



**NMSU FIRE DEPARTMENT
POWER SUPPLY
SUPPLEMENTAL RECORD OF COMPLETION**



PROPERTY INFORMATION

Name of property: _____

Address: _____

SYSTEM POWER

Control Unit: _____ Primary Power: _____

Input voltage of control panel: _____ Control panel amps: _____

Overcurrent protection: _____ Type: _____

Location (of primary supply panel-board): _____

Disconnecting means location: _____

Engine-Driven Generator

Location of generator: _____

Location of fuel storage: _____ Type of fuel: _____

Uninterruptible Power System

Equipment powered by UPS system: _____

Location of UPS system: _____

Calculated capacity of UPS batteries to drive the system components connected to it:

In standby mode (hours): _____ In alarm mode (minutes): _____

Batteries

Location: _____ Type: _____

Calculated capacity of batteries to drive the system:

In standby mode (hours): _____ In alarm mode (minutes): _____

Nominal voltage: _____ Amp/hour rating: _____

In-Building Fire Emergency Voice Alarm Communications System or Mass Notification System

Primary Power: _____

Input voltage of EVACS or MNS panel: _____ EVACS or MNS panel amps: _____

Overcurrent protection: Type: _____ Amps: _____

Location (of primary supply panel-board): _____

Disconnecting means location: _____

See Main System Record of Completion for additional information, certifications, and approvals. This form is to be completed by the system installation contractor at the time of system acceptance and approval. Attach additional sheets, data, or calculations as necessary to provide a complete record.

Form Completion Date: _____

Supplemental Pages Attached: _____