9.0 SYSTEM RETURNED TO SERVICE F.4.2 PIVs and OS&Ys backed 1/4 turn from full open F.10.0 COMMENTS: F.4.3 Main drain test conducted (see F.2.0) F.5.0 Backflow prevention assembly forward flow test conducted F.5.1 System demand flow was achieved through the device Annual Maintenance for Wet Pipe Sprinkler Systems G.1.0 System in service before conducting maintenance G.4.4 Time for supply pressure to return to normal sec Pertinent parties notified before G.2.0 Pertinent parties notified after conclusion conducting maintenance of maintenance Operating stems of OS&Y (including backflow) G.3.0 G.6.0 ALARM PANEL CLEAR valves lubricated G.7.0 SYSTEM RETURNED TO SERVICE G.3.1 Valve completely closed and reopened G.8.0 COMMENTS: G.4.0 Adequate drainage provided before flow testing G.4.1 Main drain test conducted Supply water gauge reading before flow (static) G.4.2 psi G.4.3 Gauge reading during stable flow (residual) psi

INSPECTOR'S INITIAL S

**REV. 3/03** 

(All "NO" answers to be explained.)
OWNER/DESIGNATED REP. INITIAL



### **REV. 3/03**

# Report of Inspection, Testing & Maintenance of Water Based Fire Protection Systems



Date of This Inspection:  Name of Property: Tennis PRO SHOP  Street Address: CAMBIEP Para K	Inspector: Y, D. L. O. L. Inspector: Y, D. L	ction Contract# 5 224
Street Address: CAMBIE? Par2K		
Street Address: CAMBIES Pav2K		
A		
city: Naples	State: FL Zip:	•
Phone: (239) 2137120	Fax:	
Contact Person Name: 14, 5/11 8/05		
Position:	Authority to Approve Work?	Y NA N
Property Owner:		
Address:		
City:	State: 7	ip:
Phone:	Fax:	·p.
Responsible Party Name:	P	osition;
Name of Supervisory Alarm Company:		hone:
		1010,
Date of Last Inspection:	Prior Inspector's Name:	
		***************************************
		Y N/A N
1. Prior inspection reports, logs and test data are available for review	r	
Plans of systems on site for review?		
Modifications made to systems reviewed and documented?		
Reports of sprinkler activation reviewed and documented?		
5. Copy of NFPA #25 on file?		
Weekly logs of inspections required by NFPA #25 on file?		
7. Owner/Owner's Representative verifies that the occupancy and ha	zard	
are the same as reported on last inspection?		
All deficiencies reported at last inspection corrected?	-	
9. Material Safety Data Sheets reviewed and hazards to inspector rer	moved?	
(Use separate sheet for additional information as may be needed. All "NO" a AFSA Form 104A should be completed by the Inspecting Firm/Contractor and COMMENTS: THIS IS NOT AN ENGINEERING REVIEW	answers to be explained.) and provided to the Owner.	
		·
The owner and/or designated representative acknowledges the responsibility this inspection. It is agreed that the inspection service provided by the contration and/or routine testing, and any investigation or unscheduled testing, maincluded as part of the inspection work performed. It is further understood the knowledge of the party providing such information.	actor as prescribed herein is limited to perform	orming a visual inspec-
OWNER/DESIGNATED REPRESENTATIVE	DA	ATE: I
INSPECTOR'S SIGNATURE: D. S. L. C.		TE: 11/19/13



ATTENTION: The American Fire Sprinkler Association (AFSA) is a non-profit trade association. AFSA does not guarantee, certify, underwrite, or pre-approve any services provided by those who use forms produced by AFSA. Our logo is only an advertisement. Warnings, disclaimers, and update information exist on the back of the form. It is your responsibility to read these statements.

