Range Hood Systems Report A.M. 2100 WALTER ALARM RENOVATION INSTALLATION RECHARGE ANNUAL **UL 300** SERVICES LOCATION OF SYSTEM CYLINDERS NO DRY CHEMICAL MODEL NUMBER PO Box 522 CRYSTAL LAKE, IL 60039-0522 CYLINDER SIZE SLAVE CYLINDER SIZE SLAVE CYLINDER SIZE MASTER 815-459-1136 FAX 815-477-1136 OTHER FUSE LINKS 500° F. FUSE LINKS 450° F. SIZE ELECTRIC **FUEL SHUT-OFF** Address LAST RECHARGE DATE LAST HYDRO TEST DATE Telephone Store No. DATE DRAWING NUMBER: PAGE NUMBER: Owner or Manager COOKING APPLIANCE LOCATIONS: LEFT TO RIGHT All appliances properly covered w/correct nozzles 20. Replaced fuse links Duct and plenum covered w/correct nozzles 21. Check travel of cable nuts/S-hooks 22. Piping & conduit securely bracketed Check positioning of all nozzles. System installed in accordance w/MFG UL listing 23. Proper separation between fryers & flame Hood/duct penetrations sealed w/weld or UL device 24. Proper clearance-flame to filters 25, Exhaust fan in operating order Check if seals intact, evidence of tampering NIA 26. All filters in place If system has been discharged, report same 27. Fuel shut-off in on position Pressure gauge in proper range (If gauged) 28. Manual & remote set/seals in place Check cartridge weight (If applicable) 2016 29. Replace systems covers Hydrostatic test date ok 30. System operational & seals in place 11. 6 year maintenance date 31. Slave system operational Inspect cylinder and mount 32. Clean cylinder & mount Operate system from terminal link 33. Fan warning sign on hood Test for proper operation from remote 34. Personnel instructed in manual operation of system Check operation of micro switch 35. Proper hand portable extinguishers Check operation of gas valve 36. Portable extinguishers properly serviced 17. Clean nozzles 37. Service & Certification tag on system Proper nozzle covers in place NOTE DISCREPANICES OR DEFICIENCIES BELOW 19. Check fuse links and clean COMMENTS: SUPPRESSION SYSTEM links (4-50° Replaced On this date, this range hood fire suppression system was inspected and operationally tested in accordance with the fire suppression system requirements of NFPA17 or 17A, 96 and the manufacturer's manual, with the results indicated above. Χ SERVICE TECHNICIAN PERMIT NO. TIME: CUSTOMER'S AUTHORIZED AGENT AM The above service technician certifies that the system was personally inspected and found conditions to be as indicated on this report. WHITE-CUSTOMER COPY YELLOW-DISTRIBUTOR PINK-AUTHORITY HAVING JURISDICTION

## WALTER ALARM SERVICES, INC. P.O. Box 522 Crystal Lake, IL 60039-0522 (815)459-1136

State Licenses:
Alarm #127-000739
Suppression #0129 ABC
Sprinkler #FSC 159
Cook County # E 8827-93

NAME MANVELAS BANGURIT	DATE 3/13/25				
STREET 4 WASHINGTON ST	PHONE #				
TOWN/ST FOXIAHK/1614511/2 12	TECHNICIAN 06				
NATURE OF CALL:					
FINE FXTINGUEHEN	And FIRE SUPPRESSOR				
INSPROR					
ACTION TAKEN:					
(1) 51BS ABC IN Fon	642				
(2) ANNVAR SKENNER SLBS ABC					
(2) ANNVAR SKENNA STES ABC					
FINE SUPPRESSION INS	26. ILEPEACES				
4 FUSSIBUR CINKS					

сомми	JNICATIONS TEST:	CODESVER	IFIED BY:	_TIME:
QTY	PART NUMBER	DESCRIPTION	PRICE	CUSTOMER ENGAGES WALTER ALARM SERVICES TO PERFORM THE SERVICE DESCRIBED HEREIN. THIS ENGAGEMENT IS BASED ON THE
1	7	FIRE SUPPRESSION	18500	FORM WHICH ARE INCORPORATED THEREIN BY THIS REFERENCE
4	FUSSIBU	2 cmrs 450°	6 8000	CUSTOMER HEREBY ACKNOWLEDGES HAVING READ AND UNDERSTOOD ALL OF SUCH TERMS AND CONDITIONS AND IN PARTICULARLY PARAGRAPH #2 WHICH LIMITS WALTER ALARM SERVICES LIABILITY.
3	ANNOA	MANTENN	3900	
1	67n	MAINTENDER	5600	SIGNATURE X SIGNATURE X
1				DATE
	Szen	un exce	4500	TITLE
				SERVICE CALL COMPLETE? Y N
				NEW SERVICE ORDER WRITTEN? Y N #
				RETURN APPOINTMENT DATE
			TOTAL \$ 366°	TIME