



FA Sales Rep Questionnaire



Project Information

Project Name: _____ Street Address: _____ Suite: _____
 City: _____ State: _____ Jurisdictional Name: _____
 AHJ Contact Person: _____ Phone: _____ Email: _____

Applicable Codes

- NFPA 72, Year _____ NFPA 70, Year _____
 IFC, Year _____ NFPA 702, Year _____
 _____ (Other), Year _____

Local Ordinances/Special Requirements: _____

Occupancy Rating/Load: _____

Scope of work

- New building Existing building
 New or full system replacement Add-on Upgrade

Initiating Devices

Duct Detectors: _____ (Qty.)
(1 required on units between 2,000-15,000 CFM, 2 required on units over 15,000 CFM, or the combined CFM in the space may require them on all units.)

Smoke and/or Heat Detectors: (Above FACP & power supplies required)

- Fan Shut Down: Global Individual
 Fan Shut Down By: Duct Detector General Alarm Energy Mgmt Sys Control Relays

Coverage of Elec/Mech Rooms Required?

- Yes No

Other Areas of Coverage Required?

- Yes No

Evac System

- Yes No

Hazardous Mat'l's

- Yes No

Circuiting	Class B	Class A
Addressable Loop (SLC)	<input type="checkbox"/>	<input type="checkbox"/>
Initiating Device Circuit	<input type="checkbox"/>	<input type="checkbox"/>
Notification Appliance Circuit	<input type="checkbox"/>	<input type="checkbox"/>

Sleeping Rooms/Areas

- Yes No

For Mall/Multi-Level Only

- Stand-Alone Fire System Allowed Recall Detectors Required
 Elevator Shaft Sprinklered
 Power Shunt Trip Heat Detectors/Module Shaft Detectors

Controls

FACP Panel Location: _____

Type of System:

- Addressable
 Conventional
 Combo

Type of Remote Annunciator:

- Remote LCD Display LED Exterior/WP
 Graphic Display
 LED Display

Location of main FACP panel: _____

Annunciator(s) Location: _____

Sprinklers

Building is FULLY sprinklered (Wet System)
If the building is fully sprinklered, note device count:

Building is partially sprinklered

Waterflow: _____ Tamper switch: _____ PIV: _____

Backflow preventer: _____ Gate Valve: _____

Other: _____

- Kitchen hood (Wet Chemical) Clean Agent System (Type: _____)
 Paint Booth (Dry Chemical) Dry Pipe System (Pressure Switches: _____)
 Pre-Action System Deluge System (Type: _____)
 Halon System

Note: _____

Notification Appliances

- 100% audible/visual coverage complete
 One (sprinkler monitoring) required
 Exterior required (Note: _____)
 Ceiling mounted devices allowed (Check if YES)

Note: _____

Conduit and Wire

- Non-plenum cable acceptable in non-plenum ceiling
 Plenum required

Note: _____

Central Station Monitoring Service

Primay/Sole path

- Digital dialer (DACT)
 Backup

Back-up

- Digital dialer (DACT)
 Backup
 None

PLEASE FILL OUT THIS QUESTIONNAIRE COMPLETELY. IF SOMETHING DOES NOT APPLY, PLEASE WRITE "N/A."

NOTES