

**MENDHAM BOROUGH BUREAU OF FIRE PREVENTION #1418-001
OFFICE OF THE FIRE OFFICIAL**



6 WEST MAIN STREET
MENDHAM, NJ 07945

Voice – (973) 543-7152
Fax – (973) 543-2290

**FIRE ALARM SYSTEM
TEST REPORT**

PROPERTY OWNER'S INFORMATION:

NAME:		STREET ADDRESS:	
CITY:	STATE	ZIP CODE:	PHONE:

ITEM / COMPONENT	YES / NO	NUMBER UNITS TESTED	N/A
1. Fire Alarm Panel Tested and found to be functional / Operational.			
2. All Smoke Detectors found to be NO more than 10 years old.			
3. All Smoke Detectors Tested & found to be functional / Operational.			
4. All Heat Detectors Tested & found to be functional / Operational.			
5. All Carbon Monoxide Detectors Tested & found to be functional / Operational			
6. All Visual Alarms Tested & found to be functional / Operational.			
7. All Manual Pull Stations Tested & found to be functional / Operational.			
8. All Bells or Horns Tested & found to be functional / Operational.			
9. Supervisory Device Circuits Tested & found to be functional / Operational.			
10. Primary Power Circuit & Battery back up power Tested & found to be functional / Operational.			
11. Lamp(s) and LED(s) Tested & found to be functional / Operational.			

CERTIFICATION OF SYSTEM OPERATION

FIRE PROTECTION CONTRACTOR OR
SERVICING COMPANY: _____

ADDRESS: _____

CITY, STATE, ZIP CODE: _____

THE ABOVE REFERENCED COMPANY/REPRESENTATIVE HEREBY ACKNOWLEDGES THAT THEIR REPRESENTATIVES COMPLETED THE ABOVE INSPECTIONS AND PERFORMED THE TESTING PER NFPA STANDARDS AND FOUND THE ABOVE CONDITIONS UPON INSPECTION / TESTING. AS A RESULT OF THE INSPECTION AND TESTS CONDUCTED, ALL SYSTEMS WERE FOUND TO BE OPERATING PROPERLY AND MEET COMPLIANCE WITH THE NEW JERSEY UNIFORM FIRE CODE NJAC 5:70-4.19.

SIGNED: _____ DATE: _____

PRINTED NAME: _____ LICENSE #: _____