(AFSA Form 103A) Page 1 of 1

Describe special procedures:		
	V)	
System tested 100%		
System partially tested (specify):	2	
Completion notification after testing:		*** ****
Time: a.m. By:		*
Monitoring entity		
Building occupants:		
Building management		
Others (specify)		
# Madestatespasses	2	
The following did not operate properly: Bell Power Supply Batteries changed be	fore testing.	
		ia.
System was restored to normal operation and taken off test status at:		
Times: a.m. By:		
Times. a.m. by.		
This testing was performed in accordance with applicable NEDA stands	wda	
This testing was performed in accordance with applicable NFPA standar	rus.	
Inspected by:		
Signature:		
Signature.		- 1
Signature.		
Signature.		<b>_</b>
Owner of representative:		
Owner of representative:		
Owner of representative:		
Owner of representative: Signature:		
Owner of representative:		

Systems Tests and Inspections:		
Systems 1000 and anspections.		
	Visual	Functional
Control Panel		
Interface / shutdown equipment		
Indicator lamps / LEDs		
Fuses		
Primary Power		
Trouble signals		
Disconnect means		
Ground fault monitor		
Batteries		_
		27, Load voltage:
		27.6 Discharge test
		26.9 Charger test
0		Specific gravity
Surge suppression Remote annunciators		1
		~
Notification Appliance		Audible
-	*	Visual
		Volume
* #		Message clarity
(Emorgonari annuminations and)	V	
(Emergency communications equip) Phone set	Not applicable	
Phone jacks	and the same of th	V*************************************
Off-hook indication	AND THE PROPERTY OF THE PROPER	-
Amplifiers		and the state of t
Tone generators	Print & Print and a septiment	-
Call-in signal	-	Marie Control of the
	Commission of the Commission o	
Monitoring (on or off premises)	Not applicable	
Alarm signal		
Alarm restoral		
Trouble signal		
Trouble restoral		
Supervisory alarm		***********
Supervisory restoral		
System Performance	Non Functional	Functional
Comments:		

## Initiating Device and Circuit Information:

	Initiating Device Circuits (See Total number of Initiating Devic Circuit Styles:			
	Signal Line Circuits (See NFP). Total number of Signal Line Circuit Styles:		circuits Style 4 (Class B) circuits	
	Quantity Cir	rcuit Style	Devices	
	5	3	Manual Stations	
			Ionization smoke detectors	
	*2	B	Photo electric smoke detectors	
			Duct smoke detectors, ionization	
			Duct smoke detectors, photoelectric	
			Heat detectors, temp, R/R	
	1	B	Waterflow switches: pres vane	
			Other, specify:	
	<b>X</b> 0	*	Supervisory tamper switches	
		vi	Generator condition:	
			Fire pump condition:	
			Other, specify	
	Alarm Notification Appliance	and Circuit Information	*	
	Total number of Notification Ap Circuit Styles:			
	Quantity Cir	rcuit Style	Notification Appliances	
	* 6 ž	¥	Bells	
	3	Y	Horns	
	V		Chimes	
	3		Strobes	
*			Speakers	
	<del>.</del> .		Apartment Sounders	
			Other, specify:	
-				-

## Fire Alarm Test and Inspection Record

Space Coast Fire and Safety, Inc. 420 Manor Drive Merritt Island, FL 32952

Property: C:+y of Naples - Allan Tenn Address: 735 8th St	Date: \
Naples Contact: Heather Phone:	Monitor Phone: Accoun
Owner/Mgr:	On test
Phone:	Jurisdic
Contact: Phone:	Phone:
Inspection Conducted by:  R. Chambers  Testing notification prior to testing:  Time:  Monitoring Entity  Building Occupants  Building Management  Others (Specify)	
System Description:	Primary
Transmission Type: Voice	Rated C
Communication Model:	Over Cu
Panel Mfgr. Padionics	Capacity

Model number: D 94126

Date of last service: 8/19/09

Date / scope of last software change:

Software:

