Tracking No. <u>17080263</u>

CONTRACT DOCUMENTS

CITY OF LINCOLN, NEBRASKA, LANCASTER COUNTY, LINCOLN - LANCASTER COUNTY PUBLIC BUILDING COMMISSION

Annual Service
Fire Alarm Panel Inspection, Testing and Repair
Quote No. 5682

Protex Central, Inc. 6775 South 188th Street Omaha, NE 68137 (402) 592-8225

CITY OF LINCOLN-LANCASTER COUNTY, NEBRASKA and LINCOLN-LANCASTER COUNTY PUBLIC BUILDING COMMISSION CONTRACT TERMS

THIS CONTRACT, made and entered into by and between Protex Central, Inc., 6775 South

188th Street, Omaha, NE 68137, hereinafter called "Contractor", and the City of Lincoln, Nebraska, a municipal corporation, and the County of Lancaster, Nebraska, a political subdivision of the State of Nebraska, and the Lincoln-Lancaster County Public Building Commission hereinafter called the "Owners".

WHEREAS, the Owners have caused to be prepared, in accordance with law, Specifications, Plans, and other Contract Documents for the Work herein described, and has approved and adopted said documents and has caused to be published an advertisement for and in connection with said Work, to-wit:

Fire Alarm Panel Inspection, Testing and Repair, Quote No. 5682

and,

WHEREAS, the Contractor, in response to such advertisement, has submitted to the Owners, in the manner and at the time specified, a sealed Proposal/Supplier Response in accordance with the terms of said advertisement; and,

WHEREAS, the Owners, in the manner prescribed by law has publicly opened, read aloud, examined, and canvassed the Proposals/Supplier Responses submitted in response to such advertisement, and as a result of such canvass has determined and declared the Contractor to be the lowest responsible bidder for the said Work for the sum or sums named in the Contractor's Proposal/Supplier Responses, a copy thereof being attached to and made a part of this Contract;

NOW, THEREFORE, in consideration of the sums to be paid to the Contractor and the mutual covenants herein contained, the Contractor and the Owners have agreed and hereby agree as follows:

The Contractor agrees to (a) furnish all tools, equipment, supplies, superintendence, transportation, and other accessories, services, and facilities; (b) furnish all materials, supplies, and equipment specified to be incorporated into and form a permanent part of the complete work; (c) provide and perform all necessary labor in a substantial and workmanlike manner and in accordance with the provisions of the Contract Documents; and (d) execute and complete all Work included in and covered by the Owners' award of this Contract to the Contractor, such award being based on the acceptance by the Owner of the Contractor's Proposal, or part thereof, as follows:

Agreement to Line Items 3 & 4, 15 & 16, 21-34, 39-56 and 59-80 of Contractor's Proposal

2. The Owners agree to pay to the Contractor for the performance of the Work embraced in this Contract, the Contractor agrees to accept as full compensation therefore, the following sums and prices for all Work covered by and included in the Contract award and designated above, payment thereof to be made in the manner provided by the Owners:

The Owners will pay for products/service, according to the Line Item pricing as listed in Contractors Proposal/Supplier Response, a copy thereof being attached to and made a part of this Contract. The Owners shall order on an as-needed basis for the duration of the contract. The cost of products or services for County agencies shall not exceed \$3,000.00 during the contract term without approval by the Board of Commissioners. The cost of products or services for City Departments shall not exceed \$5,500.00 during the contract term without approval. The cost of products or services for the Public Building Commission shall not exceed \$2,700.00 during the contract term without approval by the Board of the Public Building Commission.

