

Gill Security Systems, Inc
818 Ramsey St.
Fayetteville, NC 28301
910-433-2868

Fire Alarm – Annual
Customer: [Click here to enter text.](#)
Building: [Click here to enter text.](#)
Address: [Click here to enter text.](#)

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| | | | |
|--|---|--|---|
| CUSTOMER NAME: BUILDING NAME: INSPECTION TYPE: FREQUENCY: WORK ORDER: INSPECTION START DATE: INSPECTION END DATE: | Carolina Water & Fire 1337 Leet Street Fire Alarm Annual 149857 4/5/2025 4/5/2025 | TECHNICIAN: ACCOUNT NAME: OFFICE ADDRESS: OFFICE PHONE: | Jesica Jones Carolina Fire & Water 457 Cool Dr Bandit, NC 27458 910-745-1337 |
|--|---|--|---|

FIRE ALARM INSPECTION REPORT

| DEVICE DEFICIENCIES | | | | | | | | |
|---------------------|-------------|---------|--------|------------|-------|--------|--------------|--------|
| LOCATION | DESCRIPTION | ADDRESS | DEVICE | MAKE | MODEL | SERIAL | DATE OF TEST | TYPE |
| 102 Hall | Strobe | n/a | 1 | Silent Cat | EE-45 | n/a | 4/5/2025 | Stroke |

INSPECTION RESULTS SUMMARY

| DEVICE TYPE | INVENTORY COUNT | PASSED | FAILED | CANNOT INSPECT |
|--------------------|-----------------|--------|----------|----------------|
| Annunciator | 1 | Y | | |
| Battery | 2 | Y | | |
| DACT Battery | 0 | | | |
| DACT Point | 0 | | | |
| Heat Detector | 0 | | | |
| Panel | 1 | Y | | |
| Pull Station | 18 | Y | | |
| Smoke Alarm | 57 | Y | | |
| Horn/Strobe | 34 | Y | | |
| Strobe | 18 | Y | | |
| Bell | 1 | Y | | |
| Water Flow Tampers | 2 | Y | | |
| Total | 216 | | 0 | 0 |



| INSPECTION RESULTS SUMMARY | | | | |
|-----------------------------------|-----------------|--------|--------|----------------|
| DEVICE TYPE | INVENTORY COUNT | PASSED | FAILED | CANNOT INSPECT |
| Annunciator | | | | |
| Battery | | | | |
| DACT Main | | | | |
| DACT Point | | | | |
| Heat Detector | | | | |
| Panel | | | | |
| Pull Station | | | | |
| Smoke Alarm | | | | |
| Total | 0 | 0 | 0 | 0 |

| FACP PANELS | | | | | | |
|--|----------|-------------|--------------|-------|-------------|-----------------|
| # | LOCATION | DESCRIPTION | MANUFACTURER | MODEL | DEVICE TYPE | RESULT |
| 1 | | | | | | |
| 2 | | | | | | |
| 3 | | | | | | |
| Is the panel in a normal condition at the start of the inspection? | | | | | | Choose an item. |
| Alarm, Supervisory, and Trouble Signals (Inputs)? | | | | | | Choose an item. |
| Circuit Supervisory (Including Opens, Shorts & Ground Faults)? | | | | | | Choose an item. |
| Alarm verification sequence verified? | | | | | | Choose an item. |
| Power Supply Supervisory – Loss of AC Power/Batteries? | | | | | | Choose an item. |
| Fuses/Lamps/LED Tested & Verified? | | | | | | Choose an item. |
| Interface Equipment Verification of Required Signals? | | | | | | Choose an item. |
| Main Power Supply Tested Under Full Load? | | | | | | Choose an item. |
| Amplifier/Tone Generators Verified? | | | | | | Choose an item. |
| Call-In Signal Silence- Visual & Audible? | | | | | | Choose an item. |
| Remote Annunciator(s) – Operation/Verification? | | | | | | Choose an item. |

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| | |
|--|-----------------|
| Initiating Devices Test? | Choose an item. |
| Masterbox/Central Station Connection Tested? | Choose an item. |
| Alarm Notification Appliances Tested? | Choose an item. |

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| BATTERIES | | | |
|---------------------------------------|----------|-------------|-----------------|
| # | LOCATION | DESCRIPTION | RESULT |
| 1 | | | |
| 2 | | | |
| 3 | | | |
| Quantity (multiples of two for a set) | | | |
| AMP Hour Rating | | | |
| Visual Inspection | | | |
| Has Manufactory's Date Exceeded? | | | Choose an item. |
| Manufactory Date Code | | | |
| Load Voltage Test | | | |
| Reason for failure: | | | |

| DACT MAIN | | | |
|--|----------|-------------|-----------------|
| # | LOCATION | DESCRIPTION | RESULT |
| 1 | | | |
| Central Station Company | | | Choose an item. |
| Communicator model name and number | | | |
| Does communicator possess dual connection functionality? | | | |
| Number of lines connected? | | | |
| Account Number | | | |
| Receiving Station Operator ID/Name | | | |
| Line 1 Type | | | |
| Line 2 Type | | | |

| DACT POINT | | | |
|--|----------|-------------|--------|
| # | LOCATION | DESCRIPTION | RESULT |
| 1 | | | |
| Transmission to Receiving Station completed within 10 minutes? | | | |
| Time to Report to Receiving Station (In Seconds) | | | |

| SMOKE SENSING DEVICES | | | | |
|------------------------------|----------|---------|-------------|--------|
| # | LOCATION | ADDRESS | DESCRIPTION | RESULT |
| 1 | | | | |

| HEAT DETECTORS | | | | |
|-----------------------|----------|---------|-------------|--------|
| # | LOCATION | ADDRESS | DESCRIPTION | RESULT |
| 1 | | | | |

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PULL STATIONS

| # | LOCATION | ADDRESS | DESCRIPTION | RESULT |
|---|----------|---------|-------------|--------|
| 1 | | | | |

ANCILLARY FIRE ALARM DEVICES

| # | LOCATION | ADDRESS | DESCRIPTION | RESULT |
|---|----------|---------|-------------|--------|
| 1 | | | | |

SPRINKLER TAMPER/MONITORING DEVICES

| # | LOCATION | ADDRESS | DESCRIPTION | RESULT |
|---|----------|---------|-------------|--------|
| 1 | | | | |

INSPECTION RESULTS SUMMARY

| DEVICE TYPE | INVENTORY COUNT | PASSED | FAILED | CANNOT INSPECT |
|---------------|-----------------|--------|--------|----------------|
| Horn + Strobe | | | | |
| Strobe | | | | |
| Bell | | | | |
| Total | 0 | 0 | 0 | 0 |

HORN + STROBE DEVICES

| # | LOCATION | ADDRESS | DESCRIPTION | RESULT |
|---|----------|---------|-------------|--------|
| 1 | | | | |

STROBE DEVICES

| # | LOCATION | ADDRESS | DESCRIPTION | RESULT |
|---|----------|---------|-------------|--------|
| 1 | | | | |

BELLS

| # | LOCATION | ADDRESS | DESCRIPTION | RESULT |
|---|----------|---------|-------------|--------|
| 1 | | | | |

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| | | |
|------------------------|-------------------|------|
| Inspector Signature | Inspector Name | Date |
|------------------------|-------------------|------|