

Request for Proposals



Minneapolis City Hall/Hennepin County Courthouse Fire Alarm System Inspection, Testing, and Maintenance

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Proposals Due by: : f|Xñ November 4, 2016 Uh PM



Municipal Building Commission

Room 105 • 350 South Fifth Street • Minneapolis, MN 55415 Phone
(612) 596-9512 • Fax (612) 596-9561
www.municipalbuildingcommission.org

October 19, 2016

To whom it may concern:

Attached is a Request for Proposal for Fire Alarm System Inspection, Testing, and Maintenance services. These services are needed for the Minneapolis City Hall/Hennepin County Courthouse facility located at 350 South Fifth Street. The intent is to have a comprehensive service contract for the services described in the Scope of Services. If your firm meets the qualifications and is available, please consider submitting a proposal for providing these services. Please review the RFP for details.

Proposals are due by **4 PM on Friday, November 4, 2016**. A pre-proposal conference will be held at **Minneapolis City Hall/Hennepin County Courthouse, Room 132 on Tuesday, October 25, 2016 at 10 AM**.

Thank you for your consideration.

Sincerely,

Erin Delaney

Erin Delaney, Director
Municipal Building Commission

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REQUEST FOR PROPOSALS
FOR
Minneapolis City Hall/Hennepin County Courthouse
Fire Alarm System Inspection, Testing, and Maintenance

- I. INVITATION:** It is the intention of the Municipal Building Commission to solicit proposals for the inspection, testing, and maintenance of the fire alarm system(s) in the Minneapolis City Hall/Hennepin County Courthouse facility including the Hennepin County Adult Detention Center located within the building.

The Municipal Building Commission (hereinafter referred to as the MBC) makes this Request for Proposals (hereinafter referred to as the RFP) in order to select a qualified fire systems vendor (hereinafter referred to as the Contractor) for providing Fire Alarm System Inspection, Testing, and Maintenance Services (hereinafter called the Project). The Project is generally described in the “Scope of Services” (Attachment B), contained within this RFP, including descriptions of roles, responsibilities and relationship of the Contractor, MBC, and other parties involved in the Project.

- II. PRE-PROPOSAL CONFERENCE:** A pre-proposal conference will be held at **10 AM. (Minneapolis Time), on Tuesday, October 25, 2016** in Room 132 at the Minneapolis City Hall/Hennepin County Courthouse building located at 350 South Fifth Street, Minneapolis, Minnesota 55418. All potential Contractors are encouraged to attend this conference.

- III. PROPOSAL DUE DATE and LOCATION:** The Contractor shall submit **five (5) hard copies** and one (1) electronic copy of their proposals to:

Municipal Building Commission
Attn: Royce Wiens
Request for Proposals for:
Fire Alarm System Inspection, Testing, and Maintenance
350 South Fifth Street, Room 105
Minneapolis, MN 55415
Royce.Wiens@municipalbuilding.org

The submittal shall be made at or before **4:00 P.M. (Minneapolis Time), November 4, 2016.**

NOTE: Late Proposals may not be accepted.

- IV. PROPOSAL FORMAT:** The Contractor shall provide the appropriate information in sufficient detail to demonstrate that the evaluation criteria has been satisfied as specified in Section V – “EVALUATION OF PROPOSALS”.

To allow for easier comparison of proposals during evaluation, proposals should contain the following sections and appendices and be arranged in consecutive order.

1. Executive Summary - The Executive Summary should include a clear statement of the Contractor’s understanding of the RFP including a brief summary of the Scope of Work. Include, at a minimum, an outline of the contents of the proposal, an identification of the

- proposed project team, a description of the responsibilities of the project team, and a summary of the proposed services.
2. Scope of Services - Describe in detail how services will be provided. Include a detailed listing and description of tasks and deliverables.
 3. Experience and Capacity - Describe background and related experience demonstrating ability to provide required services. Indicate if company expansion is required to provide service. In addition, complete and include Exhibit 1 – Experience and Capacity Form.
 4. References - List references from contracts similar in size and scope.
 5. Personnel Listing - Show involved individuals with resumes and specific applicable experience. Sub-consultants should also be listed, including the identification of any that are certified in the City of Minneapolis Small & Underutilized Business Program.
 6. Cost/Fees - Indicate proposed cost of service including a description of how costs were determined; hourly rates; direct costs and payment billing schedule; list of charges per classification of employee; cost breakdown for each year of service. Complete and include Attachment C – Proposal Pricing Form
 7. Completed Proposal Forms
 - Exhibit 1 – Experience and Capacity Form
 - Attachment C – Proposal Pricing Form

V. EVALUATION OF PROPOSALS – SELECTION OF *VENDOR*: Proposals will be reviewed by an Evaluation Panel made up of representatives of the MBC and other City or County staff assistance as they might require. The Evaluation Panel may select a "short list" of qualified Contractors who will be formally interviewed as part of the final selection, as deemed necessary by the MBC. Evaluations will be based on the required criteria listed in Section IV “PROPOSAL FORMAT”, and the following:

- A. Quality, thoroughness, and clarity of proposal.
- B. Qualifications and experience of staff (includes a review of references).
- C. How well the Scope of Services offered meets department objectives.
- D. Financial responsibility and capacity of company including whether or not the company, any affiliates, subsidiaries, officers or directors have filed for federal bankruptcy protection within seven years of the date of this RFP.
- E. Organization and management approach and involvement for a successful project.
- F. Small & Underutilized Business participation.
- G. Cost of services proposed.
- H. Insurance coverage as defined for the services.

A formal Presentation/Interview may be requested of the “short list” Contractor/s. Specifically, the MBC requests that the Contractor’s Project Manager assigned to the proposed project team lead the Presentation and that actual members of the project team (including any sub-consultants) participate in the formal presentation/interview.

If pursued, the Presentation/Interview of the “short listed” Contractor’s will consist of the following

elements:

1. Discussion of the Contractor's approach to providing services for this Project based upon the Scope of Services described herein.
2. Overview of the Contractor's experience as related to the Scope of Services, including qualifications and experience of assigned staff.

The Evaluation Panel will schedule and arrange for the presentations.

VI. SCHEDULE: The following is a listing of key Proposal and Project milestones:

RFP Release	October 17, 2016
Pre-Proposal Conference	October 25, 2016
Questions on RFP Due by	October 26, 2016
Responses to Questions posted by	October 28, 2016
Proposals due by	4:00 PM on November 4, 2016
Estimated Contractor selection	November 21, 2016
Estimated services start date	January 1, 2017
Estimated services end date	December 31, 2021

VII. CONTRACT: The contracting parties will be the MBC and the Contractor selected to provide the services as described herein. The selected proposal, along with the RFP and any counter proposal will be incorporated into a formal agreement after negotiations. It is the intent of the MBC to award a single contract for a term of three (3) years with the option to extend the contract, on an annual basis, at the sole option of the MBC, for two (2) additional years.

VIII. DEPARTMENT CONTACT/REQUESTS FOR CLARIFICATION: The Contractor's primary interface with the MBC will be with the Contract Manager who will act as the MBC's designated representative for the Project. Prospective responders shall direct inquiries/questions ***in writing only*** to:

Contract Manager: Royce Wiens, MBC
350 South Fifth Street
Minneapolis, MN 55415
Email ID: Royce.Wiens@municipalbuilding.org

All questions are due no later than 12 PM (**Minneapolis Time**), **October 26, 2016**. Responses to the Questions will be posted by **October 28, 2016** on City's RFP website at: <http://www.minneapolismn.gov/finance/procurement/rfp>

The Contract Manager is the only individual who can be contacted regarding the Project before proposals are submitted. The Contract Manager cannot vary the terms of the RFP.

IX. REJECTION OF PROPOSALS: The MBC reserves the right to reject any Contractor on the basis of the proposals submitted. The MBC reserves the right to reject all proposals or any Contractor on the basis of the proposal submitted.

X. ADDENDUM TO THE RFP: If any addendum is issued for this RFP, it will be posted on the

City of Minneapolis web site at:

<http://www.minneapolismn.gov/finance/procurement/rfp>

The MBC reserves the right to cancel or amend the RFP at any time.

- XI. SITE VISITS:** Contractor's may visit the Minneapolis City Hall/Hennepin County Courthouse site in reference to the services to be provided, but are prohibited from interviewing MBC or City staff, or other visitors in any effort to obtain information relating to this RFP. All requests for clarification should be submitted in writing as outlined in this RFP. Failure to follow this prohibition could result in the rejection of the proposal.

ATTACHMENT A

General Conditions for Request For Proposals (RFP)

(Revised: Dec, 2015)

The General Conditions are terms and conditions that the City expects all of its Consultants to meet. The Consultant agrees to be bound by these requirements unless otherwise noted in the Proposal. The Consultant may suggest alternative language to any section at the time it submits its response to this RFP. Some negotiation is possible to accommodate the Consultant's suggestions.

1. City's Rights

The City reserves the right to reject any or all proposals or parts of proposals, to accept part or all of proposals on the basis of considerations other than lowest cost, and to create a project of lesser or greater expense and reimbursement than described in the Request for Proposal, or the respondent's reply based on the component prices submitted.

2. Equal Opportunity Statement

The Consultant agrees to comply with applicable provisions of applicable federal, state and city regulations, statutes and ordinances pertaining to the civil rights and non-discrimination in the application for and employment of applicants, employees, subcontractors and suppliers of the Consultant. Among the federal, state and city statutes and ordinances to which the Consultant shall be subject under the terms of this Contract include, without limitation, Minnesota Statutes, section 181.59 and Chapter 363A, Minneapolis Code of Ordinances Chapter 139, 42 U.S.C Section 2000e, et. seq. (Title VII of the Civil Rights Act of 1964), 29 U.S.C Sections 621-624 (the Age Discrimination in Employment Act), 42 U.S.C Sections 12101-12213 (the Americans with Disability Act or ADA), 29 U.S.C Section 206(d) (the Equal Pay Act), 8 U.S.C Section 1324 (the Immigration Reform and Control Act of 1986) and all regulations and policies promulgated to enforce these laws. The Consultant shall have submitted and had an "affirmative action plan" approved by the City prior to entering into a Contract.

3. Insurance

Insurance secured by the Consultant shall be issued by insurance companies acceptable to the City and admitted in Minnesota. The insurance specified may be in a policy or policies of insurance, primary or excess. Such insurance shall be in force on the date of execution of the Contract and shall remain continuously in force for the duration of the Contract.

Acceptance of the insurance by the City shall not relieve, limit or decrease the liability of the Consultant. Any policy deductibles or retention shall be the responsibility of the Consultant. The Consultant shall control any special or unusual hazards and be responsible for any damages that result from those hazards. The City does not represent that the insurance requirements are sufficient to protect the Consultant's interest or provide adequate coverage. Evidence of coverage is to be provided on a current ACORD Form. A thirty (30) day written notice is required if the policy is canceled, not renewed or materially changed. The Consultant shall require any of its subcontractors, if sub-contracting is allowable under this Contract, to comply with these provisions, or the Consultant will assume full liability of the subcontractors.