- 3. <u>Equal Employment Opportunity</u>. In connection with the carrying out of this project, the contractor shall not discriminate against any employee or applicant for employment because of race, color, religion, sex, national origin, ancestry, disability, age or marital status. 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, national origin, ancestry, disability, age or marital status. Such action shall include, but not be limited to, the following: employment, upgrading, demotion or transfer; recruitment or recruitment advertising; layoff or termination; rates of pay or other compensation; and selection for training, including apprenticeship.
- 4. <u>E-Verify</u>. In accordance with Neb. Rev. Stat. 4-108 through 4-114, the contractor agrees to register with and use a federal immigration verification system, to determine the work eligibility status of new employees performing services within the state of Nebraska. A federal immigration verification system means the electronic verification of the work authorization program of the Illegal Immigration Reform and Immigrant Responsibility Act of 1996, 8 U.S.C. 1324 a, otherwise known as the E-Verify Program, or an equivalent federal program designated by the United States Department of Homeland Security or other federal agency authorized to verify the work eligibility status of a newly hired employee pursuant to the Immigration Reform and Control Act of 1986. The Contractor shall not discriminate against any employee or applicant for employment to be employed in the performance of this section pursuant to the requirements of state law and 8 U.S.C.A 1324b. The contractor shall require any subcontractor to comply with the provisions of this section.
- 5. <u>Termination</u>. This Contract may be terminated by the following:
 - 5.1) <u>Termination for Convenience.</u> Either party may terminate this Contract upon thirty (30) days written notice to the other party for any reason without penalty.
 - 5.2) <u>Termination for Cause</u>. The Owners may terminate the Contract for cause if the Contractor:
 - 5.2.1) Refuses or fails to supply the proper labor, materials and equipment necessary to provide services and/or commodities.
 - 5.2.2) Disregards Federal, State or local laws, ordinances, regulations, resolutions or orders.
 - 5.2.3) Otherwise commits a substantial breach or default of any provision of the Contract Document. In the event of a substantial breach or default the Owners will provide the Contractor written notice of said breach or default and allow the Contractor ten (10) days from the date of the written notice to cure such breach or default. If said breach or default is not cured within ten (10) days from the date of notice, then the contract shall terminate.
- 6. Independent Contractor. It is the express intent of the parties that this contract shall not create an employer-employee relationship. Employees of the Contractor shall not be deemed to be employees of the Owners and employees of the Owners shall not be deemed to be employees of the Contractor. The Contractor and the Owners shall be responsible to their respective employees for all salary and benefits. Neither the Contractor's employees nor the Owners' employees shall be entitled to any salary, wages, or benefits from the other party, including but not limited to overtime, vacation, retirement benefits, workers' compensation, sick leave or injury leave. Contractor shall also be responsible for maintaining workers' compensation insurance, unemployment insurance for its employees, and for payment of all federal, state, local and any other payroll taxes with respect to its employees' compensation.
- 7. Owner Inclusion. It is understood and agreed by all parties that "Owner/s" shall include the City of Lincoln, Lancaster County, Nebraska and Lincoln-Lancaster County Public Building Commission. Whenever in the Contract documents, including the instructions to bidders, specifications, insurance requirements, bonds, and terms and conditions or any other documents which are a part of the Contract, a singular entity is referenced (i.e., "the City" or "the County" or "Building Commission") it shall mean the "Owners" encompassing the City of Lincoln, Lancaster County and Lincoln-Lancaster County Building Commission.

- 8. <u>Audit Provision</u>: The Service Provider shall be subject to an audit and shall, upon request, make available to the Public Building Commission or a contract auditor hired by the Public Service Commission, copies of all financial and performance related records and materials related to this Agreement, as allowed by law.
- 9. <u>Period of Performance</u>. This Contract shall be effective upon execution by all parties. The term of the Contract shall be a one (1) year term with option to renew for three (3) additional one (1) year terms.
- 10. The Contract Documents comprise the Contract, and consist of the following:
 - 1. Contract Terms
 - 2. Accepted Proposal/Response
 - 3. Insurance Certificate
 - 4. Addendum Number 1
 - 5. Fire Alarm Test Reports
 - 6. Special Provisions
 - 7. Specifications
 - 8. Proprietary Information for Bids/Quotes/RFP's
 - 9. Instructions to Bidders
 - 10. Insurance Requirements
 - 11. Sales Tax Exemption Form 13

(Note: This form cannot be used for the WATER Division of the City of Lincoln. The WATER Division is taxable per Reg. 066.14A or applicable laws.)

The herein above mentioned Contract Documents form this Contract and are a part of the Contract as if hereto attached. Said documents which are not attached to this document may be viewed at: lincoln.ne.gov - Keyword: Bid - Awarded or Closed bids.

The Contractor and the Owners hereby agree that all the terms and conditions of this Contract shall be binding upon themselves, and their heirs, administrators, executors, legal and personal representatives, successors, and assigns.

