

NFPA 72 inspection and testing record — 2019 edition

Blank form to print and fill by hand · every item of the 2019 record of inspection and testing, in Strobeline's own words (an alternative record under NFPA 72 7.6.6) · qualifications per 10.5.3

Systems in this building

Tick what the building has. Sections for a system it does not have can be left empty.

Is the system monitored by a supervising station? ☐ Yes ☐ No

Is there a public emergency alarm reporting system? ☐ Yes ☐ No

Is there a mass notification system (MNS)? ☐ Yes ☐ No

Is there an emergency communications system (voice / EVAC / two-way)? ☐ Yes ☐ No

Are there remote annunciators? ☐ Yes ☐ No

Are there remote power panels? ☐ Yes ☐ No

Inspection

Inspection start (date/time) _____

Inspection end (date/time) _____

Frequency covered by this visit ☐ annual ☐ semiannual ☐ quarterly ☐ monthly ☐ weekly
☐ other

NFPA 72 edition applied _____

Supplemental pages attached (count) _____

1. Property

Property name _____

Property address _____

Description _____

Owner / owner representative _____

Representative address _____

Representative phone _____

Representative fax (if applicable) _____

Representative email _____

Authority having jurisdiction (name, contact) _____

2. Testing and monitoring

Testing company

Testing company address

Testing company phone

Testing company fax (if applicable)

Testing company email

Monitoring company

Monitoring company address

Monitoring company phone

Monitoring company fax

Monitoring company email

Monitoring account number

Phone line 1

Phone line 2

Means of transmission

Alarm signals retransmitted to

Retransmission phone

3. Documentation

On-site location of record documents and site-specific software

4. System

Control unit manufacturer

Control unit model number

Firmware revision

System type (non-voice / voice / MNS / combination)

Primary power — nominal voltage

Primary power — amps

Primary power — location

Overcurrent protection — type

Overcurrent protection — amps	_____
Disconnecting means — location	_____
Secondary power — type	_____
Secondary power — location	_____
Battery type	_____
Calculated capacity — standby hours	_____
Calculated capacity — alarm minutes	_____

5. Notification before testing

Monitoring company — person and time	_____
Building management — person and time	_____
Building occupants — person and time	_____
AHJ — person and time (if applicable)	_____
Other — person and time (if applicable)	_____

6.1 Control unit and associated equipment

Control unit — visual / functional	☐ OK	☐ Not OK	☐ N/A	Note _____
Lamps / LEDs / LCD — visual / functional	☐ OK	☐ Not OK	☐ N/A	Note _____
Fuses — visual / functional	☐ OK	☐ Not OK	☐ N/A	Note _____
Trouble signals — visual / functional	☐ OK	☐ Not OK	☐ N/A	Note _____
Disconnect switches — visual / functional	☐ OK	☐ Not OK	☐ N/A	Note _____
Ground-fault monitoring — visual / functional	☐ OK	☐ Not OK	☐ N/A	Note _____
Supervision — visual / functional	☐ OK	☐ Not OK	☐ N/A	Note _____
Local annunciator — visual / functional (if applicable)	☐ OK	☐ Not OK	☐ N/A	Note _____
Remote annunciators — visual / functional	☐ OK	☐ Not OK	☐ N/A	Note _____
Remote power panels — visual / functional	☐ OK	☐ Not OK	☐ N/A	Note _____

6.2 Secondary power

Battery condition — visual / functional	☐ OK	☐ Not OK	☐ N/A	Note _____
Load voltage — visual / functional	☐ OK	☐ Not OK	☐ N/A	Note _____
Discharge test — visual / functional	☐ OK	☐ Not OK	☐ N/A	Note _____