The Consultant and its subcontractors shall secure and maintain the following insurance:

- a) **Workers Compensation** insurance that meets the statutory obligations with Coverage B-Employers Liability limits of at least \$100,000 each accident, \$500,000 disease - policy limit and \$100,000 disease each employee.
- b) **Commercial General Liability** insurance with limits of at least \$2,000,000 general aggregate, \$2,000,000 products - completed operations \$2,000,000 personal and advertising injury, \$100,000 each occurrence fire damage and \$10,000 medical expense any one person. The policy shall be on an "occurrence" basis, shall include contractual liability coverage and the City shall be named an additional insured. The amount of coverage will be automatically increased if the project amount is expected to exceed \$2,000,000 or involves potentially high risk activity.
- c) **Commercial Automobile Liability** insurance covering all owned, non-owned and hired automobiles with limits of at least \$1,000,000 per accident.
- d) **Professional Liability** Insurance or Errors & Omissions Insurance providing coverage for 1) the claims that arise from the errors or omissions of the Consultant or its subcontractors and 2) the negligence or failure to render a professional service by the Consultant or its subcontractors. The insurance policy should provide coverage in the amount of \$2,000,000 each claim and \$2,000,000 annual aggregate. The insurance policy must provide the protection stated for two years after completion of the work.

4. **Hold Harmless**

The Consultant will defend, indemnify and hold harmless the City and its officers and employees from all liabilities, claims, damages, costs, judgments, lawsuits and expenses, including court costs and reasonable attorney's fees regardless of the Consultant's insurance coverage, arising directly from any negligent act or omission of the Consultant, its employees, agents, by any subcontractor or sub-consultant, and by any employees of the sub-contractors and sub-consultants of the Consultant, in the performance of work and delivery of services provided by or through this Contract or by reason of the failure of the Consultant to perform, in any respect, any of its obligations under this Contract.

The City will defend, indemnify and hold harmless the Consultant and its employees from all liabilities, claims, damages, costs, judgments, lawsuits and expenses including court costs and reasonable attorney's fees arising directly from the negligent acts and omissions of the City by reason of the failure of the City to perform its obligations under this Contract. The provisions of the Minnesota Statutes, Chapter 466 shall apply to any tort claims brought against the City as a result of this Contract.

Except as provided in the section titled Data Practices, neither party will be responsible for or be required to defend any consequential, indirect or punitive damage claims brought against the other party.

5. **Subcontracting**

The Consultant shall provide written notice to the City and obtain the City's authorization to subcontract any work or services to be provided to the City pursuant to this Contract. As required by Minnesota Statutes, Section 471.425, the Consultant shall pay all subcontractors for

subcontractor's undisputed, completed work, within ten (10) days after the Consultant has received payment from the City.

6. Assignment or Transfer of Interest

The Consultant shall not assign any interest in the Contract, and shall not transfer any interest in the same either by assignment or novation without the prior written approval of the City. The Consultant shall not subcontract any services under this Contract without prior written approval of the City Department Contract Manager designated herein.

7. General Compliance

The Consultant agrees to comply with all applicable Federal, State and local laws and regulations governing funds provided under the Contract.

8. Performance Monitoring

The City will monitor the performance of the Consultant against goals and performance standards required herein. Substandard performance as determined by the City will constitute non-compliance with this Contract. If action to correct such substandard performance is not taken by the Consultant within a reasonable period of time to cure such substantial performance after being notified by the City, Contract termination procedures will be initiated. All work submitted by Consultant shall be subject to the approval and acceptance by the City Department Contract Manager designated herein. The City Department Contract Manager designated herein shall review each portion of the work when certified as complete and submitted by the Consultant and shall inform the Consultant of any apparent deficiencies, defects, or incomplete work, at any stage of the project.

9. Prior Uncured Defaults

Pursuant to Section 18.115 of the City's Code of Ordinances, the City may not contract with persons or entities that have defaulted under a previous contract or agreement with the City and have failed to cure the default.

10. Independent Consultant

Nothing contained in this Contract is intended to, or shall be construed in any manner, as creating or establishing the relationship of employer/employee between the parties. The Consultant shall at all times remain an independent Consultant with respect to the work and/or services to be performed under this Contract. Any and all employees of Consultant or other persons engaged in the performance of any work or services required by Consultant under this Contract shall be considered employees or subcontractors of the Consultant only and not of the City; and any and all claims that might arise, including Worker's Compensation claims under the Worker's Compensation Act of the State of Minnesota or any other state, on behalf of said employees or other persons while so engaged in any of the work or services to be rendered or provided herein, shall be the sole obligation and responsibility of the Consultant.

11. Accounting Standards

The Consultant agrees to maintain the necessary source documentation and enforce sufficient internal controls as dictated by generally accepted accounting practices (GAAP) to properly account for expenses incurred under this Contract.

12. Retention of Records

The Consultant shall retain all records pertinent to expenditures incurred under this Contract in a legible form for a period of six years commencing after the later of contract close-out or resolution of all audit findings. Records for non-expendable property acquired with funds under this Contract shall be retained for six years after final disposition of such property.

13. Data Practices

The Consultant agrees to comply with the Minnesota Government Data Practices Act (Minnesota Statutes, Chapter 13) and all other applicable state and federal laws relating to data privacy or confidentiality. The Consultant and any of the Consultant's sub-consultants or sub-contractors retained to provide services under this Contract shall comply with the Act and be subject to penalties for non-compliance as though they were a "governmental entity." The Consultant must immediately report to the City any requests from third parties for information relating to this Contract. The City agrees to promptly respond to inquiries from the Consultant concerning data requests. The Consultant agrees to hold the City, its officers, and employees harmless from any claims resulting from the Consultant's unlawful disclosure or use of data protected under state and federal laws.

All Proposals shall be treated as non-public information until the Proposals are opened for review by the City. At that time, the names of the responders become public data. All other data is private or non-public until the City has completed negotiating the Contract with the selected Consultant(s). At that time, the proposals and their contents become public data under the provisions of the Minnesota Government Data Practices Act, Minnesota Statutes, Chapter 13 and as such are open for public review.

14. Inspection of Records

Pursuant to Minnesota Statutes, Section 16C.05, all Consultant payroll and expense records with respect to any matters covered by this Contract shall be made available to the City and the State of Minnesota, Office of the State Auditor, or their designees upon notice, at any time during normal business hours, as often as the City deems necessary, to audit, examine, and make excerpts or transcripts of all relevant data.

15. Living Wage Ordinance

The Consultant may be required to comply with the "[Minneapolis Living Wage and Responsible Public Spending Ordinance](http://www.minneapolismn.gov/www/groups/public/@finance/documents/webcontent/convert_255695.pdf)" (http://www.minneapolismn.gov/www/groups/public/@finance/documents/webcontent/convert_255695.pdf), Chapter 38 of the City's Code of Ordinances (the "Ordinance"). Unless otherwise exempt from the ordinance as provided in Section 38.40 (c), any City contract for services valued at \$100,000 or more or any City financial assistance or subsidy valued at \$100,000 or more will be subject to the Ordinance's requirement that the Consultant and its subcontractors pay their employees a "living wage" as defined and provided for in the Ordinance.

16. Applicable Law

The laws of the State of Minnesota shall govern all interpretations of this Contract, and the appropriate venue and jurisdiction for any litigation which may arise hereunder will be in those courts located within the County of Hennepin, State of Minnesota, regardless of the place of business, residence or incorporation of the Consultant.

17. Conflict and Priority

In the event that a conflict is found between provisions in this Contract, the Consultant's Proposal or the City's Request for Proposals, the provisions in the following rank order shall take precedence: 1) Contract; 2) Proposal; and last 3) Request for Proposals (only for Contracts awarded using RFP).

18. Travel

If travel by the Consultant is allowable and approved for this Contract, then Consultant travel expenses shall be reimbursed in accordance with the City's [Consultant Travel Reimbursement Conditions](http://www.minneapolismn.gov/www/groups/public/@finance/documents/webcontent/wcms1p-096175.pdf) (<http://www.minneapolismn.gov/www/groups/public/@finance/documents/webcontent/wcms1p-096175.pdf>).

19. Billboard Advertising

City Code of Ordinance 544.120, prohibits the use of City and City-derived funds to pay for billboard advertising as a part of a City project or undertaking.

20. Conflict of Interest/Code of Ethics

Pursuant to Section 15.250 of the City's Code of Ordinances, both the City and the Consultant are required to comply with the City's Code of Ethics. Chapter 15 of the Code of Ordinances requires City officials and the Consultant to avoid any situation that may give rise to a "conflict of interest." A "conflict of interest" will arise if Consultant represents any other party or other client whose interests are adverse to the interests of the City.

As it applies to the Consultant, the City's Code of Ethics will also apply to the Consultant in its role as an "interested person" since Consultant has a direct financial interest in this Agreement. The City's Code of Ethics prevents "interested persons" from giving certain gifts to employees and elected officials.

21. Termination, Default and Remedies

The City may cancel this Contract for any reason without cause upon thirty (30) days' written notice. Both the City and the Consultant may terminate this Contract upon sixty (60) days' written notice if either party fails to fulfill its obligations under the Contract in a proper and timely manner, or otherwise violates the terms of this Contract. The non-defaulting party shall have the right to terminate this Contract, if the default has not been cured after ten (10) days' written notice or such other reasonable time period to cure the default has been provided. If termination shall be without cause, the City shall pay Consultant all compensation earned to the date of termination. If the termination shall be for breach of this Contract by Consultant, the City shall pay Consultant all

compensation earned prior to the date of termination minus any damages and costs incurred by the City as a result of the breach. If the Contract is canceled or terminated, all finished or unfinished documents, data, studies, surveys, maps, models, photographs, reports or other materials prepared by the Consultant under this Contract shall, at the option of the City, become the property of the City, and the Consultant shall be entitled to receive just and equitable compensation for any satisfactory work completed on such documents or materials prior to the termination.

Notwithstanding the above, the Consultant shall not be relieved of liability to the City for damages sustained by the City as a result of any breach of this Contract by the Consultant. The City may, in such event, withhold payments due to the Consultant for the purpose of set-off until such time as the exact amount of damages due to the City is determined. The rights or remedies provided for herein shall not limit the City, in case of any default by the Consultant, from asserting any other right or remedy allowed by law, equity, or by statute. The Consultant has not waived any rights or defenses in seeking any amounts withheld by the City or any damages due the Consultant.

22. Ownership of Materials

All finished or unfinished documents, data, studies, surveys, maps, models, photographs, reports or other materials resulting from this Contract shall become the property of the City upon the City's payment for and final approval of the final report or upon payment and request by the City at any time before then. The City at its own risk, may use, extend, or enlarge any document produced under this Contract without the consent, permission of, or further compensation to the Consultant.

23. Intellectual Property

All Work produced by the Consultant under this Contract is classified as "work for hire" and upon payment by the City to the Consultant will be the exclusive property of the City and will be surrendered to the City immediately upon completion, expiration, or cancellation of this Contract. "Work" covered includes all reports, notes, studies, photographs, designs, drawings, specifications, materials, tapes or other media and any databases established to store or retain the Work. The Consultant may retain a copy of the work for its files in order to engage in future consultation with the City and to satisfy professional records retention standards. The Consultant represents and warrants that the Work does not and will not infringe upon any intellectual property rights of other persons or entities.