IN WITNESS WHEREOF, the Contractor and the Owners do hereby execute this contract upon completion of signatures on:

Vendor Signature Page
City of Lincoln Signature Page
Lancaster County Signature Page
City of Lincoln-Lancaster County Public Building Commission Signature Page

Vendor Signature Page

CONTRACT
Annual Service
Fire Alarm Panel Inspection, Testing and Repair
Quote No. 5682
City of Lincoln, Lancaster County and
City of Lincoln-Lancaster County Public Building Commission
Protex Central, Inc.

EXECUTION BY CONTRACTOR

IF A CORPORATION:		
Attest:		Protex Central, Inc. Name of Corporation
Secretary	_ Seal	Address By: Duly Authorized Official General Manager Legal Title of Official
IF OTHER TYPE OF ORGANIZATION:		Name of Organization Type of Organization Address
		By: Member By: Member
F AN INDIVIDUAL:		Name
		Address
		Signature

City of Lincoln Signature Page

CONTRACT
Annual Service
Fire Alarm Panel Inspection, Testing and Repair
Quote No. 5682
City of Lincoln, Lancaster County and
City of Lincoln-Lancaster County Public Building Commission
Protex Central, Inc.

EXECUTION BY THE CITY OF LINCOLN, NEBRASKA

ATTEST:	<u>CITY OF LINCOLN, NEBRASKA</u>
City Clerk	Finance Director
	Approved by Directorial Order No
	datad

C-17-0754

Lancaster County Signature Page

CONTRACT Annual Service Fire Alarm Panel Inspection, Testing and Repair Quote No. 5682 City of Lincoln, Lancaster County and City of Lincoln-Lancaster County Public Building Commission Protex Central, Inc.

EXECUTION BY LANCASTER COUNTY, NEBRASKA

Contract Approved as to Form:	Lancaster, Nebraska
Deputy Lancaster County Attorney	-
	dated

Lincoln-Lancaster County Public Building Commission Signature Page

CONTRACT
Annual Service
Fire Alarm Panel Inspection, Testing and Repair
Quote No. 5682
City of Lincoln, Lancaster County and
City of Lincoln-Lancaster County Public Building Commission
Protex Central, Inc.

EXECUTION BY LINCOLN-LANCASTER COUNTY PUBLIC BUILDING COMMISSION

ATTEST:	
Public Building Commission Attorney	Chairperson, Public Building Commission
	dated

City of Lincoln/Lancaster County (Lincoln Purchasing) Supplier Response

Bid Information	n	Contact Info	ormation	Ship to Information
Bid Creator Email Phone	Rachelle Hinze, Buyer rhinze@lincoln.ne.gov 1 (402) 441-8313	Address	Purchasing 440 S. 8th St. Lincoln, NE 68508	Address
Fax	1 (402) 441-6513	Contact	Rachelle Hinze, Buyer Purchasing	Contact
Bid Number Title	5682 Addendum 1 Annual Service - Fire Alarm Panel Inspection, Testing and Repair	Department Building	t Suite 200	Department Building Floor/Room
Bid Type Issue Date Close Date	Quote 8/4/2017 11:45 AM (CT) 8/16/2017 02:00:00 PM (CT)	Telephone Fax Email	(402) 441-8313 (402) 441-6513 rhinze@lincoln.ne.gov	Telephone Fax Email
Supplier Inform	nation			
Company Address	Protex Central, Inc. 6775 South 188th Street			
Contact Department Building Floor/Room	Omaha, NE 68137 George Bristol			
Telephone Fax Email Submitted Total	(402) 592-8225 (402) 592-8222 george.bristol@protexcentral.ne 8/15/2017 11:55:14 AM (CT) \$15,196.00	et		
By submitting	your response, you certify that yo	ou are author	ized to represent and bind y	our company.
Signature Jac	cob Mitchell Lipker		Email jacob.l	ipker@protexcentral.net
Supplier Notes	5			
Bid Notes				
Added Addend	dum 1			
Bid Activities				
Bid Messages				
Bid Attributes Please review	the following and respond where	e necessary		

