



Department of  
**Licenses and Inspections**  
CITY OF PHILADELPHIA

\*\*\*DO NOT MAIL THIS FORM\*\*\*

\*Upload completed forms to the Building Permit in eCLIPSE.  
\*\*Upload completed forms through the "Submit an Annual Certification Report" option in eCLIPSE. [www.eclipse.phila.gov](http://www.eclipse.phila.gov)

### Fire Alarm System Certification Form

Use this form to provide results and certify the fire alarm system testing performed. Submit one certification for each system.

Indicate Type of Certification (check one):

New installation\*

Annual \*\*

**Property Information**

Provide the property address where the testing will be performed.

1

Address: 1600 Vine St. (Phila. Performing Arts Charter School)

**Building Owner/Owner's Agent**

Provide the contact information for the building owner/owner's agent.

2

Name: Steve Kirkwood

Address: 1600 Vine St. Philadelphia, PA 19102

Email: skirkwood@fluidics.com

Phone: 610-636-8822

**Contractor and Inspector Information**

(a) The contractor must provide their contact information and license number, then sign and date.

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(a) Contractor Information

Contractor Name: \_\_\_\_\_ Contractor License #: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Contractor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

(b) The fire alarm inspector must provide their contract information as well as license and certification numbers.

(b) Fire Alarm Inspector Information

Fire Alarm Inspector Name: Jeffrey M. McDonald

Email: jeffreymcdonald@adt.com

Phone: 215-579-7000

Fire Alarm Inspector License #: 3707-055359

Certification #: \_\_\_\_\_

**General Information**

Note: Skip section 4 for new installation.

This section is to be completed by the property owner or agent.

Provide explanation for all "no" answers, except as noted.

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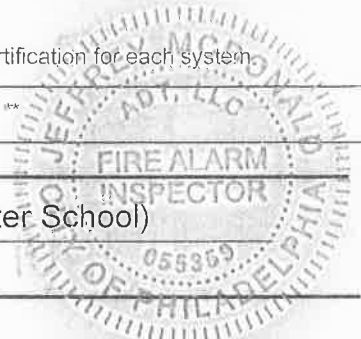
- Is the building occupied?  Yes  No
- Has the building occupancy or hazard or floor layout changed since the last inspection?  Yes  No
  - If yes, explain: \_\_\_\_\_
- Are all systems kept in service?  Yes  No
- Are the test results kept on file?  Yes  No
- Has there been any modifications to the system since the last certification?  Yes  No
  - If yes, explain: \_\_\_\_\_
- Was there any action of alarm since the last certification?  Yes  No
  - If yes, explain: \_\_\_\_\_
- Does this certification cover all fire alarm systems in the building?  Yes  No

**Control Equipment**

This section is to be completed by the fire alarm inspector.

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- Is the fire alarm Control Panel in an accessible location (in main entrance or unlocked room)?  Yes  No
- Is the battery charging circuit in the Control Panel operating correctly / at the proper voltage?  Yes  No
- Is Ground Fault Monitoring testing satisfactory?  Yes  No
- Is the test of lamps and LED's in the Control Panel satisfactory?  Yes  No
- Is the test of interface equipment satisfactory?  N/A  Yes  No
- Are the audible and visible trouble and alarm signals in the Control Panel satisfactory?  Yes  No
- Are trouble signal silence switches and alarm silence switches in the Control Panel tested satisfactory?  Yes  No
- Is the off-premises transmission test satisfactory?  Yes  No
- Is the remote annunciator test satisfactory?  N/A  Yes  No
- Is the Control Panel supervision test acceptable?  Yes  No





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**Initiating Devices**

**Section (A)**

\*Note: The certification of smoke detector sensitivity shall be performed according to the Philadelphia Fire Code Section 907.

F-907: Alternate year sensitivity testing shall begin in odd-numbered years. Where the one-year sensitivity test occurs in an even-numbered year, the next sensitivity test is not due until the second subsequent odd-numbered year.

Results of sensitivity tests shall be listed on page 4 of this form or an NFPA compliant panel printout shall be provided for each year testing is performed.

Complete Sections (B) and (C) only if applicable.

