PORTLAND FIRE & RESCUE

Randy Leonard, Commissioner
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FIRE ALARM SYSTEM RECORD OF COMPLETION

Name of protected property: Wells Fargo Tower Suite 2500 TI Permit # 13-183758FA
Address: 350 SW Jefferson St. Portland, OR 97201
Representative of protected property (name /phone): Dan Kent (503) 886-4718
Authority having jurisdiction: Portland Fire & Rescue, Jerry Randall
Address/telephone number: _____

	Organization name/phone	*Representative name/phone*
Installer	Capitol Electric (503) 255-9488	Dan Wilson (503) 262-0411
Supplier	Convergint Technologies (503)228-8522	Chad Hueneke (503)228-8522

Service organization _____
Location of record (as-built) drawings: FCC
Location of operation and maintenance manuals: Building maintenance office
Location of test reports: Building maintenance office
A contract for test and inspection in accordance with NFPA standard(s)
Contract No(s): _____ Effective date: _____ Expiration date: _____

System Software
(a) Operating system (executive) software revision level(s): EST-3 SDU Version 5.12
(b) Site-specific software revision date: 01-00-00-95
(c) Revision completed by: Chad Hueneke (name) Convergint Technologies (firm)

1. Type(s) of System or Service

_____ ***NFPA 72,* Capter 6 and 8 – Unmonitored Protected Premises**
If alarm is transmitted to location(s) off premises, list where received: _____

X ***NFPA 72,* Chapter 8 – Central Station**
Telephone numbers of the organization receiving alarm:
Alarm: _____
Supervisory: _____
Trouble: _____

_____ ***NFPA 72,* Chapter 8 – Proprietary**
Telephone numbers of the organization receiving alarm:
Alarm: _____
Supervisory: _____
Trouble: _____

If alarms are retransmitted to public fire service communications centers or others, indicate location and telephone

_____
_____
_____

Means of transmission of signals from the protected premises to the central station:

_____ McCulloh _____ Multiplex _____ One-way radio

x_____ Digital alarm communicator _____ Two-way radio _____ Others

Means of transmission of alarms to the public fire service communications center:

(a) _____

(b) _____

System location: _____

_____ ***NFPA 72,*** **Chapter 9--- Auxillary**
Indicate type of connection: _____ Local energy _____ Shunt _____ Parallel telephone
Location of telephone number for receipt of signals: _____

2.. Record of System Installation
(Fill out after installation is complete and wiring is checked for opens, shorts, ground faults, and improper branching, but prior to conducting operational axxeptance tests.)
This system has been installed in accordance with the NFPA standards as shown below, was inspected by _____ on _____, includes the devices shown in 5 and 6, and has been in service since _____ .

_x_ *NFPA 72,* Chapters 1 2 3 4 5 6 7 8 9 10 11 (circle all that apply)

_x_ NFPA 70, *National Electricail Code,* Article 750

_x_ Manufacturer's instructions

____ Other (specify): _____

Signed: _____ Date: _____

Organization: _____

3. Record of System Operation
Documentation in accordance with Inspection Testing Form, Figure 10.6.2.3, is attached _____ .
All operational features and functions of this system were tested by _____ Date _____
and found to be operating properly in accordance with the requirements of:
_x_ *NFPA 72,* Chapters 1 2 3 4 5 6 7 8 9 10 11 (circle all that apply)

x___ NFPA 70, *National Electricail Code,* Article 750

x___ Manufacturer's instructions
____ Other (specify): _____

Signed: _____ Date: _____

Organization: _____

4. Signaling Line Circuits
Quantity and class of signaling line circuits connected to system (*see NFPA 72, Table 6.6.1):*
Quantity:_____ Style: _____ Class: _____

5. Alarm--Initiating Devices and Circuits
Quantity and class of initiating device circuits (*see NFPA 72, Table 6.5):*
Quan tity: _____ Style: _____ Class: _____

