

Bid 165-2022 Addendum 1 Marmic Fire and Safety Supplier Response

Event Information

Number: Bid 165-2022 Addendum 1

Title: Fire Alarm Monitoring and Maintenance

Type: Competitive Bid Issue Date: 12/12/2022

Deadline: 12/27/2022 02:00 PM (ET)

Notes: ONLY ONLINE BIDS WILL BE ACCEPTED.

Contact Information

Contact: Kristie Thomas Address: Central Purchasing

Government Center Building

Room 338

200 East Main Street Lexington, KY 40507

Phone: (859) 2583320 Fax: (859) 2583322

Email: kthomas@lexingtonky.gov

Marmic Fire and Safety Information

Contact: Scott Barry Address: 181 ZAKK CT

NICHOLASVILLE, KY 40356

Phone: (859) 333-8854

Email: sbarry@marmicfire.com

Web Address: Marmicfire.com

ONLY ONLINE BIDS WILL BE ACCEPTED! By submitting your response, you certify that you are authorized to represent and bind your company and that you agree to all bid terms and conditions as stated in the attached bid/RFP/RFQ/Quote/Auction documents.

 Scott Barry
 sbarry@marmicfire.com

 Signature
 Email

Submitted at 12/27/2022 01:45:41 PM (ET)

Response Attachments

KENNETH CALVIN NICET LEVEL II.pdf

NICET Cert.

165-2022 Bid Documents.pdf

Bid Docs

165-2022 Addendum 1.pdf

Addendum 1

165-2022 Facilities Fleet Mgt Cost Proposal.xls

Facilities & Fleet Proposal

165-2022 Parks & Rec Cost Proposal rv20221214.xlsx

Parks & Rec Cost Proposal

Page 2 of 2 pages Vendor: Marmic Fire and Safety Bid 165-2022 Addendum 1



TODD SLATIN
DIRECTOR
CENTRAL PURCHASING

ADDENDUM #1

Bid Number: #165-2022 Date: December 16, 2022

Subject: Fire Alarm Monitoring and Maintenance Address inquiries to:

Kristie Thomas (859) 258-3320

July St.

TO ALL PROSPECTIVE SUBMITTERS:

Please be advised of the following clarifications to the above referenced Bid:

- 1. The 165-2022 Parks & Rec Cost Proposal Excel file spreadsheet has been revised to include a Fire Alarm Systems monthly cost pricing row for Carriage House Studio Player.
- 2. Copies of fire alarm inspection reports attached.

Todd Slatin, Director Division of Central Purchasing

All other terms and conditions of the Bid and specifications are unchanged. This letter should be signed, attached to and become a part of your Bid.

COMPANY NAME: Marmic Fire & Safety

ADDRESS: 181 Zakk Ct., Nicholasville, KY 40356

SIGNATURE OF BIDDER: Jennifes (words)



PERIODIC FIRE ALARM INSPECTION & TEST INSPECTOR: FAR#: /070 INSPECTION COMPANY AMERICAN FIRE & SECURITY			NAME OF FACILITY: Ay	WY SXK	es Wo	Center	
ADDRESS: 80 Eury Lane Somerset		CT.	TE: KY	CITY: Lexington OCCUPIED AS:	Bulsnes		Contraction of the last of the
CITY: Somerset ZIP: 42101 - PHON	F. (859) 3		ME: MI	SEND REPORT TO:	Jason	Noch	5
DEASON FOR REPORT () (MIARTERIV I	NSP·()	SEMIANNUAL.	INSP.; () ANNUAL INSP.; OT	HER (specify):	15-B	033
CONTROL PANEL MANUFAC	TURER AND	MODEL:	*********	NOTITIES N	+W -10	·*********	*********
1. TYPE(S) OF SYSTEM:	(VLOCAL;	() AUXIL	IARY; (V) REM	OTE STATION; () PROPRIETA	ARY; () EMER	RGENCY VO	ICE/ALARM
2. INITIATING DEVICE				3. INDICATING DEVICE	ES:		
A. HEAT SENSING:	NUMBER INSTALLED		CONDITION SAT UNSAT		NUMBER INSTALLED	NUMBER TESTED	CONDITION SAT UNSAT
 FIXED TEMPERATURE RATE COMPENSATION RATE-OF-RISE COMBINED FT/ROR OTHER (specify) 	_2	2		A. BELLS B. HORNS C. CHIMES D. VISUAL 1. COMBINED 2. SEPARATE	44	44	7
B. SMOKE SENSING: 1. IONIZATION 2. PHOTOELECTRIC 3. CLOUD CHAMBER 4. DUAL ION/PHOTO 5. H.V.A.C. 6. COMBINED w/HEAT 7. OTHER (specify)		_ l		E. OTHER (specify) 4. CONTROL FUNCTIONS A. ELEVATOR RECALL B. FAN SHUTDOWN C. DOOR HOLDER D. SMOKE CONTROL SYSTE E. OTHER (specify)			
C. FLAME SENSING: 1. FLAME 2. FLAME FLICKER 3. INFRARED 4. PHOTOELECTRIC 5. ULTRAVIOLET 6. OTHER (specify)				 5. TROUBLE DEVICES 6. REMOTE ANNUNCI 7. SUPERVISORY SERVA, CONTROL VALVES 	ATORS:		
D. GAS SENSING: 1. SEMICONDUCTOR 2. CATALYTIC ELEMENT 3. OTHER (specify)				 SPRINKLER STANDPIPE OTHER (specify) AIR PRESSURE HIGH 	_3_		
E. MANUAL STATIONS	12	12	M	2. LOW C. FIRE PUMP			
F. WATER FLOW	_1_	1		D. GENERATOR E. OTHER (specify)			
JACKS ARE INSTALLED & WMANUAL OPERATION OF STATEMENT OF S	ORK PROPER YSTEM IS SAT PRIMARY MA SSION: ALAI DUAL)	RLY (YES) TISFACTORY AIN) / W RM IS TRA POPPER ITY TEST	(NO). AUTOMA (YES); (NO). S VOLTS, 20 . C. (I NSMITTED OF E. DATE OF (IN	RE INSTALLED AND WORK PRO TIC OPERATION OF SYSTEM IN SYSTEM HAS ZONED EVACUAT AMPS. B. SECONDARY (STANINONE) D. OTHER (specify) F PREMIX (YES): (NO). ALARM THEY WERE NOTIFIED IN ILITIAL) OR (LAST) SENSITIVIT Exify)" ANSWERS	IS SATISFACTO FION FEATURE DBY) (STOR TRANSMITTI BEFORE AND TY TEST	RY(YES); (NO AGE BATTE DED TO CEA	ino). Cries, #2 Chrol Station (Yes):2(NO).
	Pens	20					

	CURITY (NAME OF FACILITY: 31 ADDRESS: 498 Cocity: Lexington OCCUPIED AS:	Buisne	Williams to the state of the st	050B
ZIP: 42101 - PHONE: (859) 333-4489		SELID REPORT TO	JEP (specify):	Ichols	
REASON FOR REPORT: () QUARTERLY INSP.; () SE CONTROL PANEL MANUFACTURER AND MODEL:		SK 5208	1EK (specify).		200
		*************	PV / DAKE	CENCY VO	OF ALADM
1. TYPE(S) OF SYSTEM: (LOCAL; () AUXILIA				GENCT VO	ICE/ALARM
2. INITIATING DEVICES:		3. INDICATING DEVICE	NUMBER	NUMBER	CONDITION
ALTERI SENSITE.	SAT UNSAT	A. BELLS	INSTALLED	TESTED	SAT UNSAT
1. FIXED TEMPERATURE 2. RATE COMPENSATION 3. RATE-OF-RISE 4. COMBINED FT/ROR 5. OTHER (specify)		B. HORNS C. CHIMES D. VISUAL I. COMBINED 2. SEPARATE	4	4	
B. SMOKE SENSING: 1. IONIZATION 2. PHOTOELECTRIC 3. CLOUD CHAMBER 4. DUAL ION/PHOTO 5. H.V.A.C. 6. COMBINED w/HEAT 7. OTHER (specify)		E. OTHER (specify) 4. CONTROL FUNCTIONS A. ELEVATOR RECALL B. FAN SHUTDOWN C. DOOR HOLDER D. SMOKE CONTROL SYSTE E. OTHER (specify)			
C. FLAME SENSING: 1. FLAME 2. FLAME FLICKER 3. INFRARED 4. PHOTOELECTRIC 5. ULTRAVIOLET 6. OTHER (specify)		 5. TROUBLE DEVICES: 6. REMOTE ANNUNCL 7. SUPERVISORY SERVA. CONTROL VALVES 	ATORS:	(
D. GAS SENSING: 1. SEMICONDUCTOR 2. CATALYTIC ELEMENT 3. OTHER (specify)		 SPRINKLER STANDPIPE OTHER (specify) AIR PRESSURE HIGH 			
E. MANUAL STATIONS 7 7 [2. LOW C. FIRE PUMP			
F. WATER FLOW		D. GENERATOR E. OTHER (specify)			
8. EMERGENCY VOICE/ALARM: A LOUDS JACKS ARE INSTALLED & WORK PROPERTY (ES) (NO MANUAL OPERATION OF SYSTEM IS SATISFACTORY (9. POWER SUPPLY: A. PRIMARY (MAIN) (A) OVER AMP-HR RATING 10. SIGNAL TRANSMISSION: ALARM IS TRANS AND RECEIVED BY (INDIVIDUAL) OPERATOR 11. SMOKE DETECTOR SENSITIVITY TEST:	O). AUTOMATI (YES); (NO). SYS OLTS, OL A	IC OPERATION OF SYSTEM ISTEM HAS ZONED EVACUAT MPS. B. SECONDARY (STAND DNE) D. OTHER (specify) PREMIS (YES) (NO). ALARM THEY WERE NOTIFIED B	S SATISFACTOR ION FEATURE OBY) (*) STOR TRANSMITTE EFORE AND A	RY PTESD (N (YES); (NO AGE BATTE D TO COAT	NO).). ERIES, #2 (Val 5 fat)
12. REMARKS: EXPLAIN ANY "UNSAT", "NO" OR	"OTHER (specif	fy)" ANSWERS			
CUSTOMER SIGNATURE					

PERIODIC FIRE ALARM INSPECT	NAME OF FACILITY:	DATE OF INSPECTION			
INSPECTION COMPANY AMERICAN FIRE &	TELEVISION	W. Second	(ST	0507	
ADDRESS: 80 Eury Lane CITY: Somerset	STATE: KY	OCCUPIED AS:	Buisne	55	0001
ZIP: 42101 - PHONE: (859) 333-4489		SEND REPORT TO:	Jason	ichol:	5
REASON FOR REPORT: () QUARTERLY INSP.; (INSP.: () ANNUAL INSI	P.; OTHER (specify):	15-B	027
CONTROL PANEL MANUFACTURER AND MODE		SIMPLEX	4002		
		*************	*******	CENCY VO	NCE /AT ADM
1. TYPE(S) OF SYSTEM: (LOCAL; () AUXILIARY; (REMOTE STATION; () PROPRIETARY; () EMERC					//CE/ALARM
2. INITIATING DEVICES:	D COMPLETION	3. INDICATING DE	NUMBER	NUMBER	CONDITION
A. HEAT SENSING: NUMBER NUMBE INSTALLED TESTER	R CONDITION D SAT UNSAT	A. BELLS	INSTALLED	TESTED	SAT UNSAT
1. FIXED TEMPERATURE		B. HORNS	4	4	V
3. RATE-OF-RISE		C. CHIMES D. VISUAL	-	1.	
4. COMBINED FT/ROR 5. OTHER (specify)		1. COMBINED	_4_	_4_	
B. SMOKE SENSING:		2. SEPARATE E. OTHER (specify)			
1. IONIZATION		4. CONTROL FUNCT	TIONS:		
2. PHOTOELECTRIC 55 55 3. CLOUD CHAMBER		A. ELEVATOR RECAL			V
4. DUAL ION/PHOTO		B. FAN SHUTDOWN	-		
5. H.V.A.C. 6. COMBINED w/HEAT		C. DOOR HOLDER D. SMOKE CONTROL	SYSTEM	0	
7. OTHER (specify)		E. OTHER (specify)			
C. FLAME SENSING:		5. TROUBLE DEVI	CES:		
1. FLAME 2. FLAME FLICKER		6. REMOTE ANNU	NCIATORS:		
3. INFRARED				-0	
4. PHOTOELECTRIC 5. ULTRAVIOLET		7. SUPERVISORY S	SERVICE:		
6. OTHER (specify)		A. CONTROL VALVE		7	
D. GAS SENSING:		I. SPRINKLER 2. STANDPIPE			
I. SEMICONDUCTOR 2. CATALYTIC ELEMENT		3. OTHER (specify)			
3. OTHER (specify)		B. AIR PRESSURE 1. HIGH			
E. MANUAL STATIONS /D /D		2, LOW			
		C. FIRE PUMP D. GENERATOR			
F. WATER FLOW		E. OTHER (specify)			
8. EMERGENCY VOICE/ALARM: A LOUDSPEAKERS ARE INSTALLED AND WORK PROPERLY (YES); (NO). TELEPHONE JACKS ARE INSTALLED & WORK PROPERLY (YES); (NO). AUTOMATIC OPERATION OF SYSTEM IS SATISFACTORY (YES); (NO). MANUAL OPERATION OF SYSTEM IS SATISFACTORY (YES); (NO). SYSTEM HAS ZONED EVACUATION FEATURE (YES); (NO). 9. POWER SUPPLY: A. PRIMARY (MAIN) (WAIN) (WAIN					
AND RECEIVED BY (INDIVIDUAL)	crex	THEY WERE NOTIF	IED BEFORE AND A	Komi	dies); (NO).
11. SMOKE DETECTOR SENSITIVITY TE	SI: DATE OF (IN	NITIAL) UK (LASI) SENSI	IIVIII IESI	17 17 000	
12. REMARKS: EXPLAIN ANY "UNSAT", "NO"	OR "OTHER (spe	ecify)" ANSWERS			
1	,				
CUSTOMER SIGNATURE	le				

PERIODIC FIRE ALARM INSPECTION & T INSPECTOR: FAR#: FA	NAME OF FACILITY: Charles Young Center ADDRESS: 540 F. 3rd st CITY: CEXMISTON KY ZIP: 40508 OCCUPIED AS: BUISINGS SEND REPORT TO: JOSON NICHOLS
	UAL INSP.; () ANNUAL INSP.; OTHER (specify): 15-2141
CONTROL PANEL MANUFACTURER AND MODEL:	
1. TYPE(S) OF SYSTEM: (LOCAL; () AUXILIARY; (REMOTE STATION; () PROPRIETARY; () EMERGENCY VOICE/ALARM
2. INITIATING DEVICES:	3. INDICATING DEVICES: NUMBER NUMBER CONDITION
A. HEAT SENSING: 1. FIXED TEMPERATURE 2. RATE COMPENSATION 3. RATE-OF-RISE 4. COMBINED FT/ROR 5. OTHER (specify)	INSTALLED TESTED SAT UNSAT A. BELLS B. HORNS C. CHIMES D. VISUAL 1. COMBINED 2. SEPARATE
B. SMOKE SENSING: 1. IONIZATION 2. PHOTOELECTRIC 3. CLOUD CHAMBER 4. DUAL ION/PHOTO 5. H.V.A.C. 6. COMBINED w/HEAT 7. OTHER (specify)	E. OTHER (specify) 4. CONTROL FUNCTIONS: A. ELEVATOR RECALL B. FAN SHUTDOWN C. DOOR HOLDER D. SMOKE CONTROL SYSTEM E. OTHER (specify)
C. FLAME SENSING: 1. FLAME 2. FLAME FLICKER 3. INFRARED 4. PHOTOELECTRIC 5. ULTRAVIOLET 6. OTHER (specify)	5. TROUBLE DEVICES: 6. REMOTE ANNUNCIATORS: 7. SUPERVISORY SERVICE: A. CONTROL VALVES
D. GAS SENSING: 1. SEMICONDUCTOR 2. CATALYTIC ELEMENT 3. OTHER (specify)	1. SPRINKLER 2. STANDPIPE 3. OTHER (specify) B. AIR PRESSURE 1. HIGH
E. MANUAL STATIONS 5 5	2. LOW C. FIRE PUMP
F. WATER FLOW	D. GENERATOR E. OTHER (specify)
JACKS ARE INSTALLED & WORK PROPERLY (YES) (NO). AUTO MANUAL OPERATION OF SYSTEM IS SATISFACTORY (YES); (NO). POWER SUPPLY: A. PRIMARY (MAIN) OF VOLTS, AMPHR RATING 10. SIGNAL TRANSMISSION: ALARM IS TRANSMITTED	RS ARE INSTALLED AND WORK PROPERLY (YES); (NO). TELEPHONE OMATIC OPERATION OF SYSTEM IS SATISFACTORY (YES); (NO). SYSTEM HAS ZONED EVACUATION FEATURE (YES); (NO). AMPS. B. SECONDARY (STANDBY) (VISTORAGE BATTERIES, MICH. C. (NONE) D. OTHER (specify) OFF PREMIS (YES); (NO). ALARM TRANSMITTED TO CONTROL STANDARD THEY WERE NOTIFIED BEFORE AND AFTER TEST (YES); (NO). F (INITIAL) OR (LAST) SENSITIVITY TEST
CUSTOMER SIGNATURE	

PERIODIC FIRE AL. INSPECTOR: COMPANY AN ADDRESS: 80 Eury Lane CITY: Somerset ZIP: 42101 - PHONI	IERICAN F	FAR IRE & SE	#: 1070	NAME OF FACILITY: CANDRESS: 1155 ACM	(K	1000	405.04
			SEMIANNUAL	INSP.; () ANNUAL INSP.; OT		15-	B030
CONTROL PANEL MANUFAC			*****		004	*********	*********
1. TYPE(S) OF SYSTEM:	(LOCAL;	() AUXIL	IARY; (V) REM	IOTE STATION; () PROPRIETA		RGENCY VO	ICE/ALARM
2. INITIATING DEVICES	<u>S:</u>			3. INDICATING DEVIC	ES: NUMBER	NIIMBED	CONDITION
A. HEAT SENSING:	NUMBER INSTALLED		CONDITION SAT UNSAT	A DELLE	INSTALLED	TESTED	SAT UNSAT
 FIXED TEMPERATURE RATE COMPENSATION RATE-OF-RISE COMBINED FT/ROR OTHER (specify) 				A. BELLS B. HORNS C. CHIMES D. VISUAL 1. COMBINED 2. SEPARATE	4	4	V
B. SMOKE SENSING: 1. IONIZATION 2. PHOTOELECTRIC 3. CLOUD CHAMBER 4. DUAL ION/PHOTO 5. H.V.A.C. 6. COMBINED w/HEAT 7. OTHER (specify)	10	10		E. OTHER (specify) 4. CONTROL FUNCTIONS A. ELEVATOR RECALL B. FAN SHUTDOWN C. DOOR HOLDER D. SMOKE CONTROL SYSTE E. OTHER (specify)			
C. FLAME SENSING: 1. FLAME 2. FLAME FLICKER 3. INFRARED 4. PHOTOELECTRIC 5. ULTRAVIOLET 6. OTHER (specify)				 5. TROUBLE DEVICES 6. REMOTE ANNUNCI 7. SUPERVISORY SERVAL CONTROL VALVES 	ATORS:		
D. GAS SENSING: 1. SEMICONDUCTOR 2. CATALYTIC ELEMENT 3. OTHER (specify)	_			1. SPRINKLER 2. STANDPIPE 3. OTHER (specify) B. AIR PRESSURE 1. HIGH		7	
E. MANUAL STATIONS	6	6		2. LOW C. FIRE PUMP			
F. WATER FLOW		17		D. GENERATOR E. OTHER (specify)			Ш
JACKS ARE INSTALLED & W MANUAL OPERATION OF SY 9. POWER SUPPLY: A. F AMP-HR RATING	8. EMERGENCY VOICE/ALARM: 1 LOUDSPEAKERS ARE INSTALLED AND WORK PROPERLY (YES); (NO). TELEPHONE JACKS ARE INSTALLED & WORK PROPERLY (YES); (NO). AUTOMATIC OPERATION OF SYSTEM IS SATISFACTORY (YES); (NO). MANUAL OPERATION OF SYSTEM IS SATISFACTORY (YES); (NO). SYSTEM HAS ZONED EVACUATION FEATURE (YES); (NO). 9. POWER SUPPLY: A. PRIMARY (MAIN) VOLTS, AMPS. B. SECONDARY (STANDBY) (*) STORAGE BATTERIES, # 2						
10. SIGNAL TRANSMIS	SION: ALAI	RM IS TRA	NSMITTED OF	F PREMIS (YES); (NO). ALARM	1 TRANSMITTI	ED TO CE	itral Stable
AND RECEIVED BY (INDIVI	DUAL)			THEY WERE NOTIFIED I			
11. SMOKE DETECTOR 12. REMARKS: EXPLAIN				ITIAL) OR (LAST) SENSITIVIT	Y TEST	CTYCLOT	
	de.	. ~					

PERIODIC FIRE AL INSPECTION: COMPANY AN	ocal	FAR	#: <u>1070</u>	NAME OF FACILITY: ADDRESS: 141 F	Man st	ARTS	
ADDRESS: 80 Eury Lane				CITY: LEXMATE		ZIP: 4	0501
CITY: Somerset			TE: KY		Buisn	ess	
ZIP: 42101 - PHON	E: (859) 33	33-4489		SEND REPORT TO:	JASON	OKSHO	15
REASON FOR REPORT: () C							
CONTROL PANEL MANUFAC	TURER AND	MODEL:		Syple	*******	*********	
1. TYPE(S) OF SYSTEM: (LOCAL; () AUXILIARY; () REMOTE STATION; () PROPRIETARY; () EMERGENCY VOICE/ALARM					ICE/ALARM		
2. INITIATING DEVICES	S:			3. INDICATING DEV			
A. HEAT SENSING:	NUMBER INSTALLED		CONDITION SAT UNSAT		NUMBER INSTALLED	TESTED	CONDITION SAT UNSAT
 FIXED TEMPERATURE RATE COMPENSATION RATE-OF-RISE COMBINED FT/ROR OTHER (specify) 	<u>_</u> 2	2		A. BELLS B. HORNS C. CHIMES D. VISUAL 1. COMBINED 2. SEPARATE	12	12	V 2V
B. SMOKE SENSING: 1. IONIZATION 2. PHOTOELECTRIC 3. CLOUD CHAMBER 4. DUAL ION/PHOTO 5. H.V.A.C. 6. COMBINED w/HEAT 7. OTHER (specify)	_6	<u></u>		E. OTHER (specify) 4. CONTROL FUNCTION A. ELEVATOR RECALL B. FAN SHUTDOWN C. DOOR HOLDER D. SMOKE CONTROL SY E. OTHER (specify)	ONS:/_	(
C. FLAME SENSING: 1. FLAME 2. FLAME FLICKER 3. INFRARED 4. PHOTOELECTRIC 5. ULTRAVIOLET 6. OTHER (specify)				5. TROUBLE DEVICE 6. REMOTE ANNUM 7. SUPERVISORY SI A. CONTROL VALVES	CIATORS:		
D. GAS SENSING: 1. SEMICONDUCTOR 2. CATALYTIC ELEMENT 3. OTHER (specify)	=			1. SPRINKLER 2. STANDPIPE 3. OTHER (specify) B. AIR PRESSURE 1. HIGH			
E. MANUAL STATIONS	_/3_	13		2. LOW C. FIRE PUMP			
F. WATER FLOW	2	2		D. GENERATOR E. OTHER (specify)			
JACKS ARE INSTALLED & W MANUAL OPERATION OF SY 9. POWER SUPPLY: A. F AMP-HR RATING	8. EMERGENCY VOICE/ALARM: 30 LOUDSPEAKERS ARE INSTALLED AND WORK PROPERLY (YES): (NO). TELEPHONE JACKS ARE INSTALLED & WORK PROPERLY (YES): (NO). AUTOMATIC OPERATION OF SYSTEM IS SATISFACTORY (YES); (NO). SYSTEM HAS ZONED EVACUATION FEATURE (YES); (NO). 9. POWER SUPPLY: A. PRIMARY (MAIN) 20 VOLTS, 20 AMPS. B. SECONDARY (STANDBY) (V) STORAGE BATTERIES, #						
10. SIGNAL TRANSMIS	SION: ALAR	M IS TRA	NSMITTED OF	F PREMIS (YES), (NO). ALA	ARM TRANSMITTE	D TO CEA	Tral STON
AND RECEIVED BY (INDIVI	DUAL)	perat	est -	THEY WERE NOTIFIE	ED BEFORE AND A	FTER TES	TYES); (NO).
11. SMOKE DETECTOR 12. REMARKS: EXPLAIN	SENSITIVE	TY TEST	DATE OF (IN	ITIAL) OR (LAST) SENSITI	VITY TEST	7/6224	<i>(6)</i> (
	1.	7/3					

PERIODIC FIRE AL	ARM INSPECTIO	N & TEST	TING REPORT P	ATE OF INSPECTIO	N2-25, d2
INSPECTOR: Ken	FAR.	#: 1070	NAME OF FACILITY:	entry Co	re Center
INSPECTION COMPANY AM	MÉRICAN FIRE & SE	CURITY		Harry' SX	Kes
ADDRESS: 80 Eury Lane		*/*/	CITY: Lexmyt	BURSA	Y ZIP: 40504
CITY: Somerset		TE: KY	OCCUPIED AS: SEND REPORT TO:	- 1048A A	muls
ZIP: 42101 - PHON			-	0000	15-3037
REASON FOR REPORT: ()				OTHER (specify):	
	UNIKUL PANEL MANUFACTURER AND MODEL.				
1. TYPE(S) OF SYSTEM:	LOCAL; () AUXIL	IARY; (REM	OTE STATION; () PROPR	LIETARY; () EMER	GENCY VOICE/ALARM
2. INITIATING DEVICES: 3. INDICATING DEVICES:					NUMBER CONDITION
A. HEAT SENSING:	NUMBER NUMBER INSTALLED TESTED	CONDITION SAT UNSAT		NUMBER INSTALLED	NUMBER CONDITION TESTED SAT UNSAT
I. FIXED TEMPERATURE	INSTACLED TESTED		A. BELLS		
2. RATE COMPENSATION			B. HORNS C. CHIMES	20	20
3. RATE-OF-RISE 4. COMBINED FT/ROR			D. VISUAL	1.1	101
5. OTHER (specify)			1. COMBINED	90	
B. SMOKE SENSING:			2. SEPARATE E. OTHER (specify)		
1. IONIZATION	78 70		4. CONTROL FUNCTI	ONS	
2. PHOTOELECTRIC 3. CLOUD CHAMBER	_10_10	7	A. ELEVATOR RECALI		
4. DUAL ION/PHOTO			B. FAN SHUTDOWN		
5. H.V.A.C.			C. DOOR HOLDER D. SMOKE CONTROL ST	VCTEM ——	- V
6. COMBINED w/HEAT 7. OTHER (specify)			E. OTHER (specify)		
C. FLAME SENSING:			5. TROUBLE DEVIC	CES:	
I. FLAME			6. REMOTE ANNUN	CLATODS:	
2. FLAME FLICKER 3. INFRARED			6, REMOTE ANNOT	l l	
4. PHOTOELECTRIC			a cumpriscops of		
5. ULTRAVIOLET 6. OTHER (specify)			7. SUPERVISORY SI A. CONTROL VALVES		. /
D. GAS SENSING:			1. SPRINKLER	3	2 V
I. SEMICONDUCTOR			2. STANDPIPE		
2. CATALYTIC ELEMENT			3. OTHER (specify) B. AIR PRESSURE	-	
3. OTHER (specify)		/	1. HIGH		
E. MANUAL STATIONS	17 17		2. LOW C. FIRE PUMP	-	
F. WATER FLOW	1 1		D. GENERATOR		
	VI.		E. OTHER (specify)		
8. EMERGENCY VOICE	ALARM: NA LOUI	DSPEAKERS AF	RE INSTALLED AND WORK I	PROPERLY (YES); (N	O)TELEPHONE
JACKS ARE INSTALLED & W MANUAL OPERATION OF S	VORK PROPERLY (YES); (NO). AUTOMA	TIC OPERATION OF SYSTEM HAS ZONED EVAC	CUATION FEATURE	(YES); (NO).
9. POWER SUPPLY: A. I	PRIMARY (MAIN)	VOLTS. NO.	AMPS. B. SECONDARY (ST	ANDBY) (STOR.	AGE BATTERIES, #2
AMP-HR RATING	12	, C. (N	NONE) D. OTHER (specify)		
10. SIGNAL TRANSMIS	SSION: ALARM IS TRAI	NSMITTED OF	F PREMIS (YES): (NO). AL	ARM TRANSMITTE	D TO CETTING STEPPO
AND RECEIVED BY (INDIVI	DUAL) Operan	ar -	THEY WERE NOTIFIE	ED BEFORE AND A	AFTER TEST (YES) (NO).
11. SMOKE DETECTOR	SENSITIVITY TEST	DATE OF (IN	IITIAL) OR (LAST) SENSIT	IVITY TEST _U/\	MOWN
12. REMARKS: EXPLAIN	ANY "UNSAT", "NO" O	R "OTHER (spe	cify)" ANSWERS		
-					
	7.7%				
	1	1			
CUSTOMER SIGNATURE	from To	2			

