

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

Order # 12130

JOB LOCATIONRed Hawk Grille
7481 Auburn Road
(440)354-4040
Concord Twp OH 44077
Service Date: 3/30/2016P1: (440)354-4040
P2:
F: (440)354-9459**CLIENT**Red Hawk Grille
7481 Auburn Road
Concord Twp OH 44077**CONTACT**Chris Hudak
Dustin

(440)668-7197

TECHNICIAN

JAL

Fire Suppression System

Num: 1

Type: Wet Chemical Extinguishing System

Manufacturer: Amerex

Model: KP ZD Dual 3.75 4 Cylinders

Location: KITCHEN

Install Date: 2001

Last Service: 3/2016

Duct Size:

Nozzle Type:

Plenum Size:

Nozzle Type:

Serial #:

Bar Code: AQ0004263

Timestamp:

Tests/Inspections/Services

Description	Last	Due
Hydro Test	2007	<input type="checkbox"/>
Monthly		<input type="checkbox"/>
Recharge	8/19/2013	<input type="checkbox"/>
Semi-Annual	3/2016	<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	ZD 3.75	Extinguishing Agent	2001	2013		75820 AX	AQ0000295	
2	ZD 3.75	Extinguishing Agent	2007			TBU 033588	AQ0002450	
3	ZD 3.75	Extinguishing Agent	2007			TBU 031629	AQ0002451	
4	3.75	Extinguishing Agent	2004	2012		015709		

Replacement Parts

Qty	Description	Part No.	Replaced
6	Fuse Links 450°F K Link	450K-11	3/30/2016
2	Fuse Links 360°F K Link	360K-11	9/2014

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Qty	Description	Part No.	Replaced
30	Amerex Nozzle Cap	12334	3/30/2016

Appliances (Left to Right)

Num	Description	Size	Nozzle(s)
1	Fryer - Gas		
2	Char broiler Gas Radiant		
3	Range - 10 Burner		
4	Cheese Melter		
5	Grill - 48"		
6	Cheese Melter		
7	Fryer - Gas		
8	Fryer - Gas		

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"/>
/* Pressure gage reading 2000psi */			
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"/>

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INSPECTION

I. Fire Suppression Systems

	Yes	No	NA
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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22. State of Ohio Certification Marcus R Orahood 54-78-1475	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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 

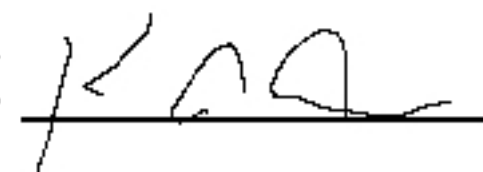
Jon LeRoy

3/30/2016

Customer Signature

X _____

Fire Inspector

X 

Ken Avram

3/30/2016

*** End Report: 1 ***

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