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|  | FIRE-LINKFIRE 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*** |
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| ***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****ALARM NETWORKS Monitoring Ph: 093030303 | Service Ph: 09 303 3033**Any queries, please contact: helpdesk@alarmnz.com* |