Charger test — visual / functional ☐ OK ☐ Not OK ☐ N/A Note _____

Remote panel batteries — visual / functional ☐ OK ☐ Not OK ☐ N/A Note _____

6.6 Supervising station monitoring

Alarm — received (yes/no) and time ☐ Yes ☐ No ☐ N/A Time _____

Alarm restoration — received (yes/no) and time ☐ Yes ☐ No ☐ N/A Time _____

Trouble — received (yes/no) and time ☐ Yes ☐ No ☐ N/A Time _____

Trouble restoration — received (yes/no) and time ☐ Yes ☐ No ☐ N/A Time _____

Supervisory — received (yes/no) and time ☐ Yes ☐ No ☐ N/A Time _____

Supervisory restoration — received (yes/no) and time ☐ Yes ☐ No ☐ N/A Time _____

6.7 Public emergency alarm reporting system

Alarm — received (yes/no) and time ☐ Yes ☐ No ☐ N/A Time _____

Alarm restoration — received (yes/no) and time ☐ Yes ☐ No ☐ N/A Time _____

Trouble — received (yes/no) and time ☐ Yes ☐ No ☐ N/A Time _____

Trouble restoration — received (yes/no) and time ☐ Yes ☐ No ☐ N/A Time _____

Supervisory — received (yes/no) and time ☐ Yes ☐ No ☐ N/A Time _____

Supervisory restoration — received (yes/no) and time ☐ Yes ☐ No ☐ N/A Time _____

7. Notification of test completion

Monitoring company — person and time _____

Building management — person and time _____

Building occupants — person and time _____

AHJ — person and time (if applicable) _____

Other — person and time (if applicable) _____

8. System restored to normal (date/time) _____

Other tests

Sequence of operations (input -> output) verified (if applicable) _____

Other tests required by the manufacturer (if applicable) _____

Other tests required by the AHJ (if applicable) _____

9. Certification

Inspector printed name _____

Organization _____

Title _____

Phone _____

Qualifications (e.g., NICET level, state license number) _____

Inspector signature and date _____

10. Impairments and deficiencies not corrected

Uncorrected impairments / deficiencies (or «none»). Write «none» on the first line if nothing is open.

#	Device / location	Impairment · deficiency · observation	What is not corrected
1			
2			
3			
4			
5			
6			
7			
8			

10.1 Owner acceptance

Owner / representative signature, name, date, organization, title, phone (if applicable) _____

(j) MNS — system

Fill only if the building has a mass notification system.

MNS type (in-building combined / stand-alone / wide-area / distributed recipient / other) _____

MNS functions (combined FA/MNS · ACU only · wide-area interfaces · LOC · DRMNS · HPLA · other) _____

(j) MNS — power

Fill only if the building has a mass notification system.

MNS panel input voltage _____

MNS panel amps _____

Generator: location and fuel type and storage location, or «no generator» _____

Energy storage system (ESS): equipment served, location, capacity (standby h / alarm min), or «none» _____

Batteries: location, type, nominal voltage, Ah rating, capacity, date of manufacture marked _____

(j) MNS — test results

Fill only if the building has a mass notification system.

Functional test — visual / functional	☐ OK	☐ Not OK	☐ N/A	Note _____
Reset / power down test — visual / functional	☐ OK	☐ Not OK	☐ N/A	Note _____
Fuses — visual / functional	☐ OK	☐ Not OK	☐ N/A	Note _____
Primary power — visual / functional	☐ OK	☐ Not OK	☐ N/A	Note _____
ESS power test — visual / functional	☐ OK	☐ Not OK	☐ N/A	Note _____
Trouble signals — visual / functional	☐ OK	☐ Not OK	☐ N/A	Note _____
Disconnect switches — visual / functional	☐ OK	☐ Not OK	☐ N/A	Note _____
Ground-fault monitoring — visual / functional	☐ OK	☐ Not OK	☐ N/A	Note _____
CCU security mechanism — visual / functional	☐ OK	☐ Not OK	☐ N/A	Note _____
Prerecorded message content — visual / functional	☐ OK	☐ Not OK	☐ N/A	Note _____
Prerecorded message activation — visual / functional	☐ OK	☐ Not OK	☐ N/A	Note _____
Software backup performed — visual / functional	☐ OK	☐ Not OK	☐ N/A	Note _____
Test backup software — visual / functional	☐ OK	☐ Not OK	☐ N/A	Note _____
Fire alarm to MNS interface — visual / functional	☐ OK	☐ Not OK	☐ N/A	Note _____
MNS to fire alarm interface — visual / functional	☐ OK	☐ Not OK	☐ N/A	Note _____
In-building MNS to wide-area MNS — visual / functional	☐ OK	☐ Not OK	☐ N/A	Note _____
MNS to direct recipient MNS — visual / functional	☐ OK	☐ Not OK	☐ N/A	Note _____
Sound pressure: occupied (yes/no), ambient dBA, alarm dBA	_____			

Intelligibility: method, score, CIS value _____

(k) ECS — system description

Fill only if the building has an emergency communications system (voice evacuation, MNS or two-way).

System type (EVAC / MNS / combination / other) and additional description _____

EVAC: manufacturer, model, single/multiple voice channels, speakers, speaker circuits, amplifier location, paging microphone locations _____

MNS: type, functions, LOC locations, HPLA zones and locations, visible appliances, textual signs, other, supervision class, special suppression pre-alert _____

Two-way: telephone jacks, warden stations, handsets, powered/sound-powered, area of refuge and elevator stations with control points and hours, other _____

(k) ECS — control unit

Fill only if the building has an emergency communications system (voice evacuation, MNS or two-way).

Control unit — visual / functional	☐ OK	☐ Not OK	☐ N/A	Note _____
Lamps / LEDs / LCD — visual / functional	☐ OK	☐ Not OK	☐ N/A	Note _____
Fuses — visual / functional	☐ OK	☐ Not OK	☐ N/A	Note _____
Trouble signals — visual / functional	☐ OK	☐ Not OK	☐ N/A	Note _____
Disconnect switches — visual / functional	☐ OK	☐ Not OK	☐ N/A	Note _____
Ground-fault monitoring — visual / functional	☐ OK	☐ Not OK	☐ N/A	Note _____
Supervision — visual / functional	☐ OK	☐ Not OK	☐ N/A	Note _____
Local annunciator — visual / functional	☐ OK	☐ Not OK	☐ N/A	Note _____
Remote annunciators — visual / functional	☐ OK	☐ Not OK	☐ N/A	Note _____
Remote power panels — visual / functional	☐ OK	☐ Not OK	☐ N/A	Note _____

(k) ECS — secondary power

Fill only if the building has an emergency communications system (voice evacuation, MNS or two-way).

Battery condition — visual / functional	☐ OK	☐ Not OK	☐ N/A	Note _____
Load voltage — visual / functional	☐ OK	☐ Not OK	☐ N/A	Note _____
Discharge test — visual / functional	☐ OK	☐ Not OK	☐ N/A	Note _____
Charger test — visual / functional	☐ OK	☐ Not OK	☐ N/A	Note _____

Remote panel batteries — visual / functional ☐ OK ☐ Not OK ☐ N/A Note _____

(k) ECS — emergency communications equipment

Fill only if the building has an emergency communications system (voice evacuation, MNS or two-way).

Control unit — visual / functional ☐ OK ☐ Not OK ☐ N/A Note _____

Lamps / LEDs — visual / functional ☐ OK ☐ Not OK ☐ N/A Note _____

Fuses — visual / functional ☐ OK ☐ Not OK ☐ N/A Note _____

Secondary power supply — visual / functional ☐ OK ☐ Not OK ☐ N/A Note _____

Trouble signals — visual / functional ☐ OK ☐ Not OK ☐ N/A Note _____

Disconnect switches — visual / functional ☐ OK ☐ Not OK ☐ N/A Note _____

Ground-fault monitoring — visual / functional ☐ OK ☐ Not OK ☐ N/A Note _____

Panel supervision — visual / functional ☐ OK ☐ Not OK ☐ N/A Note _____

System performance — visual / functional ☐ OK ☐ Not OK ☐ N/A Note _____

System audibility — visual / functional ☐ OK ☐ Not OK ☐ N/A Note _____

System intelligibility — visual / functional ☐ OK ☐ Not OK ☐ N/A Note _____

(k) ECS — MNS equipment

Fill only if the building has an emergency communications system (voice evacuation, MNS or two-way).

