

**Fire Loss Control, Inc.**590 Pearl Road  
Brunswick, Ohio 44212**Fire Suppression Systems****Service History**

Order # 12267

**JOB LOCATION**North Park Retirement  
14801 Holland Road  
Brook Park Ohio 44142  
216-267-0555

Service Date: 4/21/2016

**CONTACT**Erin Jester  
Jim Perry

P1: (216)267-0555

P2:

F:

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

MRO

**Fire Suppression System**

Num: 1

Type: Wet Chemical Extinguishing System

Manufacturer: Pyro-Chem

Model: PCL-275

Location: Kitchen

Install Date: 1999

Last Service: 4/2016

Duct Size: 15" X 19"

Nozzle Type: NL-D2

Plenum Size: 16" X 6Ft

Nozzle Type: NL1H

Serial #: M4543

Bar Code: AQ0009473

Timestamp:

**Tests/Inspections/Services**

Description	Last	Due
Hydro Test	2015	<input type="checkbox"/>
Monthly		<input type="checkbox"/>
Recharge		<input type="checkbox"/>
Semi-Annual	4/2016	<input checked="" type="checkbox"/>
Flush Piping		<input type="checkbox"/>
New		<input type="checkbox"/>

**Cylinders**

Num	Size	Type	Mfg Date	Hydro	6 Year	S/N	Bar Code	Timestamp
1	300	Extinguishing Agent	2006	2015		ATM296349		

**Replacement Parts**

Qty	Description	Part No.	Replaced
2	Fuse Links 360°F Globe ML	360ML-11	10/22/2015
2	Fuse Links 450°F Globe ML	450ML-11	9/2015
6	Nozzle Cap Pyro Chem	PC623	9/2015
1	Actuating Cartridge Pyro Chem	PCC 16	10/22/2015

**Appliances (Left to Right)**

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

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Num	Description	Size	Nozzle(s)
1	Range - 6 Burner		NL2L, NL1H
2	Grill - 24"		NL1H
3	Fryer - Gas		2H
4	Grill - 24"	Undergrate	NL1H

**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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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  
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**INSPECTION**

**I. Fire Suppression Systems**

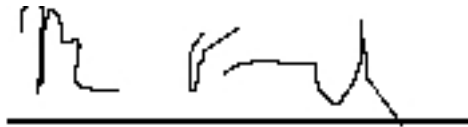
Yes No NA

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

4/21/2016

**Customer Signature**

X



Erin Jester

4/21/2016

**Fire Inspector**

X

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\*\*\* End Report: 1 \*\*\*

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