Phone: (321) 783-1040

Fax: (321) 783-1516

License # EC-13001156

EF-20000623

II/A// 3 Time: am

ored by: A// A-9486

ant Number: 4434-61

st until: am

iction: City of Naples

c: tion Interval: Annual

Primary Power Voltage: 120 ∨ Rated Current: 20

Over Current Protection: Breaker

Capacity: 20
Panel: LP
Breaker Number: ZU

Secondary (standby) power supply 24 Hour stby/5 min. alarm

Batteries: 12 V-7+H (X Y)
Type & location:
Tanel

Job Site: Tenni S

Condition 600 6001 (000 Invoice Number; 5 42 467 Pass/Fail Lights air or Lights are on Pass Date: 11/19/13 8425 648 Battery Size Emorgany Light Franci Tight 下が十八人 はいいれば EMENA Line 9 1st Walley BOOM 1年代 Entravie 18th Badent Women's RR Location Prill door Iron door Floor dool Mens

13 14 13

18

16

Tennis

INVOICE# 522467

						0771/105
Serial#	Location	DOM	6YR	TYPE	MANUF	SERVICE
1 372 021	Pro Shop Back Door	1/11	7/11	ABC	Amerex	TAG
2 672574	Pro Shop Back Door	11/11	1/1	ABC	Amerex	TAG
3 995923	FACI lopus	1/11	1/12	(02	Amedy	TAG
4274919	FA(I Room Pro Shop Back Hallway 1st floor Elev Mach Room	2010	MA	ABC	Buckeye	TA6
5 234 887	1st Plane Flow Mach Pos	2008	MA	ABC	Amerex	TAC
6 2000	19	2000	"APP	ARR.	Bolleys	<del>- 146</del>
	1st floor	1/2013	11/2013		Simplex	6-4r Matrice
7 924728	1-+1001	2013			6.1770	
8		-				
9				-		
10		-				
11					<del> </del>	
12				1		
13			-			
14					1	
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19			ŀ	-		
20						
21						
22			-			
23						
24						
25						
26						
27						
28						
29						

COMPANY

8th Ave INVOICE# 52247) DOM TYPE . MANUF SERVICE 6YR Serial # Location Sextinal Fly FACP loom 110 1094731 MA ABL 1st Ar S Elev Room Buckey ORG 1910 ABC 10/10 833 696 for SE Amerey 1/13 1/13 ABC Cabinet 10/0 1910 1st fV NE Cabinet Amerer ABL 5 833650 11/11 ABC Ameres 370108 Cabinet 2nd for sel Cabind 10/10 1000 America ARC 7 833647 10/10 10/10 8 837674 2nd Fly MUZ Galainet ABL America TAL 2nd Fly & Cabinet 2/9 2/9 TAG ABC Amerez 9 118 908 10/10 and Fly SE Cabinet ABL Avrelex T46 10 833676 Ansol Sevary ABC 2nd FIr NE Cabinet TAG 11 771431 314 Fir N Cabint 10/10 Amerex 12 833645 ABC TAC 31d Flv NE Cabinet Amerex 13 833456 3rd FIV SE Cabinet W/A 14 937 279 2011 ABC Amerox TAL 319 FIV S cabinet 2004 15 237282 ABC Amerex TAL 3rd Flv SW Cabinet 3/08 3/08 ABL America 16 025 855 TAC 3rd Flr NW Gebirut ABC 17 (08 107 Amerex 2008 4th FI/ N Elev Cabinet ABC Bickey TAL 18 274 934 2010 4th FIT S Elev Cabinet 10/10 TAL ABC America 19 833436 1ST FL W CARS 1%0 10/10 Budy Re ABC 20 326086 lac 14FL Park 21 328348 10 16 1004 04 ABC Buck 22281143 10 Eley Rm SELA 10 23 24 25 27 28

Job Site: Park Carrage 8th St

Invoice Number: 527 477
Date: 1/21/13

	25	24	23	22	21	20	19	18	17	16	15	14	13	12	11	10	9	00	7	0	5	4	ω	2	Ы	П
									÷			MATERIA MATERI						Colt S/Hz	でたってい	319 FINS EID,	12		ON AV SEIN	MAD S NOTE!	HUNE	Location
																	<b>X</b>	+7511-1/2	+xx1 +x3=	HV 11 +123	Ex.+1:964	<i>V</i>	をごより	FX+128+	ナンドナ	Туре
The second second																					£					Battery Size
																		وديه	26.55	14 St	Pass		50	Pacs to ask 8x	8455	Pass/Fail
																	0000	Cool	5000	0000	(25)	1 Sopration	Links on 100 com	3	(10-29)	Condition
																						600	1	5		