Each party acknowledges and agrees that each party is the sole and exclusive owner of all right, title, and interest in and to its services, products, software, source and object code, specifications, designs, techniques, concepts, improvements, discoveries and inventions including all intellectual property rights thereto, including without limitations any modifications, improvements, or derivative works thereof, created prior to, or independently, during the terms of this Contract. This Contract does not affect the ownership of each party's pre-existing, intellectual property. Each party further acknowledges that it acquires no rights under this Contract to the other party's pre-existing intellectual property, other than any limited right explicitly granted in this Contract.

24. Equal Benefits Ordinance

Minneapolis Code of Ordinances, Section 18.200, relating to equal benefits for domestic partners, applies to each Consultant and subcontractor with 21 or more employees that enters into a "contract", as defined by the ordinance that exceeds \$100,000. The categories to which the ordinance applies are

personal services; the sale or purchase of supplies, materials, equipment or the rental thereof; and the construction, alteration, repair or maintenance of personal property. The categories to which the ordinance does not apply include real property and development contracts.

Please be aware that if a “contract”, as defined by the ordinance, initially does not exceed \$100,000, but is later modified so the Contract does exceed \$100,000, the ordinance will then apply to the Contract. A complete text of the ordinance is available at: http://www.minneapolismn.gov/www/groups/public/@finance/documents/webcontent/convert_261694.pdf

It is the Consultant’s and subcontractor’s responsibility to review and understand the requirements and applicability of this ordinance.

25. City Ownership and Use of Data

The City has adopted an Open Data Policy (“Policy”). The City owns all Data Sets as part of its compliance with this Policy. Data Sets means statistical or factual information: (a) contained in structural data sets; and (b) regularly created or maintained by or on behalf of the City or a City department which supports or contributes to the delivery of services, programs, and functions. The City shall not only retain ownership of all City Data Sets, but also all information or data created through the City’s use of the software and /or software applications licensed by the Consultant (or any subcontractor of sub-consultant of the Consultant) to the City.

The City shall also retain the right to publish all data, information and Data Sets independently of this Contract with the Consultant and any of Consultant’s subcontractors or sub-consultants involved in providing the Services, using whatever means the City deems appropriate.

The City shall have the right to access all data, regardless of which party created the content and for whatever purpose it was created. The Consultant shall provide bulk extracts that meet the public release criteria for use in and within an open data solution. The Consultant shall permit and allow free access to City information and Data Sets by using a method that is automatic and repeatable. The Data Sets shall permit classification at the field level in order to exclude certain data.

26. Audit Requirements for Cloud-Based Storage of City Data

If the Consultant’s services include the storage of City data using a cloud based solution, then the Consultant agrees to secure the data as though it were “private data” as defined in Minnesota Statutes, Chapter 13. The Consultant shall provide the City with the annual copy of the Federal Standards for the Statement on Standards for Attestation Engagements (SSAE) No. 16 or the International Standard on Assurance Engagements (ISAE) No. 3402. The Consultant agrees to provide a .pdf copy to the City’s Contract Manager, upon the Consultant’s receipt of the audit results.

27. Small & Underutilized Business Program (SUBP) Requirements

The City of Minneapolis policy is to provide equal opportunities to all businesses, with an effort to redress discrimination in the City’s marketplace and in public contracting against Minority-Owned Business Enterprises (MBEs) and Women-Owned Business Enterprises (WBEs). The SUBP requirements detailed in the Minneapolis Code of Ordinances Chapter 423.50, apply to any

professional or technical service contract in excess of \$100,000. SUBP goals are set on contracts based on project scope, subcontracting opportunities, and availability of qualified MBEs/WBEs.

There are no specific SUBP goals on this RFP. However, if there are subcontracting opportunities later identified, Consultant shall inform the Contract Administrator to obtain authorization as stated under “Subcontracting” in the Terms and Conditions. Consultant shall take action to afford MBEs and WBEs full and fair opportunities to compete on this contract and resulting subcontracts. To locate certified MBEs and WBEs under the Minnesota Uniform Certification Program (MnUCP), please visit <http://mnucp.metc.state.mn.us/> or contact contractcompliance@minneapolismn.gov.

ATTACHMENT B

SCOPE OF SERVICES

SERVICE DESCRIPTION:

The Fire Alarm Inspection, Testing & Maintenance service contract encompasses the code required visual inspections, functional tests and general maintenance and upkeep of the fire alarm and detection system installed at the Minneapolis City Hall, Courthouse, and Adult Detention Center (ADC) at 350 S Fifth St. in Minneapolis, MN. Testing services include integrated life safety systems (i.e. elevator recall, stair pressurization, smoke exhaust, etc.). The purpose for periodic inspection, testing and maintenance is to assure that any damages or changes that might affect the system operability are identified and repaired to ensure continued system effectiveness. The inspection and testing of the fire alarm and detection system will be conducted each year to meet the requirements set forth in the 2015 Minnesota State Fire Code (MSFC), NFPA 72 National Fire Alarm and Signaling Code 2013 Edition, as well as other applicable local, state, and federal statutes.

This service contract is under the authority of the Municipal Building Commission (MBC).

EXISTING SITE CONDITIONS:

The Minneapolis City Hall and Courthouse Building was originally built between 1887 and 1906 and has been updated and maintained. The building occupies an entire city block, grossing approximately 800,000 square feet. The construction of the building is a mixture of Type I-A and Type II-B, as defined in the 2015 Minnesota State Building Code (MSBC). The Minneapolis City Hall, Courthouse and ADC is classified as mixed use, including each Group A (Assembly), Group B (Business), Group F (Factory/Industrial), Group I (Institutional), and Group S (Storage). The building is currently protected by a Gamewell-FCI E3 fire alarm control panel. The fire alarm system includes an emergency voice alarm communications system. Devices installed include remote annunciators, smoke detectors, heat detectors, duct smoke detectors, speakers, strobes, combination speaker-strobes, and similar.

SERVICE OBJECTIVES:

The current Fire Alarm Inspection, Testing & Maintenance service contract for the Minneapolis City Hall, Courthouse, and ADC will expire at the end of the calendar year. It is the objective of this RFP to assure continued Fire Alarm Inspection, Testing & Maintenance by means of an executed contract for services to be provided for 3 years beginning on January 1, 2017 and ending on December 31, 2019.

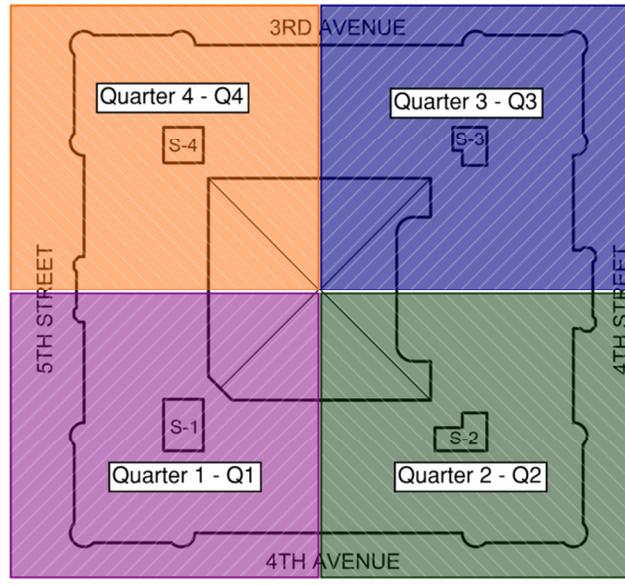
SCOPE OF WORK:

Fire Alarm Inspection and Testing

Fire Alarm Inspection and Testing services will be provided quarterly. Inspection and testing conducted shall follow the provided Fire Alarm Systems Procedure and Smoke Removal and Ventilation Systems Procedure. Quarterly scheduled fire alarm inspection and testing will include ¼ of the Minneapolis City Hall /Courthouse and the entire ADC. Testing will be performed as a

continuation of the current testing schedule, with quarter one through quarter four (Q1-Q4) testing resulting in an entire system inspection annually for all areas outside the ADC. The ADC testing will be completely tested and inspected each quarter. Testing for each quarter will be determined by areas associated with Shaft 1-4. A plan view of the building testing areas, the associated shaft, and their respective quarter for testing is provided in Figure 1 below.

Figure 1: Quarterly Testing Plan



Fire Alarm Inspection and Testing services will be conducted in the ADC quarterly. Inspection and Testing services will be conducted in areas other than the ADC according to the following schedule:

1. Quarter 1 – Shaft 1 – testing conducted in the month of March, final testing report submitted by April 1
2. Quarter 2 – Shaft 2 – testing conducted in the month of June, final testing report submitted by July 1
3. Quarter 3 – Shaft 3 – testing conducted in the month of September, final testing report submitted by October 1
4. Quarter 4 – Shaft 4 – testing conducted in the month of December, final testing report submitted by January 1

Fire Alarm Inspection and Testing services other than notification appliance testing shall be conducted during normal business hours. Notification appliance circuit testing shall be conducted prior to 6:00 am.

Fire Alarm Inspection and Testing services to be provided will include all requirements set forth in NFPA 72 (2013), including the reporting requirements specified therein. Inspection and testing services are provided according to the schedule above. Upon the completion of all four quarters of testing in a calendar year, inspection and testing services will have been provided to include:

1. Annual - Visual inspection of all equipment to verify normal conditions. Equipment to be visually inspected is to include control panels, mass notification panels, remote annunciators, NAC extenders, and remote power supplies.

2. Annual – Visual inspection of all initiation and notification devices. Devices to be visually inspected is to include smoke detectors, duct detectors, heat detectors, manual pull stations, sprinkler alarm and supervisory switches, speakers, strobes, and combination speaker – strobes.
3. Annual – Functional testing of all equipment to verify correct operation. Equipment to be function tested is to include control panels, mass notification panels, remote annunciators, NAC extenders, remote power supplies, smoke detectors, duct detectors, heat detectors, manual pull stations, sprinkler alarm and supervisory switches, speakers, strobes, and combination speaker – strobes.
 - a. Function testing includes smoke detector sensitivity testing. Sensitivity testing shall be provided by either FACP sensitivity report or field testing by means of Trutest device (or similar).
4. Quarterly – Function testing of all smoke control systems to verify correct operation (manual and automatic activation). Equipment to be function tested is to include smoke control panel (i.e. manual activation switches, position status LEDs, etc.), fan activation control relays, fan/damper status monitoring switches and other system specific status monitoring devices.

In addition to Inspection and Testing services, smoke detector cleaning shall be provided as part of the inspection and testing of the fire alarm system. With the exception of the ADC, smoke detector head cleaning shall be provided on an as needed basis throughout the building. All ADC smoke detector heads shall be cleaned on a quarterly basis.

Fire Sprinkler Testing Assistance

The Contractor shall provide one (1) technician for up to four (4) days to assist with fire sprinkler testing.

Fire Alarm Maintenance

Maintenance services to be provided according to the proposal price provided. Maintenance services will include all system required maintenance to ensure normal system operation. Maintenance services are to include:

1. General system maintenance including FACP, NAC extender panel, and remote power supply battery replacement.
2. General system service including the replacement of devices that fail function testing, manufacturer recommended FACP firmware updates, wiring troubleshooting and repair (i.e. ground faults, shorts, etc.), and the repair of all other system troubles that are required to maintain normal system operation.

