



# Tacoma Fire Department

Confidence Test Officer 253.591.5740

3471 S. 35<sup>th</sup> St. Tacoma, WA 98409

tfdcto@cityoftacoma.org

<b>SMOKE CONTROL SYSTEMS</b> (One System per Report) Annual		CTF 8012	System Certification Given		
CONFIDENCE TEST <input type="checkbox"/>	REPAIRS <input type="checkbox"/>		RED <input type="checkbox"/>		YELLOW <input type="checkbox"/>
Type of Smoke Control System		Tempered Windows <input type="checkbox"/>	Smoke Removal <input type="checkbox"/>		
Date of Inspection:					
<i>Occupancy Information</i>					
Occupancy Name:			Occupancy Address:		
Building Owner:		Phone Number:		Owner Address:	
Contact Person:			Phone Number:		
<i>System Information (where applicable)</i>					
Central Station Monitoring Yes <input type="checkbox"/> No <input type="checkbox"/>			Monitoring Company Name:		
Control Panel Manufacturer:			Model Number:		
<i>Testing Agency Information</i>					
City of Tacoma Fire Protection License:		Washington State Contractor License:		NICET NUMBER:	
Testing Agency Name:			Address:		
Phone:			E-mail:		
<b>Problems Found:</b> (Explain any "no" responses and use the back page if necessary)					
<b>Corrections Made:</b>					
Date Corrected:		Corrected by:		(Sign)	
This report certifies this fire and life safety system has been properly inspected for reliability to cover the items listed in the report and is consistent with NFPA 92-A Standard. All discrepancies are noted and have been reported to the building owner or responsible person for corrective action.					
Tech Name: (Print)		(Sign)		Date:	
Signature of Building Representative: (Print)		(Sign)		Date:	

The items on the checklists below shall be inspected and tested. This list does not constitute all of the required inspecting and testing of the fire and life safety system. Refer to the NFPA 92-A Standard for inspecting and testing requirements.

BREAKOUT GLASS		YES	NO
1.	2 inch white dots located on lower 1/3 of window?	<input type="checkbox"/>	<input type="checkbox"/>
2.	Breakout windows located at approximately 50 feet intervals around building perimeter?	<input type="checkbox"/>	<input type="checkbox"/>
3.	Tempered windows are unobstructed?	<input type="checkbox"/>	<input type="checkbox"/>
4.	Tempered windows on all floor levels above the first floor?	<input type="checkbox"/>	<input type="checkbox"/>
5.	Building has operable windows?	<input type="checkbox"/>	<input type="checkbox"/>

SMOKE REMOVAL		YES	NO
1.	Building has smoke removal fans?	<input type="checkbox"/>	<input type="checkbox"/>
2.	Smoke removal system operates on fire alarm activation?	<input type="checkbox"/>	<input type="checkbox"/>
3.	Building has fire dampers?	<input type="checkbox"/>	<input type="checkbox"/>
4.	Fire Dampers operate on fire alarm?	<input type="checkbox"/>	<input type="checkbox"/>
5.	Systems operate on emergency generator?	<input type="checkbox"/>	<input type="checkbox"/>
6.	Does the smoke removal system provide six air changes per hour?	<input type="checkbox"/>	<input type="checkbox"/>
7.	Show calculations for measuring.		