# Report of Inspection, Testing & Maintenance of Water Based Fire Protection Systems



Inspecting Firm (Contractor): Space Coast Fire & Safety	Inspector: Di Bullock Insp	pection Contract#522 4
Date of This Inspection: 11/2/13	Completed by:	
Name of Property: 8th 15+ Parking Gazage		
Street Address: 400 8th 5th		
city: Naples	State: FL Zip:	
Phone:	Fax:	processing and the second seco
Contact Person Name:		
Position:	Authority to Approve Work?	Y N/A N
Property Owner: City of Nables		
Address:		
City:	State:	Zip:
Phone:	Fax:	- Comment of the Comm
Responsible Party Name:		Position:
Name of Supervisory Alarm Company: All American		Phone:
Date of Last Inspection:	Prior Inspector's Name: M,	Obargh
Prior inspection reports, logs and test data are available for review;	, , , , , , , , , , , , , , , , , , ,	Y N/A N
Plans of systems on site for review?		
Modifications made to systems reviewed and documented?		
Reports of sprinkler activation reviewed and documented?		
Copy of NFPA #25 on file?		
Weekly logs of inspections required by NFPA #25 on file?		
Owner/Owner's Representative verifies that the occupancy and hazing the same as reported on last inspection?	ard	
All deficiencies reported at last inspection corrected?		
9. Material Safety Data Sheets reviewed and hazards to inspector rem	oved?	
(Use separate sheet for additional information as may be needed. All "NO" an AFSA Form 104A should be completed by the Inspecting Firm/Contractor and COMMENTS: THIS IS NOT AN ENGINEERING REVIEW	nswers to be explained.) d provided to the Owner.	
The owner and/or designated representative acknowledges the responsibility this inspection. It is agreed that the inspection service provided by the contraction and/or routine testing, and any investigation or unscheduled testing, morincluded as part of the inspection work performed. It is further understood that knowledge of the party providing such information.	ctor as prescribed herein is limited to pe	erforming a visual inspec-
OWNER/DESIGNATED REPRESENTATIVE:		DATE:
INSPECTOR'S SIGNATURE: D. A. C.		DATE: 11/21/13
		1 '



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(AFSA Form 103A) Page 1 of 1