MANUAL
(a) Manual stations _____ Non coded _____ Transmitters _____ Code _____
Addressable _____
(b) Combination Manual fire alarm and guard's tour coded stations _____

AUTOMATIC
Coverage: Complete _____ Partial __X_____
Selective _____ Nonrequired _____

(a) Smoke detectors _____ Ion _____ Photo _____ Addressable _____
(b) Duct detectors _____ Ion _____ Photo _____ Addressable _____
(c) Heat detectors _____ FT _____ RR _____ FT/RR _____ RC _____ Addressable _____
(d) Sprinkler waterflow indicators: Transmitters _____ Noncoded _____ Coded _____ Addressable _____
(e) The alarm verification feature is disabled _____ enabled _____, change from _____ seconds to ____seconds_____
(f) Other (list): _____
_____

6. Supervisory Signal-Initiating Device and Circuits (use blanks to indicate quantity of devices)

GUARD'S TOUR
(a) _____ Coded stations
(b) _____ Noncoded stations
(c) _____ Compulsory guard's tour system comprised of __ transmitter stations and intermediate stations
Note: Combination devices are recorded under 5(b), Manual, and 6(a), Guard's Tour.

SPRINKLER SYSTEM
Check if provided
(a)_____ Valve supervisory switches
(b)_____ Building temperature points
(c) _____ Site water temperature points
(d) _____ Site water supply level points

Electric fire pump:
(e)_____ Fire pump power
(f) _____ Fire pump running
(g)_____ Phase reversal

Engine-driven fire pump:
(h) _____ Selector in auto position
(i) _____ Engine or control panel trouble
(j) _____ Fire pump running

ENGINE-DRIVEN GENERATOR:
(a)_____Selector in auto position
(b)_____ Control panel trouble
(c)_____ Transfer switches
(d)_____ Engine running

Other supervisory function(s) (specify): _____
_____
_____

7. Annunciator(s)

Number: _____ Type _____ Location:_____

8. Alarm Notification Appliances and Circuits

NFPA 72, Chapter 6 -- Emergency Voice/Alarm Service
Quantity of voice/alarm channels: 1 Single: _____ Multiple: _____
Quantity of speakers installed: 15 Quantity of speaker zones: 1
Quantity of telephones or telephone jacks included in system: 0
Quantuty and the class of notification appliance cir cuits connected to system (*NFPA 72, Table 6.7)*
Quantity: 1 Style: A Class: B

Types and quantiies of notification appliances installed:
(a) Bells _____ With Visible _____
(b) Speakers 15 With Visible 15
(c) Horns _____ With Visible _____
(d) Chimes _____ With Visible _____
(d) Other _____ With Visible _____
(f) Visible appliances without audible: 13

9. System Power Supplies
(a) Fire Alarm Control Panel: Nominal Voltage: 120VAC Current Rating: 15A
Overcurrent protection: Type: CIRCUIT BREAKER Current rating: 15A
Location: ELECTRICAL ROOM 25th FLOOR
(b) Secondary (standby):
Storage battery: 12VDC SLA Amp-hour ratings: 7.5AH
Calculated capacity to drive system, in hours: 24HR STANDBY, 5 MIN ALARM
Engine-driven generator dedicated to fire alarm system: _____
Locaton of fuel storage: _____
(c) Emergency system used as backup to primary power supply: _____
Emergency system described in NFPA 70, Article 700: _____

10. Comments
Frequency of routine tests and inspections, if other than in accordance with the referenced NFPA standard(s):

System deviations from the referenced NFPA standard(s) are: _____

Don Koch, Installer 10/2/2013
(signed) for installation contractor/supplier (title) (date)

(signed) for alarm service company (title) (date)

(signed) for central station (title) (date)

Upon completion of the system(s) satisfactory test(s) witnessed (if required by the authority having jurisdiction):

Jerry Rundan inspector 10-2-13
(signed) representative of the authority having jurisdiction (title) (date)