

Fire Alarm Inspection and Testing Report



Location Code: DVCFUIN

Contact: John Granata

Contact Address: 49 Jetview Dr, Bldg 21401
Rochester, NY 14624-4903

Phone: 585-944-9099

Email: john.f.granata.ctr@army.mil

Property Evaluated: USAR-NY126 BLDG 21401 (Business)
49 JETVIEW DR, BLDG 21401
ROCHESTER, NY 14624-4903

Description: Fire Alarm (Fire Alarm System)

Work Order: SV2403200783/1

Company: Davis Ulmer Sprinkler Co

NYS Fire Alarm License 12000063334,
Expires: 6/30/2025

Address: 300 Metro Park
Rochester, NY 14623

Company Phone: 585-546-3670

Inspector: Zachary Squires
Not Required

Date of Work: 4/5/2024

Frequency: Annual

Tag: 0265696

Deficiency Summary

Status: Open

6. Testing Results

6.1 Control Unit and Related Equipment

Annunciators - Visual Inspection: Yes, Functional Test: Yes

LCD does not operate

Status: Open

Notification Appliances

Speaker(s) - # Installed: 14, # Tested: 14

Short circuit on amplifier prevents speakers from operating properly

General Comments

These items are outside the regular scope of the required inspection and are not the result of an engineering review. This information is not intended to be all-inclusive but rather a list of items discovered as a by-product of the required inspection.

Troubles on FACP upon arrival

Signal card 6 sig15 short circuit

Signal card 6 sig17 short circuit

Card 13 lcd card missing/failed

Signal card 1 circuit sig3 short circuit

Card 6 flex 50 amplifier analog riser 1 input



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Fire Alarm Inspection and Testing Report

1. Property Information

Tag 0265696
Inspection Frequency: Annual
Property Being Evaluated:
USAR-NY126 BLDG 21401 (Business)
Owner:
John Granata
Owner's Phone Number:
585-944-9099
Property Address:
49 JETVIEW DR, BLDG 21401, ROCHESTER, NY, 14624-4903
Assembly Description:
Fire Alarm (Fire Alarm System)

2. Owner's Section

Has the Owners section been answered on another inspection report that will be submitted with this inspection report? Yes No N/A

3. Monitoring Information

Is there a monitoring entity? Yes No
Monitoring organization: Simplex
Phone: -
Email: -
Account number:
Phone line 1:
Phone line 2:
Means of transmission: Cellular
Entity to which alarms are retransmitted:
Phone: -
Monroe County 911

4. Notifications Made Prior To Testing

	Contact	Time
Monitoring organization:	Simplex	-
Building management:	John	-

5. System Information - Panels / Power

5.1 Addressable Panels							
Control Unit	Manufacturer: Simplex		Model Number: 4100es		Location: Electric room		Software Revision: 1.03.01
SLC Loops	Max #: 1	# Utilized: 1	Addresses Available: 250	NAC Circuits	Max #: 4	# Utilized: 4	Style/Class: B
Primary Power	Voltage: 110	Amps: 9.5	Overcurrent Protection Type: Circuit Breaker	Amps: 20	Disconnecting Means Location: ORP Ckt # 4		
Battery 1	Voltage: 12	Amps: 75	Mfr Year: 2021	Load Test Battery 1	VDC: 13.48	Ah: 100%	Charger Voltage: 26.99
Battery 2	Voltage: 12	Amps: 75	Mfr Year: 2021	Load Test Battery 2	VDC: 13.50	Ah: 100%	Charger Voltage: 26.99
Secondary Power	Other Power Present? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Description:				

5.3 Additional Power Supplies

Are there additional power supplies? Yes No

6. Testing Results

6.1 Control Unit and Related Equipment

Description	Visual Inspection	Functional Test	Results
Control unit	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail <input type="checkbox"/> N/A
Lamps / LEDs / LCDs	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail <input type="checkbox"/> N/A
Fuses	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail <input type="checkbox"/> N/A
Trouble signals	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail <input type="checkbox"/> N/A
Disconnect switches	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail <input type="checkbox"/> N/A
Ground-fault monitoring	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail <input type="checkbox"/> N/A
Supervision	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail <input type="checkbox"/> N/A
Annunciators	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Pass <input checked="" type="checkbox"/> Fail <input type="checkbox"/> N/A
Remote power panels	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Pass <input type="checkbox"/> Fail <input checked="" type="checkbox"/> N/A
Other	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Pass <input type="checkbox"/> Fail <input type="checkbox"/> N/A

6.2 Secondary Power

Description	Visual Inspection	Functional Test	Results
Battery condition	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail <input type="checkbox"/> N/A
Load voltage	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail <input type="checkbox"/> N/A
Discharge test	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail <input type="checkbox"/> N/A
Charger test	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail <input type="checkbox"/> N/A
Remote panel batteries	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Pass <input type="checkbox"/> Fail <input checked="" type="checkbox"/> N/A

6.3 Alarm and Supervisory Alarm Initiating Device

Complete supplementary device test form for all initiating devices.

a. Did all tested initiating devices pass?