#### **REV. 3/03**

Report of Inspection, Testing & Maintenance of Wet Pipe Fire Sprinkler Systems...continued Inspecting Firm: Space Coast Fire & Safety 522477 Inspection Contract# Name of Inspected Property: Rage Inspector Name: D. 8 110 11 Date: Inspection Frequency: Monthly Quarterly Annually Other **Annual Inspection for Wet Pipe Sprinkler Systems** Y NA N N/A N E.4.7 Glass bulbs appear full of liquid System in service on inspection Hangers and seismic bracing appears E.2.0 E.4.8 Spare sprinklers are of proper number undamaged and tightly attached (at least 6), type and temperature rating Spare sprinklers stored where temperature E.3.0 E.4.9 Piping appears free of mechanical damage maximum is 100°F E.3.1 Piping appears free of leakage Wrench available for each type of sprinkler E.3.2 Piping appears free of corrosion PRIOR TO FREEZING WEATHER: E.3.3 Piping appears properly aligned E.5.0 Building is secure such as not to expose E.3.4 Piping appears free of external loading piping to freezing conditions E.4.0 Sprinklers appear free of leakage E.5.1 Adequate heat is provided maintaining E.4.1 Sprinklers appear free of corrosion temperatures at 40°F or higher E.4.2 Sprinklers appear free of foreign materials E.6.0 ALARM PANEL CLEAR E.4.3 Sprinklers appear free of paint E.7.0 COMMENTS: E.4.4 Sprinklers appear free of physical damage E.4.5 Sprinklers appear properly oriented Sprinkler spray patterns appear free of unacceptable obstructions E.4.6 **Annual Testing for Wet Pipe Sprinkler Systems** System in service before testing Forward flow test conducted at maximum F.1.1 Pertinent parties notified before testing rate possible (only where connections do not permit full flow test) F.1.2 Adequate drainage provided before flow testing Forward flow test conducted without F.2.0 Main drain test conducted measuring flow (device</=2" and outlet sized to flow system demand) F.2.1 Supply water gauge reading before flow (static) 10 ps F.5.4 Backflow prevention assembly internal F.2.2 Gauge reading during stable flow (residual) psi inspection conducted (where shortages last F.2.3 Time for supply pressure to return to normal more than 1 year and rationing enforced by AHJ sec Forward flow test satisfied by annual fire F3.0 Antifreeze solution tested and freezing F.5.5 point determined pump flow test Backflow preventer performance test F.5.6 F.3.1 Antifreeze solution freezing point °F conducted as required by the AHJ F.3.2 Antifreeze solution freezing point after adjustment PRV control valves partial flow test F.6.0 F.4.0 Control valves (including backflow and PIVs) conducted and adequate to unseat valve operated through full range and returned to F.7.0 Pertinent parties notified of test conclusion normal position F.8.0 ALARM PANEL CLEAR F.4.1 PIVs opened until spring or torsion felt in rod SYSTEM RETURNED TO SERVICE F.4.2 PIVs and OS&Ys backed 1/4 turn from full open F.10.0 COMMENTS: F.4.3 Main drain test conducted (see F.2.0) F.5.0 Backflow prevention assembly forward flow test conducted F.5.1 System demand flow was achieved through the device Annual Maintenance for Wet Pipe Sprinkler Systems G.1.0 System in service before conducting maintenance G.4.4 Time for supply pressure to return to normal G.2.0 Pertinent parties notified before Pertinent parties notified after conclusion conducting maintenance of maintenance G.3.0 Operating stems of OS&Y (including backflow) G.6.0 ALARM PANEL CLEAR valves lubricated G.7.0 SYSTEM RETURNED TO SERVICE G.3.1 Valve completely closed and reopened G.8.0 COMMENTS: G.4.0 Adequate drainage provided before flow testing G.4.1 Main drain test conducted G.4.2 Supply water gauge reading before flow (static) psi G.4.3 Gauge reading during stable flow (residual) psi

INSPECTOR'S INITIA

(All "NO" answers to be explained.)
OWNER/DESIGNATED REP. INITIAL

DATE 11 21 13

## Space Coast Fire& Safety

"Your Safety Is Our Business" 321.783.1040 fax 321.783.1516

## TEST AND MAINTENANCE REPORT

CUSTOMER: City	of Naples				
STREET ADDRESS:	k				***************************************
MAILING ADDRESS:					
LOCATION OF ASSEMBLY:	Street - Byp	a55			
TYPE OF ASSEMBLY:	RP (DC)	<u>PVB</u>	SVB 0	SIZE: 34	
MANUFACTURER: WI	Kins MODEL: &	35YB		0: 087328	
GAUGE MANUF	SERIAL#		DATE CAL	IBRATED:	
Check Valve #1	Relief Valve	Check Valve	#2	Pressure Vacuum E	Breaker
leaked or	opened at: psi	leaked or		Air Inlet: did not o	200
closed tight	or did not open	closed tigh	t		
AND THE COURSE OF THE PROPERTY				or opened at	psi
gauge pressure across	Outlet shut-off valve:	gauge pressure acr	- 1	Check Value: lea	ked
check valvepsi	leaked closed tight	check valve	psi	or held at	psi
DESCRIPTION	RV cleaned only Replaced: RV rubber kit RV assembly or disc diaphragm (s) seat spring guide O-rings Other  Relief valve opened at psi  be completed within fiv		psi ays.	cleaned only Replaced: rubber kit CV assembly disc, air inlet disk, CV seat, CV spring, air inlet spring, CV retainer guide • 0-rings Other air inlet check valve	psi
REIVIARKS:					
	ata is accurate and reflects t				embly.
	CERT. No:				
		- 00 1 1 TOOO			
This Assembly:	PASSED FAIL	ED	BUFFER:		