PERIODIC FIRE AL	ARM INSPECTI	ON & TES	TING REPORT DATE	OF INSPECTI	ON 3-8	3-23
INSPECTOR: HEN HO	FA FA	R#: 1016	MAINE OF TACTETY I	eet. Ser	Vice s	
INSPECTION COMPANY AMERICAN FIRE & SECURITY			ADDRESS: 669 Syr		en	
ADDRESS: 80 Eury Lane			CITY: Lex Myton	11	Y ZIP: _4	05/0
CITY: Somerset		TATE: KY	OCCUPIED AS:	SU13/1	3	
ZIP: 42101 - PHON			SEND REPORT TO:		RIWIS	1
		SEMIANNUAL	INSP.; () ANNUAL INSP.; OT	HER (specify):	15-6	5837_
CONTROL PANEL MANUFAC	TURER AND MODEL:	**********	Smylex 401	**********	********	*********
1. TYPE(S) OF SYSTEM:	(V) LOCAL; () AUXI	LIARY; (V) REN	MOTE STATION; () PROPRIETA	ARY; () EMEI	RGENCY VO	DICE/ALARM
2. INITIATING DEVICES	5:		3. INDICATING DEVICE			
A. HEAT SENSING:	NUMBER NUMBER INSTALLED TESTED	CONDITION SAT UNSAT		NUMBER INSTALLED	NUMBER TESTED	CONDITION SAT UNSAT
1. FIXED TEMPERATURE 2. RATE COMPENSATION	2 0		A. BELLS B. HORNS	36	36	V-
3. RATE-OF-RISE	27 27		C. CHIMES D. VISUAL			
4. COMBINED FT/ROR 5. OTHER (specify)			1. COMBINED	36	36	V
			2. SEPARATE			
B. SMOKE SENSING: 1. IONIZATION			E. OTHER (specify)		-	
2. PHOTOELECTRIC	7 7		4. CONTROL FUNCTIONS	3:		
3. CLOUD CHAMBER 4. DUAL ION/PHOTO			A. ELEVATOR RECALL B. FAN SHUTDOWN			
5. H.V.A.C.	3 3		C. DOOR HOLDER			
6. COMBINED w/HEAT 7. OTHER (specify)			D. SMOKE CONTROL SYSTE E. OTHER (specify)	М		
C. FLAME SENSING:			5. TROUBLE DEVICES:			
1. FLAME 2. FLAME FLICKER			6. REMOTE ANNUNCIA	ATORS:		
3. INFRARED			UI MANUAL IN TOTAL	1	1	
4. PHOTOELECTRIC			e cripebulcoby cens	MCE.		
5. ULTRAVIOLET 6. OTHER (specify)			7. SUPERVISORY SERV A. CONTROL VALVES	ICE:		
D. GAS SENSING:			1. SPRINKLER			
1. SEMICONDUCTOR			2. STANDPIPE			\Box
2. CATALYTIC ELEMENT			3. OTHER (specify) B. AIR PRESSURE			
3. OTHER (specify)			1. HIGH			
E. MANUAL STATIONS	12 12		2. LOW C. FIRE PUMP			
S WATER DI ON	1	/	D. GENERATOR			
F. WATER FLOW			E. OTHER (specify)			
JACKS ARE INSTALLED & W MANUAL OPERATION OF SY	ORK PROPERLY (YES):	NO). AUTOMA Y (YES); (NO). S	E INSTALLED AND WORK PROF TIC OPERATION OF SYSTEM IS SYSTEM HAS ZONED EVACUAT AMPS. B. SECONDARY (STAND	S SATISFACTOR	RY (YES): (NO	(O).
AMP-HR RATING	W-300 0 300 1 W 1, 4	, C. (N	NONE) D. OTHER (specify)		1	1111
10. SIGNAL TRANSMIS	SION: ALARM IS TR	NSMITTED OF	F PREMIS (YES) (NO). ALARM . THEY WERE NOTIFIED B	TRANSMITTE EFORE AND A	TO CO	ATTAL STATIS
	No.		ITIAL) OR (LAST) SENSITIVIT			
		-	cify)" ANSWERS			
	1					
	11. 1 2	12-	1			

PERIODIC FIRE AL	ARM INSPECTION & TES	TING REPORT DATE OF	F INSPECTIO	N 3-	2-22
INSPECTOR: Ken Ha			Men	+ Cente	//
INSPECTION COMPANY AN	MERICAN FIRE & SECURITY	ADDRESS: 162 E	Man	st.	
ADDRESS: 80 Eury Lane		CITY: Lexmuton		Y ZIP:	0507
CITY: Somerset	STATE: KY		orsnes	5	
ZIP: 42101 - PHON			250AD	Uzhal	5
	QUARTERLY INSP.; () SEMIANNUAL	INSP.; (ANNUAL INSP.; OTHE	R (specify);	15-14	86
CONTROL PANEL MANUFAC		Potter - GO	06	*********	*******
1. TYPE(S) OF SYSTEM:	(VLOCAL; () AUXILIARY; (V) REN	MOTE STATION; () PROPRIETAR	Y; () EMER	GENCY VO	ICE/ALARM
2. INITIATING DEVICES	S:	3. INDICATING DEVICES			CONDITION
A. HEAT SENSING:	NUMBER NUMBER CONDITION INSTALLED TESTED SAT UNSAT	A DCITC	INSTALLED	TESTED	SAT UNSAT
1. FIXED TEMPERATURE		A. BELLS B. HORNS	1		V
2. RATE COMPENSATION 3. RATE-OF-RISE		C. CHIMES			
4. COMBINED FT/ROR		D. VISUAL	1	,	
5. OTHER (specify)		1. COMBINED 2. SEPARATE	-		
B. SMOKE SENSING:		E. OTHER (specify)			
I. IONIZATION		4. CONTROL FUNCTIONS:			
2. PHOTOELECTRIC 3. CLOUD CHAMBER		A. ELEVATOR RECALL			
4. DUAL ION/PHOTO		B. FAN SHUTDOWN			
5. H.V.A.C.		C. DOOR HOLDER			
6. COMBINED w/HEAT 7. OTHER (specify)		D. SMOKE CONTROL SYSTEM E. OTHER (specify)			
C. FLAME SENSING:		5. TROUBLE DEVICES:			
2. FLAME FLICKER		6. REMOTE ANNUNCIAT	ORS:		
3. INFRARED					
4. PHOTOELECTRIC 5. ULTRAVIOLET		7. SUPERVISORY SERVICE	CIE.		
6. OTHER (specify)		A. CONTROL VALVES	<u> </u>		
D. GAS SENSING:		I. SPRINKLER			V
I. SEMICONDUCTOR		2. STANDPIPE			
2. CATALYTIC ELEMENT		3. OTHER (specify) B. AIR PRESSURE			
3. OTHER (specify)		1. HIGH			
E. MANUAL STATIONS		2. LOW			
		C. FIRE PUMP			
F. WATER FLOW		D. GENERATOR E. OTHER (specify)			
e emencency voice	ALARM: NA LOUDSPEAKERS AI		DIV (VES) N	(i) -2	TELEPHONE
IACKS ARE INSTALLED & W	ORK PROPERLY (YES) (NO). AUTOMA STEM IS SATISFACTORY (YES); (NO).	TIC OPERATION OF SYSTEM IS S	SATISFACTOR	X (YES) (N	(O).
A DOWED SHIPPLY A D	PRIMARY (MAIN) (NO).	AMPS R SECONDARY (STANDR	V) (V) STOR	AGE BATTE	RIES. # 2
AMP-HR RATING	C (NONE) D. OTHER (specify)	., (,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	102 2111 . 2	4 . 1. 1
	SION: ALARM IS TRANSMITTED OF		RANSMITTE	р то Се	chal stake
AND RECEIVED BY (INDIVII		THEY WERE NOTIFIED BEF	ORE AND A	FTER TEST	(YES) (NO).
	SENSITIVITY TEST: DATE OF (IN				
11. SMORE DETECTOR	SENSITIVE PEDIC DATE OF (II	(III) ON (LEAST) SERVICE			
12. REMARKS: EXPLAIN	ANY "UNSAT", "NO" OR "OTHER (spe	ecify)" ANSWERS			
-					
	1				

PERIODIC FIRE ALARM INSPECTION & TESTINSPECTOR: INSPECTOR: INSPECTION COMPANY AMERICAN FIRE & SECURITY ADDRESS: 80 Eury Lane CITY: Somerset STATE: KY ZIP: 42101 PHONE: (859) 333-4489 REASON FOR REPORT: () QUARTERLY INSP.; () SEMIANNUAL			NAME OF FACILITY: ADDRESS: CITY: CXMO OCCUPIED AS: SEND REPORT TO:	JASON	y zip. 40	2507 2015
CONTROL PANEL MANUFACTU	IDED AND MODEL	SEMIANNUAL	Smolex 4	100		
				***********	CENOV VO	ACC (ALADM
1. TYPE(S) OF SYSTEM: (LOCAL; () AUXIL	IARY; (×) REM			KGENCY VO	ICE/ALAKM
2. INITIATING DEVICES:			3. INDICATING DEVIC	NUMBER	NIIMRER	CONDITION
	NUMBER NUMBER NSTALLED TESTED	CONDITION SAT UNSAT		INSTALLED		SAT UNSAT
1. FIXED TEMPERATURE 2. RATE COMPENSATION 3. RATE-OF-RISE 4. COMBINED FT/ROR 5. OTHER (specify)	6 8		A. BELLS B. HORNS C. CHIMES D. VISUAL 1. COMBINED 2. SEPARATE		15	
B. SMOKE SENSING: 1. IONIZATION 2. PHOTOELECTRIC 3. CLOUD CHAMBER 4. DUAL ION/PHOTO 5. H.V.A.C. 6. COMBINED w/HEAT 7. OTHER (specify)	144 144		E. OTHER (specify) 4. CONTROL FUNCTION A. ELEVATOR RECALL B. FAN SHUTDOWN C. DOOR HOLDER D. SMOKE CONTROL SYSTI E. OTHER (specify)	=	183	
C. FLAME SENSING: 1. FLAME 2. FLAME FLICKER 3. INFRARED 4. PHOTOELECTRIC 5. ULTRAVIOLET 6. OTHER (specify)			 5. TROUBLE DEVICES 6. REMOTE ANNUNCI 7. SUPERVISORY SERVAL CONTROL VALVES 	ATORS:	2	
D. GAS SENSING: 1. SEMICONDUCTOR 2. CATALYTIC ELEMENT 3. OTHER (specify)			1, SPRINKLER 2. STANDPIPE 3. OTHER (specify) B. AIR PRESSURE 1. HIGH		<u>15_</u>	Y
E. MANUAL STATIONS	55 55		2. LOW C. FIRE PUMP			
F. WATER FLOW	15 15		D. GENERATOR E. OTHER (specify)			
8. EMERGENCY VOICE/AI JACKS ARE INSTALLED & WOR MANUAL OPERATION OF SYST 9. POWER SUPPLY: A. PRI AMP-HR RATING 10. SIGNAL TRANSMISSI AND RECEIVED BY (INDIVIDU 11. SMOKE DETECTOR SI 12. REMARKS: EXPLAIN AN	LARM: 182 LOUIR REPROPERLY (YES): PEM IS SATISFACTORY MARY (MAIN) (20) ON: ALARM IS TRANSLED ON: ENSITIVITY TEST	NO). AUTOMA (YES); (NO). S VOLTS, O . C. (N NSMITTED OF PATON	RE INSTALLED AND WORK PRO TIC OPERATION OF SYSTEM SYSTEM HAS ZONED EVACUAL AMPS. B. SECONDARY (STAN NONE) D. OTHER (specify) F PREMIS (YESP (NO), ALARM THEY WERE NOTIFIED I	S SATISFACTOR FION FEATURE DBY) (STOR. TRANSMITTE BEFORE AND A	RY (YES) (NO YES); (NO YES	(0). RIES, # (YES) (NO).
CUSTOMER SIGNATURE	fine :	ne-				

PERIODIC FIRE AL	ARM INSPECT	TION & TES	TING REPORT DATE O	F INSPECTION	-	
	tood			State	/heat	er
INSPECTION COMPANY AMERICAN FIRE & SECURITY			ADDRESS: 214, E	NOUN	St	
ADDRESS: 80 Eury Lane			CITY: Cext 19 ton	K	Y ZIP: 4	0507
CITY: Somerset		STATE: KY	OCCUPIED AS:	Duisne	55	
ZIP: 42101 - PHON			_	ON N	Ichols	
REASON FOR REPORT: () (QUARTERLY INSP.; () SEMIANNUAL	INSP.; (ANNUAL INSP.; OTH	ER (specify):		
CONTROL PANEL MANUFAC	TURER AND MODE	*************	Simplex 40	07	********	**********
1. TYPE(S) OF SYSTEM:	(LOCAL; () AU	XILIARY; (V) REM	MOTE STATION; () PROPRIETAL	RY; () EMEI	RGENCY VO	DICE/ALARM
2. INITIATING DEVICES			3. INDICATING DEVICES	S: NUMBER	NUMBER	CONDITION
A. HEAT SENSING:	NUMBER NUMB	ER CONDITION ED SAT UNSAT	A. BELLS	INSTALLED	TESTED	SAT UNSAT
I. FIXED TEMPERATURE 2. RATE COMPENSATION	1 0		B. HORNS	17	17	V
3. RATE-OF-RISE			C. CHIMES		-	
4. COMBINED FT/ROR			D. VISUAL 1. COMBINED	127	17	1
5. OTHER (specify)			2. SEPARATE	-2	2	
B. SMOKE SENSING:			E. OTHER (specify)			
1. IONIZATION 2. PHOTOELECTRIC			4. CONTROL FUNCTIONS:			
3. CLOUD CHAMBER			A. ELEVATOR RECALL			
4. DUAL ION/PHOTO	-/		B. FAN SHUTDOWN			
5. H.V.A.C.	<u>4</u> _d		C. DOOR HOLDER D. SMOKE CONTROL SYSTEM			
6. COMBINED w/HEAT 7. OTHER (specify)			E. OTHER (specify)			
C. FLAME SENSING:			5. TROUBLE DEVICES:			
1. FLAME 2. FLAME FLICKER			6. REMOTE ANNUNCIA	TORS:		
3. INFRARED						
4. PHOTOELECTRIC 5. ULTRAVIOLET			7. SUPERVISORY SERVI	CE:		
6. OTHER (specify)			A. CONTROL VALVES	~		
D. GAS SENSING:			I. SPRINKLER	5	5	
I. SEMICONDUCTOR			2. STANDPIPE	_	_	
2. CATALYTIC ELEMENT			3. OTHER (specify) B. AIR PRESSURE			
3. OTHER (specify)			1. HIGH		0	
E. MANUAL STATIONS	5 5		2. LOW	3	0	
		-	C. FIRE PUMP	-		
F. WATER FLOW	2 3		D. GENERATOR E. OTHER (specify)			
8. EMERGENCY VOICE	ALARM: NAL	OUDSPEAKERS ALTOMA	RE INSTALLED AND WORK PROPE TIC OPERATION OF SYSTEM IS	ERLY (YES); (N	10). 2 RV (YES)) (1	TELEPHONE
MANUAL OPERATION OF ST	VSTEM IS SATISFACT	ORY (YES): (NO).	SYSTEM HAS ZONED EVACUATION	ON FEATURE	(YES); (NC	").
	PRIMARY (MAIN)	CVOLTSAC	AMPS. B. SECONDARY (STANDE	31) (V) 310K	AGE DAITE	CRIES, W
AMP-HR RATING	D	, C, (NONE) D. OTHER (specify)	TD A NICALITY	en mo	Hoal Stol
10. SIGNAL TRANSMIS AND RECEIVED BY (INDIVI	SION: ALARM IS T	RANSMITTED OF	F PREMIR (YES): (NO). ALARM . THEY WERE NOTIFIED BE	FORE AND	AFTER TES	T (YES); (NO).
AND RECEIVED BY (INDIVI	OFFICIALITY T	ECT DATE OF U	NITIAL) OR (LAST) SENSITIVITY	TEST 19/	Know	11
			ecify)" ANSWERS		4750	
27 27 27 27 27 27 27 27 27 27 27 27 27 2	21.2.30 ,					
	1	1				
	11					

PERIODIC FIRE ALARM INSPECTION & TH	NAME OF FACILITY: Lexing ton Senior Center				
INSPECTION COMPANY AMERICAN FIRE & SECURITY	ADDRESS: 195 Life Lone				
00 5	CITY: LexMOTON KY ZIP: 40502				
ADDRESS: 80 Eury Lane CITY: Somerset STATE: KY	- 1 December 1 Alexander 1				
ZIP: 42101 - PHONE: (859) 333-4489	SEND REPORT TO: Jason Nichols				
REASON FOR REPORT: () QUARTERLY INSP.; () SEMIANNU.	AL INSP.; (V) ANNUAL INSP.; OTHER (specify): 15 \ 3925				
CONTROL PANEL MANUFACTURER AND MODEL:	NOTHER N - WD - 100				
1. TYPE(S) OF SYSTEM: (LOCAL; () AUXILIARY; (VE	REMOTE STATION; () PROPRIETARY; () EMERGENCY VOICE/ALARM				
2. INITIATING DEVICES:	3. INDICATING DEVICES: NUMBER NUMBER CONDITION				
A. HEAT SENSING: NUMBER NUMBER CONDITION SAT UNSAT	AT INSTALLED TESTED SAT UNSAT				
I. FIXED TEMPERATURE 2. RATE COMPENSATION	A. BELLS B. HORNS C. CHIMES				
3. RATE-OF-RISE 4. COMBINED FT/ROR 5. OTHER (specify)	D. VISUAL I. COMBINED				
B. SMOKE SENSING: 1. IONIZATION	2. SEPARATE E. OTHER (specify)				
2. PHOTOELECTRIC 3. CLOUD CHAMBER	4. CONTROL FUNCTIONS: A. ELEVATOR RECALL 1				
4. DUAL ION/PHOTO 5. H.V.A.C.	B. FAN SHUTDOWN C. DOOR HOLDER				
6. COMBINED w/HEAT 7. OTHER (specify)	D. SMOKE CONTROL SYSTEM E. OTHER (specify)				
C. FLAME SENSING:	5. TROUBLE DEVICES:				
2. FLAME FLICKER 3. INFRARED	6. REMOTE ANNUNCIATORS:				
4. PHOTOELECTRIC 5. ULTRAVIOLET	7. SUPERVISORY SERVICE:				
6. OTHER (specify)	A. CONTROL VALVES I. SPRINKLER 4 4				
D. GAS SENSING: I. SEMICONDUCTOR	2. STANDPIPE				
2. CATALYTIC ELEMENT	3. OTHER (specify) B. AIR PRESSURE				
3. OTHER (specify)	I. HIGH				
E. MANUAL STATIONS 2 2	2. LOW				
S WATER FLOW	C. FIRE PUMP D. GENERATOR				
F. WATER FLOW	E. OTHER (specify)				
8. EMERGENCY VOICE/ALARM: A LOUDSPEAKERS ARE INSTALLED AND WORK PROPERLY (YES); (NO). TELEPHONE JACKS ARE INSTALLED & WORK PROPERLY (YES); (NO). AUTOMATIC OPERATION OF SYSTEM IS SATISFACTORY (YES); (NO). MANUAL OPERATION OF SYSTEM IS SATISFACTORY (YES); (NO). SYSTEM HAS ZONED EVACUATION FEATURE (YES); (NO). 9. POWER SUPPLY: A. PRIMARY (MAIN) 100 VOLTS, 200 AMPS. B. SECONDARY (STANDBY) (VISTORAGE BATTERIES, #2					
AMP-HR RATING C 10. SIGNAL TRANSMISSION: ALARM IS TRANSMITTED	C. (NONE) D. OTHER (specify)				
AND RECEIVED BY (INDIVIDUAL)	. THEY WERE NOTIFIED BEFORE AND AFTER TEST (YES): (NO).				
11. SMOKE DETECTOR SENSITIVITY TEST: DATE OF	(INITIAL) OR (LAST) SENSITIVITY TEST				
12. REMARKS: EXPLAIN ANY "UNSAT", "NO" OR "OTHER	(specify)" ANSWERS				
-					
1 -11-					
CHOTOMED CICALATURE					

PERIODIC FIRE ALA INSPECTOR: INSPECTION COMPANY AM ADDRESS: 80 Eury Lane CITY: Somerset ZIP: 42101 - PHONE	FAR. ERICAN FIRE & SE	1500	NAME OF FACILITY: ADDRESS: 300 E CITY: Lexing for OCCUPIED AS:	Third	Y ZIP:	0507 ecreationa
REASON FOR REPORT: () Q		SEMIANNUAL		HER (specify):		
CONTROL PANEL MANUFAC	TURER AND MODEL:	*********	Noti from	************	*********	**********
1. TYPE(S) OF SYSTEM:	(LOCAL; () AUXIL	IARY; (M) REM	OTE STATION; () PROPRIET	ARY; () EMER	RGENCY VO	ICE/ALARM
2. INITIATING DEVICES	*		3. INDICATING DEVIC			
1. FIXED TEMPERATURE 2. RATE COMPENSATION 3. RATE-OF-RISE 4. COMBINED FT/ROR 5. OTHER (specify) B. SMOKE SENSING: 1. IONIZATION 2. PHOTOELECTRIC 3. CLOUD CHAMBER 4. DUAL ION/PHOTO 5. H.V.A.C. 6. COMBINED w/HEAT 7. OTHER (specify) C. FLAME SENSING: 1. FLAME 2. FLAME FLICKER 3. INFRARED 4. PHOTOELECTRIC	NUMBER NUMBER TESTED	CONDITION SAT UNSAT	A. BELLS B. HORNS C. CHIMES D. VISUAL 1. COMBINED 2. SEPARATE E. OTHER (specify) 4. CONTROL FUNCTION A. ELEVATOR RECALL B. FAN SHUTDOWN C. DOOR HOLDER D. SMOKE CONTROL SYSTE E. OTHER (specify) 5. TROUBLE DEVICES 6. REMOTE ANNUNCI	EM		CONDITION SAT UNSAT
5. ULTRAVIOLET 6. OTHER (specify) D. GAS SENSING:			7. SUPERVISORY SER A. CONTROL VALVES 1. SPRINKLER	VICE:		
1. SEMICONDUCTOR 2. CATALYTIC ELEMENT 3. OTHER (specify)			2. STANDPIPE 3. OTHER (specify) B. AIR PRESSURE 1. HIGH			
E. MANUAL STATIONS	<u> 8 8 </u>		2. LOW C. FIRE PUMP			
F. WATER FLOW			D. GENERATOR E. OTHER (specify)			
8. EMERGENCY VOICE/A JACKS ARE INSTALLED & WO MANUAL OPERATION OF SYS 9. POWER SUPPLY: A. PI AMP-HR RATING 10. SIGNAL TRANSMISS AND RECEIVED BY (INDIVID 11. SMOKE DETECTOR 12. REMARKS: EXPLAIN A	ORK PROPERLY (VES); (STEM IS SATISFACTORY RIMARY (MAIN) (LESTON) SION: ALARM IS TRANUAL) (SENSITIVITY TEST	NO). AUTOMA' (YES); (NO). S VOLTS, C. (N NOMITTED OFF	E INSTALLED AND WORK PROFIC OPERATION OF SYSTEM YSTEM HAS ZONED EVACUA' AMPS. B. SECONDARY (STANIONE) D. OTHER (specify) F PREMIS(YES); (NO). ALARM THEY WERE NOTIFIED ITIAL) OF (LAST) SENSITIVIT	IS SATISFACTOR FION FEATURE DBY) () STORA ITRANSMITTE BEFORE AND A	(YES); (NO AGE BATTE D TO CE	10).). RIES, #2 (YES) (NO).
+						_
	1					1
CUSTOMER SIGNATURE	um No	10				

PERIODIC FIRE ALA INSPECTOR: Lea LOC INSPECTION COMPANY AME ADDRESS: 80 Eury Lane CITY: Somerset ZIP: 42101 - PHONE:	FARECRICAN FIRE & SE	H: 1070	NAME OF FACILITY: OPE ADDRESS: 1515		FOR T	stment	CIR
REASON FOR REPORT: () QUA			W. Appr				
CONTROL PANEL MANUFACTU			*****************	06	*********	********	
1. TYPE(S) OF SYSTEM: (LOCAL; () AUXIL	iary; (W Rem	NOTE STATION; () PROPRIETA	RY; () EMER	RGENCY VO	ICE/ALARM	
2. INITIATING DEVICES:			3. INDICATING DEVICE	S: NUMBER	NUMBER	CONDITION	
	NUMBER NUMBER ISTALLED TESTED	CONDITION SAT UNSAT		INSTALLED	TESTED	SAT UNSAT	
1. FIXED TEMPERATURE 2. RATE COMPENSATION			A. BELLS B. HORNS	0	1	0	54
3. RATE-OF-RISE			C. CHIMES D. VISUAL		-	1	in
4. COMBINED FT/ROR 5. OTHER (specify)			1. COMBINED 2. SEPARATE			(S)	KH
B. SMOKE SENSING:			E. OTHER (specify)]
1. IONIZATION 2. PHOTOELECTRIC	1 1	V	4. CONTROL FUNCTIONS:			r - T	1
3. CLOUD CHAMBER			A. ELEVATOR RECALL				1
4. DUAL ION/PHOTO 5. H.V.A.C.			B. FAN SHUTDOWN C. DOOR HOLDER				
6. COMBINED w/HEAT 7. OTHER (specify)			D. SMOKE CONTROL SYSTEM E. OTHER (specify)	1			
C. FLAME SENSING:			5. TROUBLE DEVICES:]
1. FLAME 2. FLAME FLICKER 3. INFRARED			6. REMOTE ANNUNCIA	TORS:]
4. PHOTOELECTRIC 5. ULTRAVIOLET 6. OTHER (appaign)			7. SUPERVISORY SERV	ICE:		/	
6. OTHER (specify) D. GAS SENSING:			A. CONTROL VALVES 1. SPRINKLER				
I. SEMICONDUCTOR			2. STANDPIPE			-	-
2. CATALYTIC ELEMENT 3. OTHER (specify)			3. OTHER (specify) B. AIR PRESSURE				1
	4 6		1. HIGH		_		-
E. MANUAL STATIONS	P P		C. FIRE PUMP				1
F. WATER FLOW	1 -1		D. GENERATOR E. OTHER (specify)				1
JACKS ARE INSTALLED & WOL MANUAL OPERATION OF SYST 9. POWER SUPPLY: A. PRI AMP-HR RATING	RK PROPERTY (YES); TEM IS SATISFACTORY IMARY (MAIN)	(NO). AUTOMA (YES); (NO). S VOLTS	RE INSTALLED AND WORK PROPITIC OPERATION OF SYSTEM IS SYSTEM HAS ZONED EVACUATION AMPS. B. SECONDARY (STAND NONE) D. OTHER (specify) F PREMIS (YES); (NO). ALARM THEY WERE NOTIFIED BINITIAL) OR (LAST) SENSITIVITY ecify)" ANSWERS	ON FEATURE BY) (STOR TRANSMITTE EFORE AND	AFTER TES	ERIES, #2	-
	1						
1	1						
CUSTOMER SIGNATURE	1600 1/6	3				-	- 0

PERIODIC FIRE ALLINSPECTOR: Let LAND AM ADDRESS: 80 Eury Lane CITY: Somerset ZIP: 42101 - PHONI	FA IERICAN FIRE & S	R#: 1070	ADDRESS: 101	Buisage	V ZIP: 40	
		SEMIANNUAL	INSP.; (ANNUAL INSP.; OT			
CONTROL PANEL MANUFAC	TURER AND MODEL	***************************************	Stypicx 4	Ó	***	*****
			NOTE STATION; () PROPRIET		GENCY VO	ICE/ALARM
2. INITIATING DEVICES			3. INDICATING DEVICE			
a. IIVIIIIIIIII DEVICE.	NUMBER NUMBER	CONDITION		NUMBER		CONDITION
A. HEAT SENSING:	INSTALLED TESTED	SAT UNSAT	A. BELLS	INSTALLED	TESTED	SAT UNSAT
1. FIXED TEMPERATURE 2. RATE COMPENSATION 3. RATE-OF-RISE 4. COMBINED FT/ROR	6 6		B. HORNS C. CHIMES D. VISUAL 1. COMBINED	32	32	
5. OTHER (specify)			2. SEPARATE		7.7	
B. SMOKE SENSING: 1. IONIZATION 2. PHOTOELECTRIC 3. CLOUD CHAMBER 4. DUAL ION/PHOTO 5. H.V.A.C. 6. COMBINED w/HEAT 7. OTHER (specify)			E. OTHER (specify) 4. CONTROL FUNCTION A. ELEVATOR RECALL B. FAN SHUTDOWN C. DOOR HOLDER D. SMOKE CONTROL SYSTE E. OTHER (specify)	<u>s:</u>	0	
C. FLAME SENSING: 1. FLAME 2. FLAME FLICKER 3. INFRARED 4. PHOTOELECTRIC 5. ULTRAVIOLET 6. OTHER (specify)			 5. TROUBLE DEVICES 6. REMOTE ANNUNCI 7. SUPERVISORY SER A. CONTROL VALVES 	ATORS:		
D. GAS SENSING: 1. SEMICONDUCTOR 2. CATALYTIC ELEMENT 3. OTHER (specify)			1. SPRINKLER 2. STANDPIPE 3. OTHER (specify) B. AIR PRESSURE 1. HIGH			
E. MANUAL STATIONS	19 19		2. LOW C. FIRE PUMP			
F. WATER FLOW	1 1		D. GENERATOR E. OTHER (specify)		5	
JACKS ARE INSTALLED & WI MANUAL OPERATION OF SY 9. POWER SUPPLY: A. P AMP-HR RATING 10. SIGNAL TRANSMIS: AND RECEIVED BY (INDIVIDIAL)	ORK PROPER TYES: STEM IS SATISFACTOR RIMARY (MAIN) SION: ALARM IS TR DUAL) SENSITIVITY TES	(NO). AUTOMA Y (YES); (NO). S VOLTS, C. (N NSMITTED OF T: DATE OF (IN	RE INSTALLED AND WORK PROTIC OPERATION OF SYSTEM SYSTEM HAS ZONED EVACUATION OF SYSTEM AMPS. B. SECONDARY (STAN NONE) D. OTHER (specify) F PREMIS (YES), (NO). ALARM THEY WERE NOTIFIED INTIAL) OR (LAST) SENSITIVITY	IS SATISFACTOR FION FEATURE DBY) (*) STORA TRANSMITTE BEFORE AND A	(YES); (NO) AGE BATTE TO TO CO	ries, #2
CUSTOMER SIGNATURE	1	ne				

Revised December 2017

PERIODIC FIRE ALARM INSPECTION & INSPECTION: INSPECTION COMPANY AMERICAN FIRE & SECURIT	NAME OF FACILITY: Tolice recognitions
ADDRESS: 80 Eury Lane	CITY 2 ex MUTON - KY ZIP: 40507
CITY: Somerset STATE: KY	
ZIP: 42101 - PHONE: (859) 333-4489	SEND REPORT TO: Vason Nichols
REASON FOR REPORT: () QUARTERLY INSP.; () SEMIAN	NUAL INSP.; (ANNUAL INSP.; OTHER (specify): 15-7434
CONTROL PANEL MANUFACTURER AND MODEL:	STANK 4010
1. TYPE(S) OF SYSTEM: (\(\sigma\)LOCAL; (\)) AUXILIARY; (\	REMOTE STATION; () PROPRIETARY; () EMERGENCY VOICE/ALARM
2. INITIATING DEVICES:	3. INDICATING DEVICES:
A. HEAT SENSING: NUMBER NUMBER CONDI INSTALLED TESTED SAT U	NSAT INSTALLED TESTED SAI UNSAI
1. FIXED TEMPERATURE 2. RATE COMPENSATION 3. RATE-OF-RISE 4. COMBINED FT/ROR 5. OTHER (specify)	A. BELLS B. HORNS C. CHIMES D. VISUAL 1. COMBINED 2. SEPARATE
B. SMOKE SENSING: 1. IONIZATION 2. PHOTOELECTRIC 3. CLOUD CHAMBER 4. DUAL ION/PHOTO 5. H.V.A.C. 6. COMBINED w/HEAT 7. OTHER (specify)	E. OTHER (specify) 4. CONTROL FUNCTIONS: A. ELEVATOR RECALL B. FAN SHUTDOWN C. DOOR HOLDER D. SMOKE CONTROL SYSTEM E. OTHER (specify)
C. FLAME SENSING: 1. FLAME 2. FLAME FLICKER 3. INFRARED 4. PHOTOELECTRIC 5. ULTRAVIOLET 6. OTHER (specify)	5. TROUBLE DEVICES: 6. REMOTE ANNUNCIATORS: 7. SUPERVISORY SERVICE: A. CONTROL VALVES
D. GAS SENSING: 1. SEMICONDUCTOR 2. CATALYTIC ELEMENT 3. OTHER (specify)	1. SPRINKLER 2. STANDPIPE 3. OTHER (specify) B. AIR PRESSURE 1. HIGH
E. MANUAL STATIONS 15 15	2. LOW C. FIRE PUMP
F. WATER FLOW	D. GENERATOR E. OTHER (specify)
JACKS ARE INSTALLED & WORK PROPERLY (YES); (NO). AU MANUAL OPERATION OF SYSTEM IS SATISFACTORY (YES); 9. POWER SUPPLY: A. PRIMARY (MAIN) VOLTS, AMP-HR RATING 10. SIGNAL TRANSMISSION: ALARM IS TRANSMITT! AND RECEIVED BY (INDIVIDUAL)	ERS ARE INSTALLED AND WORK PROPERLY (YES); (NO). TELEPHONE TOMATIC OPERATION OF SYSTEM IS SATISFACTORY (YES); (NO). (NO). SYSTEM HAS ZONED EVACUATION FEATURE (YES); (NO). AMPS. B. SECONDARY (STANDBY) (Y) STORAGE BATTERIES, # C. (NONE) D. OTHER (specify) ED OFF PREMIS (YES); (NO). ALARM TRANSMITTED TO COMPANDED TO THEY WERE NOTIFIED BEFORE AND AFTER TEST (YES); (NO). OF (INITIAL) OR (LAST) SENSITIVITY TEST ER (specify)" ANSWERS
12. REWIARDS EAFLAIN ANT UNSAL, NO OR OTHE	