Yes No N/A

6.4 Notification Appliances

Include Notification Appliances Table on this Report?

Yes No

Notification Appliances

Appliance Type	# Installed	# Tested	Test Results
Bell(s)	0	0	<input type="checkbox"/> Pass <input type="checkbox"/> Fail <input checked="" type="checkbox"/> N/A
Horn(s)	0	0	<input type="checkbox"/> Pass <input type="checkbox"/> Fail <input checked="" type="checkbox"/> N/A
Horn/Strobe(s)	0	0	<input type="checkbox"/> Pass <input type="checkbox"/> Fail <input checked="" type="checkbox"/> N/A
Mini Horn(s)	0	0	<input type="checkbox"/> Pass <input type="checkbox"/> Fail <input checked="" type="checkbox"/> N/A
Speaker(s)	14	14	<input type="checkbox"/> Pass <input checked="" type="checkbox"/> Fail <input type="checkbox"/> N/A
Speaker/Strobe(s)	0	0	<input type="checkbox"/> Pass <input type="checkbox"/> Fail <input checked="" type="checkbox"/> N/A
Strobe(s)	16	16	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail <input type="checkbox"/> N/A

6.5 Interface Equipment

Complete supplementary interface component test form for all interface components.

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

6.6 Supervising Station Monitoring

Description	Yes/No	Time (sec)	Results
Alarm signal	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Pass <input type="checkbox"/> Fail <input checked="" type="checkbox"/> N/A
Alarm restoration	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Pass <input type="checkbox"/> Fail <input checked="" type="checkbox"/> N/A
Trouble signal	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Pass <input type="checkbox"/> Fail <input checked="" type="checkbox"/> N/A
Trouble restoration	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Pass <input type="checkbox"/> Fail <input checked="" type="checkbox"/> N/A
Supervisory signal	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Pass <input type="checkbox"/> Fail <input checked="" type="checkbox"/> N/A
Supervisory restoration	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Pass <input type="checkbox"/> Fail <input checked="" type="checkbox"/> N/A



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6.7 Air Sampling Detection

Is there Air Sampling Detection?

Yes No

6.8 Device Information

Devices				
Pull Station Manufacturer(s) Simplex	Type <input checked="" type="checkbox"/> Keyed <input type="checkbox"/> Hex Key <input type="checkbox"/> Screw <input type="checkbox"/> Other	Detector manufacturer(s) Simplex	Notification device manufacturer(s) Simplex	Color <input type="checkbox"/> Red <input checked="" type="checkbox"/> White <input type="checkbox"/> Other
Comment				

7. Notifications That Testing Is Complete

	Contact	Time
Monitoring organization:	Simplex	-
Building management:	John	-

8. System Restored To Normal Operation

Date: 4/5/2024
Time: -
9. Observations

These items are outside the regular scope of the required inspection and

to be all-inclusive but rather

Please see the sun

10. Inspector

Test Verification: Inspected By

Zachary Squires

Inspector License:

Inspector License
Date of Work

Date of Work Inspection Notes

Not Required

Not Required

Inspection Notes

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SECTION IV - OTHER TERMS AND LIMITATIONS