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**(A) Initiating Devices**

- Are signs mounted at each pull station stating: "IN CASE OF FIRE: SOUND ALARM AND CALL 911 or THE FIRE DEPARTMENT"?  Yes  No
- Are the manual fire alarm box tests acceptable?  N/A  Yes  No
- Are the smoke detector inspection / tests acceptable?  N/A  Yes  No
- Are the smoke detector thermal elements tests acceptable?  N/A  Yes  No
- Are the smoke detector control output tests acceptable?  N/A  Yes  No
- Are non-restorable heat detectors inspected and in satisfactory condition?  N/A  Yes  No
- Are restorable heat detector tests acceptable?  N/A  Yes  No
- Are the alarm verification tests satisfactory?  Yes  No
- Are the duct smoke detector tests acceptable?  N/A  Yes  No
- \*Is the sensitivity of all Smoke Detectors tested in accordance with NFPA 72 (2016) Section 14.4.4.3.4?  Yes  No

**(B) Sprinkler System Supervision (complete if applicable)**

Yes  No

If no, explain: \_\_\_\_\_

- Are the water flow switch inspection / tests acceptable?  N/A  Yes  No
- Are the valve tamper switch inspection / tests acceptable?  N/A  Yes  No
- Are the low temperature sensor inspection / tests acceptable?  N/A  Yes  No
- Are low air pressure switch inspection / tests acceptable?  N/A  Yes  No
- Are the Fire Pump power supervision inspection / tests acceptable?  N/A  Yes  No
- Are the Fire Pump Running supervision inspection / tests acceptable?  N/A  Yes  No
- Are the Fire Pump Trouble supervision inspection / tests acceptable?  N/A  Yes  No
- Are Fire Pump Alternate Power inspection / tests acceptable?  N/A  Yes  No

**(C) Other Initiation (complete if applicable)**

Yes  No

- Are all range hood / other suppression systems interconnected to this system as required?  N/A  Yes  No
- Are all range hood / other suppression systems inspections / tests acceptable?  N/A  Yes  No
- Are all existing air handler duct smoke detectors interconnected to this system?  N/A  Yes  No
- Were all air handler duct smoke detector inspection / tests acceptable?  N/A  Yes  No

**Audible / Visible Devices**

**Section (A)**

Complete the table on page 3 to record the ambient and alarm sound level tests.

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**(A) AUDIBLE / VISIBLE DEVICES**

- Are the ambient-sound levels tested with the normal ambient noises present (HVAC, etc.)? and recorded on Page 3?  Yes  No
- Are alarm sound levels tested and recorded on Page 3?  Yes  No
- Are visible alarms tested and operating properly?  Yes  No
- Did sound levels reach the minimum requirement noted below? (check the appropriate box below)
  - Systems installed prior to January 1984 = Sufficient volume to be heard
  - January 1984 until March 1991 = 15 dba above ambient in occupied spaces
  - May 1991 until December 2009 = 70 dba in sleeping rooms, 70 mechanical spaces, 60 in remaining spaces
  - January 2010 until Present = 75 dba sleeping rooms, 70 in mechanical spaces and 60 in remaining spaces

(Continue on next page)



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**Audible / Visible Devices**  
(continued)

*Audibility record: Describe in detail the locations tested and the results in the table.*

*Audible readings must be taken in at least one unit per floor AND at least one reading for each style unit in the building.*

*Use additional sheets if necessary.*

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LOCATION TESTED (Fill in exact location next to description, i.e., Unit D-10 etc.)	FLOOR	AMBIENT LEVEL	ALARM LEVEL
COMMON AREA LOCATION: Please see attached			
COMMON AREA LOCATION:			
COMMON AREA LOCATION:			
SLEEPING AREA:			
SLEEPING AREA:			
SLEEPING AREA:			
SLEEPING AREA:			
SLEEPING AREA:			
OTHER:			
OTHER:			
OTHER:			
OTHER:			

Complete Section (B) if applicable.

- (B) OTHER SYSTEM OUTPUTS / INTERCONNECTIONS** (complete if applicable)  Yes  No
- If no, explain: \_\_\_\_\_
  - Are all range hood / other suppression systems interconnected to fuel shut off / power disconnects as required?  N/A  Yes  No
  - Are all air handlers over 2000 cfm shut down as required?  N/A  Yes  No
  - Are all Primary Floor Elevator Recall inspection / tests acceptable?  N/A  Yes  No
  - Are all Secondary Floor Elevator Recall inspection / tests acceptable?  N/A  Yes  No
  - Are all Elevator Power Shutoff / Shunt Trip inspection / tests acceptable?  N/A  Yes  No
  - Are all Elevator Fire Fighters Hat feature inspection / tests acceptable?  N/A  Yes  No
  - Are all Door Hold Open Release inspection / tests acceptable?  N/A  Yes  No

**Electrical**

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- Is the fire alarm system power connected to a branch circuit of house panel?  Yes  No
- Is the fire alarm system power disconnected for the dedicated branch circuit locked in the "On" position?  Yes  No
- Is the fire alarm system power disconnect location clearly identified in writing at or on the control panel?  Yes  No
- Is the test of the primary power source satisfactory?  Yes  No
- Is the test of the secondary power source (e.g., batteries) satisfactory?  Yes  No
- Is the system tested using the secondary power source?  Yes  No
- Are all additional NAC power supply inspection / tests acceptable?  N/A  Yes  No
- Are all additional sub control, amplifier, firefighter phone panels and auxiliary power supply inspection / tests acceptable?  N/A  Yes  No
- Are all batteries for additional NAC power supplies sub controls, amplifiers, fire fighter phone panels and auxiliary, power supplies load tests / inspections acceptable?  N/A  Yes  No
- Are all batteries load tested?  Yes  No
- Provide Make and Model of tester used: SDI Cell Checker



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Voice, Phone, Monitoring

Complete Sections (A), (B) and (C) if applicable.