5682 Addendum 1 - Protex Central, Inc. - Page 1 of 15

#	Name	Note	Response
1	U.S. Citizenship Attestation	Is your company legally considered an Individual or Sole Proprietor: YES or NO	Yes
		As a Vendor who is legally considered an Individual or a Sole Proprietor I hereby understand and agree to comply with the requirements of the United States Citizenship Attestation Form, available at: http://www.sos.ne.gov/business/notary/citizenforminfo.html	
		All awarded Vendors who are legally considered an Individual or a Sole Proprietor must complete the form and submit it with contract documents at time of execution.	
		If a Vendor indicates on such attestation form that he or she is a qualified alien, the Vendor agrees to provide the US Citizenship and Immigration Services documentation required to verify the Vendor's lawful presence in the United States using the Systematic Alien Verification for Entitlements (SAVE) Program.	
		Vendor further understands and agrees that lawful presence in the United States is required and the Vendor may be disqualified or the Contract terminated if such lawful presence cannot be verified as required by Neb. Rev. Stat. 4-108.	
2	Instructions to Bidders	I acknowledge reading and understanding the Instructions to Bidders.	Yes
3	Insurance Requirements and Endorsements	Vendor agrees to provide insurance coverage for each checked box on the Insurance Clause document in the Bid Attachments including the submission of the Certificate of ACORD and the applicable endorsements.	Yes
		Insurance Certificate and required Endorsements are required at time of contract execution by the vendor.	
		Vendors are strongly encouraged to send the insurance requirements and endorsement information to their insurance agent prior to bid close in order to expedite the contract execution process	
4	Bid Documents	I acknowledge and accept that it is my responsibility as a Bidder to promptly notify the Purchasing Department Staff prior to the close of the bid of any ambiguity, inconsistency or error which I may discover upon examination of the bid documents including, but not limited to the Specifications.	Yes
5	Specifications	I acknowledge reading and understanding the specifications.	Yes
6	Bid award	I acknowledge and understand that the City, County and/or Public Building Commission reserves the right to award bids item-by-item, with or without alternates/options, by groups, or "lump sum" such as shall best serve the requirements and interests of the City, County and/or Public Building Commission.	Yes
		If your pricing is based on an all-or-nothing basis, please indicate so in the Supplier Notes section of your E-Bid response.	

7	License Attachments	I acknowledge attaching any applicable licenses for the services provided in the suppliers response attachment section in the bid.	Yes
8	Special Provision Term Contract Provisions	I acknowledge reading and understanding the Special Provision Term Contract Provisions.	Yes
9	Sample Contract	I acknowledge reading and understanding the sample contract.	Yes
10	Term Clause of Contract	I acknowledge that the term of the contract is for a one (1) year term with the option for three (3) additional one (1) year renewals from the date of the executed contract. (a) Are your bid prices firm for the first one (1) year contract period. YES or NO (b) Are your bid prices subject to escallation/de-escalation YES or NO (c) If (b), state period for which prices will remain firm: through	A. Yes / B. Yes / C. One year from start of agreement.
11	Percentage Markup of Material, Excluding Freight.	Percentage Markup of Material, Excluding Freight. ONLY ENTER A NUMBER IN THE SPACE PROVIDED! An invoice showing the material type AND cost of material from 3rd Party Vendor may be requested with the final invoice to verify quoted price.	30%
12	Hourly Rate	List your hourly rate for service work.	\$98.00
13	After Hours/Emergency Hours/Weekend Rate	List your hourly labor rate for emergency and weekends service work. After Hour \$ Emergency \$ Weekend \$	After Hours: \$147.00 / Emergency: \$196.00 / Weekend: \$196.00
14	Purchase Order, Contract and Delivery Contact	The City/County Purchasing Department issues Purchase Orders and Contracts via email to a designated contact person of the awarded Vendor. This designee will be the primary contact with the department through the delivery of the product/services. Please list the name, email address and phone number of the person who will be the contact person for the PO to be awarded.	Jacob M. Lipker - 402-705-9089 - jacob.lipker@protexcentral.net - Service Sales Representative - Hastings
15	Reference	List three references of this type of service. References shall include a contact person, address, telephone number and a listing of the type of work completed for them.	1. JBS Swift - Grand Island - (308) 384-5330 - John Beverly - All Inspections / 2. Lincoln Regional Center - Lincoln - (402) 479-5453 - Kurt Anderson - Inspections / 3. Offutt Air Force Base - Offut AFB - (402) 297-1100 - Phil Post - Inspections, Service, install.
16	Contact	Name of person submitting this bid:	Jacob M. Lipker - 402-705-9089 - jacob.lipker@protexcentral.net - Service Sales Representative - Hastings
17	Electronic Signature	Please check here for your electronic signature.	Yes
18	Agreement to Addendum No. 1	Respondent hereby certifies that the change set forth in this addendum has been incorporated in their proposal and is part of their bid. Reason: See Bid Attachments section for Addendum information.	Yes

