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|  | FIRE-LINK  FIRE ALARM CONNECTION FORM |

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| ***BUILDING OWNER INFORMATION*** | | | | |
| ***Building Name*** |  | | | |
| ***Contact Name*** |  | | ***Phone Number*** |  |
| ***Physical Address*** |  | | | |
| ***Suburb*** |  | | ***New Building?*** | ***Yes***  ***No*** |
| ***Town/City*** |  | | | |
| ***Postal Address***  *Leave blank if the same as physical address* |  | | | |
| ***Suburb*** |  | ***Mobile*** |  | |
| ***Town/City*** |  | | | |
| ***Email Address*** |  | | | |
| ***FIRE CONTRACTOR INFORMATION*** | | | | |
| ***Contact Name*** |  | | ***Phone Number*** |  |
| ***Postal Address*** |  | | | |
| ***Suburb*** |  | ***Mobile*** |  | |
| ***Town/City*** |  | | | |
| ***Email Address*** |  | | | |

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| ***FIRE ALARM DETAIL INFORMATION*** | | | | | | | | |
| ***Alarm Type*** | ***2***   ***3***   ***4***    ***5***   ***6***  ***7***   ***8***   ***9*** | | | | | | | |
|  | | | | | | | | |
| ***No. of PFA Connections*** | ***Manufacturer*** | | ***Model*** | | | | ***Location of Fire panel/Sprinkler/Mimic Panel*** | |
|  |  | |  | | | |  | |
| ***Notes*** |  | | | | | | | |
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| ***Copy of Letter from Certifier to be Attached***  *NOTE: The connection can proceed prior to receiving the inspection letter; however, full commissioning cannot be completed until certification is obtained.* | ***Letter Attached?***  ***Yes***  ***No*** | | | | ***Send Letter After Certification?***  ***Yes***  ***No*** | | | |
| ***Installation Location for NAD*** |  | | | | | | | |
| ***Has the cable been run to the demarcation point?*** | ***Yes***  ***No*** | ***Has the power connection been installed?*** | | ***Yes***  ***No*** | | ***Has the SGD been installed?*** | | ***Yes***  ***No*** |

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| ***Once from is complete please send to:*** [***fire-link@alarmnz.com***](mailto:fire-link@alarmnz.com)  *ALARM NETWORKS Monitoring Ph: 093030303 | Service Ph: 09 303 3033*  *Any queries, please contact: helpdesk@alarmnz.com* |