## Space Coast Fire& Safety

## "Your Safety Is Our Business" 321.783.1040 fax 321.783.1516

## TEST AND MAINTENANCE REPORT

CUSTOMER: Cityo	? Naples		
	th St Park GAR	0	
MAILING ADDRESS:	THE CHAR	age	
LOCATION OF ASSEMBLY:	Street		
TYPE OF ASSEMBLY:	RP (DC)	PVB SVB 0	SIZE: (C
MANUFACTURER: ZUR	N MODEL:	376 SERIAL	NO: 9805 131303
GAUGE MANUF	SERIAL#	DATE CA	ALIBRATED:
Check Valve #1	Relief Valve	Check Valve #2	Pressure Vacuum Breaker
leaked or	opened at: psi	leaked or	Air Inlet: did not open
closed tight	or did not open	(closed tight)	
			or opened atpsi
gauge pressure across	Outlet shut-off valve:	gauge pressure across	Check Valve: leaked
check valve 2.1 psi	leaked closed tight	check valve 3.0 psi	or held atpsi
cleaned only	RV cleaned only	cleaned only	cleaned only
Replaced:	Replaced\	Replaced:	Replaced: \
rubber kit	RV rubber kit	rubber kit	rubber kit \
CV assembly	RV asselptly	CV assembly	CV assembly
or disc	or \	or	disc, air inlet
	disc	disc	. disk, CV
0-rings	diaphragm (6)	0-rings	seat, CV
Seat	seat \	seat	spring, air inlet
spring	spring \	spring_	spring, CV
stem/guide	guide \	stem/guide	retainer
retainer	0-rings	retainer	guide •
lock nuts	Other \	lock nuts	0-rings
Other		Other	Other
Gauge pressure across .	Relief valve opened at	Gauge pressure across	air inier psi
check valve psi	psi	check valvepsi	check valvepsi
NOTE: All	1		
NOTE. All Tepairs snail	be completed within fiv	ve (5) working days.	
REMARKS:			)
hereby certify that this da	ata is accurate and reflects the	he proper operation and ma	nienance of the accombly
TESTER: Mike O' Baugh		L-08-11-9353 DATE:	11/26/12
. /			9:200
This Assembly		TIME: _	9:50AM
This Assembly:	PASSED FAIL	.ED BUFFER	R: Psi
			And the second s
	1950 4500		

## Fire Alarm Test and Inspection Record

420 Manor Drive
Merritt Island, FL 32952

Property: City of Naples 8 34 Parking
Address: 400 & th St S

Naples 34102

Contact: H. SHEIDS

Space Coast Fire and Safety, Inc.

Phone:

Owner/Mgr. Phone:

Contact: Phone:

Inspection Conducted by:

Testing notification prior to testing:

Time: am By:

Monitoring Entity

Building Occupants

Building Management

Others (Specify)

Primary Power Voltage: 110V

Rated Current: 15

Over Current Protection: Breaker

Phone: (321) 783-1040

License # EC-13001156

EF-20000623

Time: 9:30

Fax: (321) 783-1516

Monitored by: All American Phone: 800 >85-1040

Account Number: 90506 D

On test until: | Z '( ) am

Jurisdiction: Naples

Inspection Interval:

Phone:

Capacity: 20
Panel: House
Breaker Number:

Secondary (standby) power supply 24 Hour stby/5 min. alarm

Batteries: Z
Type & location:

12 12 A/HR

Transmission Type: Communication Model:

Panel Mfgr: Firelite

Model number:

Software:

