

Acquire Fire Protection, Inc.17012 Kinsman Road
Middlefield, Ohio 44062**Fire Suppression Systems****Service History**

Order # 12081

JOB LOCATIONFFA Camp Muskingum
3266 Dyewood Road SW
330-627-2208
Carrollton OH 44615
Service Date: 3/28/2016P1: (330)627-2208
P2:
F:**CLIENT**FFA Camp Muskingum
3266 Dyewood Road SW
Carrollton OH 44615**CONTACT**

Todd

TECHNICIAN

MRO

Fire Suppression System

Num: 1

Type: PRM Wet Chemical Extinguishing System

Manufacturer: Amerex

Model: KP 2.75 PRM

Location: Kitchen

Install Date: 4/14/2008

Last Service: 3/2016

Duct Size: 2 - 24" X 16"

Nozzle Type: 4 - 16414

Plenum Size: 18" X 20Ft

Nozzle Type: 2- 11982

Serial #: A-7192

Bar Code: AQ0003160

Timestamp:

Tests/Inspections/Services

Description	Last	Due
Hydro Test	2008	<input type="checkbox"/>
Recharge		<input type="checkbox"/>
Semi-Annual	9/2015	<input type="checkbox"/>
Hydro Test Hoses	9/27/2012	<input type="checkbox"/>
Flush Piping	9/27/2012	<input type="checkbox"/>
New		<input type="checkbox"/>
Tubing Replacement	2016	<input checked="" type="checkbox"/>
Clean Tubing	9/2015	<input type="checkbox"/>

Cylinders

Num	Size	Type	Mfg Date	Hydro	6 Year	S/N	Bar Code	Timestamp
1	4.75	Extinguishing Agent	2008	2008		91648	AQ0003159	
2	2.75	Extinguishing Agent	2008	2008		A-7192	AQ0003158	

Replacement Parts

Qty	Description	Part No.	Replaced
25	Tubing		9/2011
2	AAA Battery	ALK 92	9/24/2015

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Qty	Description	Part No.	Replaced
14	Amerex Nozzle Cap	12334	9/2014

Appliances (Left to Right)

Num	Description	Size	Nozzle(s)
1		27"	11982
1		21" x 26"	13729, 13729
2	Fryer - Elec		
3	Fryer - Elec	21" X 26	13729, 13729
4	Fryer - Elec	21" X 26"	13729, 13729
5	Grill - 48"	48"	11982
6	Grill - 36"	36"	11982

INSPECTION

I. Fire Suppression Systems

	Yes	No	NA
1. Hood and appliances properly protected?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Was nozzle/appliance alignment correct upon arrival?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If not was the alignment corrected during inspection?			
3. System cylinder gauge in operable range?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Cylinder weight or liquid level OK?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Fusible links replaced?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Actuation cartridge weight or gauge in operable range?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Complete fuel shut-down operational?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Remote pull station accessible and operational?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. All components clean and free of grease?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Nozzle caps cleaned or replaced?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. System meets manufacturer installation instructions?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. System conduit and piping securely mounted?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Does system meet UL 300 standard?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Employees trained in the proper operation of the system?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. Audible and/or visual alarms functional?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. System reset and placed back in service?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17. System connected to central station?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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INSPECTION

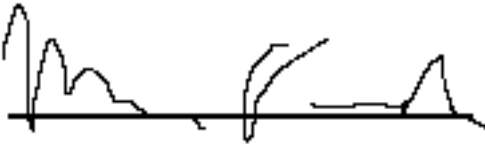
I. Fire Suppression Systems

	Yes	No	NA
18. Class K extinguisher present and functional?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. Do hood and duct comply with NFPA #96?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20. Company State of Ohio Certification # 53-28-1034	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21. State of Ohio Certification Jon LeRoy 54-18-1535	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
22. State of Ohio Certification Marcus R Orahood 54-78-1475	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
23. Complete Hydrostatic Pressure Test Current	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24. Complete 6 Year Maintenance Current	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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.

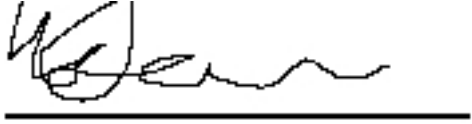
Technician

X 

Marcus R Orahood

3/28/2016

Customer Signature

X 

Todd

3/28/2016

Fire Inspector

X _____

*** End Report: 1 ***

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