



BOROUGH OF DORMONT

1444 HILLSDALE AVE
PITTSBURGH, PA 15216-2019
(412) 561-8900
FAX (412) 561-7805
www.boro.dormont.pa.us

Annual Fire Alarm System Inspection Report

Automatic fire detection system shall be connected to the buildings fire alarm control unit. The Fire Alarm System is required to be monitored by a supervising station in accordance with NFPA 72 and the system shall be continuously maintained and thoroughly inspected on an **annual** basis.

The Borough of Dormont has partnered with a service company called Compliance Engine, they will coordinate with your service provider to submit inspection reports to the Borough once a year as required by code. An inspection report must be furnished to the Building Official and records of testing shall be maintained according to the following:

- Control equipment, remote annunciators, initiating devices, HVAC shutdown devices and alarm notification appliances.
- Commercial Cooking Hood interconnect switches on extinguishing systems are also required to be tested annually.
- Inspection, testing and maintenance of batteries, smoke detectors (both system-connected and battery operated).

Protected Property Information

Site Address: _____

Name of Property and/or Business (*If applicable*): _____

Use Group _____

Name of property owner: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____ E-mail: _____

Fire Alarm System Installation, Service, and Testing Information

Installation Company responsible for testing: _____

Address: _____

Phone: _____ Fax: _____ E-mail: _____



BOROUGH OF DORMONT

1444 HILLSDALE AVE
PITTSBURGH, PA 15216-2019
(412) 561-8900
FAX (412) 561-7805
www.boro.dormont.pa.us

Name of Company receiving alarm signals with phone numbers (must provide)

Alarm Company: _____ Phone: _____

Supervisor: _____ Phone: _____

Additional Phone Numbers: _____ Fax: _____

Indicate the type of system:

FIRE ALARM SYSTEM FIRE-EXTINGUISHING SYSTEMS (SPRINKLERS)

COOKING HOOD SUPPRESSION STANDPIPE OTHER

Check here if the inspection is performed for the entire building.

If not the entire building, indicate the specific locations for which the inspection is being made: _____

Name of person Inspecting the System: _____

License number: _____ Phone number: _____

STATEMENT OF COMPLIANCE

I hereby certify that the system was inspected and/or tested under the above referenced address and is in compliance with NFPA 72 requirements.

Tested and Inspected by: _____ Date: _____
(Inspectors signature)

(Pleas attach a copy of the Fire Alarm Inspection report)

Attached is Compliance Engine information sheet, please forward this on to your Fire Alarm system service provider.