PERIODIC FIRE AL	Λ.	SPECTION FAR	And the second second	TING REPORT DATE	OF INSPECTION	on 2-2	3-33
INSPECTION COMPANY AM				the second of	J. SIXY	h 3+	1 CALLON
ADDRESS: 80 Eury Lane		THE COL	COMIT	CITY: Lexmoston		Y ZIP:	10508
CITY: Somerset		STA	TE: KY		Burson		
ZIP: 42101 - PHON	E: (859) 3				Jason 1	Nichol	5
REASON FOR REPORT: () (QUARTERLY I	NSP.; () S	SEMIANNUAL	INSP.; () ANNUAL INSP.; OTI	HER (specify):	15-1	331
CONTROL PANEL MANUFAC	TURER AND	MODEL:	**********	Totter God	•••••	******	*********
1. TYPE(S) OF SYSTEM:	(LOCAL;	() AUXIL	IARY; (V) REM	MOTE STATION; () PROPRIETA	RY; () EME	RGENCY VO	ICE/ALARM
2. INITIATING DEVICE	S:			3. INDICATING DEVICE			
A. HEAT SENSING:	NUMBER INSTALLED		CONDITION SAT UNSAT		NUMBER INSTALLED	NUMBER TESTED	CONDITION SAT UNSAT
I. FIXED TEMPERATURE				A. BELLS			
2. RATE COMPENSATION 3. RATE-OF-RISE				B. HORNS C. CHIMES			
4. COMBINED FT/ROR				D. VISUAL	,	1	
5. OTHER (specify)				1. COMBINED 2. SEPARATE			
B. SMOKE SENSING:				E. OTHER (specify)			
1. IONIZATION	-7	-1-		4. CONTROL FUNCTIONS			
2. PHOTOELECTRIC 3. CLOUD CHAMBER				A. ELEVATOR RECALL	•		
4. DUAL ION/PHOTO				B. FAN SHUTDOWN			
5. H.V.A.C. 6. COMBINED w/HEAT	_			C. DOOR HOLDER D. SMOKE CONTROL SYSTE			
7. OTHER (specify)				E. OTHER (specify)	VI		
C. FLAME SENSING:				5. TROUBLE DEVICES:			
2. FLAME FLICKER				6. REMOTE ANNUNCIA	TORS:		
3. INFRARED 4. PHOTOELECTRIC			1				
5. ULTRAVIOLET				7. SUPERVISORY SERV	ICE:		
6. OTHER (specify)				A. CONTROL VALVES	11	1	
D. GAS SENSING:				I. SPRINKLER 2. STANDPIPE		_7	
1. SEMICONDUCTOR 2. CATALYTIC ELEMENT		_		3. OTHER (specify)			
3. OTHER (specify)			175	B. AIR PRESSURE			
E. MANUAL STATIONS	1	1		I. HIGH 2. LOW			
E. MANORE STATIONS				C. FIRE PUMP			
F. WATER FLOW	_/_	1		D. GENERATOR E. OTHER (specify)			
JACKS ARE INSTALLED & W	ORK PROPER	LY (YES): (NO). AUTOMA	E INSTALLED AND WORK PROP TIC OPERATION OF SYSTEM IS	SATISFACTOR	RX (YES): (N	TELEPHONE (O).
				YSTEM HAS ZONED EVACUATI			
9. POWER SUPPLY: A. F AMP-HR RATING	RIMARY (MA	IN) AU		AMPS. B. SECONDARY (STAND NONE) D. OTHER (specify)	BY) (V) STOR	AGE BATTE	RIES, #
	SION: ALAR	M IS TRAN		F PREMIS (YES): (NO). ALARM	TRANSMITTE	D TOCET	tral States
AND RECEIVED BY (INDIVI	DUAL) _	perate	<u></u>	THEY WERE NOTIFIED BI	EFORE AND A	FTER TES	(YES); (NO).
11. SMOKE DETECTOR	SENSITIV	TY TEST	DATE OF (IN	ITIAL) OR (LAST) SENSITIVITY	TEST UN	Show	
12. REMARKS: EXPLAIN							
	1	1					
CUSTOMER SIGNATURE	au 7	100	_			-	

PERIODIC FIRE ALARM INSPECTION (INSPECTOR: FAR#: (A) INSPECTION COMPANY AMERICAN FIRE & SECUR ADDRESS: 80 Eury Lane CITY: Somerset STATE: ZIP: 42101 - PHONE: (859) 333-4489 REASON FOR REPORT: (1) QUARTERLY INSP.; (1) SEMINARY CONTROL (1) S	NAME OF FACILITY: POLICY ROLL GALL BAST ADDRESS: 1/65 Centre farkway CITY: Lex Muten S KY ZIP: 40517
CONTROL PANEL MANUFACTURER AND MODEL:	Shupley 4007
1 TVDE(S) OF SYSTEM: () OCAL: () AUXII IARY	; () REMOTE STATION; () PROPRIETARY; () EMERGENCY VOICE/ALARM
	3. INDICATING DEVICES:
2. INITIATING DEVICES: NUMBER NUMBER CON	NDITION NUMBER NUMBER CONDITION
	UNSAT INSTALLED TESTED SAT UNSAT
1. FIXED TEMPERATURE 2. RATE COMPENSATION 3. RATE-OF-RISE 4. COMBINED FT/ROR 5. OTHER (specify)	A. BELLS B. HORNS C. CHIMES D. VISUAL 1. COMBINED 2. SEPARATE
B. SMOKE SENSING: 1. IONIZATION 2. PHOTOELECTRIC 3. CLOUD CHAMBER 4. DUAL ION/PHOTO 5. H.V.A.C. 6. COMBINED w/HEAT 7. OTHER (specify)	E. OTHER (specify) 4. CONTROL FUNCTIONS: A. ELEVATOR RECALL B. FAN SHUTDOWN C. DOOR HOLDER D. SMOKE CONTROL SYSTEM E. OTHER (specify)
C. FLAME SENSING: 1. FLAME 2. FLAME FLICKER 3. INFRARED 4. PHOTOELECTRIC 5. ULTRAVIOLET 6. OTHER (specify)	5. TROUBLE DEVICES: 6. REMOTE ANNUNCIATORS: 7. SUPERVISORY SERVICE: A. CONTROL VALVES
D. GAS SENSING: 1. SEMICONDUCTOR 2. CATALYTIC ELEMENT 3. OTHER (specify)	1. SPRINKLER 2. STANDPIPE 3. OTHER (specify) B. AIR PRESSURE 1. HIGH
E. MANUAL STATIONS 4 4 V	2. LOW C. FIRE PUMP
F. WATER FLOW / / / V	D. GENERATOR E. OTHER (specify)
JACKS ARE INSTALLED & WORK PROPERLY (YES): (NO). MANUAL OPERATION OF SYSTEM IS SATISFACTORY (YES 9. POWER SUPPLY: A. PRIMARY (MAIN) / VOLT AMP-HR RATING 10. SIGNAL TRANSMISSION: ALARM IS TRANSMI AND RECEIVED BY (INDIVIDUAL)	AKERS ARE INSTALLED AND WORK PROPERLY (YES); (NO). AUTOMATIC OPERATION OF SYSTEM IS SATISFACTORY (YES); (NO). S); (NO). SYSTEM HAS ZONED EVACUATION FEAPURE (YES); (NO). S, AMPS. B. SECONDARY (STANDBY) (V) STORAGE BATTERIES, # C. (NONE) D. OTHER (specify) TTED OFF PREMIS (YES); (NO). ALARM TRANSMITTED TO CANTAL STATEMENT THEY WERE NOTIFIED BEFORE AND AFTER TEST (YES); (NO). TE OF (INITIAL) OR (LAST) SENSITIVITY TEST

PERIODIC FIRE ALARM INSPECTION &	TESTING REPORT DATE OF INSPECTION 2-22 22
INSPECTOR: Ken Hood FAR#: 10	70 NAME OF FACILITY: TOLICE KOLL GILL WEST
INSPECTION COMPANY AMERICAN FIRE & SECURIT	TY ADDRESS: 1745, Old Henkfort Tike
ADDRESS: 80 Eury Lane	CITY: Lexongton KY ZIP: 40504
CITY: Somerset STATE: K	
ZIP: 42101 - PHONE: (859) 333-4489	
REASON FOR REPORT: () QUARTERLY INSP.; () SEMIAN	INUAL INSP.; (ANNUAL INSP.; OTHER (specify): 15-13053
CONTROL PANEL MANUFACTURER AND MODEL:	> 5J05
1. TYPE(S) OF SYSTEM: LOCAL; () AUXILIARY; (REMOTE STATION; () PROPRIETARY; () EMERGENCY VOICE/ALARM
2. INITIATING DEVICES:	3. INDICATING DEVICES: NUMBER NUMBER CONDITION
A. HEAT SENSING: NUMBER NUMBER CONDITION INSTALLED TESTED SAT U	INSTALLED TESTED SAT UNSAT
1. FIXED TEMPERATURE	A. BELLS B. HORNS C. CHAPTE
3. RATE-OF-RISE 4. COMBINED FT/ROR	C. CHIMES D. VISUAL
5. OTHER (specify)	1. COMBINED
B. SMOKE SENSING:	2. SEPARATE E. OTHER (specify)
1. IONIZATION 2. PHOTOELECTRIC 4 4	4. CONTROL FUNCTIONS:
3. CLOUD CHAMBER	A. ELEVATOR RECALL
4. DUAL ION/PHOTO 5. H.V.A.C.	B. FAN SHUTDOWN C. DOOR HOLDER
6. COMBINED w/HEAT	D. SMOKE CONTROL SYSTEM
7. OTHER (specify)	E. OTHER (specify)
C. FLAME SENSING:	5. TROUBLE DEVICES:
2. FLAME FLICKER	6. REMOTE ANNUNCIATORS:
3. INFRARED 4. PHOTOELECTRIC	
5. ULTRAVIOLET	7. SUPERVISORY SERVICE:
6. OTHER (specify)	A. CONTROL VALVES
D. GAS SENSING:	1. SPRINKLER 2. STANDPIPE
1. SEMICONDUCTOR	3. OTHER (specify)
3. OTHER (specify)	B. AIR PRESSURE 1. HIGH
E. MANUAL STATIONS & 8	2. LOW
	C. FIRE PUMP D. GENERATOR
F. WATER FLOW	E. OTHER (specify)
8. EMERGENCY VOICE/ALARM: VALOUDSPEAK JACKS ARE INSTALLED & WORK PROPERLY (YES); (NO). AUMANUAL OPERATION OF SYSTEM IS SATISFACTORY (YES);	ERS ARE INSTALLED AND WORK PROPERLY (YES); (NO). TELEPHONE UTOMATIC OPERATION OF SYSTEM IS SATISFACTORY (YES); (NO). (NO). SYSTEM HAS ZONED EVACUATION FEATURE (YES); (NO). AMPS. B. SECONDARY (STANDBY) (*) STORAGE BATTERIES, #
AMP-HR RATING	. C. (NONE) D. OTHER (specify)
	ED OFF PREMISCIYES); (NO). ALARM TRANSMITTED TO CENTRAL STATE
AND RECEIVED BY (INDIVIDUAL) COPETATOR	. THEY WERE NOTIFIED BEFORE AND AFTER TEST (YES), (NO).
11. SMOKE DETECTOR SENSITIVITY TEST: DATE	OF (INITIAL) OR (LAST) SENSITIVITY TEST
12. REMARKS: EXPLAIN ANY "UNSAT", "NO" OR "OTH	ER (specify)" ANSWERS
ANNUMCICITATION to	bby Cloes NOT WORK
Supervisory Truible @ P.I.	.V. appears to be from water.
1	
CHARLES CHARLES CONTRACTOR OF THE CONTRACTOR OF	

PERIODIC FIRE AL.					OF INSPECTI		
INSPECTOR: Ken t	1000	FAR	#: 1070	NAME OF FACILITY:		ety of	is larry
INSPECTION COMPANY AM	IERICAN F	TRE & SE	CURITY	ADDRESS: 115 CIS	co KA	1	
ADDRESS: 80 Eury Lane				CITY: LEXMUTON		Y ZIP: 40	504
CITY: Somerset		STA	TE: KY	OCCUPIED AS	Disney		
ZIP: 42101 - PHONE	E: (859) 3	33-4489		SEND REPORT TO:	son N	rchols	
			SEMIANNUAL	INSP.; (ANNUAL INSP.; OTF	IER (specify):		
CONTROL PANEL MANUFAC				Notifier tu		********	**********
1. TYPE(S) OF SYSTEM:	(LOCAL;	() AUXIL	IARY; (REM	IOTE STATION; () PROPRIETA	RY; () EMEI	RGENCY VO	ICE/ALARM
2. INITIATING DEVICES				3. INDICATING DEVICE			CONDITION
A. HEAT SENSING:	NUMBER INSTALLED	NUMBER TESTED	CONDITION SAT UNSAT	A DELLC	INSTALLED	TESTED	SAT UNSAT
1. FIXED TEMPERATURE				A. BELLS B. HORNS	31	3/	
2. RATE COMPENSATION 3. RATE-OF-RISE	_			C. CHIMES			
4. COMBINED FT/ROR		,		D. VISUAL	21	31	100
5. OTHER (specify)				I. COMBINED 2. SEPARATE	277	47	
B. SMOKE SENSING:				E. OTHER (specify)			
1. IONIZATION	-			4. CONTROL FUNCTIONS			
2. PHOTOELECTRIC 3. CLOUD CHAMBER				A. ELEVATOR RECALL			
4. DUAL ION/PHOTO				B. FAN SHUTDOWN			
5. H.V.A.C.	-3	3	1	C. DOOR HOLDER	. —	-	-1
6. COMBINED w/HEAT 7. OTHER (specify)	114_	114	-	D. SMOKE CONTROL SYSTER E. OTHER (specify)	W		
C. FLAME SENSING:				5. TROUBLE DEVICES:			
I. FLAME				0.700.0000			
2. FLAME FLICKER				6. REMOTE ANNUNCIA	TORS:	21	
3. INFRARED					4	7	
4. PHOTOELECTRIC 5. ULTRAVIOLET				7. SUPERVISORY SERV	ICE:		
6. OTHER (specify)				A. CONTROL VALVES	1.	11	
D. GAS SENSING:				1. SPRINKLER	4	-4_	
I. SEMICONDUCTOR				2. STANDPIPE			
2. CATALYTIC ELEMENT			-	3. OTHER (specify) B. AIR PRESSURE			
3. OTHER (specify)				1. HIGH			
E. MANUAL STATIONS	14	14		2. LOW			
		-	/	C. FIRE PUMP D. GENERATOR			
F. WATER FLOW	_/_	_/_		E. OTHER (specify)			
JACKS ARE INSTALLED & W MANUAL OPERATION OF SY 9. POWER SUPPLY: A. P AMP-HR RATING 10. SIGNAL TRANSMIS AND RECEIVED BY (INDIVII	ORK PROPER STEM IS SAT PRIMARY (MA SION: ALAF DUAL)	ISFACTORY IN JACO RM IS TRAI	NO). AUTOMA (YES); (NO). S VOLTS, 20 . C. (N NSMITTED OF	E INSTALLED AND WORK PROP TIC OPERATION OF SYSTEM IS YSTEM HAS ZONED EVACUAT AMPS. B. SECONDARY (STAND NONE) D. OTHER (specify) F PREMIS (YES) (NO). ALARM THEY WERE NOTIFIED B ITIAL) OR (LAST) SENSITIVITY	SATISFACTO ON FEATURE BY) (STOR TRANSMITTI EFORE AND	RY(YES): (NO AGE BATTE ED TO CA AFTER TES	NO). PRIES, #2 Tral State (YES); (NO).
12. REMARKS: EXPLAIN			R "OTHER (spe		viA fr leak	is P	antroll Cowing
		_					
	1	11	2				

PERIODIC FIRE AL INSPECTOR: Real	FAR#:	1500	NAME OF FACILITY:	Recyclin	on 3-6	ter er
INSPECTION COMPANY AN		URITY	ADDRESS: 340		Y ZIP: 46	0508
ADDRESS: 80 Eury Lane Somerset		r. KV	OCCUPIED AS:	Bitsne	-	2308
CITY: Somerset ZIP: 42101 - PHON		E; KI	SEND REPORT TO:		1 4	5
REASON FOR REPORT: () C			INSP.; (ANNUAL INSP.	OTHER (specify):		
CONTROL PANEL MANUFAC	***********	******	*****************	r 200	********	********
1. TYPE(S) OF SYSTEM:	MILOCAL: () AUXILIA	RY: (V) REM	OTE STATION; () PROPR	RIETARY; () EMER	RGENCY VO	ICE/ALARM
2. INITIATING DEVICES			3. INDICATING DEV			
2. INITIATING DEVICE	NUMBER NUMBER (CONDITION		NUMBER		CONDITION
A. HEAT SENSING:		SAT UNSAT		INSTALLED	TESTED	SAT UNSAT
1. FIXED TEMPERATURE 2. RATE COMPENSATION 3. RATE-OF-RISE 4. COMBINED FT/ROR			A. BELLS B. HORNS C. CHIMES D. VISUAL	20	20	
5. OTHER (specify)			1. COMBINED 2. SEPARATE	80	520	
B. SMOKE SENSING: 1. IONIZATION 2. PHOTOELECTRIC			E. OTHER (specify) 4. CONTROL FUNCTI	ONS:		
3. CLOUD CHAMBER 4. DUAL ION/PHOTO			A. ELEVATOR RECALI B. FAN SHUTDOWN	L	<i>B</i>	
5. H.V.A.C. 6. COMBINED w/HEAT 7. OTHER (specify)			C. DOOR HOLDER D. SMOKE CONTROL S E. OTHER (specify)	YSTEM		
C. FLAME SENSING: I. FLAME			5. TROUBLE DEVICE			
2. FLAME FLICKER 3. INFRARED 4. PHOTOELECTRIC			6. REMOTE ANNUM	NCIATORS:		
5. ULTRAVIOLET 6. OTHER (specify)			7. SUPERVISORY S. A. CONTROL VALVES		,	
D. GAS SENSING: 1. SEMICONDUCTOR			1. SPRINKLER 2. STANDPIPE 3. OTHER (specify)			
 CATALYTIC ELEMENT OTHER (specify) 			B. AIR PRESSURE	4	4	1
E. MANUAL STATIONS	11 11	1.1	2. LOW C. FIRE PUMP	4	4_	
F. WATER FLOW	4 4 1		D. GENERATOR E. OTHER (specify)			
8. EMERGENCY VOICE, JACKS ARE INSTALLED & W. MANUAL OPERATION OF ST 9. POWER SUPPLY: A. I. AMP-HR RATING 10. SIGNAL TRANSMIS AND RECEIVED BY (INDIVI- 11. SMOKE DETECTOR	YORK PROPERLY (YES): YN YSTEM IS SATISFACTORY (PRIMARY MAIN) 100 V SSION: ALARM IS TRANS DUAL) 000 TA	O), AUTOMA' YES); (NO), S OLTS, C. (N SMITTED OF	TIC OPERATION OF SYSTI YSTEM HAS ZONED EVAC AMPS. B. SECONDARY (ST IONE) D. OTHER (specify) F PREMIS (YES): (NO). AL 	EM IS SATISFACTOR CUATION FEATURE (ANDBY) (STOR. ARM TRANSMITTE ED BEFORE AND A	(YES); (NO) AGE BATTE TO TO CO	ries, #2 Tral State (YES) (NO).
12. REMARKS: EXPLAIN	ANY "UNSAT", "NO" OR	"OTHER (spe	cify)" ANSWERS			
E-pull stati	on going t	to Car	opy area di	oes not	works	property
Old Tippin	Floor					
	,					(7)
CUSTOMER SIGNATURE	um 1/2	_				

PERIODIC FIRE AL.	ARM INS	PECTIO	N & TEST		TE OF INSPECTIO	ON -	12-55
INSPECTOR: Ken 1	tood	FAR	1070	10111	Afety C	1+4	
INSPECTION COMPANY AM		IRE & SE	CURITY	ADDRESS: 1100	1	xKes	mezH
ADDRESS: 80 Eury Lane Somerset		СТА	TE: KY	OCCUPIED AS:	Bulsne	Y ZIP: 4	0501
CITY: Somerset ZIP: 42101 - PHONI	E. (859) 3		ME: KI		Tason 1	Irchol	5
REASON FOR REPORT: () C	NIA DTEDIVI	NSP· () S	SEMIANNI IAI		OTHER (specify):	15-1	3951
CONTROL PANEL MANUFAC	TURER AND	MODEL:	DEMININATIONE	Smolex	4001		
					CTADV. () EMER	GENCY VO	ICE/ALARM
1. TYPE(S) OF SYSTEM:		() AUXIL	IARY; (V) KEN	3. INDICATING DEVI		OENCI VO	/CE/AEARM
2. INITIATING DEVICES	NUMBER	MILIMDED	CONDITION	3. INDICATING DEVI	NUMBER	NUMBER	CONDITION
A. HEAT SENSING:	INSTALLED		SAT UNSAT	A. BELLS	INSTALLED	TESTED	SAT UNSAT
1. FIXED TEMPERATURE 2. RATE COMPENSATION				B. HORNS	-2	_2_	
3. RATE-OF-RISE				C. CHIMES D. VISUAL			
4. COMBINED FT/ROR 5. OTHER (specify)				I. COMBINED	2	9	
				2. SEPARATE			
B. SMOKE SENSING: 1. IONIZATION				E. OTHER (specify)	-		
2. PHOTOELECTRIC				4. CONTROL FUNCTIO	NS:		
3. CLOUD CHAMBER 4. DUAL ION/PHOTO				A. ELEVATOR RECALL B. FAN SHUTDOWN		-	
5. H.V.A.C.				C. DOOR HOLDER			
6. COMBINED w/HEAT 7. OTHER (specify)	_			D. SMOKE CONTROL SYS E. OTHER (specify)	STEM		
C. FLAME SENSING:				5. TROUBLE DEVICE	ES:		
I. FLAME 2. FLAME FLICKER	-			6. REMOTE ANNUNC	CIATORS:		
3. INFRARED				U. REMOTE MINIOT			
4. PHOTOELECTRIC			H	a cribebylcoby ce	DVICE.		
5. ULTRAVIOLET 6. OTHER (specify)				7. SUPERVISORY SE	RVICE		
D. GAS SENSING:				I. SPRINKLER			
I. SEMICONDUCTOR				2. STANDPIPE		-	
2. CATALYTIC ELEMENT 3. OTHER (specify)				3. OTHER (specify) B. AIR PRESSURE			
•		_	/	1. HIGH	-		
E. MANUAL STATIONS	_2	-2		2. LOW C. FIRE PUMP			
F. WATER FLOW				D. GENERATOR E. OTHER (specify)	_		
8. EMERGENCY VOICE	AT ADM.	JA LOUI	DEDEAUEDE AD	· -	OPERIV (VES): (N	0) 2	TELEPHONE
IACKS ARE INSTALLED & W	ORK PROPER	LYCYES): (NO). AUTOMA	TIC OPERATION OF SYSTEM	I IS SATISFACTOR	RY (YES) (N	IO).
MANUAL OPERATION OF SY	STEM IS SAT	ISFACTORY	(YES); (NO). S	YSTEM HAS ZONED EVACU	IATION FEATURE	(YES); (NO).
9. POWER SUPPLY: A. P	RIMARY (MA	IN)	VOLTS, de	AMPS. B. SECONDARY (STA	NDBY) (STOR	AGE BATTE	RIES, #
AMP-HR RATING	CION, ALAI	M IC TD A		NONE) D. OTHER (specify)		n m	Hos Stok
AND RECEIVED BY (INDIVII		opelo		THEY WERE NOTIFIED	BEFORE AND A	FTER TES	(YES); (NO).
11. SMOKE DETECTOR	SENSITIV	TEST	DATE OF (IN	ITIAL) OR (LAST) SENSITIV	ITY TEST		
12. REMARKS: EXPLAIN	ANY "UNSA"	r", "NO" O	R "OTHER (spe	cify)" ANSWERS			
							
-							
OVIGNO AND GUILLIANS A	10.	1/					

PERIODIC FIRE AL	A CONTRACTOR OF THE PROPERTY O			NAME OF FACILITY: SAL	OF INSPECTION	Build	30-022 M/A
INSPECTION COMPANY AN	COLL MERICAN E	FAR	CURITY	Address: 218 E	Meins	1	100
ADDRESS: 80 Eury Lane		IKE to be	COMIT	CITY: Zex Marton		Y ZIP:	10507
CITY: Somerset		STA	TE: KY	OCCUPIED AS:	Buis	4. 9.	
ZIP: 42101 - PHON	E: (859) 3			SEND REPORT TO:	SON NI	zhols	
			SEMIANNUAL	INSP.; () ANNUAL INSP.; OTH	ER (specify):	<i>d</i>	
CONTROL PANEL MANUFAC	TURER AND	MODEL:	********	Slent Kulg	nt 510	8	
1. TYPE(S) OF SYSTEM:	(VLOCAL;	() AUXIL	IARY; (REN	MOTE STATION; () PROPRIETA	RY; () EMEI	RGENCY VO	DICE/ALARM
2. INITIATING DEVICE	S:			3. INDICATING DEVICE	<u>S:</u>		
A. HEAT SENSING:	NUMBER INSTALLED		CONDITION SAT UNSAT		NUMBER INSTALLED		CONDITION SAT UNSAT
1. FIXED TEMPERATURE 2. RATE COMPENSATION				A. BELLS B. HORNS	15	15	
3. RATE-OF-RISE				C. CHIMES D. VISUAL			
4. COMBINED FT/ROR 5. OTHER (specify)				1. COMBINED	15	15	
B. SMOKE SENSING:				2. SEPARATE E. OTHER (specify)			
I. IONIZATION							
2. PHOTOELECTRIC 3. CLOUD CHAMBER	15	15_		4. CONTROL FUNCTIONS: A. ELEVATOR RECALL			
4. DUAL ION/PHOTO				B. FAN SHUTDOWN			
5. H.V.A.C.				C. DOOR HOLDER			
6. COMBINED w/HEAT 7. OTHER (specify)				D. SMOKE CONTROL SYSTEM E. OTHER (specify)			
C. FLAME SENSING:				5. TROUBLE DEVICES:			
2. FLAME FLICKER				6. REMOTE ANNUNCIA	TORS:	~	
3. INFRARED 4. PHOTOELECTRIC					_ 2	0	
5. ULTRAVIOLET				7. SUPERVISORY SERVI	ICE:		
6. OTHER (specify)				A. CONTROL VALVES			
D. GAS SENSING: I. SEMICONDUCTOR				I. SPRINKLER 2. STANDPIPE			
2. CATALYTIC ELEMENT				3. OTHER (specify)			
3. OTHER (specify)				B. AIR PRESSURE			
E. MANUAL STATIONS	10	10	MI	2. LOW			
				C. FIRE PUMP		_	
F. WATER FLOW				D. GENERATOR E. OTHER (specify)			
JACKS ARE INSTALLED & W MANUAL OPERATION OF ST	ORK PROPER	LYC(YES); (ISFACTORY	NO). AUTOMA (YES); (NO). S	RE INSTALLED AND WORK PROPI TIC OPERATION OF SYSTEM IS SYSTEM HAS ZONED EVACUATION	SATISFACTOR	(YES); (NO	VO).
				AMPS, B. SECONDARY (STANDI	BY) (STOR	AGE BATTE	RIES, #
AMP-HR RATING	8Ah		C. (N	NONE) D. OTHER (specify)	TD A NICHALTTI	n m(24	fol - Lto
AND RECEIVED BY (INDIVI	DUAL)C	perat	25	F PREMISOYES), (NO), ALARM THEY WERE NOTIFIED BE	FORE AND A	FTER TEST	(YES) (NO).
11. SMOKE DETECTOR	SENSITIV	TY TEST	DATE OF (IN	ITIAL) OR (LAST) SENSITIVITY	TEST	Know	
12. REMARKS: EXPLAIN	ANY "UNSA	r", "no" oi	R "OTHER (spe	cify)" ANSWERS			-
				70			
	1						
CUCTOMED CICNATURE	He		1				