#	Qty	UOM	Description	Response
1	1	EA	Semi- Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for 605 Building - 605 South 10th	\$708.00
	Item N	otes:		
	Supplie	er Notes:		
2	1	EA	Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for 605 Building - 605 South 10th	\$2,100.00
	Item N	otes:		
	Supplie	er Notes:		
3	1	EA	Semi-Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for Information Services Building - 233 South 10th	\$48.00
	Item N	otes:		
	Supplie	er Notes:		
4	1	EA	Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for Information Services Building - 233 South 10th	\$100.00
	Item N	otes:		
	Supplie	er Notes:		
5	1	EA	Semi-Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for Crisis Center - 825 J Street	\$78.00
	Item N	otes:		
	Supplie	er Notes:		
6	1	EA	Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for Crisis Center - 825 J Street	\$210.00
	Item N	otes:		
	Supplie	er Notes:		
7	1	EA	Semi-Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for County City Building - 555 South 10th	\$148.00
	Item N	otes:		
		er Notes:		

8	1	EA	Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for County City Building - 555 South 10th	\$420.00
	Item N	Notes:		
	Suppl	ier Notes:		
9	1	EA	Semi-Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for County Extension Building - 444 Cherrycreek Rd	\$78.00
	Item N	Notes:		
	Suppl	ier Notes:		
10	1	EA	Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for County Extension Building - 444 Cherrycreek Rd	\$210.00
	Item N	Notes:		
	Suppl	ier Notes:		
11	1	EA	Semi-Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for County Shop - 444 Cherrycreek Rd. Building C	\$148.00
	Item N	Notes:		
	Suppl	ier Notes:		
12	1	EA	Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for County Shop - 444 Cherrycreek Rd. Building C	\$280.00
	Item N	Notes:		
	Suppl	ier Notes:		
13	1	EA	Semi-Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for Courthouse Plaza - 633 South 9th	\$218.00
	Item N	Notes:		
	Suppl	ier Notes:		
14	1	EA	Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for Courthouse Plaza - 633 South 9th	\$630.00
	Item N	Notes:		
	Suppl	ier Notes:		

15	1	EA	Semi-Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for Aging Downtown Senior Center - 1005 "O" Street	\$48.00
	Item N	otes:		
	Suppli	er Notes:		
16	1	EA	Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for Aging Downtown Senior Center - 1005 "O" Street	\$100.00
	Item N	otes:		
	Suppli	er Notes:		
17	1	EA	Semi-Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for F Street Rec Center - 1225 F Street	\$148.00
	Item N	otes:		
	Suppli	er Notes:		
18	1	EA	Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for F Street Rec Center - 1225 F Street	\$280.00
	Item N	otes:		
	Suppli	er Notes:		
19	1	EA	Semi-Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for Hall of Justice - 575 South 10th Street	\$218.00
	Item N	otes:		
	Suppli	er Notes:		
20	1	EA	Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for Hall of Justice - 575 South 10th Street	\$630.00
	Item N	otes:		
	Suppli	er Notes:		
21	1	EA	Semi-Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for Anderson Library - 3635 Touzalin	\$48.00
	Item N	otes:		
	Suppli	er Notes:		

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22	1	EA	Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for Anderson Library - 3635 Touzalin	\$100.00
	Item N	Notes:		
	Suppl	ier Notes:		
23	1	EA	Semi-Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for Bennett Martin Library - 136 South 14th	\$218.00
	Item N	Notes:		
	Suppl	ier Notes:		
24	1	EA	Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for Bennett Martin Library - 136 South 14th	\$770.00
	Item N	Notes:		
	Suppl	ier Notes:		
25	1	EA	Semi-Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for Bess Walt Library - 6701 South 14th	\$48.00
	Item N	Notes:		
	Suppl	ier Notes:		
26	1	EA	Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for Bess Walt Library - 6701 South 14th	\$100.00
	Item N	Notes:		
	Suppl	ier Notes:		
27	1	EA	Semi-Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for Bethany Library - 1810 North Cotner	\$48.00
	Item N	Notes:		
	Suppl	ier Notes:		
28	1	EA	Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for Bethany Library - 1810 North Cotner	\$100.00
	Item N	Notes:		
	Suppl	ier Notes:		

