

Fire Loss Control, Inc.

590 Pearl Road
Brunswick, Ohio 44212

Fire Suppression Systems**Service History**

Order # 12116

JOB LOCATION

Lakewood Fire Station 2
18124 Detroit Avenue
Lakewood Ohio 44107
216-529-6818 Kurt Cell
Service Date: 3/9/2016

P1:
P2:
F:

CLIENT

Fire Loss Control, Inc.
590 Pearl Road
Brunswick Ohio 44212

CONTACT

Tim Dunphy

TECHNICIAN

JAL

Fire Suppression System

Num: 1

Type: Wet Chemical Extinguishing System

Manufacturer: Ansul

Model: R-102 1.5 Gallon

Location: Kitchen

Install Date: 1995

Last Service: 3/9/2016

Duct Size: 10" X 10"

Nozzle Type: 1100

Plenum Size: 18" X 48"

Nozzle Type: 1N

Serial #: R-145253

Bar Code: AQ0007776

Timestamp: 3/9/2016 9:32:37 AM

Tests/Inspections/Services

Description	Last	Due
Hydro Test	2012	☐
Monthly		☐
Recharge		☐
Semi-Annual	3/2016	☒
Flush Piping		☐
New		☐

Cylinders

Num	Size	Type	Mfg Date	Hydro	6 Year	S/N	Bar Code	Timestamp
1	1.5 Gal	Extinguishing Agent	2012	2012		2011100134	AQ0005846	9/16/2013 11:19:07 AM
2	34.8	Cartridge	1995	2014		N/A		

Replacement Parts

Qty	Description	Part No.	Replaced
1	Fuse Links 360°F K Link	360K-11	3/9/2016
3	Ansul Nozzle Cap	AS77695	9/2014

Appliances (Left to Right)

ALL WORK DONE IN ACCORDANCE WITH N.F.P.A. STANDARDS

Printed on: 3/14/2016 3:25:27 PM

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Num	Description	Size	Nozzle(s)
1	Range - 6 Burner	36"	1F, 245

INSPECTION**I. Fire Suppression Systems**

Yes No NA

1. Hood and appliances properly protected? ☒ Yes ☐ No ☐ NA
2. Was nozzle/appliance alignment correct upon arrival? ☒ Yes ☐ No ☐ NA
- If not was the alignment corrected during inspection? ☐ Yes ☐ No ☒ NA
3. System cylinder gauge in operable range? ☐ Yes ☐ No ☒ NA
4. Cylinder weight or liquid level OK? ☒ Yes ☐ No ☐ NA
5. Fusible links replaced? ☒ Yes ☐ No ☐ NA
6. Actuation cartridge weight or gauge in operable range? ☒ Yes ☐ No ☐ NA
- /* Stamped weight 34 7/8 oz, Actual weight 34 7/8 oz */
7. Complete fuel shut-down operational? ☒ Yes ☐ No ☐ NA
8. Remote pull station accessible and operational? ☒ Yes ☐ No ☐ NA
9. All components clean and free of grease? ☒ Yes ☐ No ☐ NA
10. Nozzle caps cleaned or replaced? ☒ Yes ☐ No ☐ NA
11. System meets manufacturer installation instructions? ☒ Yes ☐ No ☐ NA
12. System conduit and piping securely mounted? ☒ Yes ☐ No ☐ NA
13. Does system meet UL 300 standard? ☒ Yes ☐ No ☐ NA
14. Employees trained in the proper operation of the system? ☒ Yes ☐ No ☐ NA
15. Audible and/or visual alarms functional? ☒ Yes ☐ No ☐ NA
16. System reset and placed back in service? ☒ Yes ☐ No ☐ NA
17. System connected to central station? ☐ Yes ☐ No ☒ NA
18. Class K extinguisher present and functional? ☒ Yes ☐ No ☐ NA
19. Do hood and duct comply with NFPA #96? ☒ Yes ☐ No ☐ NA
20. Company State of Ohio Certification # 53-28-1034 ☒ Yes ☐ No ☐ NA
21. State of Ohio Certification Jon LeRoy 54-18-1535 ☒ Yes ☐ No ☐ NA
22. State of Ohio Certification Marcus R Orahod 54-78-1475 ☐ Yes ☐ No ☒ NA
23. Complete Hydrostatic Pressure Test Current ☒ Yes ☐ No ☐ NA
24. Complete 6 Year Maintenance Current ☐ Yes ☐ No ☒ NA

I state that the information on this form is correct at the time and place of my inspection. And that all equipment tested at this time was left in operational condition upon completion of this inspection except as noted above.

Acquire Fire Protection, Inc. / Fire Loss Control, Inc.

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CLIENT

Fire Loss Control, Inc.
590 Pearl Road
Brunswick Ohio 44212

Technician

X 

Jon LeRoy

3/9/2016

Customer Signature

X _____

Fire Inspector

X _____

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