Date of last service: 8/13
Date / scope of last software change:
8/13 New Panel

Systems Tests and Inspections:		
	Visual	Functional
Control Panel		
Interface / shutdown equipment		
Indicator lamps / LEDs		1
Fuses		Na
Primary Power		
Trouble signals		
Disconnect means		
Ground fault monitor		
Batteries	_	V
		24,1 Load voltage:
		Discharge test
e		Charger test
		Specific gravity
Surge suppression	1	n /s
Remote annunciators	MA	11/14
Notification Appliance		Audible
		Visual
		Volume
		n/A Message clarity
(T		1
(Emergency communications equip) Phone set	Not applicable	
Phone jacks	***************************************	Mary Company and Address.
Off-hook indication		
Amplifiers	* <del></del>	
Tone generators	MAPPA TO PROGRAMMENT AND THE PROGRAMMENT AND T	
Call-in signal	-	and the second second
Can in signar	***************************************	additionary in the definition of the contract
Monitoring (on or off premises)	Not applicable	
Alarm signal		
Alarm restoral		7
Trouble signal		
Trouble restoral		
Supervisory alarm		
Supervisory restoral		
× 9		
System Performance	Non Prosting	Bunatianal
	Non Functional	Functional
Comments:		

## Initiating Device and Circuit Information:

	nits (See NFPA 72, Table 3-5 ng Device Circuits (I.D.C.'s) o	
Circuit Styles:	Style D (Cl	lass A) circuits Style B (Class B) circuits
	iee NFPA 72, Table 3-6) Line Circuits (I.D.C.'s) on syst Style 6a (C	tem: class A) circuits Style 4 (Class B) circuits
Quantity S	Circuit Style	Devices  Manual Stations  Ionization smoke detectors
		Photo electric smoke detectors
		Duct smoke detectors, ionization
	P	Duct smoke detectors, photoelectric
0	D	Heat detectors, temp, R/R
3	B	Waterflow switches:pres vane
		Other, specify.
7	B	Supervisory tamper switches
		Generator condition:
		Fire pump condition:
		Other, specify
Alarm Notification An	pliance and Circuit Informa	tion
	ation Appliance Circuits (N.A	
Quantity	Circuit Style	Notification Appliances
8	B	Bells Horns + Stephe
		Chimes
		Strobes
		Speakers
×		Apartment Sounders
		Other, specify:

Describe special procedures:			
		*	n 145
System tested 100%			
System partially tested (specify):			3
Completion notification after testing:			
Time: a.m. By:			
Monitoring entity			
Building occupants:			
Building management			
Others (specify)			
. *			
The following did not operate properly:			
nh			
TH			
		\$	
System was restored to normal operation and taken off test status at:			
Times: a.m. By: D. B. Work			
This testing was performed in accordance with applicable NFPA standa	ede.		
I his testing was performed in accordance with applicable NFFA standa	145.	· · · · · · · · · · · · · · · · · · ·	
534		·	
Inspected by: D. B. Mark			
Signature: The Signature S			
YII WELL			
Owner of representative:	(4		
Signature:			
	······································		
A.H.J. or representative::			
Signature:			
31 × 33			

Job Site:

8th S+ PK Garage

Invoice Number: Date:

		-	Tamper	M022	25 2 TO FL W
			Water 4 low	m021	24 1 STFC W
			de v	M020	23 年元 い
			Tamp	MOIA	22 15+FC W
			Heat	MOIS	213 ROFL W
			Heat	MOCI	20 20 FL W
			Heat	MO16	19 パチモし い
			Heat	MOIS	18 3 TYPL E
			Heat	M0)4	17 2mpl =
			Heat	M013	
			Tamp	2/QM	15 Eley Shop W
			Jano	301	14 Eley Rm W
			Tans	MOID	13 Ely Tamp E
			Tamp	MODOR	12 Eley Tamp Ly
			Poll	800M	11 HAFE W
			PUI	M007	10 3 FOR W
			Pul	MOOL	9 20 FC W
			1173	S COM	8 14FL W
Elevicecal)	050M		112	h Gowl	7 4446
Elevizera"	M029	37	11.3	MODS	6 3RPFLE
Eler Recall	750M	וק	R-11 *	M602	520AE
Elev Recall	42.0M	Recall E Prim	원미	M00)	4 15 FLE
water low	MD 25	3KPF L W	smoke	D632 2000	3 ELSMGTE
Tamper	MOZY	3ROFLW	Smoke	Hale 5006	2 Day FACT ST
waterflow	X20M	20PLW	SMOKE	和兄在的	1目·Shaft W
Condition		Pass/Fail	Battery Size	7555 Type	Location