29	1	EA	Semi-Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for Charles Gere Library - 2400 South 56th	\$48.00
	Item N	lotes:		
	Suppli	ier Notes:		
30	1	EA	Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for Charles Gere Library - 2400 South 56th	\$100.00
	Item N	lotes:		
	Suppli	er Notes:		
31	1	EA	Semi-Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for Loren Eiseley Library - 1530 Superior Street	\$78.00
	Item N	lotes:		
	Suppli	er Notes:		
32	1	EA	Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for Loren Eiseley Library - 1530 Superior Street	\$140.00
	Item N	lotes:		
	Suppli	ier Notes:		
33	1	EA	Semi-Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for South Branch Library - 2675 South Street	\$48.00
	Item N	lotes:		
	Suppli	er Notes:		
34	1	EA	Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for South Branch Library - 2675 South Street	\$100.00
	Item N	lotes:		
	Suppli	er Notes:		
35	1	EA	Semi-Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for Municipal Service Center - 901 West Bond	\$288.00
	Item N	lotes:		
	Suppli	ier Notes:		

36	1	EA	Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for Municipal Service Center - 901 West Bond	\$840.00
	Item N	lotes:		
	Supplier Notes:			
37	1	EA	Semi-Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for Municipal Service Center - 949 West Bond	\$148.00
	Item N	Item Notes:		
	Suppli	Supplier Notes:		
38	1	EA	Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for Municipal Service Center - 949 West Bond	\$420.00
	Item N	Item Notes:		
	Suppli	er Notes:		
39	1	EA	Semi-Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for NE Treatment Control Maintenance Shop - 7000 N 70th Street	\$48.00
	Item Notes:			
	Suppli	er Notes:		
40	1	EA	Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for NE Treatment Control Maintenance Shop - 7000 N 70th Street	\$100.00
	Item N	lotes:		
	Suppli	er Notes:		
41	1	EA	Semi-Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for TS Grit Handling Building - 2400 Theresa Street	\$48.00
	Item Notes:			
	Suppli	er Notes:		
42	1	EA	Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for TS Grit Handling Building - 2400 Theresa Street	\$100.00
	Item N	lotes:		
	Suppli	er Notes:		

43	1	EA	Semi-Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for TS Odor Control - 2400 Theresa Street	\$48.00
	Itom N	lotoo:	Control - 2400 Theresa Street	
	Item Notes:			
	Suppli	er Notes:		
44	1	EA	Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for TS Odor Control - 2400 Theresa Street	\$100.00
	Item N	Item Notes:		
	Suppli	Supplier Notes:		
45	1	EA	Semi-Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for NE Grit Facility - 7000 N 70th Street	\$48.00
	Item N	otes:		
	Suppli	er Notes:		
46	1	EA	Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for NE Grit Facility - 7000 N 70th Street	\$100.00
	Item Notes:			
	Suppli	er Notes:		
47	1	EA	Semi-Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for NE Blower Building - 7000 N 70th Street	\$48.00
	Item N	otes:		
	Suppli	er Notes:		
48	1	EA	Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for NE Blower Building - 7000 N 70th Street	\$100.00
	Item N	otes:		
	Suppli	er Notes:		
49	1	EA	Semi-Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for Wastewater Administration - 2400 Theresa Street	\$48.00
	Item N	otes:		
	Suppli	er Notes:		