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(A) VOICE EVACUATION SYSTEM (complete if applicable):  Yes  No

If no, explain: \_\_\_\_\_

- Is this system applicable to the system being tested?  Yes  No

If yes, complete this section:

- Is the Fire Command Center operating properly?  Yes  No
- Is speaker sound pressure and clarity recorded in the Section 7 table?  Yes  No
- Are amplifier / tone generators test satisfactory?  Yes  No

(B) FIRE FIGHTER PHONE SYSTEM (complete if applicable):  Yes  No

If no, explain: \_\_\_\_\_

- Is the call-in signal silence function correct?  Yes  No
- Is the off-hook indicator verified?  Yes  No
- Are phone jacks tested satisfactorily?  Yes  No
- Are phone sets tested satisfactorily?  Yes  No
- Are handset system voice quality and clarity acceptable?  Yes  No

(C) MONITORING (complete if applicable):  Yes  No

If no, explain: \_\_\_\_\_

- Is this system monitored or required to be monitored?  Yes  No

If yes, complete this section:

- This system is monitored under which of the NFPA 72 monitoring categories?
  - Proprietary Supervising Station  Central Station Service
  - Remote Supervising Station  Other, explain: \_\_\_\_\_

- The system is monitored in compliance with the selected method above.  Yes  No
- The system sends a daily test signal to the monitoring station.  Yes  No
- The system has two telephone lines or other NFPA method of communication with the monitoring station.  Yes  No
- The monitoring station is UL approved to receive Fire Alarm Signals.  Yes  No

The name of the Monitoring Entity is: TYCO

Phone #: 1-800-367-2677

Account Reference No.: H624909231 UL Certification #: Unknown

- The system is tested to the monitoring station for the following conditions:
  - Alarm and Restore  Yes  No
  - Trouble and Trouble Restore  Yes  No
  - Ground Fault and Restore  Yes  No
  - Supervisory Signal and Restore  Yes  No
  - AC Power Loss and Restore  Yes  No



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**Additional Explanations and Notes**

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FA System does not control fuel/shutoff nor power disconnect. FA System does not monitor if this takes place.

FA System testing does not measure and cannot confirm Air Handler Capacity beyond initial designed shut down control.

Ground fault and AC power loss report off premises as a trouble.

The Monitoring Entity could not provide their UL Certification number when contacted.

**DETECTOR SENSITIVITY RESULTS**

LOCATION	DEVICE TYPE	VISUAL CHECK	FUNCTIONAL TEST	FACTORY SETTING	MEASURED SETTING	PASS	FAIL



**Declaration & Signature**

By accepting this statement, I, the certified technician shown on this form, certify that this fire alarm system(s) has been properly inspected for functional operation in accordance with the current Fire Code (FC) used by the department that has jurisdiction and NFPA Standards adopted by the FC for this system. Any deficiencies found are noted in the report and have been reported to the building owner/owner's agent for corrective action.

The certification must be presented by the Contractor to the building owner/owner's agent upon completion and shall be maintained on the property and made available for inspection upon request.

The Deficiency Form (TP\_015\_F) shall be submitted to the Department of Licenses and Inspections when deficiencies are not corrected within 45 days.

Signature of Fire Alarm Inspector: *Jeffrey McDonald*

Date: 6/22/23

Signature of Building Owner/Owner's Agent: \_\_\_\_\_

Date: \_\_\_\_\_



## Inspection Testing Results

**Facility: Philadelphia Performing Arts Charter School**

**Date: 6/21/23**

### Audible Device Sound Levels

Location	Floor	Ambient	Alarm
8025	8	55	74
08065	8	54	72
Central Stairs	8	55	92
Central Stairs	7	46	96
706	7	56	72
723	7	56	70
west stairs	6	44	94
611	6	58	74
605	6	56	72
Central Stairs	5	40	95
509	5	54	74
522	5	52	73
408	4	40	75
411	4	42	80
North Stairs	4	40	80
303	3	42	80
309	3	45	85
South Stairs	3	42	100
North End	2	44	80
South End	2	45	85
Central Stairs	2	40	90
Auditorium	1	44	75
Front Lobby	1	42	80
Central Stairs	1	44	85