1. This Agreement is for inspection services only. If Customer wants Company to make any repairs, alterations or replacements as a result of the inspection services performed pursuant to this Agreement, such work and the additional compensation to Company must be specified in a separate written agreement between Company and Customer.
2. Any additional system equipment added to the Property after the date of this Agreement or not otherwise specified in Section II of this Agreement is not included in the inspection services to be provided pursuant to this Agreement. Inclusion of any such other equipment will require execution of an amendment to this agreement and adjustment of the inspection fee.
3. The inspection services provided by Company pursuant to this Agreement are limited to an evaluation of the functionality of the equipment identified in Section II above. Company will not evaluate or express any opinion as to whether the design and/or installation of the system are suitable for the Property or the operations at the Property.
4. Company's inspection is limited to a visual inspection of external readily accessible parts of the system and will not include every component including but not limited to sprinkler heads, pipe, fittings, hangers, pull stations, smoke detectors, conduit wire or other parts of the system being inspected. Company will only inspect a representative number or sample of the sprinkler heads, pipes, hangers, valves or other devices and equipment in their current position. THEREFORE, BY CONDUCTING ITS INSPECTION UNDER THIS AGREEMENT, COMPANY DOES NOT GUARANTEE OR WARRANT THE CONDITION OR OPERATION OF EVERY PIPE, SPRINKLER HEAD OR OTHER PART OF THE FIRE PROTECTION AND/OR FIRE ALARM/SECURITY SYSTEM ON THE PROPERTY.
5. AS A MATERIAL INDUCEMENT FOR COMPANY TO PROVIDE THE SERVICES SPECIFIED IN THIS AGREEMENT AT THE INSPECTION FEE QUOTED IN THIS AGREEMENT, CUSTOMER AGREES THAT COMPANY'S LIABILITY TO CUSTOMER AND ALL THIRD PARTIES WITH RESPECT TO ANY CLAIM UNDER THIS AGREEMENT, OR ARISING FROM THE SERVICES FURNISHED BY COMPANY, SHALL BE LIMITED TO THE LESSER OF \$1,000.00 OR THE TOTAL CONSIDERATION ACTUALLY RECEIVED BY COMPANY UNDER THIS AGREEMENT. THE FOREGOING LIMITATION SHALL APPLY TO ALL CLAIMS REGARDLESS OF THE NATURE THEREOF, INCLUDING CLAIMS ASSERTED AS A BREACH OF CONTRACT, A BREACH OF WARRANTY, NEGLIGENCE, STRICT LIABILITY OR OTHERWISE. IN NO EVENT SHALL COMPANY BE LIABLE FOR INCIDENTAL, CONSEQUENTIAL, SPECIAL, AND INDIRECT OR PUNITIVE DAMAGES, OR DAMAGES FOR LOST PROFITS. If Customer desires Company to accept an increased limit of liability for the services provided under this Agreement, Company will provide an alternate inspection fee quote reflecting such increased limit, provided, however, that the increased limit shall be effective only upon Company's and Customer's execution of a replacement agreement confirming the same and Customer's payment of the alternate fee.
6. Company, following each inspection, will provide to Customer a written "Report of Inspection" ("Report"). If required and/or with prior written authorization, Company will provide copies of the Report to the local or state authority having jurisdiction on behalf of Customer. If requested by Customer, a copy of the Report will also be forwarded to Customer's insurance company. The Report and recommendations, if any, by Company are only advisory in nature and are intended to assist Customer in reducing the possibility of loss to the Property by indicating obvious defects or impairments to the system(s) which were discovered by Company's inspection and which should receive prompt attention.

7. Customer agrees to obtain and shall be solely responsible to maintain property and casualty insurance for the Property, all contents therein, and operations performed within or around the Property. No insurance company, insurer or bonding company or their successors or assigns shall have any right of subrogation or otherwise against Company arising out of this Agreement or the services provided by Company pursuant to this Agreement.
8. Customer agrees to indemnify, defend and hold harmless Company, its agents, and employees from and against any and all claims, demands, suits, liabilities, damages, judgments, losses and expenses (including, without limitation, attorneys' fees) which may be asserted against or incurred by Company by any third party arising out of or related to this Agreement or the services provided by Company pursuant to this Agreement.
9. Company will make every reasonable effort to prevent the discharge of water into or onto areas of landscaping, decorative pavement, etc., at the Property, however it is Customer's responsibility to provide sufficient and readily accessible means to accept the full flow of water that may be required by tests as determined by the type of inspection and to take measures to eliminate the formation of ice in any area where a slip and fall hazard could occur.
10. This Agreement may not be assigned by Customer without the written consent of Company.
11. This Agreement may be signed in counterparts; a signed facsimile, photocopy, and/or electronic mail of this Agreement shall be as binding on both parties just as though this Agreement were executed in its original, pre-printed form.
12. This Agreement constitutes the entire Agreement between Company and Customer regarding the subject matter hereof and supersedes all prior agreements and understandings relating thereto. Although Customer for its convenience or in furtherance of its internal procedures may issue to Company a purchase order, order acknowledgement or similar form in connection with the services provided by Company pursuant to this Agreement, no term or condition in any such form that is different from or in addition to the terms set forth in this Agreement shall be applicable, and all such different or additional terms shall be ineffective and void. This Agreement cannot be amended or modified except by a writing signed by Customer and Company.
13. Customer acknowledges Company is relying upon the accuracy of the information regarding Customer and the Property set forth in Sections I of this Agreement. Customer represents that all such information is complete and accurate as of the date on which this Agreement is signed by Customer. Customer will promptly advise Company in writing of any change to such information.
14. Other inclusions, exclusions, or attachments (if any) we exclude fire alarm.