

NEWTON FIRE DEPARTMENT
1164 CENTRE STREET
NEWTON, MASSACHUSETTS 02459

FIRE PREVENTION/CODE ENFORCEMENT DIVISION
FIRE ALARM/COMMUNICATIONS DIVISION
(617) 796-2230 (617) 796-2220
FAX (617) 796-2239

REQUEST FOR ACCEPTANCE TEST

DOCUMENT #: _____

DATE: _____

SUBJECT: Request for Fire Protection System Acceptance Test, per State and local codes and Fire Prevention/Code Enforcement requirements.

This is to certify that the Fire Protective System, located at:

has been 100% tested and functions in complete compliance with the system specifications and manufacturer's recommendations. (A dated copy of the form used indicating all devices and detectors tested and a check for \$100.00 payable to City of Newton, must be submitted with this form.)

****NO FAXED APPLICATIONS ACCEPTED****

FIRE ALARM SERVICE COMPANY

TELEPHONE #

SIGNATURE OF INSTALLER/TESTER

NFD ID SIGNATURE

SPRINKLER SERVICE COMPANY

SIGNATURES OF FIRE ALARM INSTALLER

SPRINKLER INSTALLER

GENERAL CONTRACTOR

OWNER OF PROPERTY

NOTE: IN THE EVENT THAT THE AFOREMENTIONED FIRE PROTECTIVE SYSTEM IS REJECTED BY THE NEWTON FIRE DEPARTMENT, ANY SUBSEQUENT ACCEPTANCE TESTS REQUESTED FOR THAT SYSTEM WILL REQUIRE REIMBURSEMENT TO THE CITY OF NEWTON FOR LABOR COST OF FIRE PERSONNEL CONDUCTING THE TEST. ALL TESTS WILL BE PERFORMED BETWEEN 8:00 A.M. AND 4:00 P.M., MONDAY THROUGH FRIDAY.

***MINIMUM OF FIVE (5) DAYS (AFTER RECEIPT OF THIS FORM) SHALL BE REQUIRED BEFORE SCHEDULING A DATE FOR THE FIRE DEPARTMENT TEST.**