

FIRE ALARM INSPECTION REPORT

Customer: Sam Gandhi

Inspection Location: Best Western Plus - 8502 Seawall Blvd

Notes:

Inspector: Salvador Vargas, Robert Paxton

Date: 10/19/2020 08:00am CDT

Job Number: 19940780

[illegible]



A-1 FIRE EQUIPMENT COMPANY 3202
Main Street La Marque Tx, 77568 (409) 744-4438
Fax (409) 938-1331 WWW.A-1FIRE.COM
“PROTECTION FOR LIFE AND PROPERTY”

Island Fire and Safety
Equipment Co., Inc
ACR-1750774
ECR-973
SCR-G-1847307

FIRE ALARM INSPECTION REPORT

Customer: Sam Gandhi	Inspection Location Best Western Plus - 8502 Seawall Blvd
Street: 8628 Seawall Blvd.	Inspector: Salvador Vargas, Robert Paxton
City & State: Galveston TX	Date: 10/19/2020 08:00am CDT
Contact: Edward	Job Number: 19940780

System Tag Color	BLUE	<input checked="" type="checkbox"/>	YELLOW	<input type="checkbox"/>	RED	<input type="checkbox"/>
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1. SYSTEM INFORMATION:	YES	N/A	NO
A. Manufacturer <u>Silent knight</u> Model # <u>lfp 1000</u>			
B. System Type - <u>ldp</u> Addressable <u>Yes</u>			
C. Last date of Sensitivity Test <u>10/19/18</u>			
D. Does system indicate normal condition?	<input checked="" type="checkbox"/>		
E. Is the Installation Certificate posted at panel?	<input checked="" type="checkbox"/>		
F. Is the system being monitored?	<input checked="" type="checkbox"/>		
If yes - name of company: <u>A-1 Fire</u>			
G. Monitoring Phone # <u>1-800-2999900</u> Acct # _____			
Comments:			

2. POWER SUPPLIES:	YES	N/A	NO
A. Satisfactory?	<input checked="" type="checkbox"/>		
B. Primary Power <u>120</u> Volts Is there an emergency Generator?			<input checked="" type="checkbox"/>
C. Secondary Power _____ AC / DC _____ Battery Date: _____			
D. # of batteries _____ Amp Hour _____ Charging Voltage _____			

3. AUXILIARY POWER SUPPLIES:	YES	N/A	NO
A. Satisfactory?			
B. Manufacturer _____ Model # _____ Qty _____			
C. Secondary Power _____ Volts AC / DC _____ Battery Date: _____			
D. # batteries _____ Charging Voltage _____			

4. SYSTEM FUNCTIONS:	YES	N/A	NO
A. Satisfactory?			
B. Trouble - Audible _____ Visual _____ Silence _____			
C. Supervisory- Audible _____ Visual _____ Silence _____			
D. Alarm - Audible _____ Visual _____ Silence _____			
E. Lamp Test - _____ Disconnect Switches _____			
F. Annunciator - _____			
G. Fire Pump - Pump run _____ Pump fail _____ Phase reversal _____			

5. AUXILIARY FUNCTIONS:	SAT	N/A	UN-SAT	SAT	N/A	UN-SAT
A. HVAC Shutdown - Qty _____				Damper Control Qty _____		
B. Door Release - Qty _____				Mag Lock Release Qty _____		
C. Elevator Control - Qty _____				Fan Control Qty _____		

D. Additional Functions: _____

Comments: _____

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Percentage

System Status:

6. SYSTEM TESTS:	SAT	N/A	UN-SAT
A. Initiating Circuits- Qty_____ Indicating Circuits - Qty _____			
B. Manual Pull Stations - Qty_____ Model _____			
C. Smoke Detectors - Qty_____ Model _____ Type _____			
D. Heat Detectors - Qty_____ Model _____ Type _____			
E. Duct Detectors - Qty_____ Model _____ Type _____			
F. Waterflow - Qty_____ Model _____ Type _____			
G. Tamper - Qty_____ Model _____ Type _____			
H. Audibles - Qty_____ Model _____ Type _____			
I. Visuals_			

7. SYSTEM OPERATION:	YES	N/A	NO
A. Are device locations and descriptions accurate?			
B. Were audible signals heard throughout the building?			
C. Were signals received at the monitoring company?			
D. Is the system restored to Operational Status?			

Comments:

8. LIST ADJUSTMENTS OR CORRECTIONS MADE:

9. EXPLANATION OF ANY NEGATIVE ANSWERS:

10. SUPPLEMENTALS ATTACHED? Deficiencies List Device List Dry / Special System

11. REVIEW:

Inspector Signature_____

Customer Signature

Additional Comments:

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Percentage

EQUIPMENT	TOTAL QTY	PAST RPT	THIS RPT	YES		NO	NOTES
Control Equipment							
FACP							
Network Panels							
Booster Panels							
Annunciators							
Initiation Devices							
Detectors							
Smoke Detectors Photo							
Smoke Detectors Ion							
Heat Detectors							
Duct Detectors							
Pull Stations							
Notification Devices							
Horn / Strobes							
Horns							
Strobes							
Speaker / Strobes							
Mini /Horn							
Misc. Equipment							
Phone Jacks							
Door Holder / Mags							
Control Relays							
Waterflow Switches							
Tamper Switches							
Pressure Switches							

Comments:

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	Percentage
1. The company's financial performance is strong.	85%
2. The company's customer service is excellent.	78%
3. The company's product quality is high.	92%
4. The company's employee satisfaction is high.	70%
5. The company's market share is growing.	65%
6. The company's innovation is strong.	80%
7. The company's social responsibility is strong.	75%
8. The company's brand reputation is strong.	88%
9. The company's financial performance is weak.	15%
10. The company's customer service is poor.	22%
11. The company's product quality is low.	8%
12. The company's employee satisfaction is low.	30%
13. The company's market share is declining.	35%
14. The company's innovation is weak.	20%
15. The company's social responsibility is weak.	25%
16. The company's brand reputation is weak.	12%

INSPECTION DEFICIENCIES

Review:

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REPAIR PARTS DESCRIPTION

Make / Model/ Color/ Quantity

RECOMMENDATIONS

These items are recommended by your licensed inspector; please consider these changes and ask for pricing

Review: