



# TENANT FIRE ALARM / ANSUL FUNCTIONAL INSPECTION REQUEST

Send Inspection Request by email to [sfobice@flysfo.com](mailto:sfobice@flysfo.com) and [airportfiremarshal@flysfo.com](mailto:airportfiremarshal@flysfo.com)

**Request must be received by SFFD & BICE before 2pm, at a minimum of two workdays (48hours M-F) in advance of the inspection.**

**Date of Inspection Requested:** [REDACTED]  
(DAY/MM/DD/YY)

**Confirm your inspection by phone with appropriate Inspectors.**

**AM** (7:30am-12:00pm)  **PM** (12:00pm-3:00pm)

**OFF-HOUR** [REDACTED] (specify your off-hour time)

**Off hour inspections must be pre-approved with appropriate Inspectors.**

**Request By:**

[REDACTED]

**Email:**

[REDACTED]

**Phone:**

[REDACTED]

**Project Location Description / Proximity:**

[REDACTED]

**Tenant Project: T-** [REDACTED]

**Description of Inspection Requested:**

Fire Alarm **Permit #:** [REDACTED] (required)

Ansul **Permit #:** [REDACTED] (required)

Pre Test Completed (use attached checklist / reviewers signoff required)

(Approved plans shall be available on job site)

FOR OFFICIAL USE ONLY

**BICE INSPECTOR'S COMMENTS:**  APPROVED  REINSPECTION/CORRECTION NEEDED

**Inspector:**

**Date:**

**SFFD INSPECTOR'S COMMENTS:**  APPROVED  REINSPECTION/CORRECTION NEEDED

**Inspector:**

**Date:**

# PRE-TEST CHECKLIST (required to submit with Inspection Request)

Tenant Project Name: \_\_\_\_\_

P	F	NA		All items below (not all inclusive) must be tested/checked/confirmed and pass prior to the final fire alarm system test.	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1	Submit installer's certificate that installation is completed and has been tested, including new or relocated equipment listed below.	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2	The Approved plans shall be available at the job site	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	3	Life Safety Components match approved plan	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	4	Type and gauge of wire or cable(s) match plans	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5	Initiating and alarm device locations match plans	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	6	Alarm, supervisory and trouble signals are distinctive	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	7	All devices are mounted at proper height (wall mounted 80" to 96" above floor, or on ceiling)	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	8	Strobes candela match plans	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	9	Trouble condition has been tested for each circuit affected by installation	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	10	New or relocated initiating devices have been tested	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	11	Remote annunciator receives correct information	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	12	Activation of emergency control function interface device occurs within 10 seconds of activation of the initiating device. NFPA 72 (2016) 10.11.1	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	13	Strobes have been synchronized if more than 2 devices are in field of view NFPA 72 (2016) 18.5	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	14	Music system shutdown on alarm activation	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	15	Duct detectors have been tested for supervision and/or alarm, and fan shutdown per plans	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	16	Other systems activate fire alarm: kitchen hood suppression system, clean agent, HVAC duct detectors (>2000cfm), etc	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	17	Dampers open/ close upon alarm activation	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	18	Magnetic door holders release as per plans	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	19	Elevator recall has been tested as per plans	
Reviewers: <small>(signoff required)</small>				signatures	date
Electrical Contractor:					
General Contractor:					
Tenant Coordinator:					