PERIODIC FIRE AL INSPECTOR: INSPECTION COMPANY AN ADDRESS: 80 Eury Lane	HOOC MERICAN F	FAR	#: 1076		, Verschilles	R. Ca	10504
CITY: Somerset STATE: KY					Buisn	255	
ZIP: <u>42101</u> PHON	E: (859) 3	33-4489		SEND REPORT TO:	Jason	Nicho	ls
REASON FOR REPORT: ()	QUARTERLY I	NSP.; () S			P.; OTHER (specify):	15-1	3.35
CONTROL PANEL MANUFAC	TURER AND	MODEL:		Siemens	************	*********	**********
1. TYPE(S) OF SYSTEM:	(LOCAL;	() AUXIL	IARY; (V) REM	OTE STATION; () PROP	RIETARY; () EME	RGENCY VO	ICE/ALARM
2. INITIATING DEVICES	S:			3. INDICATING DE			
A. HEAT SENSING:	NUMBER INSTALLED		CONDITION SAT UNSAT		NUMBER INSTALLED	NUMBER TESTED	CONDITION SAT UNSAT
1. FIXED TEMPERATURE 2. RATE COMPENSATION				A. BELLS B. HORNS	39	39	V
3. RATE-OF-RISE				C. CHIMES D. VISUAL			
4. COMBINED FT/ROR 5. OTHER (specify)				1. COMBINED	39	39	
B. SMOKE SENSING:				2. SEPARATE			
B. SMOKE SENSING: 1. IONIZATION				E. OTHER (specify)	-		
2. PHOTOELECTRIC				4. CONTROL FUNCT			
3. CLOUD CHAMBER 4. DUAL ION/PHOTO				A. ELEVATOR RECAL B. FAN SHUTDOWN	L		
5. H.V.A.C.	_2	2		C. DOOR HOLDER			
6. COMBINED w/HEAT 7. OTHER (specify)				D. SMOKE CONTROL S E. OTHER (specify)	SYSTEM		
C. FLAME SENSING:				5. TROUBLE DEVI	CES:		
I. FLAME 2. FLAME FLICKER				6. REMOTE ANNU	NCIATORS:		- /
3. INFRARED					1	1	
4. PHOTOELECTRIC 5. ULTRAVIOLET				7. SUPERVISORY S	EPVICE:		
6. OTHER (specify)				A. CONTROL VALVES			
D. GAS SENSING:				I. SPRINKLER			V
1. SEMICONDUCTOR				2. STANDPIPE 3. OTHER (specify)	-		
2. CATALYTIC ELEMENT 3. OTHER (specify)				B. AIR PRESSURE			
	1 7	17		1. HIGH 2. LOW	-		
E. MANUAL STATIONS	70	70		C. FIRE PUMP			
F. WATER FLOW		_/_		D. GENERATOR E. OTHER (specify)			
8. EMERGENCY VOICE	ALARM:	1/ALOUI	OSPEAKERS AR	E INSTALLED AND WORK	PROPERLY (YES); (N	0). 2	TELEPHONE
JACKS ARE INSTALLED & W MANUAL OPERATION OF SY	STEM IS SAT	ISFACTORY	(YES); (NO). S	YSTEM HAS ZONED EVA	CUATION FEATURE	(YES); (NO).
9. POWER SUPPLY: A. P.	RIMARY (MA	IN) /DU				AGE BATTE	RIES, #
AMP-HR RATING	D)		IONE) D. OTHER (specify)		n m ()	to testil
10. SIGNAL TRANSMIS AND RECEIVED BY (INDIVII	DUAL) Of	rerato		. THEY WERE NOTIF	ED BEFORE AND	FTER TEST	(YES) (NO).
11. SMOKE DETECTOR	SENSITIV	TY TEST	DATE OF (IN	ITIAL) OR (LAST) SENSIT	TIVITY TEST	nown	
12. REMARKS: EXPLAIN							
-		-					
	1						
CUSTOMER SIGNATURE	un.	M	Duose hand were	ere making A conies			

PERIODIC FIRE AL. INSPECTOR: INSPECTION COMPANY AN ADDRESS: 80 Eury Lane CITY: Somerset	A ERICAN F	FAR TRE & SE	#: 1020	NAME OF FACILITY: WADDRESS: 475 B CITY: Lexington OCCUPIED AS:	yrd Those	Y ZIP:	nt 1310
ZIP: 42101 - PHON	E: (859) 3			SEND REPORT TO:	Jason 1		Š
REASON FOR REPORT: () (THER (specify):		
CONTROL PANEL MANUFAC	TURER AND	MODEL:		Notatier	***********	********	*******
1. TYPE(S) OF SYSTEM:	W LOCAL;	() AUXIL	IARY; (V) REM	OTE STATION; () PROPRIE	TARY; () EMER	RGENCY VO	ICE/ALARM
2. INITIATING DEVICES	3:			3. INDICATING DEVI			CONDITION
A. HEAT SENSING: I. FIXED TEMPERATURE	NUMBER INSTALLED		CONDITION SAT UNSAT	A. BELLS	NUMBER	TESTED	SAT UNSAT
 RATE COMPENSATION RATE-OF-RISE COMBINED FT/ROR OTHER (specify) 				B. HORNS C. CHIMES D. VISUAL I. COMBINED 2. SEPARATE	5	5	
B. SMOKE SENSING: 1. IONIZATION 2. PHOTOELECTRIC 3. CLOUD CHAMBER 4. DUAL ION/PHOTO 5. H.V.A.C. 6. COMBINED w/HEAT 7. OTHER (specify)				E. OTHER (specify) 4. CONTROL FUNCTIO! A. ELEVATOR RECALL B. FAN SHUTDOWN C. DOOR HOLDER D. SMOKE CONTROL SYSTE. OTHER (specify)			
C. FLAME SENSING: 1. FLAME 2. FLAME FLICKER 3. INFRARED 4. PHOTOELECTRIC 5. ULTRAVIOLET 6. OTHER (specify)				 5. TROUBLE DEVICE 6. REMOTE ANNUNC 7. SUPERVISORY SER A. CONTROL VALVES 	IATORS:		
D. GAS SENSING: 1. SEMICONDUCTOR 2. CATALYTIC ELEMENT 3. OTHER (specify)				1. SPRINKLER 2. STANDPIPE 3. OTHER (specify) B. AIR PRESSURE 1. HIGH			
E. MANUAL STATIONS	4	8		2. LOW C. FIRE PUMP	-		
F. WATER FLOW		_1_		D. GENERATOR E. OTHER (specify)			
8. EMERGENCY VOICE/A JACKS ARE INSTALLED & WA MANUAL OPERATION OF SY 9. POWER SUPPLY: A. P AMP-HR RATING 10. SIGNAL TRANSMISS AND RECEIVED BY (INDIVIDE 11. SMOKE DETECTOR 12. REMARKS: EXPLAIN	ORK PROPER STEM IS SATI RIMARY (MA SION: ALAR DUAL) SENSITIVI	IV (YES). ISFACTORY IN) /2-0 IM IS TRAN	NO). AUTOMA' (YES); (NO). S VOLTS, 20 . C. (N SMITTED OFF	E INSTALLED AND WORK PROTICE OPERATION OF SYSTEM YSTEM HAS ZONED EVACUA AMPS. B. SECONDARY (STANDONE) D. OTHER (specify) F PREMIS (YES): (NO). ALAR THEY WERE NOTIFIED ITIAL) OR (LAST) SENSITIVE	IS SATISFACTOR ATTION FEATURE ADBY) (V) STORA M TRANSMITTE BEFORE AND A	Y (YES); (NO) AGE BATTE D TO CA	ries, # 2
	1						
CUSTOMED SIGNATURE	lecons	1	12				

PERIODIC FIRE AL	ARM INSPECTI	ON & TES	TING REPORT DA	TE OF INSPECTIO	N. 2. 2.	5-22
INSPECTOR: Ken	HOOT FAR	#: 1070	NAME OF FACILITY:	7	later B1	16
INSPECTION COMPANY AN	MÉRICAN FIRE & SI	ECURITY	ADDITEOD!	is/e Rd		-11
ADDRESS: 80 Eury Lane			CITY: Lexing ton		Y ZIP: 40	5/1
CITY: Somerset		ATE: <u>KY</u>	OCCUPIED AS:	Jason /	0 3/12/6	
ZIP: 42101 - PHON			SEND REPORT TO:		VICUEIS	A
REASON FOR REPORT: () C	QUARTERLY INSP.; ()	SEMIANNUAL	INSP.; (ANNUAL INSP.; (OTHER (specify):	15-13	056
CONTROL PANEL MANUFAC	TURER AND MODEL:			(X 400	**********	*******
1. TYPE(S) OF SYSTEM:	(LOCAL; () AUXII	JARY; (V) REM	OTE STATION; () PROPRIE	ETARY; () EMER	GENCY VOICE	E/ALARM
2. INITIATING DEVICES	<u>S:</u>		3. INDICATING DEVI			ON IDITION
A. HEAT SENSING:	NUMBER NUMBER INSTALLED TESTED	CONDITION SAT UNSAT		NUMBER INSTALLED	NUMBER CO TESTED SA	AT UNSAT
1. FIXED TEMPERATURE	HOMELLO ILGILLO		A. BELLS		0	
2. RATE COMPENSATION			B. HORNS C. CHIMES		-7	
3. RATE-OF-RISE 4. COMBINED FT/ROR			D. VISUAL	a	0	
5. OTHER (specify)			1. COMBINED		- 3	
B. SMOKE SENSING:			2. SEPARATE E. OTHER (specify)			
1. IONIZATION	15 1			NC.		
2. PHOTOELECTRIC 3. CLOUD CHAMBER	12 12		4. CONTROL FUNCTIO A. ELEVATOR RECALL	ins:	-	
4. DUAL ION/PHOTO			B. FAN SHUTDOWN			
5. H.V.A.C.			C. DOOR HOLDER	TEM		
6. COMBINED w/HEAT 7. OTHER (specify)			D. SMOKE CONTROL SYS E. OTHER (specify)			
C. FLAME SENSING:			5. TROUBLE DEVICE	ES:		
I. FLAME 2. FLAME FLICKER			6. REMOTE ANNUNC	CIATORS:		
3. INFRARED			•	/	/ []	
4. PHOTOELECTRIC 5. ULTRAVIOLET			7. SUPERVISORY SE	DVICE.		
6. OTHER (specify)			A. CONTROL VALVES	RVICE.		
D. GAS SENSING:			I. SPRINKLER			
1. SEMICONDUCTOR			2. STANDPIPE	-		-
2. CATALYTIC ELEMENT 3. OTHER (specify)		-	3. OTHER (specify) B. AIR PRESSURE	-		
	21 11	/	1. HIGH			-
E. MANUAL STATIONS	11	V	2. LOW C. FIRE PUMP	-		
F. WATER FLOW	1. 1	V	D. GENERATOR			
	1/4.00	DODE LICENS . P	E. OTHER (specify)	ODEDLY (VEC). AL	O) J) TE	LEPHONE
8. EMERGENCY VOICE/A JACKS ARE INSTALLED & W	OPV PROPERI VIESV	DSPEAKERS AR	E INSTALLED AND WORK PR	(VES); (NO		
MANUAL OPERATION OF SY	STEM IS SATISFACTOR	(YES); (NO). S	YSTEM HAS ZONED EVACU	ATION FEATURE	(YES); (NO).	
9. POWER SUPPLY: A. P	RIMARY (MAIN)	VOLTS,	AMPS. B. SECONDARY (STA	NDBY) (STOR	AGE BATTERIE	ES, #2
AMP-HR RATING	12		IONE) D. OTHER (specify) _		7.1	1 11
10. SIGNAL TRANSMIS	W &	NSMITTED OF	PREMIS (NO) ALAI THEY WERE NOTIFIED	RM TRANSMITTE	D TO COMY	ESI-(NO)
11. SMOKE DETECTOR					./	227 (1.0)
12. REMARKS : EXPLAIN	A	R "OTHER (spe	cify)" ANSWERS			
10- phone Li	mes are d	ead		· u		
CUSTOMED SIGNATURE	luces the		_			

PERIODIC FIRE AL				TING REPORT DATE O	OF INSPECTI	ON 9-0	26	-039
INSPECTOR: Ker			R#: (070)	NAME OF FACILITY: CANT	rage 17		Stu	clos
INSPECTION COMPANY AL		TRE & SE	ECURITY	ADDRESS: 545 Say		1	in Ta	757
ADDRESS: 80 Eury Lane City Somerset	-		1/1/	CITY: Lexington			0.50	7.
CITY: Somerset ZIP: 42101 - PHON	E. (859)	The state of the s	ATE: KY		-61	Kelly		
			SEMIANNUAL	INSP.; () ANNUAL INSP.; OTHE				=
CONTROL PANEL MANUFAC				DMP XB500	1.0	Son F Hillary		
*******************	***************************************	*********	************	MOTE STATION; () PROPRIETAR	**************************************	CENCY V	10F/	*******
	A STATE OF THE PARTY OF THE PAR	() AUXIL	.IAKY; (V) KEN			(GENCY VC	HCE/A	ALAKM
2. INITIATING DEVICE	T. 400. Sec. 1.	NUMBER	CONDITION	3. INDICATING DEVICES	NUMBER	NUMBER	CON	DITION
A. HEAT SENSING:	NUMBER INSTALLED		CONDITION SAT UNSAT		INSTALLED			UNSAT
FIXED TEMPERATURE RATE COMPENSATION				A. BELLS B. HORNS	5	-5	3	2
3. RATE-OF-RISE				C. CHIMES				
4. COMBINED FT/ROR				D. VISUAL	E	5	3	2
5. OTHER (specify)				I. COMBINED				~
B. SMOKE SENSING:				2. SEPARATE E. OTHER (specify)				
1. IONIZATION								7
2. PHOTOELECTRIC	-6	-0	V	4. CONTROL FUNCTIONS:				
3. CLOUD CHAMBER 4. DUAL ION/PHOTO		-		A. ELEVATOR RECALL			\vdash	
5. HV.A.C.			Na heavy	B. FAN SHUTDOWN C. DOOR HOLDER				
6. COMBINED w/HEAT			W 11 1	D. SMOKE CONTROL SYSTEM			1000	
7. OTHER (specify)			لتحليا	E. OTHER (specify)				
C. FLAME SENSING: I. FLAME				5. TROUBLE DEVICES:				
2. FLAME FLICKER				6. REMOTE ANNUNCIAT	ORS:			
3. INFRARED	استنسار							
4. PHOTOELECTRIC			$\overline{}$				-	
5. ULTRAVIOLET 6. OTHER (specify)				7. SUPERVISORY SERVICE	E:			
		-		A. CONTROL VALVES				
D. GAS SENSING: 1. SEMICONDUCTOR				I. SPRINKLER 2. STANDPIPE	-		101	
2. CATALYTIC ELEMENT				3. OTHER (specify)				
3. OTHER (specify)				B. AIR PRESSURE				1 0
			/	I. HIGH		المعسية		
E. MANUAL STATIONS	_5_	5		2. LOW C. FIRE PUMP				
E WATER FLOW				D. GENERATOR				
F. WATER FLOW			V	E. OTHER (specify)				11 = 1
8. EMERGENCY VOICE/A	ALARM: ^	A LOUD	SPEAKERS AR	E INSTALLED AND WORK PROPER	LY (YES); (NO	0). 2	TELEI	PHONE
JACKS ARE INSTALLED & WO	ORK PROPERI	LY (YES):XN	NO). AUTOMAT	TIC OPERATION OF SYSTEM IS SAYSTEM HAS ZONED EVACUATION	ATISFACTOR	Y (YES); IN	0).	
				AMPS. B. SECONDARY (STANDBY				42
AMP-HR RATING	8			ONE) D. OTHER (specify)) (v) Sloka	OL DAI I CI	tiles, i	-
	SION: ALAR	M IS TRAN	the state of the s	PREMIS (YES); (NO). ALARM TE	ANSMITTE	n m Ruy	NO	10
AND RECEIVED BY (INDIVID	UAL)	Derw		THEY WERE NOTIFIED BEFO				
		7		TIAL) OR (LAST) SENSITIVITY T	/	4	(120)	, ,,.
II. SMOKE DETECTOR	SENSITIVI	II IESI.	DATE OF (IN	HAL) OR (LAST) SENSITIVITI	ESI TYTE	1		
12. REMARKS: EXPLAIN	ANY "LINSAT"	" "NO" OR	"OTHER (spec	ify)" ANSWERS		-		
1/201/5/2010	9 7	1	O THER (Spec	Answers 1)	11	1	
HOND/SMUDE	M	heatr	- are	Upstairs and	LOV	UUN	S	
				ı				<u></u>
		1						
CUSTOMED SIGNATURE	la lem	1 1/	1014	M				

PERIODIC FIRE AL	1		Carlotte and the care	/	F INSPECT	1 /	
INSPECTOR: Kent			#: 1070		agton A		gue
ADDRESS: 80 Eury Lane		IKE & SI	ECURITY		tellood		N=>11
CITY: Somerset		CT	TE VV	CITY: Lexington	Z N	Y ZIP:	2505
ZIP: 42101 - PHON			ATE: KY		Suisne:		,
			SEMIANNUAL	INSP.; (ANNUAL INSP.; OTHE			
CONTROL PANEL MANUFAC					eo		
1. TYPE(S) OF SYSTEM:	() LOCAL;) AUXIL	IARY: () REN	MOTE STATION; () PROPRIETAR	Y: () EME	GENCY VC	ICE/ALARM
2. INITIATING DEVICES				3. INDICATING DEVICES			. CEALAIN
A. HEAT SENSING:	NUMBER INSTALLED		CONDITION SAT UNSAT		NUMBER INSTALLED		CONDITION SAT UNSAT
I. FIXED TEMPERATURE			11/15-51	A. BELLS	-14	- 1 24	
2. RATE COMPENSATION 3. RATE-OF-RISE				B. HORNS C. CHIMES	-17	-17-	
4. COMBINED FT/ROR				D. VISUAL			
5. OTHER (specify)				1. COMBINED	17	17	V
				2. SEPARATE			LAL A
B. SMOKE SENSING: 1. IONIZATION				E. OTHER (specify)			
2. PHOTOELECTRIC	2	5		4. CONTROL FUNCTIONS:			
3. CLOUD CHAMBER				A. ELEVATOR RECALL			
4. DUAL ION/PHOTO				B. FAN SHUTDOWN			
5. H.V.A.C.				C. DOOR HOLDER	-3	3	~
COMBINED w/HEAT				D. SMOKE CONTROL SYSTEM			
7. OTHER (specify)				E. OTHER (specify)			
C. FLAME SENSING: I. FLAME	other -			5. TROUBLE DEVICES:			
2. FLAME FLICKER				6. REMOTE ANNUNCIAT	ORS:		
3. INFRARED						1	
4. PHOTOELECTRIC 5. ULTRAVIOLET	-						14
6. OTHER (specify)				7. SUPERVISORY SERVICE	E:		
		7		A. CONTROL VALVES			
D. GAS SENSING: 1. SEMICONDUCTOR				1. SPRINKLER 2. STANDPIPE			
2. CATALYTIC ELEMENT				3. OTHER (specify)			21.11.2
3. OTHER (specify)				B. AIR PRESSURE			
3. Gillen (speen))				I. HIGH		المتعلق	48412 44
E. MANUAL STATIONS	9	9	V	2. LOW			K = I
				C. FIRE PUMP			
F. WATER FLOW				D. GENERATOR			
	*11	4	S. U.S.	E. OTHER (specify)			
MANUAL OPERATION OF SYS	ORK PROPERLY	Y (YES); (N FACTORY	O). AUTOMAT (YES); (NO). SY	E INSTALLED AND WORK PROPER IC OPERATION OF SYSTEM IS SA STEM HAS ZONED EVACUATION	TISFACTOR'	Y (YES); (NO).	
AMP-HR RATING	MAKI (MAIN	VI ZIXX V		AMPS. B. SECONDARY (STANDBY)	() SIORA	GE BATTER	IES, #
	TON		The state of the s	ONE) D. OTHER (specify)		-/-	al etal
AND RECEIVED BY (INDIVID				PREMIS (YES); (NO). ALARM TR THEY WERE NOTIFIED BEFO			(YES); (NO).
11. SMOKE DETECTOR S	SENSITIVIT	Y TEST:	DATE OF (INI	TIAL) OR (LAST) SENSITIVITY T	EST _N	4	
12. REMARKS: EXPLAIN A	NY "UNSAT",	"NO" OR	"OTHER (spec	ify)" ANSWERS			
						-	
		,					
	11	16/1	/				(S
CUSTOMER SIGNATURE	1000	Wills					

INSPECTION COMPANY AT	MERICANI	FAR	#: <u>/070</u>	NAME OF FACILITY: GAST	1 e woo	9 90	iter_
ADDRESS: 80 Eury Land		TRE & SE	CURITI	CITY: Lexmaton	K	Y ZIP: 4	0504
CITY: Somerset		STA	ATE: KY		Recre	atrena	
ZIP: 42101 - PHON					thony	16e1/y	
REASON FOR REPORT: ()	QUARTERLY	INSP.; () !	SEMIANNUAL	INSP.; () ANNUAL INSP.; OTHE	ER (specify):		
CONTROL PANEL MANUFAC	CTURER AND	MODEL:				*********	
1. TYPE(S) OF SYSTEM	6/LOCAL	() AUXII	LARY (VEREN	MOTE STATION; () PROPRIETAR	Y· () FMF	RGENCY VO	DICE/AL ARM
2. INITIATING DEVICE	All the second second	(/////////	min (v / NE	3. INDICATING DEVICES			
2. INITIATING DEVICE	NUMBER	MUMBED	CONDITION	3. INDICATING DEVICES	NUMBER	NUMBER	CONDITION
A. HEAT SENSING:			SAT UNSAT		INSTALLED	TESTED	SAT UNSAT
1. FIXED TEMPERATURE				A. BELLS	1	-	
2. RATE COMPENSATION 3. RATE-OF-RISE				B. HORNS C. CHIMES	-4		
4. COMBINED FT/ROR				D. VISUAL		1	
5. OTHER (specify)				1. COMBINED	4_	_4_	V
B. SMOKE SENSING:				2. SEPARATE			
1. IONIZATION				E. OTHER (specify)			\Box
2. PHOTOELECTRIC	_3	3	~	4. CONTROL FUNCTIONS:			
3. CLOUD CHAMBER				A. ELEVATOR RECALL			Jell Fall
4. DUAL ION/PHOTO				B. FAN SHUTDOWN			P-12-3
5. H.V.A.C. 6. COMBINED w/HEAT		_		C. DOOR HOLDER D. SMOKE CONTROL SYSTEM			
7. OTHER (specify)				E. OTHER (specify)			
C. FLAME SENSING:				5. TROUBLE DEVICES:			
2. FLAME FLICKER				6. REMOTE ANNUNCIAT	ORS:		
3. INFRARED			\vdash				
4. PHOTOELECTRIC 5. ULTRAVIOLET	-			7. SUPERVISORY SERVICE	E.		
6. OTHER (specify)				A. CONTROL VALVES	·E.		
D. GAS SENSING:				I. SPRINKLER			12 6 2 6
I. SEMICONDUCTOR				2. STANDPIPE			
2. CATALYTIC ELEMENT				3. OTHER (specify)			
3. OTHER (specify)				B. AIR PRESSURE 1. HIGH			
E. MANUAL STATIONS	6	10	1/	2. LOW			
E. MAITOAL STATIONS	_0_	9	4	C. FIRE PUMP			
F. WATER FLOW				D. GENERATOR			
		0.		E. OTHER (specify)			
JACKS ARE INSTALLED & WO MANUAL OPERATION OF SY	ORK PROPERI	LY (YES); (N SFACTORY	NO). AUTOMAT (YES); (NO). SY	E INSTALLED AND WORK PROPER FIC OPERATION OF SYSTEM IS S YSTEM HAS ZONED EVACUATION	ATISFACTOR N FEATURE	Y (YES); (NO).	
	RIMARY (MA)	IN) de l		AMPS. B. SECONDARY (STANDBY) () STORA	GE BATTE	RIES, #
AMP-HR RATING	8			ONE) D. OTHER (specify)		1	(= M.
10. SIGNAL TRANSMISS AND RECEIVED BY (INDIVID				PREMIS (YES); (NO). ALARM TE 			
11. SMOKE DETECTOR	SENSITIVI	TY TEST:	DATE OF (INI	TIAL) OR (LAST) SENSITIVITY T	EST^	IA	
12. REMARKS: EXPLAIN						l T	
		-					
						3	
	11	11.					
	//	III					

PERIODIC FIRE AL				N/	F INSPECTI	/1 /	8-22
INSPECTOR: Ken				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	wick	Centi	er
INSPECTION COMPANY A!		RE & SE	CURITY	ADDRESS: 313, 0	6	Ave	to to to
ADDRESS: 80 Eury Land				CITY: Lexington			0504
CITY: Somerset	and A - Andrew Art and		ATE: KY		BUTS	. 11	10
ZIP: 42101 - PHON					ntuon		(X
REASON FOR REPORT: () CONTROL PANEL MANUFAC	241 201 20 20 20 20 20 20 20 20 20 20 20 20 20			INSP.; (V) ANNUAL INSP.; OTH	ER (specify):		
**************************************	CTOKEK AND	********		***************************************	*********	*********	**********
1. TYPE(S) OF SYSTEM	LOCAL;) AUXIL	IARY; (V) REM	MOTE STATION; () PROPRIETAR	RY; () EME	RGENCY VO	DICE/ALARM
2. INITIATING DEVICE	<u>S:</u>			3. INDICATING DEVICES			
A. HEAT SENSING:	NUMBER N INSTALLED		CONDITION SAT UNSAT		NUMBER INSTALLED		CONDITION SAT UNSAT
1. FIXED TEMPERATURE				A. BELLS B. HORNS	23	73	1
2. RATE COMPENSATION 3. RATE-OF-RISE	2	0		C. CHIMES		->-	
4. COMBINED FT/ROR				D. VISUAL	23	23	
5. OTHER (specify)				1. COMBINED	00	_00	
B. SMOKE SENSING:				2. SEPARATE E. OTHER (specify)			Tall I and
1. IONIZATION							
2. PHOTOELECTRIC			V	4. CONTROL FUNCTIONS:			
CLOUD CHAMBER DUAL ION/PHOTO				A. ELEVATOR RECALL	-	_	
5. H.V.A.C.			1401 1400	B. FAN SHUTDOWN C. DOOR HOLDER			
6. COMBINED w/HEAT			1 1 1 - 4	D. SMOKE CONTROL SYSTEM			11111
7. OTHER (specify)	-			E. OTHER (specify)			
C. FLAME SENSING:				5. TROUBLE DEVICES:			
1. FLAME 2. FLAME FLICKER	-			C DEMOTE ANNUNCIA	one		
3. INFRARED				6. REMOTE ANNUNCIAT	ORS:		
4. PHOTOELECTRIC							
5. ULTRAVIOLET			egilt of	7. SUPERVISORY SERVICE	CE:		
6. OTHER (specify)	-			A. CONTROL VALVES	7	173	
D. GAS SENSING:				I. SPRINKLER		3	V
1. SEMICONDUCTOR				2. STANDPIPE 3. OTHER (specify)			-
2. CATALYTIC ELEMENT 3. OTHER (specify)				B. AIR PRESSURE			
s. office (specify)				I. HIGH		(~
E. MANUAL STATIONS	6	6		2. LOW		1	V
				C. FIRE PUMP D. GENERATOR			
F. WATER FLOW		1		E. OTHER (specify)			Tallana u
JACKS ARE INSTALLED & WOMANUAL OPERATION OF SY	ORK PROPERLY STEM IS SATISF	(YES); (N	NO). AUTOMAT (YES); (NO). S	E INSTALLED AND WORK PROPERTIC OPERATION OF SYSTEM IS SYSTEM HAS ZONED EVACUATION AMPS. B. SECONDARY (STANDBY	ATISFACTOR N FEATURE	Y (YES); (NO).	
AMP-HR RATING	8		. C. (N	ONE) D. OTHER (specify)			11
	SION: ALARM	IS TRAN	SMITTED OFF	PREMIS (YES); (NO). ALARM TI 			
				TIAL) OR (LAST) SENSITIVITY T		ILA	(120) (10)
12. REMARKS: EXPLAIN						1	
						-	7
		7.0					
- / WY 347 - 77-177-13	A	1/1					
CUSTOMER SIGNATURE	NI	/					

PERIODIC FIRE AI	ARM INS	SPECTIO	ON & TES	TING REPORT DATE	OF INSPECTI	ON 9-5	3-22
INSPECTOR: Ken	1		#:1070			Parter	
INSPECTION COMPANY AL	1000			ADDRESS: 522 Patt		st	
ADDRESS: 80 Eury Lane	e		2772	CITY: Lexmaton		Y ZIP: 4	0504
CITY: Somerset		STA	ATE: KY			1055	
ZIP: 42101 - PHON	IE: (859) 3	33-4489		SEND REPORT TO:	hory	Kelly	/
				INSP.; (ANNUAL INSP.; OTH			
CONTROL PANEL MANUFAC	CTURER AND	MODEL:	***************	POTET - IPA	60	*********	**********
1. TYPE(S) OF SYSTEM	(V) LOCAL;	() AUXIL	IARY; (V) REM	MOTE STATION; () PROPRIETA	RY; () EMER	RGENCY VO	ICE/ALARM
2. INITIATING DEVICE	<u>S:</u>			3. INDICATING DEVICE	<u>S:</u>		
A. HEAT SENSING:	NUMBER INSTALLED		CONDITION SAT UNSAT		NUMBER INSTALLED	NUMBER TESTED	CONDITION SAT UNSAT
1. FIXED TEMPERATURE				A. BELLS	- 11	- / 1	
2. RATE COMPENSATION		-		B. HORNS C. CHIMES	17	-17	V
3. RATE-OF-RISE 4. COMBINED FT/ROR	-6	-	V	D. VISUAL		7.7	
5. OTHER (specify)				1. COMBINED	17	17	V
		E S		2. SEPARATE	_5	5	V
B. SMOKE SENSING:				E. OTHER (specify)			
1. IONIZATION 2. PHOTOELECTRIC	25	25		4. CONTROL FUNCTIONS:			1
3. CLOUD CHAMBER	0			A. ELEVATOR RECALL	1	1	
4. DUAL ION/PHOTO				B. FAN SHUTDOWN	2	A	
5. H.V.A.C.	_/_	0	1405-10	C. DOOR HOLDER			
6. COMBINED w/HEAT				D. SMOKE CONTROL SYSTEM			
7. OTHER (specify)				E. OTHER (specify)			
C. FLAME SENSING:				5. TROUBLE DEVICES:			
I. FLAME				A DEMOTE ANNUNCIA	PODC.		
2. FLAME FLICKER 3. INFRARED				6. REMOTE ANNUNCIA	IOKS:		
4. PHOTOELECTRIC			1.21				
5. ULTRAVIOLET			1.01112-11	7. SUPERVISORY SERVI	CE:		
6. OTHER (specify)				A. CONTROL VALVES			
D. GAS SENSING:				1. SPRINKLER	_ 3_	3	
1. SEMICONDUCTOR				2. STANDPIPE			11 4 117 6 3
2. CATALYTIC ELEMENT			181 18 0	OTHER (specify)			
3. OTHER (specify)				B. AIR PRESSURE	1	1	
E MANUAL STATIONS	12	-		1. HIGH 2. LOW		-	1
E. MANUAL STATIONS	_/0_	10		C. FIRE PUMP			200
E WATER FLOW				D. GENERATOR			
F. WATER FLOW				E. OTHER (specify)			
8. EMERGENCY VOICE/	ALARM: A	1A-LOUD	SPEAKERS AR	E INSTALLED AND WORK PROPE	RLY (YES): (NO	0). 2	TELEPHONE
				TIC OPERATION OF SYSTEM IS			
MANUAL OPERATION OF SY	STEM IS SATI	SFACTORY	(YES); (NO). S	YSTEM HAS ZONED EVACUATION	N FEATURE	(YES); (NO)	
				AMPS. B. SECONDARY (STANDB			
AMP-HR RATING	8			ONE) D. OTHER (specify)	.,(₽,0.0		1
				PREMIS (YES); (NO). ALARM T	DANGMITTE	m To CPA	m 55+
AND RECEIVED BY (INDIVID		and the same of th		THEY WERE NOTIFIED BE			
11. SMOKE DETECTOR	SENSITIVE	TY TEST:	DATE OF (IN	ITIAL) OR (LAST) SENSITIVITY	TEST	A	
12. REMARKS: EXPLAIN	ANY "UNSAT	", "NO" OR	"OTHER (spec	cify)" ANSWERS			
		1 11		100			
NOVE TO THE PARTY OF THE PARTY	All	1111		- Ave.			
CUSTOMER SIGNATURE	200	7/		No.			

INSPECTION COMPANY AL		TRE & SE	CURITY	ADDRESS: 469 JOK		- / /	/-
ADDRESS: 80 Eury Land		4 - 1 V - 1		CITY: Lexington		Y ZIP: 4	0507
CITY: Somerset ZIP: 42101 - PHON			ATE: KY	A	BURSTE		1/4
			CENTAL NAME OF				1
				INSP.; (V) ANNUAL INSP.; OTH			
CONTROL PANEL MANUFAC	TUKEK AND	MODEL:			*********	********	***********
1. TYPE(S) OF SYSTEM	(V) LOCAL;	() AUXIL	IARY; (V) REM	NOTE STATION; () PROPRIETAR	RY; () EME	RGENCY VO	ICE/ALARM
2. INITIATING DEVICE	S:			3. INDICATING DEVICES	<u>6:</u>		
. HEAT SENSING	NUMBER		CONDITION		NUMBER INSTALLED	NUMBER TESTED	CONDITION SAT UNSAT
A. HEAT SENSING: 1. FIXED TEMPERATURE	INSTALLED	TESTED	SAT UNSAT	A. BELLS	INSTALLED	ILSILD	JAI UNSAI
2. RATE COMPENSATION				B. HORNS	16	21	V
3. RATE-OF-RISE		0	10.0	C. CHIMES	-		
4. COMBINED FT/ROR				D. VISUAL I. COMBINED	21	- 1	1
5. OTHER (specify)				2. SEPARATE	-2/1	1	V
B. SMOKE SENSING:				E. OTHER (specify)	-	-1	V
1. IONIZATION			1.1				
2. PHOTOELECTRIC	_0_	-4	V	4. CONTROL FUNCTIONS:	,		1
3. CLOUD CHAMBER 4. DUAL ION/PHOTO				A. ELEVATOR RECALL B. FAN SHUTDOWN			-
5. H.V.A.C.				C. DOOR HOLDER			
6. COMBINED w/HEAT			14 (2004)	D. SMOKE CONTROL SYSTEM			
7. OTHER (specify)				E. OTHER (specify)			
C. FLAME SENSING:				5. TROUBLE DEVICES:			
I. FLAME			-				
2. FLAME FLICKER 3. INFRARED			$\overline{}$	6. REMOTE ANNUNCIAT	ORS:		
4. PHOTOELECTRIC							
5. ULTRAVIOLET				7. SUPERVISORY SERVICE	F.		
6. OTHER (specify)				A. CONTROL VALVES			
D. GAS SENSING:				I. SPRINKLER	_/_	Γ	
1. SEMICONDUCTOR			(E ->== 4)	2. STANDPIPE			
2. CATALYTIC ELEMENT				3. OTHER (specify)			
3. OTHER (specify)				B. AIR PRESSURE			
E. MANUAL STATIONS	11	11	1	1. HIGH 2. LOW			
E. MILITORE STATISTIS	1			C. FIRE PUMP			
F. WATER FLOW	,			D. GENERATOR			
		1		E. OTHER (specify)			
8. EMERGENCY VOICE/	ALARM: N	LOUD	SPEAKERS ARI	E INSTALLED AND WORK PROPER	RLY (YES); (NO	0)2	TELEPHONE
JACKS ARE INSTALLED & W	ORK PROPER	LY (YES) (N	NO). AUTOMAT	IC OPERATION OF SYSTEM IS S	ATISFACTOR	Y (YES); (N	O).
				STEM HAS ZONED EVACUATION			
A CONTRACTOR OF THE PROPERTY O	RIMARY (MA	N) (75)		AMPS. B. SECONDARY (STANDBY	() (V) STORA	GE BATTE	RIES, #_
AMP-HR RATING	8			ONE) D. OTHER (specify)			1 1 11.
10. SIGNAL TRANSMISS AND RECEIVED BY (INDIVID				PREMIS (YES), (NO). ALARM TI THEY WERE NOTIFIED BEF			
		1			/	/ IEK IESI	TIEST (NO).
11. SMOKE DETECTOR	SENSITIVI	TY TEST:	DATE OF (INI	TIAL) OR (LAST) SENSITIVITY 1	EST	/A	
12 DEMARKS, EVELAIN	A NIV WINCAT	" "NO" OB	MOTHER (CAN ANGWEDS			
12. REMARKS: EXPLAIN	ANT UNSAL	, NO OK	OTHER (spec	ily) ANSWERS			
NO access to	Elev	Much	KM				
	X						

INSPECTOR: Ken F				ADDRESS: 545	Sper	ST	
ADDRESS: 80 Eury Lane				CITY: Lex Mytering		X ZIP: 4	0504
CITY: Somerset		STA	ATE: KY	OCCUPIED AS:	regreat	tonal,	
ZIP: 42101 - PHON	E: (859) 3	333-4489		SEND REPORT TO:	Jthony	Kelly	
REASON FOR REPORT: ()	QUARTERLY	INSP.; ()	SEMIANNUAL	INSP.; () ANNUAL INSP.; OTH	ER (specify):	15-b	035
CONTROL PANEL MANUFAC	CTURER AND	MODEL:	***********	SK 5208	**********	**********	**********
1. TYPE(S) OF SYSTEM:	LOCAL;	() AUXIL	IARY; (REM	MOTE STATION; () PROPRIETAL	RY; () EME	RGENCY VO	ICE/ALARM
2. INITIATING DEVICE				3. INDICATING DEVICES			
	NUMBER	NUMBER	CONDITION		NUMBER		CONDITION
A. HEAT SENSING:	INSTALLED		SAT UNSAT		INSTALLED	TESTED	SAT UNSAT
1. FIXED TEMPERATURE		تشنيت		A. BELLS	-	-	
2. RATE COMPENSATION				B. HORNS C. CHIMES	-0	-0	V
3. RATE-OF-RISE			+	D. VISUAL			
4. COMBINED FT/ROR				1. COMBINED			
5. OTHER (specify)				2. SEPARATE			111/4 2
B. SMOKE SENSING:				E. OTHER (specify)			
1. IONIZATION		-					
2. PHOTOELECTRIC	-6	-6	V	4. CONTROL FUNCTIONS:			
3. CLOUD CHAMBER				A. ELEVATOR RECALL			
4. DUAL ION/PHOTO 5. H.V.A.C.	-	-		B. FAN SHUTDOWN C. DOOR HOLDER	-		
6. COMBINED w/HEAT				D. SMOKE CONTROL SYSTEM			1.79
7. OTHER (specify)				E. OTHER (specify)			
C. FLAME SENSING:				5. TROUBLE DEVICES:			
2. FLAME FLICKER				6. REMOTE ANNUNCIAL	TORS:		
3. INFRARED							
4. PHOTOELECTRIC			$\overline{}$				
5. ULTRAVIOLET			+	7. SUPERVISORY SERVI	CE:		
6. OTHER (specify)				A. CONTROL VALVES			
D. GAS SENSING:				I. SPRINKLER			
1. SEMICONDUCTOR				2. STANDPIPE			
2. CATALYTIC ELEMENT				3. OTHER (specify)	-		
3. OTHER (specify)		-	4	B. AIR PRESSURE 1. HIGH			
E. MANUAL STATIONS	0	9	1	2. LOW			
E. MANOAL STATIONS	-7-		V	C. FIRE PUMP		Tagle of the	
F. WATER FLOW				D. GENERATOR			Mile As I
I. WAILK I LOW		7.		E. OTHER (specify)			
8. EMERGENCY VOICE/	ALARM: A	A LOUD	SPEAKERS ARI	E INSTALLED AND WORK PROPE	RLY (YES); (NO	0). 2	TELEPHONE
JACKS ARE INSTALLED & W	ORK PROPER	LYCYES): (NO). AUTOMAT	IC OPERATION OF SYSTEM IS S	SATISFACTOR	Y (YES) (N	0).
				YSTEM HAS ZONED EVACUATIO			
	RIMARY (MA	IN) SOU		AMPS. B. SECONDARY (STANDB)	Y) (V) STORA	GE BATTE	RIES, #
AMP-HR RATING	0			ONE) D. OTHER (specify)		0	1 1 1.
10. SIGNAL TRANSMISS				PREMIS (YES)? (NO). ALARM T	RANSMITTE	D TO CA	tral Sto
AND RECEIVED BY (INDIVID	DUAL)	opers	er	THEY WERE NOTIFIED BEI	FORE AND A	FTER TEST	(YES); (NO).
11. SMOKE DETECTOR	SENSITIVI	TY TEST	DATE OF (INI	TIAL) OR (LAST) SENSITIVITY	TEST	SIA	
				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			7
12. REMARKS: EXPLAIN	ANY "UNSAT	". "NO" OR	"OTHER (spec	ify)" ANSWERS			
			· · · · · · · · · · · · · · · · · · ·	,			
				6			
	11	111					

INSPECTOR: 101			#:1010		tes C	regk	(00	21
INSPECTION COMPANY A!	MERICAN FI	RE & SE	CURITY	ADDRESS; 1400 COLV	resway	de la	1	
ADDRESS: _ 80 Eury Land	e			CITY: Lexmaton	K	Y ZIP:	1050	24
CITY: Somerset			ATE: KY	OCCUPIED AS:	Recree	Wong	-	
ZIP: 42101 - PHON	IE: (859) 33	33-4489		SEND REPORT TO:	Thony	Kell	Y	
REASON FOR REPORT: ()	QUARTERLY IN	VSP.; ()	SEMIANNUAL	INSP.; (V ANNUAL INSP.; OTHE	ER (specify):			
CONTROL PANEL MANUFAC	CTURER AND	MODEL:	**********	Simplex 400	5	********	******	*****
1. TYPE(S) OF SYSTEMS	(VLOCAL; () AUXIL	IARY; (V) REN	MOTE STATION; () PROPRIETAR	XY; () EMEI	RGENCY VO	DICE/AL	ARM
2. INITIATING DEVICE	S:			3. INDICATING DEVICES	<u>š:</u>			
A HEAT CENCING	NUMBER INSTALLED		CONDITION SAT UNSAT		NUMBER	NUMBER TESTED	SAT U	
A. HEAT SENSING:	INSTALLED	TESTED	SALUNSAL	A. BELLS				
FIXED TEMPERATURE RATE COMPENSATION				B. HORNS	11	11		N. I
3. RATE-OF-RISE			De Miller	C. CHIMES			-	
4. COMBINED FT/ROR				D. VISUAL	11		K k	1118
5. OTHER (specify)				1. COMBINED			1	-
B. SMOKE SENSING:				2. SEPARATE E. OTHER (specify)			1 1	
1. IONIZATION								
2. PHOTOELECTRIC		1	/	4. CONTROL FUNCTIONS:				
3. CLOUD CHAMBER				A. ELEVATOR RECALL		_		$\overline{}$
4. DUAL ION/PHOTO				B. FAN SHUTDOWN			-	-
5. H.V.A.C. 6. COMBINED w/HEAT				C. DOOR HOLDER D. SMOKE CONTROL SYSTEM				
7. OTHER (specify)			TILL .	E. OTHER (specify)				
C. FLAME SENSING:				5. TROUBLE DEVICES:				
2. FLAME FLICKER				6. REMOTE ANNUNCIAT	ORS:			
3. INFRARED				di MENOLE MANOREMANI	1	1		
4. PHOTOELECTRIC	4						LY	$\overline{}$
5. ULTRAVIOLET				7. SUPERVISORY SERVICE	CE:			
6. OTHER (specify)	-	-		A. CONTROL VALVES	7	2	-	
D. GAS SENSING:				I. SPRINKLER	~	2	~	S-2- U
I. SEMICONDUCTOR				2. STANDPIPE			-	-
2. CATALYTIC ELEMENT				3. OTHER (specify) B. AIR PRESSURE				- 11
3. OTHER (specify)	-			1. HIGH	1	1	~	18
E. MANUAL STATIONS	IH	de 11	11/21	VII 2. LOW	1	1	~	
E. MANOAL SIMIONS	17	MEZ !!	MI SVI	C. FIRE PUMP				
F. WATER FLOW	4			D. GENERATOR			131	
	-/-	-	V	E. OTHER (specify)				
		1		E INSTALLED AND WORK PROPER FIC OPERATION OF SYSTEM IS S				HONE
MANUAL OPERATION OF SY	STEM IS SATIS	FACTORY	(YES); (NO). S	YSTEM HAS ZONED EVACUATION	N FEATURE	(YES); (NO)).	000
9. POWER SUPPLY: A. P	RIMARY (MAII	N/20	VOLTS, 20	AMPS. B. SECONDARY (STANDBY	() (V) STORA	AGE BATTE	RIES, #_	2
AMP-HR RATING	8	N. P. C.	. C. (N	ONE) D. OTHER (specify)			-	1
10. SIGNAL TRANSMIS AND RECEIVED BY (INDIVII			SMITTED OFF	PREMIS (YES); (NO). ALARM T				Stat
		212		ITIAL) OR (LAST) SENSITIVITY		1/1	(120),	(1.0).
II. SMOKE DETECTOR	SENSITIVIT	1 1231	DAIL OF (III	THAL, OR (EAST) SENSITIVITY	. 25	1		
12. REMARKS: EXPLAIN	ANY "UNSAT"	"NO" OF	"OTHER (spec	cify)" ANSWERS				
E 0.11 64	L. tros	11	ked in	Cost shoral				
F- 101101	9100	0190	yey or	Test sorting f	D	1.		
COULD NO +	405+ D	0//0	76/10A	in Kenovatell	KOON	NO	acc	c.55
to pulls	1	74 1	VIVE CE					
T. C.						1		
	11	101						

CUSTOMER SIGNATURE.

INSPECTION COMPANY AN	MERICAN F	TRE & SE	#: <u>/070</u> CURITY			an w	av	1
ADDRESS: 80 Eury Land		1110 44 02		CITY: Lexington	6	Y,ZIP: 4	05%	5
CITY: Somerset		STA	ATE: KY		Rerea	frona/		
ZIP: 42101 - PHON		The second secon		A	Huony	Kp//y	/	
			CEMIANNILIA I		FR (specify):	15-8	1144	7
				INSP.; (NANNUAL INSP.; OTHE	LK (specify).			1100
CONTROL PANEL MANUFAC	***********	*********	***********	************************	*********	*********	*****	*****
1. TYPE(S) OF SYSTEM:	(LOCAL;	() AUXIL	IARY; () REN	NOTE STATION; () PROPRIETAR	Y; () EMER	RGENCY VO	ICE/A	LARM
2. INITIATING DEVICE	S:			3. INDICATING DEVICES	<u>i:</u>			
	NUMBER		CONDITION		NUMBER	NUMBER TESTED		UNSAT
A. HEAT SENSING:	INSTALLED	TESTED	SAT UNSAT	A. BELLS	INSTALLED	TESTED	SAL	DINGAL
1. FIXED TEMPERATURE				B. HORNS	17	17	-	
2. RATE COMPENSATION 3. RATE-OF-RISE				C. CHIMES				
4. COMBINED FT/ROR				D. VISUAL	, >	127	1	
5. OTHER (specify)		-		1. COMBINED 2. SEPARATE		-1-1-	-	
B. SMOKE SENSING:				E. OTHER (specify)				2507
1. IONIZATION	17		1	4. CONTROL FUNCTIONS:				
2. PHOTOELECTRIC		-1-/-	V	A. ELEVATOR RECALL				
CLOUD CHAMBER DUAL ION/PHOTO				B. FAN SHUTDOWN				E II
5. H.V.A.C.				C. DOOR HOLDER				
6. COMBINED w/HEAT				D. SMOKE CONTROL SYSTEM			-	
7. OTHER (specify)		_		E. OTHER (specify)				
C. FLAME SENSING: 1. FLAME				5. TROUBLE DEVICES:			Ш	
2. FLAME FLICKER				6. REMOTE ANNUNCIAT	ORS:			
3. INFRARED					(1	V	
4. PHOTOELECTRIC			-		ar.	7		4.75
5. ULTRAVIOLET 6. OTHER (specify)				7. SUPERVISORY SERVICE	CE:			
				A. CONTROL VALVES I. SPRINKLER				
D. GAS SENSING: 1. SEMICONDUCTOR				2. STANDPIPE				
2. CATALYTIC ELEMENT			12151	3. OTHER (specify)			-	
3. OTHER (specify)				B. AIR PRESSURE				
E MANUAL STATIONS	01	0	-	1. HIGH 2. LOW				5 = 1
E. MANUAL STATIONS	_8_	_0_		C. FIRE PUMP				C =
F. WATER FLOW				D. GENERATOR				
		1		E. OTHER (specify)				
JACKS ARE INSTALLED & W	ORK PROPER	LY (YES); (ISFACTORY	NO). AUTOMA (YES); (NO). S	E INSTALLED AND WORK PROPE FIC OPERATION OF SYSTEM IS S YSTEM HAS ZONED EVACUATION	SATISFACTOR N FEATURE	RY (YES); (NO	NO).).	PHONE
	PRIMARY (MA	IN) 120	VOLTS, 20	AMPS. B. SECONDARY (STANDE	Y) (V) STORA	AGE BALLE	KIES,	-
AMP-HR RATING	0	6 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		IONE) D. OTHER (specify)	DANISAITTE	n m Co.	trul	clit
				F PREMIS (YES); (NO). ALARM T THEY WERE NOTIFIED BEI	KANSMITTE	ETED TEST	TVES	DINO
AND RECEIVED BY (INDIVI						AT /A	(ILS)	(14O).
11. SMOKE DETECTOR	SENSITIVI	ITY TEST	DATE OF (IN	ITIAL) OR (LAST) SENSITIVITY	TEST	NA		
12. REMARKS: EXPLAIN	ANY "UNSAT	r", "no" oi	R "OTHER (spe	cify)" ANSWERS				
					3-120			
				the state of the s				
	16	M.						

CUSTOMER SIGNATURE

SPECTION COMPANY AN							
		TRE & SE	CURITY	ADDRESS: 545 S	2×1ex	ve	
DDRESS: 80 Eury Lane				CITY: Lexington)	Y ZIP:	0504
TY: Somerset	/ 050 \ 1	The second secon	ATE: KY	occo. in	AL CO.	maj	
P: 42101 - PHON	White was a second				heny	Helly	
EASON FOR REPORT: () (QUARTERLY I	NSP.; () S	EMIANNUAL	INSP.; () ANNUAL INSP.; OTH		15-0	U43
ONTROL PANEL MANUFAC	************	*********	***********	Simplex 401	**********	**************************************	
SOUTH THE SECOND STREET STREET, STREET		() AUXIL	IARY; (/) REM	OTE STATION; () PROPRIETAL		GENCY VC	ICE/ALAKM
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2. RATE COMPENSATION			64553	B. HORNS C. CHIMES	-17		
3. RATE-OF-RISE 4. COMBINED FT/ROR	-			D. VISUAL	. //	-/1	
5. OTHER (specify)			Alt Tay	1. COMBINED	14	14	
SMOKE SENSING:				2. SEPARATE			
1. IONIZATION				E. OTHER (specify)			
2. PHOTOELECTRIC	_1_		V	4. CONTROL FUNCTIONS:			
3. CLOUD CHAMBER 4. DUAL ION/PHOTO				A. ELEVATOR RECALL		_	
5. H.V.A.C.	-			B. FAN SHUTDOWN C. DOOR HOLDER			
6. COMBINED w/HEAT				D. SMOKE CONTROL SYSTEM			
7. OTHER (specify)				E. OTHER (specify)			
FLAME SENSING:				5. TROUBLE DEVICES:			
I. FLAME			-		ronc		
2. FLAME FLICKER 3. INFRARED		-		6. REMOTE ANNUNCIA	ORS:	1	
4. PHOTOELECTRIC							7
5. ULTRAVIOLET				7. SUPERVISORY SERVI	CE:		
6. OTHER (specify)			لسلا	A. CONTROL VALVES	11	11	
GAS SENSING:				1. SPRINKLER	-4	7	V
1. SEMICONDUCTOR 2. CATALYTIC ELEMENT			+	2. STANDPIPE 3. OTHER (specify)			TENER OF
3. OTHER (specify)				B. AIR PRESSURE		TD.XT	
	V THE V		/	I. HIGH			1
MANUAL STATIONS		1		2, LOW C. FIRE PUMP	-		-
WATER FLOW			/	D. GENERATOR			
WATER FLOW				E. OTHER (specify)			
CKS ARE INSTALLED & WO ANUAL OPERATION OF SY	ORK PROPER STEM IS SATI	LY (YES); (N SFACTORY	NO). AUTOMAT (YES); (NO). SY VOLTS, 20	E INSTALLED AND WORK PROPE FIC OPERATION OF SYSTEM IS: YSTEM HAS ZONED EVACUATION AMPS. B. SECONDARY (STANDB ONE) D. OTHER (specify)	SATISFACTOR N FEATURE	(YES); (N (YES); (NO)).
	SION: ALAR	M IS TRAN		PREMIS (YES): (NO). ALARM T	RANSMITTE	D TO COA	tral St
ND RECEIVED BY (INDIVID				THEY WERE NOTIFIED BEI			
				TIAL) OR (LAST) SENSITIVITY	TEST ^	1/4	
						1	
2. REMARKS: EXPLAIN	ANY "UNSAT	", "NO" OR	"OTHER (spec	ify)" ANSWERS			
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a palarie Co	mol	som.	1				
- LECHEUCE CX	UUVU	Parie					

CUSTOMER SIGNATURE _

ADDRESS: 80 Eury Lane STATE: KY IP: 42101 - PHONE: (859) 333-4489 EASON FOR REPORT: () QUARTERLY INSP.; () SEMIANNUA TONTROL PANEL MANUFACTURER AND MODEL:	SEND REPORT TO: MYNONY KELLY
IP: 42101 - PHONE: (859) 333-4489 EASON FOR REPORT: () QUARTERLY INSP.; () SEMIANNU/ ONTROL PANEL MANUFACTURER AND MODEL:	SEND REPORT TO: MYNONY KELLY
EASON FOR REPORT: () QUARTERLY INSP.; () SEMIANNUM CONTROL PANEL MANUFACTURER AND MODEL:	
ONTROL PANEL MANUFACTURER AND MODEL:	IL INSP.; (V) ANNUAL INSP.; OTHER (Specify).
THE PERCENCE OF CHOTEN AND LOCAL AND LARVE AND PROPERTY OF THE PERCENCE OF THE	
. INITIATING DEVICES:	3. INDICATING DEVICES:
NUMBER NUMBER CONDITION	N NUMBER NUMBER CONDITION
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1. FIXED TEMPERATURE	A. BELLS B. HORNS
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S SMOKE SENSING:	2. SEPARATE
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3. CLOUD CHAMBER	A. ELEVATOR RECALL
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7. OTHER (specify)	E. OTHER (specify)
C. FLAME SENSING:	5. TROUBLE DEVICES:
2. FLAME FLICKER 3. INFRARED 4. PHOTOELECTRIC	6. REMOTE ANNUNCIATORS:
5. ULTRAVIOLET	7. SUPERVISORY SERVICE:
6. OTHER (specify)	A. CONTROL VALVES
D. GAS SENSING:	1. SPRINKLER 2. STANDPIPE
1. SEMICONDUCTOR 2. CATALYTIC ELEMENT	3. OTHER (specify)
3. OTHER (specify)	B. AIR PRESSURE
	1. HIGH
E. MANUAL STATIONS 4 4	2. LOW
	C. FIRE PUMP D. GENERATOR
WATER FLOW	E. OTHER (specify)
	MATIC OPERATION OF SYSTEM IS SATISFACTORY (YES); (NO). SYSTEM HAS ZONED EVACUATION FEATURE (YES); (NO). AMPS. B. SECONDARY (STANDBY) (STORAGE BATTERIES, # 2000) (NONE) D. OTHER (specify) OFF PREMIS(YES); (NO). ALARM TRANSMITTED TO CONTROL (YES); (NO). THEY WERE NOTIFIED BEFORE AND AFTER TEST (YES); (NO). (INITIAL) OR (LAST) SENSITIVITY TEST
B-2 smalle detector is varying	Loose on Shop 20the of Barri

CUSTOMER SIGNATURE

INSPECTION COMPANY AT	MERICAN I	FAR	CURITY	NAME OF FACILITY: TACK	harrock	w	1.11
ADDRESS: 80 Eury Lane				CITY: Lexmaton	К	Y ZIP: 4/C	504
CITY: Somerset		STA	ATE: KY	OCCUPIED AS:	JISMESS.	Reche	fron
ZIP: 42101 - PHON				SEND REPORT TO:A	thony '	Kelly	
REASON FOR REPORT: () (OUARTERLY	NSP.: () :	SEMIANNUAL	INSP.; () ANNUAL INSP.; OTH	IER (specify):	15-	
CONTROL PANEL MANUFAC	CTURER AND	MODEL:		Smplex 40	07	********	*********
1 TVPF(S) OF SYSTEM	MIDCAL:	() AUXII	IARY: (V) REM	OTE STATION; () PROPRIETA	RY; () EME	RGENCY VO	ICE/ALARM
		(),10,112		3. INDICATING DEVICE			
2. INITIATING DEVICE		MIMPED	CONDITION	3. INDICATING DEVICE	NUMBER	NUMBER	CONDITION
A. HEAT SENSING:	NUMBER INSTALLED		SAT UNSAT		INSTALLED		SAT UNSAT
1. FIXED TEMPERATURE	monteces	120120		A. BELLS			
2. RATE COMPENSATION		Total Control		B. HORNS			
3. RATE-OF-RISE				C. CHIMES			
4. COMBINED FT/ROR				D. VISUAL			
5. OTHER (specify)				I. COMBINED			
3. OTTIER (specify)				2. SEPARATE			
B. SMOKE SENSING:				E. OTHER (specify)			
I. IONIZATION				4. CONTROL FUNCTIONS			
2. PHOTOELECTRIC			V				
3. CLOUD CHAMBER				A. ELEVATOR RECALL			
4. DUAL ION/PHOTO				B. FAN SHUTDOWN	-		
5. H.V.A.C.	-			C. DOOR HOLDER	. —		
6. COMBINED w/HEAT		-		D. SMOKE CONTROL SYSTEM E. OTHER (specify)	м		
7. OTHER (specify) C. FLAME SENSING:				5. TROUBLE DEVICES:		- 4	
I. FLAME				5. TROUBLE DEVICES.			
2. FLAME FLICKER				6. REMOTE ANNUNCIA	TORS:		
3. INFRARED			12/10/2019	or <u>Relieved</u>			
4. PHOTOELECTRIC							
5. ULTRAVIOLET				7. SUPERVISORY SERV	ICE:		
6. OTHER (specify)				A. CONTROL VALVES			
				I. SPRINKLER	-3	3	211
D. GAS SENSING:				2. STANDPIPE			
1. SEMICONDUCTOR				3. OTHER (specify)			LE PULLET
2. CATALYTIC ELEMENT				B. AIR PRESSURE			17/12/08
3. OTHER (specify)	-			1. HIGH	(1	
T MANUAL STATIONS		100		2. LOW	1	1	
E. MANUAL STATIONS			V	C. FIRE PUMP			MEAN E
				D. GENERATOR			
F. WATER FLOW		_1		E. OTHER (specify)			
8. EMERGENCY VOICE	ALARM: A	A LOUI	OSPEAKERS AR	E INSTALLED AND WORK PROP	ERLY (YES)(N	0)2	TELEPHONE
JACKS ARE INSTALLED & W	ORK PROPER	RLY (YES);	NO). AUTOMA	TIC OPERATION OF SYSTEM IS	SATISFACTOR	(VEC) (NO	10).
MANUAL OPERATION OF S	YSTEM IS SAI	ISFACTORY	(YES); (NO). S	YSTEM HAS ZONED EVACUATI	ON FEATORE	(123), (140	, , , , , , , , , , , , , , , ,
9. POWER SUPPLY: A. I	PRIMARY (MA	IN) LOW	VOLTS,	AMPS. B. SECONDARY (STAND	BY) (STOR.	AGE BATTE	RIES, #
AMP-HR RATING	8		C. (N	IONE) D. OTHER (specify)			111
10 SICNAL TRANSMIS	SION. ALAI	M IS TRAI		PREMIS (YES) (NO). ALARM	TRANSMITTE	D TO CA	stral Ste
AND RECEIVED BY (INDIVI		tin is then	15.1111122 011	THEY WERE NOTIFIED BI	FORE AND	FTER TES	(YES): (NO)
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11. SMOKE DETECTOR	SENSITIV	ITY TEST	DATE OF (IN	ITIAL) OR (LAST) SENSITIVITY	TEST		
12. REMARKS: EXPLAIN	ANY "UNSA"	I", "NO" Q	R "OTHER (spe	cify)" ANSWERS			
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INSPECTION COMPANY AM	MERICAN I	TIRE & SE	CURITY	NAME OF FACILITY: FOR	parney	Rd	
ADDRESS: 80 Eury Lane				CITY: Lexmaton	К	Y ZIP:	05.09
CITY: Somerset		STA	ATE: KY	OCCUPIED AS:	JIBARSS	>	
ZIP: 42101 - PHON				SEND REPORT TO: ANT	hony	KAlly	
			SEMIANNUAL	INSP.; (VANNUAL INSP.; OTHE	ER (specify):	15	-8043
CONTROL PANEL MANUFAC					7		
				MOTE STATION; () PROPRIETAR	Y; () EMER	RGENCY VO	ICE/ALARM
2. INITIATING DEVICE		() nonic		3. INDICATING DEVICES			
	NUMBER	NUMBER	CONDITION	AL SEPTIMES			CONDITION
A. HEAT SENSING:	INSTALLED	TESTED	SAT UNSAT		INSTALLED	TESTED	SAT UNSAT
1. FIXED TEMPERATURE	ر السامار			A. BELLS			
2. RATE COMPENSATION				B. HORNS C. CHIMES			121112
3. RATE-OF-RISE	-			D. VISUAL		4	
4. COMBINED FT/ROR				1. COMBINED	, and the second		11 411 2
5. OTHER (specify)				2. SEPARATE			TELESCO
B. SMOKE SENSING:				E. OTHER (specify)			
1. IONIZATION			1				
2. PHOTOELECTRIC		_/_	~	4. CONTROL FUNCTIONS:			
3. CLOUD CHAMBER				A. ELEVATOR RECALL			
4. DUAL ION/PHOTO				B. FAN SHUTDOWN			
5. H.V.A.C.	(C. DOOR HOLDER D. SMOKE CONTROL SYSTEM			
6. COMBINED w/HEAT 7. OTHER (specify)				E. OTHER (specify)			
C. FLAME SENSING:				5. TROUBLE DEVICES:			
I. FLAME 2. FLAME FLICKER	AYES T			6. REMOTE ANNUNCIAT	ORS:		
3. INFRARED							
4. PHOTOELECTRIC						-	
5. ULTRAVIOLET				7. SUPERVISORY SERVI	CE:		
6. OTHER (specify)			لسليا	A. CONTROL VALVES			
D. GAS SENSING:				I. SPRINKLER			
1. SEMICONDUCTOR			164-66-7	2. STANDPIPE			
2. CATALYTIC ELEMENT				3. OTHER (specify)			
3. OTHER (specify)				B. AIR PRESSURE			
				I. HIGH	_		
E. MANUAL STATIONS			CHIEF I	2. LOW			
				C. FIRE PUMP			
F. WATER FLOW	_1_			D. GENERATOR E. OTHER (specify)			
8. EMERGENCY VOICE	ALARM:	1/4 LOUI	SPEAKERS AR	RE INSTALLED AND WORK PROPE	RLY (YES);(N	or	TELEPHONE
MANUAL OPERATION OF ST	YSTEM IS SAT	ISFACTORY	(YES); (NO). S	TIC OPERATION OF SYSTEM IS S SYSTEM HAS ZONED EVACUATION	N FEATURE	(YES); (NO).
9. POWER SUPPLY: A. I	PRIMARY (MA	(IN) 120	VOLTS, 20	AMPS. B. SECONDARY (STANDB)	Y) () STOR.	AGE BATTE	RIES, #
AMP-HR RATING	SAN		. C. (1	NONE) D. OTHER (specify)			1 11
10. SIGNAL TRANSMIS	SION: ALAF	RM IS TRAN	NSMITTED OF	F PREMIS (YES), (NO). ALARM T	RANSMITTE	D TO	etra Listat
AND RECEIVED BY (INDIVI	DUAL)	ope	rator	THEY WERE NOTIFIED BEI	FORE AND A	AFTER TEST	TYES); (NO).
11. SMOKE DETECTOR	SENSITIV	ITY TEST	DATE OF (IN	IITIAL) OR (LAST) SENSITIVITY	TEST		
A SMORE CENTER							
12. REMARKS: EXPLAIN	ANY "UNSA"	r", "NO" O	R "OTHER (spe	ecify)" ANSWERS			
d 1. 1	1- 1		11.	A- 11-			
D- LINE-1	150	eer r	S ADHO	Top occide tout	-		
				9			
	11	111					
	11.1	1116		1000			

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Bid 165-2022 Addendum 1 Marmic Fire and Safety Supplier Response

Event Information

Number: Bid 165-2022 Addendum 1

Title: Fire Alarm Monitoring and Maintenance

Type: Competitive Bid Issue Date: 12/12/2022

Deadline: 12/27/2022 02:00 PM (ET)

Notes: ONLY ONLINE BIDS WILL BE ACCEPTED.

Contact Information

Contact: Kristie Thomas Address: Central Purchasing

Government Center Building

Room 338

200 East Main Street Lexington, KY 40507

Phone: (859) 2583320 Fax: (859) 2583322

Email: kthomas@lexingtonky.gov

Marmic Fire and Safety Information

Contact: Scott Barry Address: 181 ZAKK CT

NICHOLASVILLE, KY 40356

Phone: (859) 333-8854

Email: sbarry@marmicfire.com

Web Address: Marmicfire.com

ONLY ONLINE BIDS WILL BE ACCEPTED! By submitting your response, you certify that you are authorized to represent and bind your company and that you agree to all bid terms and conditions as stated in the attached bid/RFP/RFQ/Quote/Auction documents.

 Scott Barry
 sbarry@marmicfire.com

 Signature
 Email

Submitted at 12/27/2022 01:45:41 PM (ET)

Response Attachments

KENNETH CALVIN NICET LEVEL II.pdf

NICET Cert.

165-2022 Bid Documents.pdf

Bid Docs

165-2022 Addendum 1.pdf

Addendum 1

165-2022 Facilities Fleet Mgt Cost Proposal.xls

Facilities & Fleet Proposal

165-2022 Parks & Rec Cost Proposal rv20221214.xlsx

Parks & Rec Cost Proposal

Page 2 of 2 pages Vendor: Marmic Fire and Safety Bid 165-2022 Addendum 1



Lexington-Fayette Urban County Government

Lexington, Kentucky Horse Capital of the World

Division of Central	Purchasing		Date of Issu	ue: December 12, 2022
INVI	TATION ⁻	TO BID #165-2022 Fire Alarm Mo	onitoring and Ma	aintenance
Bid Opening Date: Address:	December All bids mu	27, 2022 st be submitted on line at https://lexingtonky	Bid Opening To	ime: 2:00 PM
Type of Bid:	Price Contr	ract		
Pre Bid Meeting: Address:	N/A N/A		Pre Bid Time:	N/A
		nline at https://lexingtonky.ionwave.net/ until 2:00 e-mentioned date and time.	D PM, prevailing local tim	e on <u>12/27/2022</u> . Bids mus ^a
Bids are to include all s located at: Various Lo		dling and associated fees to the point of delivery (ington, KY	unless otherwise specifie	d in the bid documents below)
Bid Specific	cations Met _{sal} submitted.	Check One: Exceptions to Bid Specifications. Exceptions	s shall be itemized and	Proposed Delivery:days after acceptance of bid.
Procurement Card	d Usage —Th	ne Lexington-Fayette Urban County Government ments. Will you accept Procurement Cards?	nay be using Procuremen	
To expedit	e award, t	he forms in this document should be co	mpleted and upload	ded with your bid.
Submitted b	ov: Ma	armic Fire & Safety		
	<i>y</i>	Firm Name		
		181 Zakk Ct		
		Address		
		Nicholasville, KY 40356		
		City, State & Zip		
5.4		Clennifes Curwing B.	egional Vice Preside	nt .
Bid must b	e signed:	Signature of Authorized Company Rep		<u> </u>
		eignature et maniemana eempang mep		
		Jennifer Curwick		
		Representative's Name (Typed or printed)		
		765-413-7513		
		Area Code - Phone - Extension F	-ax #	
		jcurwick@marmicfire.com		

E-Mail Address

The Affidavit in this bid must be completed before your firm can be considered for award of this contract.

	<u>AFFIDAVIT</u>
per	Comes the Affiant, <u>Jennifer Curwick</u> , and after being first duly sworn under penalty of jury as follows:
1.	His/her name is and he/she is the individual submitting the bid or is the
	authorized representative of Marmic Fire & Safety
	the entity submitting the bid (hereinafter referred to as "Bidder")
2.	Bidder will pay all taxes and fees, which are owed to the Lexington-Fayette Urban County Government at the time the bid is submitted, prior to award of the contract and will maintain a "current" status in regard to those taxes and fees during the life of the contract.
3.	Bidder will obtain a Lexington-Fayette Urban County Government business license, if applicable, prior to award of the contract.
4.	Bidder has authorized the Division of Central Purchasing to verify the above-mentioned information with the Division of Revenue and to disclose to the Urban County Council that taxes and/or fees are delinquent or that a business license has not been obtained.
5.	Bidder has not knowingly violated any provision of the campaign finance laws of the Commonwealth of Kentucky within the past five (5) years and the award of a contract to the Bidder will not violate any provision of the campaign finance laws of the Commonwealth.
6.	Bidder has not knowingly violated any provision of Chapter 25 of the Lexington-Fayette Urban County Government Code of Ordinances, known as "Ethics Act."
7.	Bidder acknowledges that "knowingly" for purposes of this Affidavit means, with respect to conduct or to circumstances described by a statute or ordinance defining an offense, that a person is aware or should have been aware that his conduct is of that nature or that the circumstance exists.
	Further, Affiant sayeth naught.
ST	unty of Fayette
co	UNTY OF Fagette
	The foregoing instrument was subscribed, sworn to and acknowledged before me
by .	Jennifer Curwick on this the 27 h day
of _	December, 2022
	My Commission expires: February 21, 2024 550278
	Borbara/ Quen Uyatt NOTARY PUBLIC, STATE AT LARGE

Please refer to Section II. Bid Conditions, Item "U" prior to completing this form.
Page 2 of 30

I. GREEN PROCUREMENT

A. ENERGY

The Lexington-Fayette Urban County Government is committed to protecting our environment and being fiscally responsible to our citizens.

The Lexington-Fayette Urban County Government mandates the use of Energy Star compliant products if they are available in the marketplace (go to www.Energystar.gov). If these products are available, but not submitted in your pricing, your bid will be rejected as non-compliant.

ENERGY STAR is a government program that offers businesses and consumers energy-efficient solutions, making it easy to save money while protecting the environment for future generations.

Key Benefits

These products use 25 to 50% less energy Reduced energy costs without compromising quality or performance Reduced air pollution because fewer fossil fuels are burned Significant return on investment Extended product life and decreased maintenance

B. GREEN SEAL CERTIFIED PRODUCTS

The Lexington-Fayette Urban County Government is also committed to using other environmentally friendly products that do not negatively impact our environment. Green Seal is a non-profit organization devoted to environmental standard setting, product certification, and public education.

Go to <u>www.Greenseal.org</u> to find available certified products. These products will have a reduced impact on the environment and on human health. The products to be used must be pre-approved by the LFUCG prior to commencement of any work in any LFUCG facility. If a Green Seal product is not available, the LFUCG must provide a signed waiver to use an alternate product. Please provide information on the Green Seal products being used with your bid response.

C. GREEN COMMUNITY

The Lexington-Fayette Urban County Government (LFUCG) serves as a principal, along with the University of Kentucky and Fayette County Public Schools, in the Bluegrass Partnership for a Green Community. The Purchasing Team component of the Partnership collaborates on economy of scale purchasing that promotes and enhances environmental initiatives. Specifically, when applicable, each principal is interested in obtaining best value products and/or services which promote environment initiatives via solicitations and awards from the other principals.

If your company is the successful bidder on this Invitation For Bid, do you agree to extend the same product/service pricing to the other principals of the Bluegrass Partnership for a Green Community (i.e. University of Kentucky and Fayette County Schools) if requested?

Yes	X	No
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II. <u>Bid Conditions</u>

- A. No bid may be withdrawn for a period of sixty (60) days after the date and time set for opening.
- B. No bid may be altered after the date and time set for opening. In the case of obvious errors, the Division of Central Purchasing may permit the withdrawal of a bid. The decision as to whether a bid may be withdrawn shall be that of the Division of Central Purchasing.
- C. Acceptance of this proposal shall be enactment of an Ordinance by the Urban County Council.
- D. The bidder agrees that the Urban County Government reserves the right to reject any and all bids for either fiscal

- or technical reasons, and to award each part of the bid separately, all parts to one vendor or all parts to multiple vendors.
- E. Minor exceptions may not eliminate the bidder. The decision as to whether any exception is minor shall be entirely that of the head of the requisitioning Department or Division and the Director of the Division of Central Purchasing. The Urban County Government may waive technicalities and informalities where such waiver would best serve the interests of the Urban County Government.
- F. Manufacturer's catalogue numbers, trade names, etc., where shown herein are for descriptive purposes and are to guide the bidder in interpreting the standard of quality, design, and performance desired, and shall not be construed to exclude proposals based on furnishing other types of materials and/or services. However, any substitution or departure proposed by the bidder must be clearly noted and described; otherwise, it will be assumed that the bidder intends to supply items specifically mentioned in this Invitation for Bids.
- G. The Urban County Government may require demonstrations of the materials proposed herein prior to acceptance of this proposal.
- H. Bids must be submitted on this form and must be signed by the bidder or his authorized representative. Unsigned bids will not be considered.
- Bids must be submitted prior to the date and time indicated for opening. Bids submitted after this time will not be considered.
- J. All bids mailed must be submitted in the Ion Wave online portal at https://lexingtonky.ionwave.net/
- K. Bidder is requested to show both unit prices and lot prices. In the event of error, the unit price shall prevail.
- L. A certified check or Bid Bond in the amount of <u>XX</u> percent of the bid price must be attached hereto. This check must be made payable to the Lexington-Fayette Urban County Government, and will be returned when the material and/or services specified herein have been delivered in accordance with specifications. In the event of failure to perform within the time period set forth in this bid, it is agreed the certified check may be cashed and the funds retained by the Lexington-Fayette Urban County Government as liquidated damages. Checks of unsuccessful bidders will be returned when the bid has been awarded.
- M. The delivery dates specified by bidder may be a factor in the determination of the successful bidder.
- N. Tabulations of bids received may be mailed to bidders. Bidders requesting tabulations must enclose a stamped, self-addressed envelope with the bid.
- O. The Lexington-Fayette Urban County Government is exempt from Kentucky Sales Tax and Federal Excise Tax on materials purchased from this bid invitation. Materials purchased by the bidder for construction projects are not tax exempt and are the sole responsibility of the bidder.
- P. All material furnished hereunder must be in full compliance with OSHA regulations.
- Q. If more than one bid is offered by one party, or by any person or persons representing a party, all such bids shall be rejected.
- R. Signature on the face of this bid by the Bidder or his authorized representative shall be construed as acceptance of and compliance with all terms and conditions contained herein.
- S. The Entity (regardless of whether construction contractor, non-construction contractor or supplier) agrees to provide equal opportunity in employment for all qualified persons, to prohibit discrimination in employment because of race, color, religion, sex (including pregnancy, sexual orientation or gender identity), national origin, disability, age, genetic information, political affiliation, or veteran status, and to promote equal employment through a positive, continuing program from itself and each of its sub-contracting agents. This program of equal employment opportunity shall apply to every aspect of its employment policies and practices.
- T. The Kentucky Equal Employment Opportunity Act of 1978 (KRS 45.560-45.640) requires that any county, city, town, school district, water district, hospital district, or other political subdivision of the state shall include in directly

or indirectly publicly funded contracts for supplies, materials, services, or equipment hereinafter entered into the following provisions:

During the performance of this contract, the contractor agrees as follows:

- (1) The contractor will not discriminate against any employee or applicant for employment because of race, color, religion, sex, age or national origin;
- (2) The contractor will state in all solicitations or advertisements for employees placed by or on behalf of the contractors that all qualified applicants will receive consideration for employment without regard to race, color, religion, sex, age or national origin;
- (3) The contractor will post notices in conspicuous places, available to employees and applicants for employment, setting forth the provisions of the non-discrimination clauses required by this section; and
- (4) The contractor will send a notice to each labor union or representative of workers with which he has a collective bargaining agreement or other contract or understanding advising the labor union or workers' representative of the contractor's commitments under the nondiscrimination clauses.

The Act further provides:

KRS 45.610. Hiring minorities - Information required

- (1) For the length of the contract, each contractor shall hire minorities from other sources within the drawing area, should the union with which he has collective bargaining agreements be unwilling to supply sufficient minorities to satisfy the agreed upon goals and timetable.
- (2) Each contractor shall, for the length of the contract, furnish such information as required by KRS 45.560 to KRS 45.640 and by such rules, regulations and orders issued pursuant thereto and will permit access to all books and records pertaining to his employment practices and work sites by the contracting agency and the department for purposes of investigation to ascertain compliance with KRS 45.560 to 45.640 and such rules, regulations and orders issued pursuant thereto.

KRS 45.620. Action against contractor - Hiring of minority contractor or subcontractor

- (1) If any contractor is found by the department to have engaged in an unlawful practice under this chapter during the course of performing under a contract or subcontract covered under KRS 45.560 to 45.640, the department shall so certify to the contracting agency and such certification shall be binding upon the contracting agency unless it is reversed in the course of judicial review.
- (2) If the contractor is found to have committed an unlawful practice under KRS 45.560 to 45.640, the contracting agency may cancel or terminate the contract, conditioned upon a program for future compliance approved by the contracting agency and the department. The contracting agency may declare such a contractor ineligible to bid on further contracts with that agency until such time as the contractor complies in full with the requirements of KRS 45.560 to 45.640.
- (3) The equal employment provisions of KRS 45.560 to 45.640 may be met in part by a contractor by subcontracting to a minority contractor or subcontractor. For the provisions of KRS 45.560 to 45.640, a minority contractor or subcontractor shall mean a business that is owned and controlled by one or more persons disadvantaged by racial or ethnic circumstances.

KRS 45.630 Termination of existing employee not required, when

Any provision of KRS 45.560 to 45.640 notwithstanding, no contractor shall be required to terminate an existing employee upon proof that that employee was employed prior to the date of the contract.

KRS 45.640 Minimum skills

Nothing in KRS 45.560 to 45.640 shall require a contractor to hire anyone who fails to demonstrate the minimum skills required to perform a particular job.

It is recommended that all of the provisions above quoted to be included as special conditions in each contract.

In the case of a contract exceeding \$250,000, the contractor is required to furnish evidence that his work-force in Kentucky is representative of the available work-force in the area from which he draws employees, or to supply an Affirmative Action plan which will achieve such representation during the life of the contract.

U. Any party, firm or individual submitting a proposal pursuant to this invitation must be in compliance with the requirements of the Lexington-Fayette Urban County Government regarding taxes and fees before they can be considered for award of this invitation and must maintain a "current" status with regard to those taxes and fees throughout the term of the contract. The contractor must be in compliance with Chapter 13 from the Code of Ordinances of the Lexington-Fayette Urban County Government. The contractor must be in compliance with Ordinance 35-2000 pursuant to contractor registration with the Division of Building Inspection. If applicable, said business must have a Fayette County business license.

Pursuant to KRS 45A.343 and KRS 45A.345, the contractor shall

- (1) Reveal any final determination of a violation by the contractor within the previous five year period pursuant to KRS Chapters 136 (corporation and utility taxes), 139 (sales and use taxes), 141 (income taxes), 337 (wages and hours), 338 (occupational safety and health of employees), 341 (unemployment and compensation) and 342 (labor and human rights) that apply to the contractor; and
- (2) Be in continuous compliance with the above-mentioned KRS provisions that apply to the contractor for the duration of the contract.

A contractor's failure to reveal the above or to comply with such provisions for the duration of the contract shall be grounds for cancellation of the contract and disqualification of the contractor from eligibility for future contracts for a period of two (2) years.

V. Vendors who respond to this invitation have the right to file a notice of contention associated with the bid process or to file a notice of appeal of the recommendation made by the Director of Central Purchasing resulting from this invitation.

Notice of contention with the bid process must be filed within 3 business days of the bid/proposal opening by (1) sending a written notice, including sufficient documentation to support contention, to the Director of the Division of Central Purchasing or (2) submitting a written request for a meeting with the Director of Central Purchasing to explain his/her contention with the bid process. After consulting with the Commissioner of Finance the Chief Administrative Officer and reviewing the documentation and/or hearing the vendor, the Director of Central Purchasing shall promptly respond in writing findings as to the compliance with bid processes. If, based on this review, a bid process irregularity is deemed to have occurred the Director of Central Purchasing will consult with the Commissioner of Finance, the Chief Administrative Officer and the Department of Law as to the appropriate remedy.

Notice of appeal of a bid recommendation must be filed within 3 business days of the bid recommendation by (1) sending a written notice, including sufficient documentation to support appeal, to the Director, Division of Central Purchasing or (2) submitting a written request for a meeting with the Director of Central Purchasing to explain his appeal. After reviewing the documentation and/or hearing the vendor and consulting with the Commissioner of Finance and the Chief Administrative Officer, the Director of Central Purchasing shall in writing, affirm or withdraw the recommendation.

III. Procurement Contract Bid Conditions

- A. The terms of this agreement shall be for <u>41.5</u> month(s) from the date of acceptance of this contract by the Lexington-Fayette Urban County Government. This agreement may be automatically extended for an additional <u>five (5), 1</u> year(s) renewal. This contract may be canceled by either party thirty (30) days after delivery by canceling party of written notice of intent to cancel to the other contracting party.
- B. Price Changes (Space Checked Applies)
- (XXX)1. Prices quoted in response to the Invitation shall be firm prices for the first 365 days of the Procurement Contract. After 365 days, prices may be subject to revision and such changes shall be based on general industry changes. Revision may be either increases or decreases and may be requested by either party. There will be no more than one (1) price adjustment per year. Requests for price changes shall be received in writing at least twenty (20) days prior to the effective date and are subject to written acceptance before becoming effective. Proof of the validity of a request for revision shall be responsibility of the requesting party. The Lexington-Fayette Urban County Government shall receive the benefit of any decline that the seller shall offer his other accounts.
 - () 2. No provision for price change is made herein. Prices are to be firm for the term of this contract.
 - () 3. See bid specifications.
- C. If any contract item is not available from the vendor, the Lexington-Fayette Urban County Government, at its option, may permit the item to be back-ordered or may procure the item on the open market.
- D. All invoices must bear reference to the Lexington-Fayette Urban County Government Purchasing document numbers which are being billed.
- E. This contract may be canceled by the Lexington-Fayette Urban County Government if it is determined that the Bidder has failed to perform under the terms of this agreement, such cancellation to be effective upon receipt of written notice of cancellation by the Bidder.
- F. No substitutions for articles specified herein may be made without prior approval of the Division of Central Purchasing.

EQUAL OPPORTUNITY AGREEMENT

Standard Title VI Assurance

The Lexington Fayette-Urban County Government, (hereinafter referred to as the "Recipient") hereby agrees that as a condition to receiving any Federal financial assistance from the U.S. Department of Transportation, it will comply with Title VI of the Civil Rights Act of 1964, 78Stat.252, 42 U.S.C. 2000d-4 (hereinafter referred to as the "Act"), and all requirements imposed by or pursuant to Title 49, Code of Federal Regulations, U.S. Department of Transportation, Subtitle A, Office of the Secretary, (49 CFR, Part 21) Nondiscrimination in Federally Assisted Program of the Department of Transportation – Effectuation of Title VI of the Civil Rights Act of 1964 (hereinafter referred to as the "Regulations") and other pertinent directives, no person in the United States shall, on the grounds of race, color, national origin, sex, age (over 40), religion, sexual orientation, gender identity, veteran status, or disability be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any program or activity for which the Recipient receives Federal financial assistance from the U.S. Department of Transportation, including the Federal Highway Administration, and hereby gives assurance that will promptly take any necessary measures to effectuate this agreement. This assurance is required by subsection 21.7(a) (1) of the Regulations.

The Law

- Title VII of the Civil Rights Act of 1964 (amended 1972) states that it is unlawful for an employer to discriminate in employment because of race, color, religion, sex, age (40-70 years) or national origin.
- Executive Order No. 11246 on Nondiscrimination under Federal contract prohibits employment discrimination by contractor and sub-contractor doing business with the Federal Government or recipients of Federal funds. This order was later amended by Executive Order No. 11375 to prohibit discrimination on the basis of sex.
- Section 503 of the Rehabilitation Act of 1973 states: *The Contractor will not discriminate against any employee or applicant for employment because of physical or mental disability.*
- Section 2012 of the Vietnam Era Veterans Readjustment Act of 1973 requires Affirmative Action on behalf of disabled veterans and veterans of the Vietnam Era by contractors having Federal contracts.
- Section 206(A) of Executive Order 12086, Consolidation of Contract Compliance Functions for Equal Employment
 Opportunity, states: The Secretary of Labor may investigate the employment practices of any Government contractor or
 sub-contractor to determine whether or not the contractual provisions specified in Section 202 of this order have been
 violated.

The Lexington-Fayette Urban County Government practices Equal Opportunity in recruiting, hiring and promoting. It is the Government's intent to affirmatively provide employment opportunities for those individuals who have previously not been allowed to enter into the mainstream of society. Because of its importance to the local Government, this policy carries the full endorsement of the Mayor, Commissioners, Directors and all supervisory personnel. In following this commitment to Equal Employment Opportunity and because the Government is the benefactor of the Federal funds, it is both against the Urban County Government policy and illegal for the Government to let contracts to companies which knowingly or unknowingly practice discrimination in their employment practices. Violation of the above mentioned ordinances may cause a contract to be canceled and the contractors may be declared ineligible for future consideration.

Please sign this statement in the appropriate space acknowledging that you have read and understand the provisions contained herein. Return this document as part of your application packet.

<u>Bidders</u>

I/We agree to comply with the Civil Rights Laws listed as	bove that govern employment rights of minorities, women, veteran
status, disability and age.	
Signature Cuzuich	Marmic Fire & Safety
Signature	Name of Business

GENERAL PROVISIONS OF BID CONTRACT

By signing the below, bidder acknowledges that it understands and agrees with the following provisions related to its bid response and the provision of any goods or services to LFUCG upon selection by LFUCG pursuant to the bid request:

- 1. Bidder shall comply with all Federal, State & Local regulations concerning this type of service or good. All applicable state laws, ordinances and resolutions (including but not limited to Section 2-33 (Discrimination due to sexual orientation or gender identity) and Chapter 13 (Licenses and Regulations) of the Lexington-Fayette Urban County Government Code of Ordinances, and Resolution No. 484-17 (Minority, Women, and Veteran-Owned Businesses)) and the regulations of all authorities having jurisdiction over the project shall apply to the contract, and shall be deemed to be incorporated herein by reference.
- 2. Failure to submit ALL forms and information required by LFUCG may be grounds for disqualification.
- 3. Addenda: All addenda and IonWave Q&A, if any, must be considered by the bidder in making its response, and such addenda shall be made a part of the requirements of the bid contract. Before submitting a bid response, it is incumbent upon bidder to be informed as to whether any addenda have been issued, and the failure of the bidder to cover any such addenda may result in disqualification of that response.
- 4. Bid Reservations: LFUCG reserves the right to reject any or all bid responses, to award in whole or part, and to waive minor immaterial defects in proposals. LFUCG may consider any alternative proposal that meets its basic needs.
- 5. Liability: LFUCG is not responsible for any cost incurred by bidder in the preparation of its response.
- 6. Changes/Alterations: Bidder may change or withdraw a proposal at any time prior to the opening; however, no oral modifications will be allowed. Only letters, or other formal written requests for modifications or corrections of a previously submitted proposal which is addressed in the same manner as the bid response, and received by LFUCG prior to the scheduled closing time for receipt of bids, will be accepted. The bid response when opened, will then be corrected in accordance with such written request(s), provided that the written request is contained in a sealed envelope which is plainly marked "modifications of bid response".
- 7. Clarification of Submittal: LFUCG reserves the right to obtain clarification of any point in a bid or to obtain additional information from any bidder.
- 8. Bribery Clause: By his/her signature on its response, bidder certifies that no employee of his/hers, any affiliate or subcontractor, has bribed or attempted to bribe an officer or employee of the LFUCG.
- 9. Additional Information: While not necessary, the bidder may include any product brochures, software documentation, sample reports, or other documentation that may assist LFUCG in better understanding and evaluating the bid response. Additional documentation shall not serve as a substitute for other documentation which is required by the LFUCG to be submitted with the bid response.
- 10. Ambiguity, Conflict or other Errors: If a bidder discovers any ambiguity, conflict, discrepancy, omission or other error in the bid request of LFUCG, it shall immediately notify LFUCG of such error in writing and request modification or clarification of the document if allowable by the LFUCG.
- 11. Agreement to Bid Terms: In submitting its bid response, the bidder agrees that it has carefully examined the specifications and all provisions relating to LFUCG's bid request, including but not limited to the bid contract. By submission of its bid response, bidder states that it understands the meaning, intent and requirements of LFUCG's bid request and agrees to the same. The successful bidder shall warrant that it is familiar with and understands all provisions herein and shall warrant that it can comply with them. No additional compensation to bidder shall be authorized for services, expenses, or goods reasonably covered under these provisions that the bidder omits from its bid response.
- 12. Cancellation: LFUCG may unilaterally terminate the bid contract with the selected bidder(s) at any time, with or without cause, by providing at least thirty (30) days advance written notice unless a different advance written notice

period is negotiated prior to contract approval. Payment for services or goods received prior to termination shall be made by the LFUCG provided these goods or services were provided in a manner acceptable to the LFUCG. Payment for those goods and services shall not be unreasonably withheld.

- 13. Assignment of Contract: The selected bidder(s) shall not assign or subcontract any portion of the bid contract with LFUCG without the express written consent of LFUCG. Any purported assignment or subcontract in violation hereof shall be void. It is expressly acknowledged that LFUCG shall never be required or obligated to consent to any request for assignment or subcontract; and further that such refusal to consent can be for any or no reason, fully within the sole discretion of LFUCG.
- 14. No Waiver: No failure or delay by LFUCG in exercising any right, remedy, power or privilege hereunder, nor any single or partial exercise thereof, nor the exercise of any other right, remedy, power or privilege shall operate as a waiver hereof or thereof. No failure or delay by LFUCG in exercising any right, remedy, power or privilege under or in respect of this bid proposal or bid contract shall affect the rights, remedies, powers or privileges of LFUCG hereunder or shall operate as a waiver thereof.
- 15. Authority to do Business: Each bidder must be authorized to do business under the laws of the Commonwealth of Kentucky and must be in good standing and have full legal capacity to provide the goods or services specified in the bid proposal. Each bidder must have all necessary right and lawful authority to submit the bid response and enter into the bid contract for the full term hereof including any necessary corporate or other action authorizing the bidder to submit the bid response and enter into this bid contract. If requested, the bidder will provide LFUCG with a copy of a corporate resolution authorizing this action and/or a letter from an attorney confirming that the proposer is authorized to do business in the Commonwealth of Kentucky. All bid responses must be signed by a duly authorized officer, agent or employee of the bidder.
- 16. Governing Law: This bid request and bid contract shall be governed by and construed in accordance with the laws of the Commonwealth of Kentucky. In the event of any proceedings regarding this matter, the bidder agrees that the venue shall be the Fayette County Circuit Court or the U.S. District Court for the Eastern District of Kentucky, Lexington Division and that the bidder expressly consents to personal jurisdiction and venue in such Court for the limited and sole purpose of proceedings relating to these matters or any rights or obligations arising thereunder.
- 17. Ability to Meet Obligations: Bidder affirmatively states that there are no actions, suits or proceedings of any kind pending against bidder or, to the knowledge of the bidder, threatened against the bidder before or by any court, governmental body or agency or other tribunal or authority which would, if adversely determined, have a materially adverse effect on the authority or ability of bidder to perform its obligations under this bid response or bid contract, or which question the legality, validity or enforceability hereof or thereof.
- 18. Price Discrepancy: When applicable, in case of price discrepancy, unit bid price written in words will prevail followed by unit price written in numbers then total amount bid per line item.
- 19. Bidder understands and agrees that its employees, agents, or subcontractors are not employees of LFUCG for any purpose whatsoever. Bidder is an independent contractor at all times related to the bid response or bid contract.
- 20. Contractor [or Vendor or Vendor's Employees] will not appropriate or make use of the Lexington-Fayette Urban County Government (LFUCG) name or any of its trade or service marks or property (including but not limited to any logo or seal), in any promotion, endorsement, advertisement, testimonial or similar use without the prior written consent of the government. If such consent is granted LFUCG reserves the unilateral right, in its sole discretion, to immediately terminate and revoke such use for any reason whatsoever. Contractor agrees that it shall cease and desist from any unauthorized use immediately upon being notified by LFUCG.
- 21. If any term or provision of this bid contract shall be found to be illegal or unenforceable, the remainder of the contract shall remain in full force and such term or provision shall be deemed stricken.

Gennifes Chrisish	12/27/2022
Signature	Date

WORKFORCE ANALYSIS FORM

Name of Organization: Marmic Fire & Safety (Nicholasville branch)

Categories	Total	(N Hisp	hite Not panic or ino)	Hisp o Lat	r	Afrio Ame (N	rican lot anic	Haw ar Oti Pad Islar (N Hisp	tive aiian her cific nder lot panic	Asi (N Hispa o Lati	ot anic r	India Alas Na (n Hisp		more (I Hisp	vo or e races Not anic or atino	То	tal
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Foremen																	
Technicians		3	1														
Protective Service																	
Para-Professionals																	
Office/Clerical																	
Skilled Craft																	
Service/Maintenance																	
Total:																	

Prepared by:	Date	12 <i>j</i> 27	
(Name and Title)		Revised	I 2015-Dec-15

DIRECTOR, DIVISION OF CENTRAL PURCHASING LEXINGTON-FAYETTE URBAN COUNTY GOVERNMENT 200 EAST MAIN STREET LEXINGTON, KENTUCKY 40507

NOTICE OF REQUIREMENT FOR AFFIRMATIVE ACTION TO ENSURE EQUAL EMPLOYMENT OPPORTUNITIES AND DBE CONTRACT PARTICIPATION

The Lexington-Fayette Urban County Government has set a goal that not less than ten percent (10%) of the total value of this contract be subcontracted to MBE/WBE's, and set a goal that not less than three percent (3%) of the total value of this contract be subcontracted to Veteran-Owned Small Businesses. The goal for the utilization of Certified MBE/WBE's and Veteran-Owned Small Businesses as subcontractors are recommended goals. Contractors who fail to meet such goals will be expected to provide written explanations to the Director of the Division of Central Purchasing of efforts they have made to accomplish the recommended goals and the extent to which they are successful in accomplishing the recommended goals will be a consideration in the procurement process.

For assistance in locating MBE/WBE Subcontractors contact Sherita Miller at 859/258-3320 or by writing the address listed below:

Sherita Miller, Division of Central Purchasing Lexington-Fayette Urban County Government 200 East Main Street – Room 338 Lexington, Kentucky 40507 smiller@lexingtonky.gov

Lexington-Fayette Urban County Government MWDBE PARTICIPATION GOALS

A. GENERAL

- 1) The LFUCG request all potential contractors to make a concerted effort to include Minority-Owned (MBE), Woman-Owned (WBE), Disadvantaged (DBE) Business Enterprises and Veteran-Owned Small Businesses (VOSB) as subcontractors or suppliers in their bids.
- 2) Toward that end, the LFUCG has established 10% of total procurement costs as a Goal for participation of Minority-Owned, Woman-Owned and Disadvantaged Businesses on this contract.
- 3) It is therefore a request of each Bidder to include in its bid, the same goal (10%) for MWDBE participation and other requirements as outlined in this section.
- 4) The LFUCG has also established a 3% of total procurement costs as a Goal for participation for of Veteran-Owned Businesses.
- 5) It is therefore a request of each Bidder to include in its bid, the same goal (3%) for Veteran-Owned participation and other requirements as outlined in this section.

B. PROCEDURES

- 1) The successful bidder will be required to report to the LFUCG, the dollar amounts of all payments submitted to Minority-Owned, Woman-Owned or Veteran-Owned subcontractors and suppliers for work done or materials purchased for this contract. (See Subcontractor Monthly Payment Report)
- 2) Replacement of a Minority-Owned, Woman-Owned or Veteran-Owned subcontractor or supplier listed in the original submittal must be requested in writing and must be accompanied by documentation of Good Faith Efforts to replace the subcontractor / supplier with another MWDBE Firm; this is subject to approval by the LFUCG. (See LFUCG MWDBE Substitution Form)
- 3) For assistance in identifying qualified, certified businesses to solicit for potential contracting opportunities, bidders may contact:
 - a) The Lexington-Fayette Urban County Government, Division of Central Purchasing (859-258-3320)
- 4) The LFUCG will make every effort to notify interested MWDBE and Veteran-Owned subcontractors and suppliers of each Bid Package, including information on the scope of work, the pre-bid meeting time and location, the bid date, and all other pertinent information regarding the project.

C. DEFINITIONS

- 1) A Minority-Owned Business Enterprise (MBE) is defined as a business which is certified as being at least 51% owned, managed and controlled by persons of African American, Hispanic, Asian, Pacific Islander, American Indian or Alaskan Native Heritage.
- 2) A Woman-Owned Business Enterprise (WBE) is defined as a business which is certified as being at least 51% owned, managed and controlled by one or more women.
- 3) A Disadvantaged Business (DBE) is defined as a business which is certified as being at least 51% owned, managed and controlled by a person(s) that are economically and socially disadvantaged.

- 4) A Veteran-Owned Small Business (VOSB) is defined as a business which is certified as being at least 51% owned, managed and controlled by a veteran and/or a service disabled veteran.
- 5) Good Faith Efforts are efforts that, given all relevant circumstances, a bidder or proposer actively and aggressively seeking to meet the goals, can reasonably be expected to make. In evaluating good faith efforts made toward achieving the goals, whether the bidder or proposer has performed the efforts outlined in the Obligations of Bidder for Good Faith Efforts outlined in this document will be considered, along with any other relevant factors.

D. OBLIGATION OF BIDDER FOR GOOD FAITH EFFORTS

- 1) The bidder shall make a Good Faith Effort to achieve the Participation Goal for MWDBE and Veteran-Owned subcontractors/suppliers. The failure to meet the goal shall not necessarily be cause for disqualification of the bidder; however, bidders not meeting the goal are required to furnish with their bids <u>written documentation</u> of their Good Faith Efforts to do so.
- 2) Award of Contract shall be conditioned upon satisfaction of the requirements set forth herein.
- 3) The Form of Proposal includes a section entitled "MWDBE Participation Form". The applicable information must be completed and submitted as outlined below.
- 4) Failure to submit this information as requested may be cause for rejection of bid or delay in contract award.

E. DOCUMENTATION REQUIRED FOR GOOD FAITH EFFORTS

- 1) Bidders reaching the Goal are required to submit only the MWDBE Participation Form." The form must be fully completed including names and telephone number of participating MWDBE firm(s); type of work to be performed; estimated value of the contract and value expressed as a percentage of the total Lump Sum Bid Price. The form must be signed and dated, and is to be submitted with the bid.
- 2) Bidders not reaching the Goal must submit the "MWDBE Participation Form", the "Quote Summary Form" and a written statement documenting their Good Faith Effort to do so. If bid includes no MWDBE and/or Veteran participation, bidder shall enter "None" on the subcontractor / supplier form). In addition, the bidder must submit written proof of their Good Faith Efforts to meet the Participation Goal:
 - a. Advertised opportunities to participate in the contract in at least two (2) publications of general circulation media; trade and professional association publications; small and minority business or trade publications; and publications or trades targeting minority, women and disadvantaged businesses not less than fifteen (15) days prior to the deadline for submission of bids to allow MWDBE firms and Veteran-Owned businesses to participate.
 - b. Included documentation of advertising in the above publications with the bidders good faith efforts package
 - c. Attended LFUCG Central Purchasing Economic Inclusion Outreach event
 - d. Attended pre-bid meetings that were scheduled by LFUCG to inform MWDBEs and/or Veteran-Owned businesses of subcontracting opportunities

- e. Sponsored Economic Inclusion event to provide networking opportunities for prime contractors and MWDBE firms and Veteran-Owned businesses.
- f. Requested a list of MWDBE and/or Veteran subcontractors or suppliers from LFUCG and showed evidence of contacting the companies on the list(s).
- g. Contacted organizations that work with MWDBE companies for assistance in finding certified MWBDE firms and Veteran-Owned businesses to work on this project. Those contacted and their responses should be a part of the bidder's good faith efforts documentation.
- h. Sent written notices, by certified mail, email or facsimile, to qualified, certified MWDBEs and/or Veteran-Owned businesses soliciting their participation in the contract not less than seven (7) days prior to the deadline for submission of bids to allow them to participate effectively.
- i. Followed up initial solicitations by contacting MWDBEs and Veteran-Owned Businesses to determine their level of interest.
- j. Provided the interested MWBDE firm and/or Veteran-Owned business with adequate and timely information about the plans, specifications, and requirements of the contract.
- k. Selected portions of the work to be performed by MWDBE firms and/or Veteran-Owned businesses in order to increase the likelihood of meeting the contract goals. This includes, where appropriate, breaking out contract work items into economically feasible units to facilitate MWDBE and Veteran participation, even when the prime contractor may otherwise perform these work items with its own workforce
- l. Negotiated in good faith with interested MWDBE firms and Veteran-Owned businesses not rejecting them as unqualified without sound reasons based on a thorough investigation of their capabilities. Any rejection should be so noted in writing with a description as to why an agreement could not be reached.
- m. Included documentation of quotations received from interested MWDBE firms and Veteran-Owned businesses which were not used due to uncompetitive pricing or were rejected as unacceptable and/or copies of responses from firms indicating that they would not be submitting a bid.
- n. Bidder has to submit sound reasons why the quotations were considered unacceptable. The fact that the bidder has the ability and/or desire to perform the contract work with its own forces will not be considered a sound reason for rejecting a MWDBE and/or Veteran-Owned business's quote. Nothing in this provision shall be construed to require the bidder to accept unreasonable quotes in order to satisfy MWDBE and Veteran goals.
- o. Made an effort to offer assistance to or refer interested MWDBE firms and Veteran-Owned businesses to obtain the necessary equipment, supplies, materials, insurance and/or bonding to satisfy the work requirements of the bid proposal
- p. Made efforts to expand the search for MWBE firms and Veteran-Owned businesses beyond the usual geographic boundaries.

q. Other--any other evidence that the bidder submits which may show that the bidder has made reasonable good faith efforts to include MWDBE and Veteran participation.

<u>Note</u>: Failure to submit any of the documentation requested in this section may be cause for rejection of bid. Bidders may include any other documentation deemed relevant to this requirement which is subject to review by the MBE Liaison. Documentation of Good Faith Efforts must be submitted with the Bid, if the participation Goal is not met.



MINORITY BUSINESS ENTERPRISE PROGRAM

Sherita Miller, MPA
Minority Business Enterprise Liaison
Division of Central Purchasing
Lexington-Fayette Urban County Government
200 East Main Street
Lexington, KY 40507
smiller@lexingtonky.gov
859-258-3323

OUR MISSION: The mission of the Minority Business Enterprise Program is to facilitate the full participation of minority and women owned businesses in the procurement process and to promote economic inclusion as a business imperative essential to the long term economic viability of Lexington-Fayette Urban County Government.

To that end the city council adopted and implemented Resolution 484-2017 – A Certified Minority, Women and Disadvantaged Business Enterprise ten percent (10%) minimum goal and a three (3%) minimum goal for Certified Veteran-Owned Small Businesses and Certified Service Disabled Veteran – Owned Businesses for government contracts.

The resolution states the following definitions shall be used for the purposes of reaching these goals (a full copy is available in Central Purchasing):

Certified Disadvantaged Business Enterprise (DBE) – a business in which at least fifty-one percent (51%) is owned, managed and controlled by a person(s) who is socially and economically disadvantaged as define by 49 CFR subpart 26.

Certified Minority Business Enterprise (MBE) – a business in which at least fifty-one percent (51%) is owned, managed and controlled by an ethnic minority (i.e. African American, Asian American/Pacific Islander, Hispanic Islander, Native American/Native Alaskan Indian) as defined in federal law or regulation as it may be amended from time-to-time.

Certified Women Business Enterprise (WBE) – a business in which at least fifty-one percent (51%) is owned, managed and controlled by a woman.

Certified Veteran-Owned Small Business (VOSB) – a business in which at least fifty-one percent (51%) is owned, managed and controlled by a veteran who served on active duty with the U.S. Army, Air Force, Navy, Marines or Coast Guard.

Certified Service Disabled Veteran Owned Small Business (SDVOSB) – a business in which at least fifty-one percent (51%) is owned, managed and controlled by a disabled veteran who served on active duty with the U.S. Army, Air Force, Navy, Marines or Coast Guard.

The term "Certified" shall mean the business is appropriately certified, licensed, verified, or validated by an organization or entity recognized by the Division of Purchasing as having the appropriate credentials to make a determination as to the status of the business.

To comply with Resolution 484-2017, prime contractors and minority, women and veteran owned businesses must enroll in the new Diverse Business Management Compliance system, https://lexingtonky.diversitycompliance.com/

We have compiled the list below to help you locate certified MBE, WBE and DBE certified businesses. Below is a listing of contacts for LFUCG Certified MWDBEs and Veteran-Owned Small Businesses in (https://lexingtonky.ionwave.net)

Business	Contact	Email Address	Phone
LFUCG	Sherita Miller	smiller@lexingtonky.gov	859-258-3323
Commerce Lexington – Minority Business Development	Tyrone Tyra	ttyra@commercelexington.com	859-226-1625
Tri-State Minority Supplier Diversity Council	Susan Marston	smarston@tsmsdc.com	502-365-9762
Small Business Development Council	Shawn Rogers UK SBDC	shawn.rogers@uky.edu	859-257-7666
Community Ventures Corporation	Phyllis Alcorn	palcorn@cvky.org	859-231-0054
KY Transportation Cabinet (KYTC)	Melvin Bynes	Melvin.bynes2@ky.gov	502-564-3601
KYTC Pre-Qualification	Shella Eagle	Shella.Eagle@ky.gov	502-782-4815
Ohio River Valley Women's Business Council (WBENC)	Sheila Mixon	smixon@orvwbc.org	513-487-6537
Kentucky MWBE Certification Program	Yvette Smith, Kentucky Finance Cabinet	Yvette.Smith@ky.gov	502-564-8099
National Women Business Owner's Council (NWBOC)	Janet Harris-Lange	janet@nwboc.org	800-675-5066
Small Business Administration	Robert Coffey	robertcoffey@sba.gov	502-582-5971
LaVoz de Kentucky	Andres Cruz	lavozdeky@yahoo.com	859-621-2106
The Key News Journal	Patrice Muhammad	production@keynewsjournal.com	859-685-8488



completed form may cause rejection of the bid.

LFUCG MWDBE PARTICIPATION FORM
Bid/RFP/Quote Reference #_165-2022
The MWDBE and/or veteran subcontractors listed have agreed to participate on this Bid/RFP/Quote. If any substitution is made or the total value of the work is changed prior to or after the job is in progress, it is understood
that those substitutions must be submitted to Central Purchasing for approval immediately. Failure to submit a

MWDBE Company, Name, Address, Phone, Email		MBE WBE or DBE	Work to be Performed	Total Dollar Value of the Work	% Value of Total Contract
1. N/A			ry small office, and we do r s for the fire safety inspection		
2.					
3.					
4.					

The undersigned company representative submits the above list of MWDBE firms to be used in accomplishing the work contained in this Bid/RFP/Quote. Any misrepresentation may result in the termination of the contract and/or be subject to applicable Federal and State laws concerning false statements and false claims.

Marmic Fire & Safety	Glunger Curuch
Company	Company Representative
12/27/2022	Regional Vice President
Date	Title



Date

MWDBE Company, Name, Address, Phone, Email	MBE WBE or DBE	Work to be Performed	Total Dollar Value of the Work	% Value of Tota Contract

Title



LFUCG MWDBE SUBSTITUTION FORM Bid/RFP/Quote Reference #_____

The substituted MWDBE and/or veteran subcontractors listed below have agreed to participate on this Bid/RFP/Quote. These
substitutions were made prior to or after the job was in progress. These substitutions were made for reasons stated below and
are now being submitted to Central Purchasing for approval. By the authorized signature of a representative of our company
we understand that this information will be entered into our file for this project. Failure to submit this form may cause
rejection of the bid.

SUBSTITUTED MWDBE Company Name, Address, Phone, Email	MWDBE Formally Contracted/ Name, Address, Phone, Email	Work to Be Performed	Reason for the Substitution	Total Dollar Value of the Work	% Value of Total Contract
1.					
N/A					
2.					
3.					
4.					

The undersigned acknowledges that any misrepresentation may result in termination of the contract and/or be applicable Federal and State laws concerning false statements and false claims.					
Company	Company Representative				
Date	Title				



MWDBE QUOTE SUMMARY FORM Bid/RFP/Quote Reference #_____

The undersigned acknowledges that the minority and/or veteran subcontractors listed on this form d	id
submit a quote to participate on this project. Failure to submit this form may cause rejection of the bid.	

Company Name	Contact Person
Address/Phone/Email	Bid Package / Bid Date

MWDBE Company Addre	Contact Person	Contact Information (work phone, Email, cell)	Date Contacted	Services to be performed	Method of Communication (email, phone meeting, ad, event etc)	Total dollars \$\$ Do Not Leave Blank (Attach Documentation)	MBE * AA HA AS NA Female	Veteran
N/A								

(MBE designation / AA=African American / HA= Hispanic American/AS = Asian American/Pacific Islander/ NA= Native American)

	mation is accurate. Any misrepresentation may result in termination of the leral and State laws concerning false statements and claims.
Company	Company Representative

Date Title



LFUCG SUBCONTRACTOR MONTHLY PAYMENT REPORT

The LFUCG has a 10% goal plan adopted by city council to increase the participation of minority and women owned businesses in the procurement process. The LFUCG also has a 3% goal plan adopted by cited council to increase the participation of veteran owned businesses in the procurement process. In order to measure that goal LFUCG will track spending with MWDBE and Veteran contractors on a monthly basis. By the signature below of an authorized company representative, you certify that the information is correct, and that each of the representations set forth below is true. Any misrepresentation may result in termination of the contract and/or prosecution under applicable Federal and State laws concerning false statements and false claims. Please submit this form monthly to the Division of Central Purchasing/ 200 East Main Street / Room 338 / Lexington, KY 40507.

Project Name/ Contract # Company Name: Federal Tax ID:				Work Period/ From:			То:
				Address:			
				Contact Person:			
Subcontractor Vendor ID (name, address, phone, email	Description of Work	Total Subcontract Amount	% of Total Contrac Awarded to Prime for this Project	d this Period	Purchase Order number for subcontractor work (please attach PO)	Scheduled Project Start Date	Scheduled Project End Date
N/A							
By the signature bel epresentations set t nder applicable Fe	forth below is tr	ue. Any misrepi	resentatior	ns may result in th	ne termination of		
Company			$\overline{\mathbf{C}}$	ompany Repres	entative		

LFUCG STATEMENT OF GOOD FAITH EFFORTS Bid/RFP/Quote #_____

By the signature below of an authorized company representative, we certify that we have utilized the following Good Faith Efforts to obtain the maximum participation by MWDBE and Veteran-Owned business enterprises on the project and can supply the appropriate documentation.
Advertised opportunities to participate in the contract in at least two (2) publications of general circulation media; trade and professional association publications; small and minority business or trade publications; and publications or trades targeting minority, women and disadvantaged businesses not less than fifteen (15) days prior to the deadline for submission of bids to allow MWDBE firms and Veteran-Owned businesses to participate.
Included documentation of advertising in the above publications with the bidders good faith efforts package
Attended LFUCG Central Purchasing Economic Inclusion Outreach event
Attended pre-bid meetings that were scheduled by LFUCG to inform MWDBEs and/or Veteran-Owned Businesses of subcontracting opportunities
Sponsored Economic Inclusion event to provide networking opportunities for prime contractors and MWDBE firms and Veteran-Owned businesses
Requested a list of MWDBE and/or Veteran subcontractors or suppliers from LFUCG and showed evidence of contacting the companies on the list(s).
Contacted organizations that work with MWDBE companies for assistance in finding certified MWBDE firms and Veteran-Owned businesses to work on this project. Those contacted and their responses should be a part of the bidder's good faith efforts documentation. Sent written notices, by certified mail, email or facsimile, to qualified, certified MWDBEs soliciting their participation in the contract not less than seven (7) days prior to the deadline for submission of bids to allow them to participate effectively.
Followed up initial solicitations by contacting MWDBEs and Veteran-Owned businesses to determine their level of interest.
Provided the interested MWBDE firm and/or Veteran-Owned business with adequate and timely information about the plans, specifications, and requirements of the contract.
Selected portions of the work to be performed by MWDBE firms and/or Veteran-Owned businesses in order to increase the likelihood of meeting the contract goals. This includes, where appropriate, breaking out contract work items into economically feasible units to facilitate MWDBE and Veteran participation, even when the prime contractor may otherwise perform these work items with its own workforce
Negotiated in good faith with interested MWDBE firms and Veteran-Owned businesses not rejecting them as unqualified without sound reasons based on a thorough investigation of their capabilities. Any rejection should be so noted in writing with a description as to why an agreement could not be reached.

Date		Title
Company 12/27/2022	<u></u>	Company Representative Regional Vice President
Marmic Fire	e & Safety	Gennery Representative
		formation is accurate. Any misrepresentations may result in termination cable Federal and State laws concerning false statements and claims.
	rejection of bid. Bidders which is subject to appr	t any of the documentation requested in this section may be cause for nay include any other documentation deemed relevant to this requirement wal by the MBE Liaison. Documentation of Good Faith Efforts must be the participation Goal is not met.
	•	vidence that the bidder submits which may show that the bidder has made orts to include MWDBE and Veteran participation.
	Made efforts to ex the usual geographic box	band the search for MWBE firms and Veteran-Owned businesses beyond indaries.
		offer assistance to or refer interested MWDBE firms and Veteran-Owned necessary equipment, supplies, materials, insurance and/or bonding to lents of the bid proposal
	fact that the bidder has t will not be considered a quote. Nothing in this p	nit sound reasons why the quotations were considered unacceptable. The ne ability and/or desire to perform the contract work with its own forces sound reason for rejecting a MWDBE and/or Veteran-Owned business's rovision shall be construed to require the bidder to accept unreasonable MWDBE and Veteran goals.
	Veteran-Owned busines	entation of quotations received from interested MWDBE firms and es which were not used due to uncompetitive pricing or were rejected as es of responses from firms indicating that they would not be submitting

Please note: the local office is a very small office, and we do not have the need to subcontract out to another company. Our bid is for the fire safety inspections, and we take care of those in-house.

AMENDMENT 1 — CERTIFICATION OF COMPLIANCE FOR EXPENDITURES USING FEDERAL FUNDS, INCLUDING THE AMERICAN RESCUE PLAN ACT

The Lexington-Fayette Urban County Government ("LFUCG") <u>may</u> use Federal funding to pay for the goods and/or services that are the subject matter of this bid. That Federal funding may include funds received by LFUCG under the American Rescue Plan Act of 2021. Expenditures using Federal funds require evidence of the contractor's compliance with Federal law. Therefore, by the signature below of an authorized company representative, you certify that the information below is understood, agreed, and correct. Any misrepresentations may result in the termination of the contract and/or prosecution under applicable Federal and State laws concerning false statements and false claims.

The bidder (hereafter "bidder," or "contractor") agrees and understands that in addition to all conditions stated within the attached bid documents, the following conditions will also apply to any Agreement entered between bidder and LFUCG, if LFUCG uses Federal funds, including but not limited to funding received by LFUCG under the American Rescue Plan Act ("ARPA"), toward payment of goods and/or services referenced in this bid. The bidder also agrees and understands that if there is a conflict between the terms included elsewhere in this Request for Proposal and the terms of this Amendment 1, then the terms of Amendment 1 shall control. The bidder further certifies that it can and will comply with these conditions, if this bid is accepted and an Agreement is executed:

- 1. Any Agreement executed as a result of acceptance of this bid may be governed in accordance with 2 CFR Part 200 and all other applicable Federal law and regulations and guidance issued by the U.S. Department of the Treasury.
- 2. Pursuant to 24 CFR § 85.43, any Agreement executed as a result of acceptance of this bid can be terminated if the contractor fails to comply with any term of the award. This Agreement may be terminated for convenience in accordance with 24 CFR § 85.44 upon written notice by LFUCG. Either party may terminate this Agreement with thirty (30) days written notice to the other party, in which case the Agreement shall terminate on the thirtieth day. In the event of termination, the contractor shall be entitled to that portion of total compensation due under this Agreement as the services rendered bears to the services required. However, if LFUCG suspects a breach of the terms of the Agreement and/or that the contractor is violating the terms of any applicable law governing the use of Federal funds, LFUCG may suspend the contractor's ability to receive payment by giving thirty (30) days' advance written notice. Further, either party may terminate this Agreement for cause shown with thirty (30) days written notice, which shall explain the party's cause for the termination. If the parties do not reach a settlement before the end of the 30 days, then the Agreement shall terminate on the thirtieth day. In the event of a breach, LFUCG reserves the right to pursue any and all applicable legal, equitable, and/or administrative remedies against the contractor.
- 3. The contractor will not discriminate against any employee or applicant for employment because of race, color, religion, sex, sexual orientation, gender identity, or national origin. The contractor will take affirmative action to ensure that applicants are employed and that employees are treated during employment without regard to their race, color, religion, sex, sexual orientation, gender identity, or national origin. Such action shall include, but not be limited to the following:
 - (1) Employment, upgrading, demotion, or transfer; recruitment or recruitment advertising; layoff or termination; rates of pay or other forms of compensation; and selection for training, including apprenticeship. The contractor agrees to post in conspicuous places, available to employees and applicants for employment, notices to be provided setting forth the provisions of this nondiscrimination clause.

- (2) The contractor will, in all solicitations or advertisements for employees placed by or on behalf of the contractor, state that all qualified applicants will receive consideration for employment without regard to race, color, religion, sex, sexual orientation, gender identity, or national origin.
- (3) The contractor will not discharge or in any other manner discriminate against any employee or applicant for employment because such employee or applicant has inquired about, discussed, or disclosed the compensation of the employee or applicant or another employee or applicant. This provision shall not apply to instances in which an employee who has access to the compensation information of other employees or applicants as a part of such employee's essential job functions discloses the compensation of such other employees or applicants to individuals who do not otherwise have access to such information, unless such disclosure is in response to a formal complaint or charge, in furtherance of an investigation, proceeding, hearing, or action, including an investigation conducted by the employer, or is consistent with the contractor's legal duty to furnish information.
- (4) The contractor will send to each labor union or representative of workers with which he has a collective bargaining agreement or other contract or understanding a notice to be provided advising the said labor union or workers' representatives of the contractor's commitments under this section and shall post copies of the notice in conspicuous places available to employees and applicants for employment.
- (5) The contractor will comply with all provisions of Executive Order 11246 of September 24, 1965, and of the rules, regulations, and relevant orders of the Secretary of Labor.
- (6) The contractor will furnish all information and reports required by Executive Order 11246 of September 24, 1965, and by rules, regulations, and orders of the Secretary of Labor, or pursuant thereto, and will permit access to his books, records, and accounts by the administering agency and the Secretary of Labor for purposes of investigation to ascertain compliance with such rules, regulations, and orders.
- (7) In the event of the contractor's noncompliance with the nondiscrimination clauses of this contract or with any of the said rules, regulations, or orders, this contract may be canceled, terminated, or suspended in whole or in part, and the contractor may be declared ineligible for further government contracts or federally assisted construction contracts in accordance with procedures authorized in Executive Order 11246 of September 24, 1965, and such other sanctions may be imposed and remedies invoked as provided in Executive Order 11246 of September 24, 1965, or by rule, regulation, or order of the Secretary of Labor, or as otherwise provided by law.
- (8) The contractor will include the portion of the sentence immediately preceding paragraph (1) and the provisions of paragraphs (1) through (8) in every subcontract or purchase order unless exempted by rules, regulations, or orders of the Secretary of Labor issued pursuant to section 204 of Executive Order 11246 of September 24, 1965, so that such provisions will be binding upon each subcontractor or vendor. The contractor will take such action with respect to any subcontract or purchase order as the administering agency may direct as a means of enforcing such provisions, including sanctions for noncompliance.

Provided, however, that in the event a contractor becomes involved in or is threatened with litigation with a subcontractor or vendor as a result of such direction by the administering agency, the contractor may request the United States to enter into such litigation to protect the interests of the United States.

- 4. If fulfillment of the contract requires the contractor to employ mechanic's or laborers, the contractor further agrees that it can and will comply with the following:
 - (1) Overtime requirements: No contractor or subcontractor contracting for any part of the contract work which may require or involve the employment of laborers or mechanics shall require or permit any such laborer or mechanic in any workweek in which he or she is employed on such work to work in excess of forty hours in such a workweek unless such laborer or mechanic receives compensation at a rate not less than one and onehalf times the basic rate of pay for all hours worked in excess of forty hours in such a workweek.
 - (2) Violation: liability for unpaid wages; liquidated damages. In the event of any violation of the clause set forth in paragraph (1) of this section, the contractor and any subcontractor responsible therefor shall be liable for

the unpaid wages. In addition, such contractor and subcontractor shall be liable to the United States (in the case of work done under contract for the District of Columbia or a territory, to such District or to such territory) for liquidated damages. Such liquidated damages shall be computed with respect to each individual laborer or mechanic, including watchmen and guards, employed in violation of the clause set forth in paragraph (1) of this section, in the sum of \$10 for each calendar day on which such individual was required or permitted to work in excess of the standard workweek of forty hours without payment of the overtime wages required by the clause set forth in paragraph (1) of this section.

- (3) Withholding for unpaid wages and liquidated damages. LFUCG shall upon its own action or upon written request of an authorized representative of the Department of Labor withhold or cause to be withheld, from any moneys payable on account of work performed by the contractor or subcontractor under any such contract or any other federal contract with the same prime contractor, or any other federally-assisted contract subject to the Contract Work Hours and Safety Standards Act, which is held by the same prime contractor, such sums as may be determined to be necessary to satisfy any liabilities of such contractor or subcontractor for unpaid wages and liquidated damages as provided in the clause set forth in paragraph (2) of this section.
- (4) Subcontracts. The contractor or subcontractor shall insert in any subcontracts the clauses set forth in paragraph (1) through (4) of this section and also a clause requiring the subcontractors to include these clauses in any lower-tier subcontracts. The prime contractor shall be responsible for compliance by any subcontractor or lower-tier subcontractor with the clauses set forth in paragraphs (1) through (4) of this section.
- 5. The contractor shall comply with all applicable standards, orders, or regulations issued pursuant to the Clean Air Act, as amended, 42 U.S.C. § 7401 et seq.
- 6. The contractor shall report each violation to LFUCG and understands and agrees that LFUCG will, in turn, report each violation as required to assure notification to the Treasury Department and the appropriate Environmental Protection Agency Regional Office.
- 7. The contractor shall include these requirements in numerical paragraphs 5 and 6 in each subcontract exceeding \$100,000 financed in whole or in part with Federal funding.
- 8. The contractor shall comply with all applicable standards, orders, or regulations issued pursuant to the Federal Water Pollution Control Act, as amended, 33 U.S.C. § 1251 et seq.
- 9. The contractor shall report each violation to LFUCG and understands and agrees that LFUCG will, in turn, report each violation as required to assure notification to the Treasury Department and the appropriate Environmental Protection Agency Regional Office.
- 10. The contractor shall include these requirements in numerical paragraphs 8 and 9 in each subcontract exceeding \$100,000 financed in whole or in part with Federal funds.
- 11. The contractor shall comply with all applicable standards, orders, or regulations issued pursuant to the Federal Water Pollution Control Act, as amended, 33 U.S.C. § 1251 et seq.
- 12. The contractor shall report each violation to LFUCG and understands and agrees that LFUCG will, in turn, report each violation as required to assure notification to the Treasury Department and the appropriate Environmental Protection Agency regional office.
- 13. The contractor shall include these requirements in numerical paragraphs 11 and 12 in each subcontract exceeding \$100,000 financed in whole or in part with American Rescue Plan Act funds.
- 14. The contractor shall include this language in any subcontract it executes to fulfill the terms of this bid: "the subgrantee, contractor, subcontractor, successor, transferee, and assignee shall comply with Title VI of the Civil Rights

Act of 1964, which prohibits recipients of federal financial assistance from excluding from a program or activity, denying benefits of, or otherwise discriminating against a person on the basis of race, color, or national origin (42 U.S.C. § 2000d et seq.), as implemented by the Department of the Treasury's Title VI regulations, 31 CFR Part 22, which are herein incorporated by reference and made a part of this contract (or agreement). Title VI also includes protection to persons with 'Limited English Proficiency' in any program or activity receiving federal financial assistance, 42 U.S.C. § 2000d et seq., as implemented by the Department of the Treasury's Title VI regulations, 31 CFR Part 22, and herein incorporated by reference and made a part of this contract or agreement."

- 15. Contractors who apply or bid for an award of \$100,000 or more shall file the required certification that it will not and has not used federal appropriated funds to pay any person or organization for influencing or attempting to influence an officer or employee of any agency. Each tier certifies to the tier above that it will not and has not used federal appropriated funds to pay any person or organization for influencing or attempting to influence an officer or employee of any agency, a member of Congress, officer or employee of Congress, or an employee of a member of Congress in connection with obtaining any federal contract, grant, or any other award covered by 31 U.S.C. § 1352. Each tier shall also disclose any lobbying with non-federal funds that takes place in connection with obtaining any federal award. Such disclosures are forwarded from tier to tier, up to the recipient. The required certification is included here:
 - a. The undersigned certifies, to the best of his or her knowledge and belief, that:
 - (1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.
 - (2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions.
 - (3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.
 - b. This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.
- 16. The contractor acknowledges and certifies that it has not been debarred or suspended and further acknowledges and agrees that it must comply with regulations regarding debarred or suspended entities in accordance with 24 CFR § 570.489(l). Funds may not be provided to excluded or disqualified persons.
- 17. The contractor agrees and certifies that to the greatest extent practicable, it will prefer the purchase, acquisition, and use of all applicable goods, products or materials produced in the United States, in conformity with 2 CFR 200.322 and/or section 70914 of Public Law No. 117-58, §§ 70901-52, also known as the Infrastructure Investment and Jobs Act, whichever is applicable.

- 18. The contractor agrees and certifies that all activities performed pursuant to any Agreement entered as a result of the contractor's bid, and all goods and services procured under that Agreement, shall comply with 2 C.F.R. § 200.216 (Prohibition on certain telecommunications and video surveillance services and equipment) and 2 C.F.R. 200 § 200..323 (Procurement of recovered materials), to the extent either section is applicable.
- 19. If this bid involves construction work for a project totaling \$10 million or more, then the contractor further agrees that all laborers and mechanics, etc., employed in the construction of the public facility project assisted with funds provided under this Agreement, whether employed by contractor, or contractor's contractors, or subcontractors, shall be paid wages complying with the Davis-Bacon Act (40 U.S.C. 3141-3144). Contractor agrees that all of contractor's contractors and subcontractors will pay laborers and mechanics the prevailing wage as determined by the Secretary of Labor and that said laborers and mechanics will be paid not less than once a week. The contractor agrees to comply with the Copeland Anti- Kick Back Act (18 U.S.C. § 874) and its implementing regulations of the U.S. Department of Labor at 29 CFR part 3 and part 5. The contractor further agrees to comply with the applicable provisions of the Contract Work Hours and Safety Standards Act (40 U.S.C. Section 327-333), and the applicable provisions of the Fair Labor Standards Act of 1938, as amended (29 U.S.C. et seq.). Contractor further agrees that it will report all suspected or reported violations of any of the laws identified in this paragraph to LFUCG.

alunites Curvinato	12/27/2022		
Signature	Date		

RISK MANAGEMENT PROVISIONS INSURANCE AND INDEMNIFICATION

INDEMNIFICATION AND HOLD HARMLESS PROVISION

- (1) It is understood and agreed by the parties that Contractor hereby assumes the entire responsibility and liability for any and all damages to persons or property caused by or resulting from or arising out of any act or omission on the part of Contractor or its employees, agents, servants, owners, principals, licensees, assigns or subcontractors of any tier (hereinafter "CONTRACTOR") under or in connection with this agreement and/or the provision of goods or services and the performance or failure to perform any work required thereby.
- CONTRACTOR shall indemnify, save, hold harmless and defend the Lexington-Fayette Urban County Government and its elected and appointed officials, employees, agents, volunteers, and successors in interest (hereinafter "LFUCG") from and against all liability, damages, and losses, including but not limited to, demands, claims, obligations, causes of action, judgments, penalties, fines, liens, costs, expenses, interest, defense costs and reasonable attorney's fees that are in any way incidental to or connected with, or that arise or are alleged to have arisen, directly or indirectly, from or by CONTRACTOR's performance or breach of the agreement and/or the provision of goods or services provided that: (a) it is attributable to personal injury, bodily injury, sickness, or death, or to injury to or destruction of property (including the loss of use resulting therefrom), or to or from the negligent acts, errors or omissions or willful misconduct of the CONTRACTOR; and (b) not caused solely by the active negligence or willful misconduct of LFUCG.
- (3) In the event LFUCG is alleged to be liable based upon the above, CONTRACTOR shall defend such allegations and shall bear all costs, fees and expenses of such defense, including but not limited to, all reasonable attorneys' fees and expenses, court costs, and expert witness fees and expenses, using attorneys approved in writing by LFUCG, which approval shall not be unreasonably withheld.
- (4) These provisions shall in no way be limited by any financial responsibility or insurance requirements, and shall survive the termination of this agreement.
- (5) LFUCG is a political subdivision of the Commonwealth of Kentucky. CONTRACTOR acknowledges and agrees that LFUCG is unable to provide indemnity or otherwise save, hold harmless, or defend the CONTRACTOR in any manner.

FINANCIAL RESPONSIBILITY

BIDDER/CONTRACTOR understands and agrees that it shall demonstrate the ability to assure compliance with the above Indemnity provisions and these other risk management provisions prior to final acceptance of its bid and the commencement of any work or provision of goods.

INSURANCE REQUIREMENTS

YOUR ATTENTION IS DIRECTED TO THE INSURANCE REQUIREMENTS BELOW, AND YOU MAY NEED TO CONFER WITH YOUR INSURANCE AGENTS, BROKERS, OR CARRIERS TO DETERMINE IN ADVANCE OF SUBMISSION OF A RESPONSE THE AVAILABILITY OF THE INSURANCE COVERAGES AND ENDORSEMENTS REQUIRED HEREIN. IF YOU FAIL TO COMPLY WITH THE INSURANCE REQUIREMENTS BELOW, YOU MAY BE DISQUALIFIED FROM AWARD OF THE CONTRACT.

Required Insurance Coverage

BIDDER/CONTRACTOR shall procure and maintain for the duration of this contract the following or equivalent insurance policies at no less than the limits shown below and cause its subcontractors to maintain similar insurance with limits acceptable to LFUCG in order to protect LFUCG against claims for injuries to persons or damages to property which may arise from or in connection with the performance of the work hereunder by CONTRACTOR. The cost of such insurance shall be included in any bid:

<u>Coverage</u>	<u>Limits</u>
General Liability (Insurance Services Office Form CG 00 01)	\$1 million per occurrence, \$2 million aggregate or \$2 million combined single limit
Auto Liability	\$1 million per occurrence
Worker's Compensation	Statutory
Employer's Liability	\$100,000

Excess Liability \$1 million per occurrence

Professional (E&O) Liability \$1 million per claim

The policies above shall contain the following conditions:

- a. All Certificates of Insurance forms used by the insurance carrier shall be properly filed and approved by the Department of Insurance for the Commonwealth of Kentucky (DOI). LFUCG shall be named as an additional insured in the General Liability Policy and Commercial Automobile Liability Policy using the Kentucky DOI approved forms.
- b. The General Liability Policy shall be primary to any insurance or self-insurance retained by LFUCG.
- c. The General Liability Policy shall include Premises and Operations coverage unless it is deemed not to apply by LFUCG.
- d. The General Liability Policy shall include Employment Practices Liability coverage or an endorsement in a minimum amount of \$1 million unless it is deemed not to apply by LFUCG.
- e. The Policy shall include Umbrella/Excess Liability coverage in the amount of \$1 million per occurrence, \$1 million aggregate, unless it is deemed not to apply by LFUCG.
- f. LFUCG shall be provided at least 30 days advance written notice via certified mail, return receipt requested, in the event any of the required policies are canceled or non-renewed.
- g. Said coverage shall be written by insurers acceptable to LFUCG and shall be in a form acceptable to LFUCG. Insurance placed with insurers with a rating classification of no less than Excellent (A or A-) and a financial size category of no less than VIII, as defined by the most current Best's Key Rating Guide shall be deemed automatically acceptable.

Renewals

After insurance has been approved by LFUCG, evidence of renewal of an expiring policy must be submitted to LFUCG, and may be submitted on a manually signed renewal endorsement form. If the policy or carrier has changed, however, new evidence of coverage must be submitted in accordance with these Insurance Requirements.

<u>Deductibles and Self-Insured Programs</u>

LEXINGTON-FAYETTE URBAN COUNTY GOVERNMENT, DIVISION OF RISK MANAGEMENT, 200 EAST MAIN STREET, LEXINGTON, KENTUCKY 40507 NO LATER THAN A MINIMUM OF FIVE (5) WORKING DAYS PRIOR TO THE RESPONSE DATE. Self-insurance programs, deductibles, and self-insured retentions in insurance policies are subject to separate approval by Lexington-Fayette Urban County Government's Division of Risk Management, upon review of evidence of BIDDER/CONTRACTOR's financial capacity to respond to claims. Any such programs or retentions must provide LFUCG with at least the same protection from liability and defense of suits as would be afforded by first-dollar insurance coverage

Safety and Loss Control

CONTRACTOR shall comply with all applicable federal, state, and local safety standards related to the performance of its works or services under this Agreement and take necessary action to protect the life, health and safety and property of all of its personnel on the job site, the public, and LFUCG.

Verification of Coverage

BIDDER/CONTRACTOR agrees to furnish LFUCG with all applicable Certificates of Insurance signed by a person authorized by the insurer to bind coverage on its behalf prior to final award, and if requested, shall provide LFUCG copies of all insurance policies, including all endorsements.

Right to Review, Audit and Inspect

CONTRACTOR understands and agrees that LFUCG may review, audit and inspect any and all of its records and operations to insure compliance with these Insurance Requirements.

DEFAULT

BIDDER/CONTRACTOR understands and agrees that the failure to comply with any of these insurance, safety, or loss control provisions shall constitute default and that LFUCG may elect at its option any single remedy or penalty or any combination of remedies and penalties, as available, including but not limited to purchasing insurance and charging BIDDER/CONTRACTOR for any such insurance premiums purchased, or suspending or terminating the work.

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Part I – Qualifications

1. **Company**

- 1.1 The company shall have an office and/or technical staff, permanently located within one (1) hour travel distance.
- 1.2 The company shall have adequate full-time, qualified service personnel in their employment. The company shall submit the names and qualifications of the service personnel with the bid.
- 1.3 Alarm monitoring companies shall submit a copy of their UL and FM certification with the bid
- 1.4 The company shall be set up to receive and dispatch qualified service personnel to emergency calls, twenty-four (24) hours per day, three hundred sixty-five (365) days per year. This procedure must not involve answering machines.
- 1.5 The company shall meet all requirements contained in this specification and will be held responsible for the quality/completeness of all work performed as part of this specification. Submit a list of three (3) fire alarm maintenance projects that are similar in scope to this one (provide name, phone numbers, contact).

2. Service Personnel

- 2.1 Service personnel shall wear clothing that clearly identifies them as employees of the company selected to provide this service.
- 2.2 All company personnel must have and shall display at all times while in LFUCG facilities a valid company picture identification that includes their name.
- 2.3 Service vehicles shall be clearly identified with company name.
- 2.4 Service personnel shall follow all required sign-in/sign-out procedures at various LFUCG facilities where they are required.

3. **Testing/Inspection Personnel**

3.1 The company shall employ testing/inspection personnel (identified in the following as inspection personnel) as full-time fire alarm inspectors, shall be active Kentucky State Certified Fire Alarm Inspectors (bid must include a copy of each technicians Kentucky State Fire Alarm certificate). Inspectors shall be National Institute for Certification in Engineering

- Technologies (NICET) certified in the field of Fire Protection Engineering Technology, Level II minimum (bid must include a copy of each technicians NICET certificate).
- 3.2 Inspection personnel shall display Kentucky Certified Inspector license, with certification number, at all times while on the job site.
- 3.3 The Lead Inspector shall be trained and capable to perform the following procedures to all LFUCG fire alarm systems.
 - 3.3.1 Put the system into, perform, and take the system out of Walk Test Mode.
 - 3.3.2 Accurately measure system voltage readings during alarm and trouble conditions and verify their correctness.
 - 3.3.3 Program all LFUCG fire alarm systems.

Part 2 - Services

1. Test and Inspections

- 1.1 Tests and inspections of the fire alarm system shall include, but not be limited to, the following:
 - 1.1.1 NFPA 72 (Current adopted edition): <u>Inspection, Testing and Maintenance.</u> Note: The KY Standards of Safety requires quarterly inspections of medical facilities.
- 1.2 The apparent low bidder shall be required to demonstrate that they have the equipment for doing sensitivity testing. They will also be required to demonstrate that their service personnel who will be assigned to perform this work for the LFUCG can perform the sensitivity testing properly and accurately, prior to the LFUCG making recommendation for award of the bid.
- 1.3 The required fire alarm report form referenced in NFPA 72 (current adopted edition), shall be filled out and signed by qualified inspection personnel, as defined in this specification, while on-site.
 - 1.3.1 One original copy shall be mailed to Division of Facilities Management, Attn: Jason Nichols, 1555 Old Frankfort Pike, Lexington, Kentucky 40504.

- 1.3.2 One copy shall be turned over to the witnessing facility personnel.
- 1.3.3 One copy shall be forwarded to the State Fire Marshal's Office within ten (10) working days of the inspection/test.
- 1.3.4 One copy must be archived and made available to the LFUCG upon request.
- 1.4 All equipment and reporting forms needed to perform the required testing and reporting per NFPA 72 shall be provided by the contractor. Record of inspection that documents the above tests, included but not limited to, individual peripheral device locations (for ALL peripheral devices), along with smoke detector sensitivity test results (ratings versus actual) and individual loop test results (normal verses abnormal) must be submitted to the Lexington-Fayette Urban County Government Division of Facilities Management within thirty (30) calendar days of completing the test/inspection.
- 1.5 One Hundred Percent (100%) tests and inspections shall be performed, utilizing two (2) company qualified personnel. The representatives shall be present during the entire inspection and utilize adequate test equipment supplied by company.
- 1.6 Inspections shall be scheduled and coordinated as needed at least <u>one</u>
 (1) week in advance with LFUCG Division of Facilities Management for respective government Facilities and (1) week in advance with LFUCG Division of Parks and Recreation for respective Park Facilities.
- 1.7 Testing at Government Center and Police Headquarters must be performed before 8:00 AM.
- 1.8 Company shall be capable of making inspection repairs while on-site based on the submitted unit pricing for all additional services considered to be above and beyond the scope of this RFP.
- 1.9 Company shall provide labor to perform program changes to system control units during the scheduled test and inspection.
- 1.10 In addition to the above, all tests/inspections shall be completed per the Kentucky Standards of Safety current adopted edition, NFPA 72 current adopted edition, and NFPA 101 Life Safety Code current adopted edition.

2. Emergency Services

- 2.1 Labor shall be provided to complete the following:
 - 2.1.1 Labor to complete repairs to the entire fire alarm system control units (including but not limited to: multiplex control panels, fire alarm control units and enunciators).
 - 2.1.2 Labor to isolate system-wiring troubles.
 - 2.1.3 Labor to troubleshoot fire alarm systems.
 - 2.1.4 Labor to replace failed peripheral equipment.
 - 2.1.5 Labor to maintain all systems in good working order in accordance with the highest standards of workmanship.
 - 2.1.6 Labor to assist owner in isolating problems that arise from interconnection of systems, (i.e., Elevator recall, AHU shutdown, etc.).
- 2.2 Company shall provide all mileage and travel necessary for unlimited emergency service calls to the job-site.
- 2.3 Company shall provide emergency repairs within one (1) hour following receipt of call from LFUCG personnel.
- 2.4 Company shall provide emergency 24-hour service, 24-hours per day, 365 days per year.

Part 3 - Services Not Included

 Optional retrofits, exterior painting or refinishing of the equipment and/or surrounding surfaces, repair of damages from any cause other than ordinary use, including acts of nature (except those systems that are warranted against lightning) or vandalism, repair and maintenance of water flow and tamper switches.

Part 4 - Parts/Equipment

1. **Inventory**

1.1 The company shall have in local office inventory an adequate supply of replacement parts and devices to maintain all of the LFUCG fire alarm systems (i.e., compatible smoke detectors, batteries and CPU's, power supplies, zone signal circuits, digital dialers, and annunciator boards).

- 1.2 The service personnel shall have in their vehicle inventory an adequate supply of replacement parts/equipment.
- 1.3 The company shall be capable of securing parts in a timely manner to ensure that all LFUCG fire alarm systems are operating and reduce fire watch cost.
- 1.4 All replacement parts and software should be universal and approved by Director, Facilities Management.

Part 5 - Owner Responsibility

1. Access

- 1.1 Owner agrees to provide free access to the equipment to be maintained.
- 1.2 Owner agrees to provide suitable electrical service.
- 1.3 Owner agrees that in the event of an emergency or system failure, reasonable safety precautions will be taken to protect the life and property during the period of time the contractor is first notified of the emergency or failure and until such time as the contractor notifies the owner that the system is operational.

Part 6 - Notes

- 1. The initial term of this contract shall be for Forty One and Half (41.5) months effective January 16, 2023 and ending on June 30, 2026. The final effective date of the contract shall be provided via issuance of an official letter of Notice to Proceed (NTP) by the Division of Purchasing contingent upon Council's full review and approval. Both parties may extend this contract for an additional five (5) one-year periods at the same terms and conditions upon written agreement, providing such agreement is executed in writing not less than thirty (30) days before the expiration of the original contract term.
- 2. LFUCG reserves the right to add or delete facilities to this contract utilizing the monthly rates provided by the contractor.
- 3. The contract price may be adjusted at renewal based on increase or decrease of straight-time hourly labor cost for alarm system maintenance in this locale. The Lexington-Fayette Urban County Government may agree to such adjustment or may elect to re-bid the contract at that time.
- 4. This document constitutes the entire agreement between the Contractor and the Lexington-Fayette Urban County Government. If Contractor has a standard

service contract, *he/she* may request that the Urban County Government execute said contract; however, if any term or condition of said contract conflicts with the terms and conditions set forth herein, the terms and conditions established herein shall prevail.

Lexington-Fayette Urban County Government



Fire Alarm System Services Cost Proposal Div. of Facilities & Fleet Management

	Cost Proposal for Fire Alarm Systems - Division of Facilities & Fleet Management						
#	Facility	Fire Alarm Panel Type	Central Monitoring Station UL & FM Listed for Fire and Security	Service on Demand	Annual 100% Fire Test & Inspection (Per NFPA current edition)	Proposed Monthly Cost	Total Annual Cost
1	Audrey Grevious	Notifier AFP-200	Х	Х	Х	\$48.52	\$582.25
2	Black & Williams Center (1)	Silent Knight 5208	X	Х	Х	\$68.52	\$822.25
3	Carnegie Center	Simplex 4002	Х	Х	Х	\$48.52	\$582.25
4	Charles Young Center (1)	Simplex 4001	Х	Х	Х	\$48.52	\$582.25
5	Coleman House	Simplex 4004	Х	Х	Х	\$48.52	\$582.25
6	Downtown Art Center	Simplex 4010	Х	Х	Х	\$48.52	\$582.25
7	Family Care Center	Simplex 4005	Х	Х	Х	\$48.52	\$582.25
8	Fleet Services(1)	Simplex 4010	Х	Х	Х	\$48.52	\$582.25
9	Government Center	Simplex 4100	Х	Х	Х	\$48.52	\$582.25
10	Government Center Annex	Potter PFC-6030	Х	Х	Х	\$48.52	\$582.25
11	KY State Theater (1)/Switow Blg	Simplex 4002/Silent Knight	Х	Х	Х	\$48.52	\$582.25
12	Lexington Senior Center (1)	Simplex 4004	Х	Х	Х	\$48.52	\$582.25
13	Lyric (1)	Notifier DVC	Х	Х	Х	\$68.52	\$822.25
14	Operational Adjustment Center	Simplex 4004	Х	Х	Х	\$48.52	\$582.25
15	Phoenix Building	Simplex 4100	Х	Х	Х	\$48.52	\$582.25
16	Police Headquarters	Simplex 4005	Х	Х	Х	\$48.52	\$582.25
17	Police Mounted Patrol	Potter PFC-6030	Х	Х	Х	\$48.52	\$582.25
18	Police Roll Call East (Gainesway) (1)	Simplex 4004	Х	Х	Х	\$48.52	\$582.25
19	Police Roll Call West (OFP)	Silent Knight 5207	Х	Х	Х	\$48.52	\$582.25
20	Police Safety City	Simplex 4001	Х	Х	Х	\$48.52	\$582.25
21	Police Tech	Honeywell	Х	Х	Х	\$68.52	\$822.25

	Cost Proposal for Fire Alarm Systems - Division of Facilities & Fleet Management						
#	Facility	Fire Alarm Panel Type	Central Monitoring Station UL & FM Listed for Fire and Security	Service on Demand	Annual 100% Fire Test & Inspection (Per NFPA current edition)	Proposed Monthly Cost	Total Annual Cost
22	PSOC	Notifier NFW-100x	Х	Х	Х	\$48.52	\$582.25
23	Recycling Center - MRF	Notifier NFW-100x	Х	Х	Х	\$48.52	\$582.25
24	Versailles Rd Campus (1)	Siemens FS-250	Х	Х	Х	\$68.52	\$822.25
25	Waste Management (675 Byrd Thurman)	Sensiscan 1000	Х	Х	Х	\$69.35	\$832.25
26	Water Quality Building	Simplex 4005	Х	Х	Х	\$48.52	\$582.25
					Total:	\$1,362.37	\$16,348.50

(1) Denotes locations with security alarms

Hourly Rates for Additional Services (\$/Hr.)						
Туре	Standard Hours (\$/Hr.)	Non-Standard Hours and Holidays (\$/Hr.)				
Hardwired non-software based equipment:	\$155.00	\$232.50				
Software based equipment	\$155.00	\$232.50				

Instruction to Bidders
All cells highlighted in yellow must be filled
out by the contractor's authorized
representative.
The proposed monthly fee will be utilized as
Unit Price for needed adjustments for
new/additional facilities as well as removal
of any decommissioned facility.

IAll hilling must be submitted to:	LFUCG Division of Facilities Management, Attn: Jason Nichols, 1555 Old Frankfort Pike, Lexington, KY 40504

Lexington-Fayette Urban County Government



Security System Services Cost Proposal Div. of Parks & Recreation

Instruction to Bidders

All cells highlighted in yellow must be filled out by the contractor's authorized representative.

The proposed monthly fee will be utilized as Unit Price for needed adjustments for new/additional facilities as well as removal of any decommissioned facility.

Cost Proposal for Security Systems - Division of Parks & Recreation **Central Monitoring Proposed Monthly Total Annual Facility** Station UL & FM Listed Cost Cost for Fire and Security Bell House Χ \$24.08 \$289.00 Χ Carver Center \$24.08 \$289.00 Χ Castlewood Comm Ctr (Tubby's CH) \$24.08 \$289.00 Χ **Dunbar Community Center** \$24.08 \$289.00 Gainesway Community Center Χ \$24.08 \$289.00 Kearney Hills GC Clubhouse Χ \$24.08 \$289.00 Χ \$24.08 \$289.00 Kenwick Community Center Χ \$24.08 \$289.00 Lakeside GC Cart Barn Lakeside GC Clubhouse Χ \$24.08 \$289.00 Χ McConnell Springs Nature Ctr. \$24.08 \$289.00 Masterson Station Base Χ \$24.08 \$289.00 Χ \$24.08 \$289.00 Meadowbrook GC Pro Shop Χ North Base \$24.08 \$289.00 Χ Picadome Admin Office Building \$24.08 \$289.00 Picadome GC Cart Barn Χ \$24.08 \$289.00 Χ Picadome GC Pro Shop \$24.08 \$289.00 Χ Picadome Turf Maintenance Bldg \$24.08 \$289.00 South Base Χ \$24.08 \$289.00 Tates Creek GC Pro Shop Χ \$24.08 \$289.00 Total: \$192.67 \$5,491.00

(1) Denotes locations with security alarms

Hourly Rates for Additional Services (\$/Hr.)

Туре	Standard Hours (\$/Hr.)	Non-Standard Hours and Holidays (\$/Hr.)		
Certified Technician	\$155.00	\$232.50		

All billings must be submitted to:

LFUCG Division of Parks & Recreation, 600 Laramie Drive, Lexington, KY 40503



NATIONAL INSTITUTE FOR CERTIFICATION IN ENGINEERING TECHNOLOGIES®

Providing Certification Programs Since 1961

BE IT KNOWN THAT

Kenneth W. Calvin

IS HEREBY AWARDED CERTIFICATION AT

Level II

IN FIRE ALARM SYSTEMS

BASED UPON SUCCESSFUL DEMONSTRATION OF REQUISITE KNOWLEDGE, EXPERIENCE AND WORK PERFORMANCE AS SET FORTH BY THIS INSTITUTE.

Certification Valid Through 10/01/2024

CERTIFICATION NUMBER 135176

CHAIRMAN OF THE NICET BOARD OF GOVERNORS

A DIVISION OF THE NATIONAL SOCIETY OF PROFESSIONAL ENGINEERS





Approval Letter

Name:

Kenneth W. Calvin

Date of Award:

08/14/2021

Certification Number:

135176

Certification Expire Date:

10/01/2024

It is my pleasure to inform you that recertification has been granted as follows:

FIRE ALARM SYSTEMS LEVEL II

You will find your new wallet card attached to the bottom of this letter. Also enclosed with this letter is your new certificate. Your new three-year period of certification is printed on both your wallet card and your certificate. You will need to accumulate another 90 continuing professional development points to continue your certification beyond this new expiration date.

Prior to removing the wallet card from this letter, we advise that you make a copy of the letter for your files as the complete letter may be required as proof of certification.

The interest you have shown in your career development by obtaining professional recognition and status through certification is most commendable. On behalf of the Board of Governors, please accept our congratulations and best wishes.

Very truly yours,

Charles "Chip" E. Hollis Jr

Charles & Halli J

Senior Director

remove card slowly



NATIONAL INSTITUTE FOR CERTIFICATION IN ENGINEERING TECHNOLOGIES®

Kenneth W. Calvin

Fire Alarm Systems Level II

Kenneth W. Calvin 4235 ClarkStore Sinking Fork Rd Crofton, KY 42217

CERT NO. 135176 VALID THROUGH 10/01/2024



CERTIFICATE OF LIABILITY INSURANCE

3/1/2023

date (mm/dd/yyyy) 1/5/2023

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

	and definitions deed not define rights to the definitions in near the definition of the definition (a).					
PRODUCER	Lockton Companies	CONTACT NAME:				
	Kansas City MO 64112-1906 (816) 960-9000 kctsu@lockton.com	PHONE FAX (A/C, No, Ext): (A/C, No):				
		E-MAIL ADDRESS:				
		INSURER(S) AFFORDING COVERAGE	NAIC#			
		INSURER A: Zurich American Insurance Company	16535			
INSURED 1485404	i in name i na a sin Ei i co, in c	INSURER B: Starr Surplus Lines Insurance Company	13604			
		INSURER C: Associated Industries Insurance Co, Inc.	23140			
		INSURER D :				
		INSURER E :				
		INSURER F:				

COVERAGES CERTIFICATE NUMBER: 19233691 REVISION NUMBER: XXXXXXX

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR		TYPE OF INSURANCE	ADDL	SUBR	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP	LIMITS	
С	X	COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR	Y	N	AES103804807	4/1/2022	3/1/2023	EACH OCCURRENCE \$ 1,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000	
								MED EXP (Any one person) \$ 15,00 PERSONAL & ADV INJURY \$ 1,000	
	GEN	POLICY X PRO- POLICY X JECT LOC						GENERAL AGGREGATE \$ 2,000 PRODUCTS - COMP/OP AGG \$ 2,000	,000
A	AUT	OTHER: FOMOBILE LIABILITY	Y	N	BAP2929963-01	3/1/2022	3/1/2023	COMBINED SINGLE LIMIT (Ea accident) \$ 2,000	,000
	X	ANY AUTO OWNED SCHEDULED AUTOS ONLY AUTOS						BODILY INJURY (Per person) \$ Include BODILY INJURY (Per accident) \$ Include Include BODILY INJURY (Per accident) \$ Include BODILY INJURY (Per accident) \$ Include BODILY INJURY (Per person) \$ Include BODILY INJURY (Per accident) \$ Induction BODILY (Per a	led
	X	HIRED AUTOS ONLY X NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident) \$ Include AGGREGATE \$ 2,000	
В	X	UMBRELLA LIAB X OCCUR EXCESS LIAB CLAIMS-MADE	N	N	1000586993211	4/1/2022	3/1/2023	EACH OCCURRENCE \$ 5,000 AGGREGATE \$ 5,000	,000
A	AND	DED X RETENTION \$ 10,000 RKERS COMPENSATION EMPLOYERS' LIABILITY Y/N		N	WC2929961-01	3/1/2022	3/1/2023	X PER OTH- STATUTE ER	
	OFFI (Mar	PROPRIETOR/PARTNER/EXECUTIVE IN INCREMENTAL INCREMENTA	N/A					E.L. EACH ACCIDENT \$ 1,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000 E.L. DISEASE - POLICY LIMIT \$ 1,000	,000
	DES	ĆRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT \$ 1,000	,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
LFUCG IS NAMED AS ADDITIONAL INSURED, AS RESPECTS TO GENERAL LIABILITY AND AUTOMOBILE LIABILITY ARISING OUT OF THE ACTIVITIES PERFORMED BY OR
ON BEHALF OF THE NAMED INSURED, WHERE COVERAGE SHALL BE PRIMARY AND NON-CONTRIBUTORY TO ANY POLICY HELD BY THE ADDITIONAL INSURED AS
REQUIRED BY WRITTEN AGREEMENT, AND SUBJECT TO POLICY TERMS, CONDITIONS, AND EXCLUSIONS. FOR CANCELLATION FOR ANY REASON OTHER THAN
NONPAYMENT OF PREMIUM, THE INSURER(S) WILL SEND 30 DAYS NOTICE OF CANCELLATION TO THE CERTIFICATE HOLDER.

CERTIFICATE HOLDER	CANCELLATION

19233691

LFUCG DIVISION OF BUILDING INSPECTION 200 E. MAIN ST. LEXINGTON, KY 40507 SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

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