Functional test — visual / functional ☐ OK ☐ Not OK ☐ N/A Note _____

Reset / power down test — visual / functional ☐ OK ☐ Not OK ☐ N/A Note _____

Fuses — visual / functional ☐ OK ☐ Not OK ☐ N/A Note _____

Primary power — visual / functional ☐ OK ☐ Not OK ☐ N/A Note _____

ESS power test — visual / functional ☐ OK ☐ Not OK ☐ N/A Note _____

Trouble signals — visual / functional ☐ OK ☐ Not OK ☐ N/A Note _____

Disconnect switches — visual / functional ☐ OK ☐ Not OK ☐ N/A Note _____

Ground-fault monitoring — visual / functional ☐ OK ☐ Not OK ☐ N/A Note _____

CCU security mechanism — visual / functional ☐ OK ☐ Not OK ☐ N/A Note _____

Prerecorded message content — visual / functional ☐ OK ☐ Not OK ☐ N/A Note _____

Prerecorded message activation — visual / functional ☐ OK ☐ Not OK ☐ N/A Note _____

Software backup performed — visual / functional	☐ OK	☐ Not OK	☐ N/A	Note _____
Test backup software — visual / functional	☐ OK	☐ Not OK	☐ N/A	Note _____
Fire alarm to MNS interface — visual / functional	☐ OK	☐ Not OK	☐ N/A	Note _____
MNS to fire alarm interface — visual / functional	☐ OK	☐ Not OK	☐ N/A	Note _____
In-building MNS to wide-area MNS — visual / functional	☐ OK	☐ Not OK	☐ N/A	Note _____
MNS to direct recipient MNS — visual / functional	☐ OK	☐ Not OK	☐ N/A	Note _____
Sound pressure: occupied (yes/no), ambient dBA, alarm dBA	_____			
Intelligibility: method (CSI / STI), score	_____			

(k) ECS — two-way equipment

Fill only if the building has an emergency communications system (voice evacuation, MNS or two-way).

Phone handsets — visual / functional	☐ OK	☐ Not OK	☐ N/A	Note _____
Phone jacks — visual / functional	☐ OK	☐ Not OK	☐ N/A	Note _____
Off-hook indicator — visual / functional	☐ OK	☐ Not OK	☐ N/A	Note _____
Call-in signal — visual / functional	☐ OK	☐ Not OK	☐ N/A	Note _____
System performance — visual / functional	☐ OK	☐ Not OK	☐ N/A	Note _____
System audibility — visual / functional	☐ OK	☐ Not OK	☐ N/A	Note _____
System intelligibility — visual / functional	☐ OK	☐ Not OK	☐ N/A	Note _____

Device test record (supplement)

One row per initiating device, notification appliance and interface component. Result: P = pass · F = fail · NT = not tested (write the reason). Sensitivity readings, if measured, go in the note.

#	Device type	Address	Location / zone	Result P / F / NT	Reason or note
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
21					
22					
23					
24					
25					
26					
27					
28					
29					
30					

#	Device type	Address	Location / zone	Result P / F / NT	Reason or note
31					
32					
33					
34					
35					
36					
37					
38					
39					
40					
41					
42					
43					
44					
45					
46					
47					
48					
49					
50					
51					
52					
53					
54					
55					
56					
57					
58					
59					
60					
61					
62					

#	Device type	Address	Location / zone	Result P / F / NT	Reason or note
63					
64					
65					
66					
67					
68					
69					
70					
71					
72					
73					
74					
75					
76					
77					
78					
79					
80					
81					
82					
83					
84					
85					
86					
87					
88					
89					
90					
91					
92					

Prefer your phone? strobeline.com/app keeps each building's device list, records results with no signal, signs on site and sends the owner a link to the stored record.