CONTRACTOR RESPONSIBILITIES:

The Contractor shall be responsible for field verifying all quantities, dimensions, conditions, and variables related to the scope of services herein. Other contractor responsibilities include:

1. Licensing – contractor shall be licensed as required by the State of Minnesota to perform the scope of services herein.

2. Certifications – contractor shall be a certified Gamewell-FCI distributor. Additionally, the contractor shall be Inspection & Testing for Fire Alarm Systems NICET certified to a minimum of Level II (or equivalent).
3. Subcontractors – subcontractors are not allowed to perform work under this RFP.
4. Background check – contractor shall coordinate criminal history check and drug screening tests on all employees performing work under this RFP. All workers must pass the City of Minneapolis and Hennepin County background checks and obtain a City ID badge prior to working in the building. Allow 6-8 weeks for the background check and 1 week for the ID badge.
5. Identification – contractor shall provide uniforms and ID badges for all employees performing work under this RFP.
6. Professionalism – contractor and their employees shall conduct themselves in a professional manner and interact with MBC staff, tenants, and visitors in a courteous and proper business manner.
7. Coordination – contractor shall be responsible for all inspection, testing, and maintenance related coordination. Coordination includes, but is not limited to:
 - a. Scheduling testing with other trades (i.e. elevator, sprinkler, etc.).
 - b. Communications with MBC personnel to verify test dates and assure proper building occupant notification prior to testing.
 - c. One week notice of testing to confirm MBC or ADC escort availability in ADC.
 - d. Scheduling smoke control quarterly testing with MBC personnel.
8. Equipment – contractor is responsible for providing, at their own expense, ladders, lifts, and other related equipment required to perform work under this RFP.
9. Permits – it is the responsibility of the contractor to obtain all permits required for inspection, testing, and maintenance services provided under this RFP.

RFP FORMS, DOCUMENTS, SPECIFICATIONS, AND DRAWINGS:

Plans will not be provided to the contractor as part of this RFP. However, plans will be made available for review onsite at the time of the pre-proposal conference and site review. Upon request, arrangements can be made for additional time onsite prior to proposal deadline for further site survey and plan review. Following the selection, plans will be provided to the awarded contractor.

As part of this RFP, fire alarm initiation device counts (i.e. smoke detectors, duct detectors, manual pull stations, etc.) are provided below. Notification appliance and control device counts are not provided. It is the contractor's responsibility to verify device count accuracy prior to bid submission. Devices are provided as listed: a total for each of the four building quadrants (not including the ADC) as well as a total for the ADC.

1. Quarter 1 – Shaft 1 – Initiation devices, 130
2. Quarter 2 – Shaft 2 – Initiation devices, 130
3. Quarter 3 – Shaft 3 – Initiation devices, 156
4. Quarter 4 – Shaft 4 – Initiation devices, 200
5. ADC – Initiation devices, 525

The device counts above are provided as recorded in previously submitted inspection and testing reports. A

copy of each the 2015 4th Quarter ADC and MBC Report of Inspection and Testing is provided as part of this attachment for reference.

DELIVERABLES:

A record of each inspection, test, or service shall be maintained as required in the 2015 Minnesota State Fire Code. Documentation shall be included in the form of a system record of testing and inspection (with applicable supplementary record included), a complete list of devices tested, a completed testing checklists, and a list of deficiencies. The System Record of Inspection and Testing, Fire Alarm Systems Testing Checklist, and Smoke Removal and Ventilation Systems Testing Checklists to be submitted are included in this attachment. Records shall be provided to the owner each quarter for both the ADC and the MBC shaft tested.

Copies of each test and inspection shall be forwarded to the applicable local, state, or federal authorities having jurisdiction upon completion. Documentation shall be provided in a medium acceptable to the AHJ (i.e. printed, PDF, other). Further, a PDF copy of each inspection, test, or service shall be forwarded to MBC within two weeks of testing completion.

PROPOSAL PRICES:

Proposers are advised that the proposal fee shall be all inclusive and fully burdened to accomplish the service as specified in this RFP. Prices are to include all applicable taxes and fees (please note that the MBC is tax exempt). Proposers shall provide pricing via submission of the MBC / ADC Fire Alarm Inspection, Testing & Maintenance Price Sheet provided as part of this attachment.

Pricing shall be provided in the following format:

1. Cost per quarter for quarterly Fire Alarm Inspection and Testing
2. Cost per quarter for quarterly ADC Fire Alarm Inspection and Testing
3. Cost per quarter for fire sprinkler testing assistance
 - a. 4 days per quarter, 1 technician shall be assumed
4. Hourly rates (regular and after hours) for Fire Alarm Maintenance
5. Materials and parking mark-up percentage

FIRE ALARM SYSTEMS TESTING PROCEDURE

Testing and Inspections for
Municipal Building Commission
Life Safety Systems - Inspection, Testing and Maintenance Procedures

Fire Alarm Systems

Inspection, Testing, and Maintenance of Fire Alarm Systems – General Requirements

- ❖ Inspection testing and maintenance of fire alarm systems shall be performed by a licensed fire alarm contractor and shall be in accordance with the currently adopted edition of NFPA 72, Chapter 14. Reference Minnesota State Fire Code 901.6.
- ❖ Items to be tested include the following list (see checklist for testing frequencies):
 - (1) Alarm Notification Appliances
 - (2) Batteries
 - (3) Control Equipment
 - (4) Control Unit Trouble Signal
 - (5) Emergency Voice Alarm Communication Equipment
 - (6) Remote Annunciators
 - (7) Initiating Devices
 - (8) Interface Equipment Including Security and Smoke Control

- END -

**SMOKE REMOVAL AND VENTILATION SYSTEMS
TESTING PROCEDURE**

Testing and Inspections for
Municipal Building Commission
Life Safety Systems - Inspection, Testing and Maintenance Procedures

Smoke Removal and Ventilation Systems

Testing – General Requirements

Testing and maintenance requirements for smoke control systems are described under 909.20 of the 2007 Minnesota State Fire Code (MSFC). Specifically, routine maintenance and operational testing are required to ensure “to a reasonable degree that the system is capable of controlling smoke for the duration required.”

- ❖ For dedicated smoke control systems, MSFC 909.20.4 requires the smoke control sequence to be operationally tested at least semi-annually.
- ❖ For non-dedicated smoke control systems, MSFC 909.20.5 requires the smoke control sequence to be operationally tested at least annually.

Systems Requiring Testing (and type of system)

- ❖ Elevator Ventilation (dedicated)
- ❖ ADC Smoke Exhaust (non-dedicated)
- ❖ Stair D-2 - Stair Pressurization (dedicated)

Testing – Specific Requirements

Ongoing testing procedures should incorporate the following aspects and consideration:

- ❖ Operation of the smoke control system for multiple control sequences
 - Automatic activation via spot smoke detection system
 - Automatic activation via sprinkler water flow alarm (as applicable)
 - Manual activation via keyed switch
- ❖ Confirmation of proper operation of the smoke control systems should include all smoke-control-related components and related systems including:
 - Smoke control fans (exhaust and supply, as applicable)
 - Smoke control – related dampers
 - Normal building HVAC equipment that has a smoke control function, as applicable (i.e. AHU’s, ERU’s, etc.)
 - Normal building HVAC equipment required to shut-down in smoke control mode, as applicable
 - Other smoke control components, as applicable
- ❖ Record maximum response time for each smoke control system.
- ❖ Confirm proper status monitoring and control (i.e. ON/OFF/AUTO) of smoke control system at the Smoke Control Panel(s)
- ❖ Operation of the smoke control system under standby power conditions
 - Includes confirmation of standby power supply to smoke control system components
 - Includes confirmation of maximum transfer time from primary building power to standby power does not exceed 60 seconds
- ❖ All manufacturer’s instructions for ongoing maintenance and testing for smoke and ventilation system components shall be followed, in addition to standard industry practice when conducting the above tests. Further, the above test(s) shall be conducted

Testing and Inspections for
Municipal Building Commission
Life Safety Systems - Inspection, Testing and Maintenance Procedures

by personnel familiar with the mechanical system in the building and in such a manner so as to prevent physical damage to equipment.

Testing – Recordkeeping

- ❖ Per MSFC 909.20.2, a written record of smoke control testing and maintenance shall be maintained on the premises. The written record shall include the date of the maintenance, identification of the service personnel, notification of any unsatisfactory condition, and the corrective action taken, including parts replaced.

- END -

**2015 4TH QUARTER ADC
REPORT OF INSPECTION AND TESTING**

REPORT OF INSPECTION AND TESTING

Date of Inspection: 12/30/15 Technician: _____ Job #: _____

Inspection Type: Quarterly Semiannual Annual

PROPERTY INFORMATION

MONITORING ORGANIZATION

Name: ADULT DETENTION CENTER FIRE ALARM
Address: 350 S 5TH ST
MINNEAPOLIS MN
Contact: DEPT. JIM SELLWOOD , ROYCE WEINS (MBC)
Phone: 612 466 1662 612 596 9522

Name: MBC SECURITY
Phone: _____
Account #: NA
Password: _____
Means of Transmission: Remote Display

SYSTEM #1 INFORMATION

Control Unit: GAM FCI
Model #: E3
Circuit Style: 4, Y, CLASS B
Notification Ckts: NA

Initiating Ckts: 14
Firmware Rev: 2.7
Software Rev: 2.3
Date of Last Update: NA

SYSTEM #2 INFORMATION

Control Unit: GAM FCI
Model #: FF8 NAC PANELS (4)
Circuit Style: Y
Notification Ckts: 16

Initiating Ckts: NA
Firmware Rev: NA
Software Rev: NA
Date of Last Update: NA

SYSTEM #3 INFORMATION

Control Unit: NA
Model #: _____
Circuit Style: _____
Notification Ckts: _____

Initiating Ckts: _____
Firmware Rev: _____
Software Rev: _____
Date of Last Update: _____

SYSTEM POWER SUPPLIES

Primary Power Location: SHAFT 3 GROUND FL ELECTRIC ROOM
Disconnecting Means Location: SHAFT 3 GROUND FL ELECTRIC ROOM
Nominal Voltage: 120 Amps: 20 Overcurrent Protection: BREAKER

Secondary Power Loc: FACP, NACS, GENERATOR
Battery Type (if applicable): SEALED 12V
In Stand By Mode (Hours): 24 In Alarm Mode (Minutes): 5

NOTIFICATIONS MADE PRIOR TO TESTING

Monitoring Organization	Contact: <u>MBC</u>	Time: <u>12/30/15</u>
Building Management	Contact: <u>MBC / ADC</u>	Time: <u>12/30/15</u>
Building Occupants	Contact: <u>ADC</u>	Time: <u>12/30/15</u>
AHJ	Contact: _____	Time: _____
Other (if required)	Contact: <u>MBC SECURITY</u>	Time: <u>12/30/15</u>

CONTROL UNIT AND RELATED EQUIPMENT

Description	Visual	Functional	N/A	Comments
Control Unit	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>Gamewell/FCI E3</u>
Lamps/LEDs/LCDs	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	_____
Fuses	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Disconnect Switches	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Ground Fault Monitoring	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Supervision	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	_____
Local Annunciator	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>LCD E3, NGA</u>
Remote Annunciators	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>LCD 7100 (10)</u>
Remote Power Panels	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>FF8 (4)</u>

