



Certificate of Completion
Fire Alarm Systems and Fire Protection Monitoring Systems

This form must be completed and available to the inspector upon their arrival to conduct a final fire alarm system or fire protection monitoring system performance test.

Location of System

Bus. Name _____
Address: _____
City/State/Zip: _____
Bus. Phone: _____
Contact Person: _____

System Installer

Bus. Name: _____
Address: _____
City/State/Zip: _____
Bus. Phone: _____
Contact Person: _____

General Information

Alarm Panel Manufacturer: _____ Model: _____
Alarm Panel Location: _____
Annunciator Panel Location(s): _____
Primary Telephone #: _____ Secondary Telephone #: _____
Other Communication Method: _____
Monitoring Company: _____ Phone: _____
Passcode: _____ UL Certificate #: _____
Reset Procedure: _____

Documentation and labeling:

- NFPA 72 Record of Completion document completed
- Installing contractor information provided on panel
- Monitoring contractor information provided on panel
- Account number provided on panel
- Circuit breaker location and number provided on panel
- All required documents placed into cabinet or document box
- System map with a minimum size of 8-1/2" x 11"
- System reset information provided to fire department
- One key to the fire alarm system provided to the fire department
- One key for any other devices used with the fire alarm system
- One PDF set of as-built drawings and battery calculations provided to the fire department

Is the alarm system back in service? Yes _____ No _____

Alarm Installer Certification

I, _____, representing the firm _____, have installed the fire alarm system/fire protection monitoring system at the location detailed on this certificate in accordance with the approved plans and nationally recognized standards. I have tested the system in accordance with the manufacturer's specifications and the appropriate NFPA requirements and local ordinances.

Installer Signature: _____ **Date:** _____

COMMUNITY PRIDE SINCE 1857

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