

Building Permit No.

FIRE ALARM SYSTEM AFFIDAVIT FOR ALTERATIONS OR TENANT IMPROVEMENTS

(0-5 APPLIANCES WITHOUT PLAN REVIEW)

(Submittal of form by fax or over-the-counter)

Project Name:	Occupancy:
Valuation:	
Job Address:	Suite:
Contractor:	Phone:
(Both
Note: Deleted Fire Alarm Panel option the replacement of a fire alarm panel req manufacture specification sheets) for compliance with the current standard (ADA)	
Fire Alarm Control Panel:	To be Replaced / To be Relocated
No. of Proposed Notification Appliance Power Supplies: To be Added	
No. of Proposed Smoke/Heat Detectors:To b	e Added / To be Relocated (max 5) / (max 5)
No. of Proposed Manual Alarm Stations:To I	be Added / To be Relocated
No. of Proposed Notification Appliances:To l	be Added / To be Relocated

I, _____, Oregon Construction Contractors Board No. _____certify that the following is true and reasonably defines the scope of work for this project:

a) All work complies with the current state-adopted NFPA-72 and the authority having jurisdiction.

b) All notification appliances are located in accordance with the current state-adopted NFPA-72.

c) Smoke/Heat detector spacing complies with current state-adopted NFPA-72 and the authority having jurisdiction.

- d) Exposed wiring will not be covered until inspected.
- e) Final approval shall be subject to on-site tests and inspections.
- f) Voltage drop is adequate to operate all appliances and subject to field verification.
- g) Battery supplies are capable of supporting the system modifications.
- h) A statement of compliance, with the minimum information as specified in OFC Section 901.2.1, will be given to the building inspector prior to final approval.
- i) Compatibility of appliances and devices are in accordance with the FACP manufacturer's specifications.

In addition, I understand the following is required:

- * A sketch attached to this document and the building permit showing the area of work within the building's structure, and
- * A copy of this document shall be available for the authority having jurisdiction, and
- * An electrical permit.

Signature: ____

_____ Date: _____