SECONDARY POWER

Description	Visual	Functional	N/A	Comments
Battery Condition	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Load Voltage	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Fuses	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Discharge Test	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	_____
Charger Test	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	_____
Remote Panel Batteries	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____

ANNUNCIATORS

This System Does Not Have Annunciator(s)

Annunciator 1: KIOSK

Annunciator 2: ADC QUADS, MAIN CONTROLS , (10)

Annunciator 3: FACP , LCD / NGA

ALARM AND SUPERVISORY INITIATING DEVICES

Description	Qty	Visual	Functional	N/A	Comments
Manual Station	11	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	All Devices Tested, Double Action Covers Added
Smoke Det - Ion		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Smoke Det - Photo	492	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Cell Detectors Cleaned and Tested, All Devices Tested
Duct Det - Ion		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Duct Det - Photo	21	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	All Devices Tested
Heat Det - Fixed		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Heat Det - ROR	1	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Heat Det - Combo		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Beam Detector		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Radiant (Flame) Det		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Gas Detector		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Water Flow Switch		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Tested by Sprinkler Contractor
Tamper Switch		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Tested by Sprinkler Contractor
Elevator Recall		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Not tested Quarterly
Door Holders	ok	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	4th and 5th Floors
Abort Switch		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Key Disable		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Solenoid		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Other (Specify in Comments)	CP	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	RCE Control Points HVAC, Remote Displays
Other (Specify in Comments)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Other (Specify in Comments)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Other (Specify in Comments)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Alarm verification feature is: Disabled Enabled

NOTIFICATION APPLIANCES

Description	Qty	Visual	Functional	N/A	Comments
Horns		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Strobes	ok	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Shaft 4 4th and 5th
Horn/Strobes		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Chimes		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Bells		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Speakers		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Speaker/Strobes	ok	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Shaft 4 4th and 5th
Other (Specify in Comments)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Other (Specify in Comments)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

TWO-WAY EMERGENCY COMMUNICATIONS EQUIPMENT

Description	Visual	Functional	N/A	Comments
Phone Set	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	_____
Phone Jacks	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	_____
Off-Hook Indicator	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	_____
Amplifiers	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	12/30/15
Tone Generators	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	12/30/15
Call In Signal	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	_____
Elevator Comm. Sys	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	_____

SYSTEM RESTORED TO NORMAL OPERATION

Description	Yes	No	Time	Comments
Alarm Signal	<input checked="" type="checkbox"/>	<input type="checkbox"/>	_____	12/30/15
Alarm Restoration	<input checked="" type="checkbox"/>	<input type="checkbox"/>	_____	12/30/15
Supervisory Signal	<input checked="" type="checkbox"/>	<input type="checkbox"/>	_____	12/30/15
Supervisory Restoration	<input checked="" type="checkbox"/>	<input type="checkbox"/>	_____	12/30/15
Trouble Signal	<input checked="" type="checkbox"/>	<input type="checkbox"/>	_____	12/30/15
Trouble Restoration	<input checked="" type="checkbox"/>	<input type="checkbox"/>	_____	12/30/15

ADDITIONAL COMMENTS

4th Quarter Fire Alarm Test
 Bad Smoke Detector Replaced in Quad 2 cell1

DEFICIENCIES

One device needs updating on panel description

THIS TESTING WAS PERFORMED IN ACCORDANCE WITH APPLICABLE CODES AND STANDARDS

Tech Signature: _____
 Printed Name: _____
 Date: 12/30/15

Customer Signature: _____
 Printed Name: ROYCE WEINS , JIM SELLWOOD
 Date: 12/30/15

**2015 4TH QUARTER MBC
REPORT OF INSPECTION AND TESTING**

REPORT OF INSPECTION AND TESTING

Date of Inspection: 12/31/15 Technician: _____ Job #: _____

Inspection Type: Quarterly Semiannual Annual

PROPERTY INFORMATION

Name: Municipal Building Fire Alarm
Address: 350 S 5TH ST
MINNEAPOLIS MN
Contact: ROYCE WEINS (MBC)
Phone: 612 466 1662 612 596 9522

MONITORING ORGANIZATION

Name: MBC SECURITY
Phone: _____
Account #: _____
Password: _____
Means of Transmission: _____

SYSTEM #1 INFORMATION

Control Unit: GAM FCI
Model #: E3
Circuit Style: 4, Y, CLASS B
Notification Ckts: 22 Audio

Initiating Ckts: 19
Firmware Rev: 2.7
Software Rev: 2.3
Date of Last Update: NA

SYSTEM #2 INFORMATION

Control Unit: GAM FCI
Model #: FF8 NAC PANELS (Shafts)
Circuit Style: Y
Notification Ckts: 32

Initiating Ckts: NA
Firmware Rev: NA
Software Rev: NA
Date of Last Update: NA

SYSTEM #3 INFORMATION

Control Unit: NA
Model #: _____
Circuit Style: _____
Notification Ckts: _____

Initiating Ckts: _____
Firmware Rev: _____
Software Rev: _____
Date of Last Update: _____

SYSTEM POWER SUPPLIES

Primary Power Location: SHAFT 3 GROUND FL ELECTRIC ROOM
Disconnecting Means Location: SHAFT 3 GROUND FL ELECTRIC ROOM
Nominal Voltage: 120 Amps: 20 Overcurrent Protection: BREAKER

Secondary Power Loc: FACP, NACS in Shafts, GENERATOR
Battery Type (if applicable): SEALED 12V
In Stand By Mode (Hours): 24 In Alarm Mode (Minutes): 15

NOTIFICATIONS MADE PRIOR TO TESTING

Monitoring Organization	Contact: <u>MBC</u>	Time: <u>12/2015</u>
Building Management	Contact: <u>MBC</u>	Time: <u>12/2015</u>
Building Occupants	Contact: <u>MBC/ADC</u>	Time: <u>12/2015</u>
AHJ	Contact: _____	Time: <u>12/2015</u>
Other (if required)	Contact: <u>MBC SECURITY</u>	Time: <u>12/2015</u>

CONTROL UNIT AND RELATED EQUIPMENT

Description	Visual	Functional	N/A	Comments
Control Unit	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>12/2015</u>
Lamps/LEDs/LCDs	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	_____
Fuses	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Disconnect Switches	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Ground Fault Monitoring	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Supervision	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	_____
Local Annunciator	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>LCD E3, NGA</u>
Remote Annunciators	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>LCD 7100 (3) LCD E3 (1)</u>
Remote Power Panels	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>FF8 (16)</u>

SECONDARY POWER

Description	Visual	Functional	N/A	Comments
Battery Condition	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Load Voltage	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Fuses	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Discharge Test	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Charger Test	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	_____
Remote Panel Batteries	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	_____

ANNUNCIATORS

This System Does Not Have Annunciator(s)

Annunciator 1: KIOSK

Annunciator 2: MAIN CONTROLS , (3)

Annunciator 3: FACP , LCD / NGA - MECC, LCD E3

ALARM AND SUPERVISORY INITIATING DEVICES

Description	Qty	Visual	Functional	N/A	Comments
Manual Station	6	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	OK
Smoke Det - Ion		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Smoke Det - Photo	156	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	OK
Duct Det - Ion		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Duct Det - Photo	35	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	OK
Heat Det - Fixed		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Heat Det - ROR		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Heat Det - Combo	3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	OK , INSPECTION
Beam Detector		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Radiant (Flame) Det		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Gas Detector		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Water Flow Switch		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Tested by Sprinkler Contractor
Tamper Switch		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Tested by Sprinkler Contractor
Elevator Recall		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Not tested Quarterly
Door Holders	NA	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Abort Switch		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Key Disable		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Solenoid		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Other (Specify in Comments)	CP	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Control Points RCE 95 - HVAC, Elev.
Other (Specify in Comments)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Other (Specify in Comments)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Other (Specify in Comments)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Alarm verification feature is: Disabled Enabled

NOTIFICATION APPLIANCES

Description	Qty	Visual	Functional	N/A	Comments
Horns		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Strobes	ok	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Not Functionally Tested Quarterly
Horn/Strobes		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Chimes		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Bells		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Speakers		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Speaker/Strobes	ok	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Not Functionally Tested Quarterly
Other (Specify in Comments)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Other (Specify in Comments)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

TWO-WAY EMERGENCY COMMUNICATIONS EQUIPMENT

Description	Visual	Functional	N/A	Comments
Phone Set	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	_____
Phone Jacks	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	_____
Off-Hook Indicator	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	_____
Amplifiers	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	12/2015
Tone Generators	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	12/2015
Call In Signal	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	_____
Elevator Comm. Sys	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	_____

SYSTEM RESTORED TO NORMAL OPERATION

Description	Yes	No	Time	Comments
Alarm Signal	<input checked="" type="checkbox"/>	<input type="checkbox"/>	_____	12/31/15
Alarm Restoration	<input checked="" type="checkbox"/>	<input type="checkbox"/>	_____	12/31/15
Supervisory Signal	<input checked="" type="checkbox"/>	<input type="checkbox"/>	_____	12/31/15
Supervisory Restoration	<input checked="" type="checkbox"/>	<input type="checkbox"/>	_____	12/31/15
Trouble Signal	<input checked="" type="checkbox"/>	<input type="checkbox"/>	_____	12/31/15
Trouble Restoration	<input checked="" type="checkbox"/>	<input type="checkbox"/>	_____	12/31/15

ADDITIONAL COMMENTS

4th Quarter Fire Alarm Test , Shaft 4 Area, System Tested OK

DEFICIENCIES

NA

THIS TESTING WAS PERFORMED IN ACCORDANCE WITH APPLICABLE CODES AND STANDARDS

Tech Signature: _____

Printed Name: _____

Date: 12/31/15

Customer Signature: _____

Printed Name: **ROYCE WEINS**

Date: 12/31/15

SYSTEM RECORD OF INSPECTION AND TESTING

SYSTEM RECORD OF INSPECTION AND TESTING

Inspection/Test Start Date/Time: _____ Inspection/Test Completion Date/Time: _____

Supplemental Form(s) Attached: Yes No

1. PROPERTY INFORMATION

Name of property: _____

Address: _____

Description of property: _____

Name of property representative: _____

Address: _____

Phone: _____ Fax: _____ E-mail: _____

2. TESTING AND MONITORING INFORMATION

Testing organization: _____

Address: _____

Phone: _____ Fax: _____ E-mail: _____

Monitoring organization: _____

Address: _____

Phone: _____ Fax: _____ E-mail: _____

Account number: _____ Phone line 1: _____ Phone line 2: _____

Means of transmission: _____

Entity to which alarms are retransmitted: _____ Phone: _____

3. DOCUMENTATION

Onsite location of the required record documents and site-specific software:

4. DESCRIPTION OF SYSTEM OR SERVICE

4.1 Control Unit

Manufacturer: _____ Model number: _____

4.2 Software Firmware

Firmware revision number: _____

4.3 System Power

4.3.1 Primary (Main) Power

Nominal voltage: _____ Amps: _____ Location: _____

Overcurrent protection type: _____ Amps: _____ Disconnecting means location:

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SYSTEM RECORD OF INSPECTION AND TESTING *(continued)*

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

4.3.2 Secondary Power

Type: _____ Location: _____

Battery type (if applicable): _____

Calculated capacity of batteries to drive the system: _____

In standby mode (hours): _____ In alarm mode (minutes): _____

5. NOTIFICATIONS MADE PRIOR TO TESTING

Monitoring organization Contact: _____ Time: _____

Building management Contact: _____ Time: _____

Building occupants Contact: _____ Time: _____

Authority having jurisdiction Contact: _____ Time: _____

Other, if required Contact: _____ Time: _____

6. TESTING RESULTS

6.1 Control Unit and Related Equipment

Description	Visual Inspection	Functional Test	Comments
Control unit	<input type="checkbox"/>	<input type="checkbox"/>	
Lamps/LEDs/LCDs	<input type="checkbox"/>	<input type="checkbox"/>	
Fuses	<input type="checkbox"/>	<input type="checkbox"/>	
Trouble signals	<input type="checkbox"/>	<input type="checkbox"/>	
Disconnect switches	<input type="checkbox"/>	<input type="checkbox"/>	
Ground-fault monitoring	<input type="checkbox"/>	<input type="checkbox"/>	
Supervision	<input type="checkbox"/>	<input type="checkbox"/>	
Local annunciator	<input type="checkbox"/>	<input type="checkbox"/>	
Remote annunciators	<input type="checkbox"/>	<input type="checkbox"/>	
Remote power panels	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	

6.2 Secondary Power

Description	Visual Inspection	Functional Test	Comments
Battery condition	<input type="checkbox"/>	<input type="checkbox"/>	
Load voltage	<input type="checkbox"/>	<input type="checkbox"/>	
Discharge test	<input type="checkbox"/>	<input type="checkbox"/>	
Charger test	<input type="checkbox"/>	<input type="checkbox"/>	
Remote panel batteries	<input type="checkbox"/>	<input type="checkbox"/>	

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SYSTEM RECORD OF INSPECTION AND TESTING *(continued)*

6. TESTING RESULTS *(continued)*

6.3 Alarm and Supervisory Alarm Initiating Device

Attach supplementary device test sheets for all initiating devices.

6.4 Notification Appliances

Attach supplementary appliance test sheets for all notification appliances.

6.5 Interface Equipment

Attach supplementary interface component test sheets for all interface components.

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

6.6 Supervising Station Monitoring

Description	Yes	No	Time	Comments
Alarm signal	<input type="checkbox"/>	<input type="checkbox"/>		
Alarm restoration	<input type="checkbox"/>	<input type="checkbox"/>		
Trouble signal	<input type="checkbox"/>	<input type="checkbox"/>		
Trouble restoration	<input type="checkbox"/>	<input type="checkbox"/>		
Supervisory signal	<input type="checkbox"/>	<input type="checkbox"/>		
Supervisory restoration	<input type="checkbox"/>	<input type="checkbox"/>		

6.7 Public Emergency Alarm Reporting System

Description	Yes	No	Time	Comments
Alarm signal	<input type="checkbox"/>	<input type="checkbox"/>		
Alarm restoration	<input type="checkbox"/>	<input type="checkbox"/>		
Trouble signal	<input type="checkbox"/>	<input type="checkbox"/>		
Trouble restoration	<input type="checkbox"/>	<input type="checkbox"/>		
Supervisory signal	<input type="checkbox"/>	<input type="checkbox"/>		
Supervisory restoration	<input type="checkbox"/>	<input type="checkbox"/>		



SYSTEM RECORD OF INSPECTION AND TESTING (continued)

7. NOTIFICATIONS THAT TESTING IS COMPLETE

Monitoring organization	Contact: _____	Time: _____
Building management	Contact: _____	Time: _____
Building occupants	Contact: _____	Time: _____
Authority having jurisdiction	Contact: _____	Time: _____
Other, if required	Contact: _____	Time: _____

8. SYSTEM RESTORED TO NORMAL OPERATION

Date: _____ Time: _____

9. CERTIFICATION

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

Signed: _____ Printed name: _____ Date: _____

Organization: _____ Title: _____ Phone: _____

Qualifications (refer to 10.5.3):

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

10.1 Acceptance by Owner or Owner's Representative:

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

Signed: _____ Printed name: _____ Date: _____

Organization: _____ Title: _____ Phone: _____



**MASS NOTIFICATION SYSTEM
SUPPLEMENTARY RECORD OF INSPECTION AND TESTING**

Inspection/Test Start Date/Time: _____ Inspection/Test Completion Date/Time: _____

Number of Supplemental Pages Attached: _____

1. PROPERTY INFORMATION

Name of property: _____

Address: _____

2. MASS NOTIFICATION SYSTEM

2.1 System Type

In-building MNS—combination

In-building MNS—stand alone Wide-area MNS Distributed recipient MNS

Other (specify): _____

2.2 System Features

Combination fire alarm/MNS MNS ACU only Wide-area MNS to regional national alerting interface

Local operating console (LOC) Direct recipient MNS (DRMNS) Wide-area MNS to DRMNS interface

Wide-area MNS to high-power speaker array (HPSA) interface In-building MNS to wide-area MNS interface

Other (specify): _____

3. IN-BUILDING MASS NOTIFICATION SYSTEM

3.1 Primary Power

Input voltage of MNS panel: _____ MNS panel amps: _____

3.2 Engine-Driven Generator This system does not have a generator.

Location of generator: _____

Location of fuel storage: Type of fuel: _____

3.3 Uninterruptible Power System This system does not have a UPS.

Equipment powered by a UPS system: _____

Location of UPS system: _____

Calculated capacity of UPS batteries to drive the system components connected to it:

In standby mode (hours): _____ In alarm mode (minutes): _____

3.4 Batteries

Location: _____ Type: _____

Nominal voltage: _____ Amp/hour rating: _____

Calculated capacity of batteries to drive the system:

In standby mode (hours): _____ In alarm mode (minutes): _____

Batteries are marked with date of manufacture.

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**MASS NOTIFICATION SYSTEM
SUPPLEMENTARY RECORD OF INSPECTION AND TESTING (continued)**

4. MASS NOTIFICATION EQUIPMENT TEST RESULTS

Description	Visual Inspection	Functional Test	Comments
Functional test			
Reset/power down test			
Fuses			
Primary power supply			
UPS power test			
Trouble signals			
Disconnect switches			
Ground-fault monitoring			
CCU security mechanism			
Prerecorded message content			
Prerecorded message activation			
Software backup performed			
Test backup software			
Fire alarm to MNS interface			
MNS to fire alarm interface			
In-building MNS to wide-area MNS			
MNS to direct recipient MNS			
Sound pressure levels Occupied <input type="checkbox"/> Yes <input type="checkbox"/> No Ambient dBA: _____ Alarm dBA: _____ (attach supplementary notification appliance form(s) with locations, values, and weather conditions)			
System intelligibility Test method: _____ Score: _____ CIS value: _____ (attach supplementary notification appliance form(s) with locations, values, and weather conditions)			
Other (specify):			

See main System Record of Inspection and Testing for additional information, certifications, and approvals.



**EMERGENCY COMMUNICATIONS SYSTEMS
SUPPLEMENTARY RECORD OF INSPECTION AND TESTING**

Inspection/Test Start Date/Time: _____ Inspection/Test Completion Date/Time: _____

Number of Supplemental Pages Attached: _____

1. PROPERTY INFORMATION

Name of property: _____

Address: _____

2. DESCRIPTION OF SYSTEM OR SERVICE

Fire alarm with in-building fire emergency voice alarm communication system (EVAC)

Mass notification system

Combination system, with the following components:

Fire alarm EVACS MNS Two-way, in-building, emergency communication system

Other (specify): _____

Additional description of system(s):

2.1 In-Building Fire Emergency Voice Alarm Communication System

Manufacturer: _____ Model number: _____

Number of single voice alarm channels: _____ Number of multiple voice alarm channels: _____

Number of speakers: _____ Number of speaker circuits: _____

Location of amplification and sound processing equipment:

Location of paging microphone stations:

Location 1: _____

Location 2: _____

Location 3: _____

2.2 Mass Notification System

2.2.1 System Type:

In-building MNS—combination

In-building MNS Wide-area MNS Distributed recipient MNS

Other (specify): _____



**EMERGENCY COMMUNICATIONS SYSTEMS
SUPPLEMENTARY RECORD OF INSPECTION AND TESTING (continued)**

2. DESCRIPTION OF SYSTEM OR SERVICE (continued)

2.2.2 System Features:

- Combination fire alarm/MNS MNS autonomous control unit Wide-area MNS to regional national alerting interface
 Local operating console (LOC) Distributed-recipient MNS (DRMNS) Wide-area MNS to DRMNS interface
 Wide-area MNS to high-power speaker array (HPSA) interface In-building MNS to wide-area MNS interface
 Other (specify): _____

2.2.3 MNS Local Operating Consoles

Location 1: _____

Location 2: _____

Location 3: _____

2.2.4 High-Power Speaker Arrays

Number of HPSA speaker initiation zones: _____

Location 1: _____

Location 2: _____

Location 3: _____

2.2.5 Mass Notification Devices

Combination fire alarm/MNS visual devices: _____ MNS-only visual devices: _____

Textual signs: _____ Other (describe): _____

Supervision class: _____

2.2.6 Special Hazard Notification

- This system does not have special suppression pre-discharge notification
 MNS systems DO NOT override notification appliances required to provide special suppression pre-discharge notification

3. TWO-WAY EMERGENCY COMMUNICATION SYSTEMS

3.1 Telephone System

Number of telephone jacks installed: _____ Number of warden stations installed: _____

Number of telephone handsets stored on site: _____

Type of telephone system installed: Electrically powered Sound powered

3.2 Area of Refuge (Area of Rescue Assistance) Emergency Communications Systems

Number of stations: _____

Location of central control point: _____

Days and hours when central control point is attended: _____

Location of alternate control point: _____

Days and hours when alternate control point is attended: _____



**EMERGENCY COMMUNICATIONS SYSTEMS
SUPPLEMENTARY RECORD OF INSPECTION AND TESTING (continued)**

3. TWO-WAY EMERGENCY COMMUNICATIONS SYSTEMS (continued)

3.3 Elevator Emergency Communications Systems

Number of elevators with stations: _____ Location of central control point: _____

Days and hours when central control point is attended: _____

Location of alternate control point: _____

Days and hours when alternate control point is attended: _____

3.4 Other Two-Way Communication System

Describe: _____

4. TESTING RESULTS

4.1 Control Unit and Related Equipment

Description	Visual Inspection	Functional Test	Comments
Control unit	<input type="checkbox"/>	<input type="checkbox"/>	
Lamps/LEDs/LCDs	<input type="checkbox"/>	<input type="checkbox"/>	
Fuses	<input type="checkbox"/>	<input type="checkbox"/>	
Trouble signals	<input type="checkbox"/>	<input type="checkbox"/>	
Disconnect switches	<input type="checkbox"/>	<input type="checkbox"/>	
Ground fault monitoring	<input type="checkbox"/>	<input type="checkbox"/>	
Supervision	<input type="checkbox"/>	<input type="checkbox"/>	
Local annunciator	<input type="checkbox"/>	<input type="checkbox"/>	
Remote annunciators	<input type="checkbox"/>	<input type="checkbox"/>	
Remote power panels	<input type="checkbox"/>	<input type="checkbox"/>	
Other:	<input type="checkbox"/>	<input type="checkbox"/>	

4.2 Secondary Power

Description	Visual Inspection	Functional Test	Comments
Battery condition	<input type="checkbox"/>	<input type="checkbox"/>	
Load voltage	<input type="checkbox"/>	<input type="checkbox"/>	
Discharge test	<input type="checkbox"/>	<input type="checkbox"/>	
Charger test	<input type="checkbox"/>	<input type="checkbox"/>	
Remote panel batteries	<input type="checkbox"/>	<input type="checkbox"/>	



**EMERGENCY COMMUNICATIONS SYSTEMS
SUPPLEMENTARY RECORD OF INSPECTION AND TESTING (continued)**

4. TESTING RESULTS (continued)

4.3 Emergency Communications Equipment

Description	Visual Inspection	Functional Test	Comments
Control unit	<input type="checkbox"/>	<input type="checkbox"/>	
Lamps/LEDs/LCDs	<input type="checkbox"/>	<input type="checkbox"/>	
Fuses	<input type="checkbox"/>	<input type="checkbox"/>	
Secondary power supply	<input type="checkbox"/>	<input type="checkbox"/>	
Trouble signals	<input type="checkbox"/>	<input type="checkbox"/>	
Disconnect switches	<input type="checkbox"/>	<input type="checkbox"/>	
Ground fault monitoring	<input type="checkbox"/>	<input type="checkbox"/>	
Panel supervision	<input type="checkbox"/>	<input type="checkbox"/>	
System performance	<input type="checkbox"/>	<input type="checkbox"/>	
System audibility	<input type="checkbox"/>	<input type="checkbox"/>	
System intelligibility	<input type="checkbox"/>	<input type="checkbox"/>	
Other:	<input type="checkbox"/>	<input type="checkbox"/>	

4.4 Mass Notification Equipment

Description	Visual Inspection	Functional Test	Comments
Functional test	<input type="checkbox"/>	<input type="checkbox"/>	
Reset/Power down test	<input type="checkbox"/>	<input type="checkbox"/>	
Fuses	<input type="checkbox"/>	<input type="checkbox"/>	
Primary power supply	<input type="checkbox"/>	<input type="checkbox"/>	
UPS power test	<input type="checkbox"/>	<input type="checkbox"/>	
Trouble signals	<input type="checkbox"/>	<input type="checkbox"/>	
Disconnect switches	<input type="checkbox"/>	<input type="checkbox"/>	
Ground fault monitoring	<input type="checkbox"/>	<input type="checkbox"/>	
CCU security mechanism	<input type="checkbox"/>	<input type="checkbox"/>	
Prerecorded message content	<input type="checkbox"/>	<input type="checkbox"/>	
Prerecorded message activation	<input type="checkbox"/>	<input type="checkbox"/>	
Software backup performed	<input type="checkbox"/>	<input type="checkbox"/>	
Test backup software	<input type="checkbox"/>	<input type="checkbox"/>	
Fire alarm to MNS Interface	<input type="checkbox"/>	<input type="checkbox"/>	
MNS to fire alarm interface	<input type="checkbox"/>	<input type="checkbox"/>	
In-building MNS to wide-area MNS	<input type="checkbox"/>	<input type="checkbox"/>	
MNS to direct recipient MNS	<input type="checkbox"/>	<input type="checkbox"/>	



**EMERGENCY COMMUNICATIONS SYSTEMS
SUPPLEMENTARY RECORD OF INSPECTION AND TESTING (continued)**

4. TESTING RESULTS (continued)

4.4 Mass Notification Equipment (continued)

Description	Visual Inspection	Functional Test	Comments
Sound pressure levels (attach report with locations, values, and weather conditions)	<input type="checkbox"/>	<input type="checkbox"/>	
System intelligibility <input type="checkbox"/> CSI <input type="checkbox"/> STI (attach report with locations, values, and weather conditions)	<input type="checkbox"/>	<input type="checkbox"/>	
Other:	<input type="checkbox"/>	<input type="checkbox"/>	

4.5 Two-Way Communication Equipment

Description	Visual Inspection	Functional Test	Comments
Phone handsets	<input type="checkbox"/>	<input type="checkbox"/>	
Phone jacks	<input type="checkbox"/>	<input type="checkbox"/>	
Off-hook indicator	<input type="checkbox"/>	<input type="checkbox"/>	
Call-in signal	<input type="checkbox"/>	<input type="checkbox"/>	
System performance	<input type="checkbox"/>	<input type="checkbox"/>	
System audibility	<input type="checkbox"/>	<input type="checkbox"/>	
System intelligibility	<input type="checkbox"/>	<input type="checkbox"/>	
Other:	<input type="checkbox"/>	<input type="checkbox"/>	

See main System Record of Inspection and Testing for additional information, certifications, and approvals.



FIRE ALARM SYSTEMS TESTING CHECKLIST

Testing and Inspections Fire Alarm Systems											
Item	MSFC Frequency	ACA Frequency	Inspector/ Tester	Component Name	Code Reference(s)	Activity Test/Inspection	Date & Time of Test/ Inspection	Company /Personnel Initials	Pass	Fail	Comments
1	Annually	N/A	Licensed Fire Alarm Contractor	Initiating Devices	NFPA 72 Table 14.3.1	Test <input type="checkbox"/> Inspection <input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	
2	Annually	N/A	Licensed Fire Alarm Contractor	Alarm Notification Appliances	NFPA 72 14.3.1	Test <input type="checkbox"/> Inspection <input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	
3	Annually	N/A	Licensed Fire Alarm Contractor	Batteries	NFPA 72 Table 14.3.1	Test <input type="checkbox"/> Inspection <input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	
4	Annually	N/A	Licensed Fire Alarm Contractor	Control Unit Trouble Signal	NFPA 72 Table 14.3.1	Test <input type="checkbox"/> Inspection <input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	
5	Annually	N/A	Licensed Fire Alarm Contractor	Emergency Voice/Alarm Communication Equipment	NFPA 72 Table 14.3.1	Test <input type="checkbox"/> Inspection <input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	
6	Annually	N/A	Licensed Fire Alarm Contractor	Remote Annunciators	NFPA 72 Table 14.3.1	Test <input type="checkbox"/> Inspection <input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	
7	Annually	N/A	Licensed Fire Alarm Contractor	Interface Equipment, Including Security and Smoke	NFPA 72 Table 14.3.1	Test <input type="checkbox"/> Inspection <input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	
8	Annually	N/A	Licensed Fire Alarm Contractor	Control Equipment	NFPA 72 Table 14.3.1	Test <input type="checkbox"/> Inspection <input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	

Testing and Inspections Fire Alarm Systems											
Item	MSFC Frequency	ACA Frequency	Inspector/ Tester	Component Name	Code Reference(s)	Activity Test/Inspection	Date & Time of Test/ Inspection	Company /Personnel Initials	Pass	Fail	Comments
9	Annually	Quarterly	Licensed Fire Alarm Contractor	Alarm Notification Appliances	NFPA 72 Table 14.3.1	Test <input checked="" type="checkbox"/> Inspection <input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	In order to minimize disruptions, provide quarterly testing of alarm notification/communication equipment in different portions of the building such that each component is tested at least annually
10	Annually	Quarterly	Licensed Fire Alarm Contractor	Batteries	NFPA 72 Table 14.4.2.2 and Table 14.4.5	Test <input checked="" type="checkbox"/> Inspection <input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	
11	Annually	Quarterly	Licensed Fire Alarm Contractor	Control Equipment	NFPA 72 Table 14.4.5	Test <input checked="" type="checkbox"/> Inspection <input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	
12	Annually	Quarterly	Licensed Fire Alarm Contractor	Control Unit Trouble Signal	NFPA 72 Table 14.4.2.2 and Table 14.4.5	Test <input checked="" type="checkbox"/> Inspection <input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	
13	Annually	Quarterly	Licensed Fire Alarm Contractor	Emergency Voice/ Alarm Communication Equipment	NFPA 72 Table 14.4.2.2 and Table 14.4.5	Test <input checked="" type="checkbox"/> Inspection <input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	In order to minimize disruptions, provide quarterly testing of alarm notification/communication equipment in different portions of the building such that each component is tested at least annually
14	Annually	Quarterly	Licensed Fire Alarm Contractor	Remote Annunciators	NFPA 72 Table 14.4.2.2 and Table 14.4.5	Test <input checked="" type="checkbox"/> Inspection <input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	
15	Annually	Quarterly	Licensed Fire Alarm Contractor	Initiating Devices	NFPA 72 Table 14.4.2.2 and Table 14.4.5	Test <input checked="" type="checkbox"/> Inspection <input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	
16	Annually	Quarterly	Licensed Fire Alarm Contractor	Interface Equipment, Including Security and Smoke	NFPA 72 Table 14.4.2.2 and Table 14.4.5	Test <input checked="" type="checkbox"/> Inspection <input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	

Testing and Inspections											
Fire Alarm Systems											
Item	MSFC Frequency	ACA Frequency	Inspector/ Tester	Component Name	Code Reference(s)	Activity Test/Inspection	Date & Time of Test/ Inspection	Company /Personnel Initials	Pass	Fail	Comments
17	Annually	N/A	Licensed Fire Alarm Contractor	All Fire Alarm Items	NFPA 72 14.5.1, 14.5.2	Maintenance <input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	

**SMOKE REMOVAL AND VENTILATION SYSTEMS
TESTING CHECKLIST**

Testing and Inspections											
Smoke Removal and Ventilation Systems											
Item	MSFC Frequency	ACA Frequency	Inspector/ Tester	Component Name	Code Reference(s)	Activity Test/Inspection	Date & Time of Test/ Inspection	Company /Personnel Initials	Pass	Fail	Comments
Stair D-2											
1	Semi-Annually	Quarterly	Licensed Fire Alarm Contractor / MBC Personnel	Stair D-2 Pressurization - Control Sequences	NFPA 92A 8.6	Test Inspection <input checked="" type="checkbox"/> <input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	Automatic activation via spot smoke detection
2	Semi-Annually	Quarterly	Licensed Fire Alarm Contractor / MBC Personnel	Stair D-2 Pressurization - Control Sequences	NFPA 92A 8.6	Test Inspection <input type="checkbox"/> <input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	Automatic activation via sprinkler waterflow alarm
3	Semi-Annually	Quarterly	Licensed Fire Alarm Contractor / MBC Personnel	Stair D-2 Pressurization - Control Sequences	NFPA 92A 8.6	Test Inspection <input checked="" type="checkbox"/> <input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	Manual activation at the smoke control panel
4	Semi-Annually	Quarterly	Licensed Fire Alarm Contractor / MBC Personnel	Stair D-2 Pressurization - Confirm Proper Operation	NFPA 92A 8.6	Test Inspection <input checked="" type="checkbox"/> <input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	Smoke Control Fans
5	Semi-Annually	Quarterly	Licensed Fire Alarm Contractor / MBC Personnel	Stair D-2 Pressurization - Confirm Proper Operation	NFPA 92A 8.6	Test Inspection <input checked="" type="checkbox"/> <input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	Dampers Related to Smoke Control
6	Semi-Annually	Quarterly	Licensed Fire Alarm Contractor / MBC Personnel	Stair D-2 Pressurization Test - Stair A - Confirm Proper Operation	NFPA 92A 8.6	Test Inspection <input checked="" type="checkbox"/> <input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	Normal building HVAC equipment that has a smoke control function (i.e., i.e. AHU's, ERU's, etc.)
7	Semi-Annually	Quarterly	Licensed Fire Alarm Contractor / MBC Personnel	Stair D-2 Pressurization - Confirm Proper Operation	NFPA 92A 8.6	Test Inspection <input checked="" type="checkbox"/> <input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	Normal building HVAC equipment required to shut down in smoke control mode, as applicable

Testing and Inspections											
Smoke Removal and Ventilation Systems											
Item	MSFC Frequency	ACA Frequency	Inspector/ Tester	Component Name	Code Reference(s)	Activity Test/Inspection	Date & Time of Test/ Inspection	Company /Personnel Initials	Pass	Fail	Comments
8	Semi-Annually	Quarterly	Licensed Fire Alarm Contractor / MBC Personnel	Stair A Pressurization - Stair A - Confirm Proper Operation	NFPA 92A 8.6	Test Inspection <input checked="" type="checkbox"/> <input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	Verify operation of other smoke control components, as applicable
9	Semi-Annually	Quarterly	Licensed Fire Alarm Contractor / MBC Personnel	Stair D-2 Pressurization - Response Time	NFPA 92A 8.6	Test Inspection <input checked="" type="checkbox"/> <input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	Record maximum response time for each smoke control system
10	Semi-Annually	Quarterly	Licensed Fire Alarm Contractor / MBC Personnel	Stair D-2 Pressurization - Status Monitoring and Control	NFPA 92A 8.6	Test Inspection <input checked="" type="checkbox"/> <input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	Confirm proper status monitoring and control (i.e., ON/OFF/AUTO) of smoke control system at the Smoke Control Panel(s)
11	Semi-Annually	Quarterly	Licensed Fire Alarm Contractor / MBC Personnel	Stair D-2 Pressurization - Standby Power Operation	NFPA 92A 8.6	Test Inspection <input checked="" type="checkbox"/> <input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	Confirm standby power supply to smoke control system components
12	Semi-Annually	Quarterly	Licensed Fire Alarm Contractor / MBC Personnel	Stair D-2 Pressurization - Standby Power Operation	NFPA 92A 8.6	Test Inspection <input checked="" type="checkbox"/> <input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	Confirm maximum transfer time from primary building power to standby power does not exceed 60 seconds
Elevator Ventilation											
13	Semi-Annually	Quarterly	Licensed Fire Alarm Contractor / MBC Personnel	Elevator Ventilation - Control Sequences	NFPA 92A 8.6	Test Inspection <input checked="" type="checkbox"/> <input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	Automatic activation via spot smoke detection
14	Semi-Annually	Quarterly	Licensed Fire Alarm Contractor / MBC Personnel	Elevator Ventilation - Control Sequences	NFPA 92A 8.6	Test Inspection <input checked="" type="checkbox"/> <input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	Automatic activation via sprinkler waterflow alarm

Testing and Inspections											
Smoke Removal and Ventilation Systems											
Item	MSFC Frequency	ACA Frequency	Inspector/ Tester	Component Name	Code Reference(s)	Activity Test/Inspection	Date & Time of Test/ Inspection	Company /Personnel Initials	Pass	Fail	Comments
15	Semi-Annually	Quarterly	Licensed Fire Alarm Contractor / MBC Personnel	Elevator Ventilation - Control Sequences	NFPA 92A 8.6	Test Inspection <input checked="" type="checkbox"/> <input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	Manual activation at the smoke control panel
16	Semi-Annually	Quarterly	Licensed Fire Alarm Contractor / MBC Personnel	Elevator Ventilation - Confirm Proper Operation	NFPA 92A 8.6	Test Inspection <input checked="" type="checkbox"/> <input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	Smoke Control Fans
17	Semi-Annually	Quarterly	Licensed Fire Alarm Contractor / MBC Personnel	Elevator Ventilation - Confirm Proper Operation	NFPA 92A 8.6	Test Inspection <input checked="" type="checkbox"/> <input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	Dampers Related to Smoke Control
18	Semi-Annually	Quarterly	Licensed Fire Alarm Contractor / MBC Personnel	Elevator Ventilation - Confirm Proper Operation	NFPA 92A 8.6	Test Inspection <input checked="" type="checkbox"/> <input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	Normal building HVAC equipment that has a smoke control function (i.e., i.e. AHU's, ERU's, etc.)
19	Semi-Annually	Quarterly	Licensed Fire Alarm Contractor / MBC Personnel	Elevator Ventilation - Confirm Proper Operation	NFPA 92A 8.6	Test Inspection <input checked="" type="checkbox"/> <input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	Normal building HVAC equipment required to shut down in smoke control mode, as applicable
20	Semi-Annually	Quarterly	Licensed Fire Alarm Contractor / MBC Personnel	Elevator Ventilation - Confirm Proper Operation	NFPA 92A 8.6	Test Inspection <input checked="" type="checkbox"/> <input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	Verify operation of other smoke control components, as applicable
21	Semi-Annually	Quarterly	Licensed Fire Alarm Contractor / MBC Personnel	Elevator Ventilation - Response Time	NFPA 92A 8.6	Test Inspection <input checked="" type="checkbox"/> <input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	Record maximum response time for each smoke control system
22	Semi-Annually	Quarterly	Licensed Fire Alarm Contractor / MBC Personnel	Elevator Ventilation - Status Monitoring and Control	NFPA 92A 8.6	Test Inspection <input checked="" type="checkbox"/> <input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	Confirm proper status monitoring and control (i.e., ON/OFF/AUTO) of smoke control system at the Smoke Control Panel(s)

Testing and Inspections											
Smoke Removal and Ventilation Systems											
Item	MSFC Frequency	ACA Frequency	Inspector/ Tester	Component Name	Code Reference(s)	Activity Test/Inspection	Date & Time of Test/ Inspection	Company /Personnel Initials	Pass	Fail	Comments
23	Semi-Annually	Quarterly	Licensed Fire Alarm Contractor / MBC Personnel	Elevator Ventilation - Standby Power Operation	NFPA 92A 8.6	Test Inspection <input checked="" type="checkbox"/> <input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	Confirm standby power supply to smoke control system components
24	Semi-Annually	Quarterly	Licensed Fire Alarm Contractor / MBC Personnel	Elevator Ventilation - Standby Power Operation	NFPA 92A 8.6	Test Inspection <input checked="" type="checkbox"/> <input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	Confirm maximum transfer time from primary building power to standby power does not exceed 60 seconds
ADC Smoke Exhaust											
25	Annually	Quarterly	Licensed Fire Alarm Contractor / MBC Personnel	ADC Smoke Exhaust - Control Sequences	NFPA 92A 8.6	Test Inspection <input checked="" type="checkbox"/> <input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	Automatic activation via spot smoke detection
26	Annually	Quarterly	Licensed Fire Alarm Contractor / MBC Personnel	ADC Smoke Exhaust - Control Sequences	NFPA 92A 8.6	Test Inspection <input checked="" type="checkbox"/> <input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	Manual activation at the smoke control panel
27	Annually	Quarterly	Licensed Fire Alarm Contractor / MBC Personnel	ADC Smoke Exhaust - Confirm Proper Operation	NFPA 92A 8.6	Test Inspection <input checked="" type="checkbox"/> <input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	Smoke Control Fans
28	Annually	Quarterly	Licensed Fire Alarm Contractor / MBC Personnel	ADC Smoke Exhaust - Confirm Proper Operation	NFPA 92A 8.6	Test Inspection <input checked="" type="checkbox"/> <input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	Dampers Related to Smoke Control
29	Annually	Quarterly	Licensed Fire Alarm Contractor / MBC Personnel	Stair Pressurization - Confirm Proper Operation	NFPA 92A 8.6	Test Inspection <input checked="" type="checkbox"/> <input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	Normal building HVAC equipment that has a smoke control function (i.e., i.e. AHU's, ERU's, etc.)

Testing and Inspections											
Smoke Removal and Ventilation Systems											
Item	MSFC Frequency	ACA Frequency	Inspector/ Tester	Component Name	Code Reference(s)	Activity Test/Inspection	Date & Time of Test/ Inspection	Company /Personnel Initials	Pass	Fail	Comments
30	Annually	Quarterly	Licensed Fire Alarm Contractor / MBC Personnel	ADC Smoke Exhaust - Confirm Proper Operation	NFPA 92A 8.6	Test <input checked="" type="checkbox"/> Inspection <input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	Normal building HVAC equipment required to shut down in smoke control mode, as applicable
31	Annually	Quarterly	Licensed Fire Alarm Contractor / MBC Personnel	ADC Smoke Exhaust - Confirm Proper Operation	NFPA 92A 8.6	Test <input checked="" type="checkbox"/> Inspection <input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	Verify operation of other smoke control components, as applicable
32	Annually	Quarterly	Licensed Fire Alarm Contractor / MBC Personnel	ADC Smoke Exhaust - Response Time	NFPA 92A 8.6	Test <input checked="" type="checkbox"/> Inspection <input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	Record maximum response time for each smoke control system
33	Annually	Quarterly	Licensed Fire Alarm Contractor / MBC Personnel	ADC Smoke Exhaust - Status Monitoring and Control	NFPA 92A 8.6	Test <input checked="" type="checkbox"/> Inspection <input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	Confirm proper status monitoring and control (i.e., ON/OFF/AUTO) of smoke control system at the Smoke Control Panel(s)
34	Annually	Quarterly	Licensed Fire Alarm Contractor / MBC Personnel	ADC Smoke Exhaust - Standby Power Operation	NFPA 92A 8.6	Test <input checked="" type="checkbox"/> Inspection <input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	Confirm standby power supply to smoke control system components
35	Annually	Quarterly	Licensed Fire Alarm Contractor / MBC Personnel	ADC Smoke Exhaust - Standby Power Operation	NFPA 92A 8.6	Test <input checked="" type="checkbox"/> Inspection <input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	Confirm maximum transfer time from primary building power to standby power does not exceed 60 seconds

Attachment C - Proposal Pricing Form
MBC RFP for Fire Alarm System Inspection, Testing, and Maintenance

Proposer Name: _____

	Service	Per Quarter	Annual
1.	Building Fire Alarm Inspection & Testing		
2.	ADC Fire Alarm Inspection & Testing		
3.	Fire Sprinkler Testing Assistance		
	Total:		
4.	Hourly Rates	Regular Hours: <u>7 AM - 3:30 PM</u>	After-Hours Hours: <u>3:30 PM - 7 AM Weekdays, and all day on Weekends and Holidays</u>
	Fire Alarm Maintenance		
5.	Materials and Parking Mark-up Percentage		
	Materials Mark-up %	%	
	Parking Mark-up %	%	

This agreement will be for three (3) full years through December 31, 2019 with the option for the MBC to extend the contract two (2) additional years at one (1) year periods with rate increases to be based on the Consumer Price Index percentage.

Additional Notes:

- A. All truck and delivery charges must be included in hourly cost listed above.
- B. The MBC will not cover travel time or travel expense.
- C. Invoicing must be provided on a monthly basis, which must include the numbers of hours worked each week per person, the rate, the sub-total per week and the total cost.
- D. Provide back-up documentation for parking expenses.