50	1	EA	Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for Wastewater Administration - 2400 Theresa Street	\$100.00
	Item N	lotes:		
	Suppli	er Notes:		
51	1	EA	Semi-Annual Fire Alarm and Inspection, Testing and Maintenance for Property Management - 920 "O" Street	\$78.00
	Item N	lotes:		
	Suppli	er Notes:		
52	1	EA	Annual Fire Alarm and Inspection, Testing and Maintenance for Property Management - 920 "O" Street	\$210.00
	Item N	lotes:		
	Suppli	er Notes:		
53	1	EA	Semi-Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for Trabert Hall - 2202 South 11th Street	\$150.00
	Item Notes:			
	Suppli	er Notes:		
54	1	EA	Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for Trabert Hall - 2202 South 11th Street	\$350.00
	Item N	lotes:		
	Suppli	er Notes:		
55	1	EA	Semi-Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for Youth Service Center - 1700 Radcliff Street	\$288.00
	Item N	lotes:		
	Suppli	er Notes:		
56	1	EA	Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for Youth Service Center - 1700 Radcliff Street	\$840.00
	Item N	lotes:		
	Suppli	er Notes:		

57	1	EA	Semi-Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for Pioneers Park Prairie Interpretive Center - 3201 Coddington	\$78.00
	Item N	lotes:		
	Suppl	ier Notes:		
58	1	EA	Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for Pioneers Park Prairie Interpretive Center - 3201 Coddington	\$210.00
	Item N	lotes:		
	Suppl	ier Notes:		
59	1	EA	Semi-Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for Lancaster County Motor Vehicle - 625 North 46th Street	\$48.00
	Item N	lotes:		
	Suppl	ier Notes:		
60	1	EA	Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for Lancaster County Motor Vehicle - 625 North 46th Street	\$100.00
	Item Notes:			
	Suppl	ier Notes:		
61	1	EA	Semi- Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for K Street Complex - 440 South 8th	\$78.00
	Item N	lotes:		
	Suppl	ier Notes:		
62	1	EA	Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for K Street Complex - 440 South 8th	\$210.00
	Item N	lotes:		
	Suppl	ier Notes:		
63	1	EA	Semi- Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for Health Department	\$48.00
	Item N	lotes:		
	Suppl	ier Notes:		

64	1	EA	Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for Health Department	\$100.00
	Item N	lotes:		
	Suppl	er Notes:		
65	1	EA	Semi-Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for North 27th St. Police Department	\$48.00
	Item N	lotes:		
	Suppl	er Notes:		
66	1	EA	Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for North 27th St. Police Department	\$100.00
	Item N	lotes:		
	Suppl	er Notes:		
67	1	EA	Semi-Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for Carriage Park Garage	\$42.00
	Item Notes:			
	Suppl	er Notes:		
68	1	EA	Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for Carriage Park Garage	\$70.00
	Item N	lotes:		
	Suppl	er Notes:		
69	1	EA	Semi-Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for Center Park Garage	\$39.00
	Item N	lotes:		
	Suppl	er Notes:		
70	1	EA	Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for Center Park Garage	\$39.00
	Item N	lotes:		
	Suppl	er Notes:		

_				
71	1	EA	Semi-Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for Que Place Garage	\$48.00
	Item N	lotes:		
	Suppl	ier Notes:		
72	1	EA	Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for Que Place Garage	\$100.00
	Item N	Notes:		
	Suppl	ier Notes:		
73	1	EA	Semi-Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for Market Place Garage	\$48.00
	Item N	lotes:		
	Suppl	ier Notes:		
74	1	EA	Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for Market Place Garage	\$100.00
	Item N	lotes:		
	Suppl	ier Notes:		
75	1	EA	Semi-Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for Lumber Works Garage	\$48.00
	Item N	lotes:		
	Suppl	ier Notes:		
76	1	EA	Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for Lumber Works Garage	\$100.00
	Item N	lotes:		
	Suppl	ier Notes:		
77	1	EA	Semi-Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for Green #2 Garage	\$48.00
	Item N	lotes:		
	Suppl	ier Notes:		

78	1	EA	Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for Green #2 Garage	\$100.00
	Item	Notes:		
	Supp	olier Notes:		
79	1	EA	Semi-Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for Red One Garage	\$48.00
	Item	Notes:		
	Supp	olier Notes:		
80	1	EA	Annual Fire Alarm and Equipment Inspection, Testing and Maintenance for Red One Garage	\$100.00
	Item	Notes:		
	Supp	olier Notes:		
			Response Total:	\$15,196.00



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 09/01/2017

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 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).

PRODUCER	1-800-247-7756	CONTACT	***	
Holmes Murphy & Assoc - WDM		NAME: PHONE (A/C, No, Ext):	FAX (A/C, No):	
PO Box 9207		E-MAIL ADDRESS:		
		INSURER(S) AFFORDING CO	VERAGE	NAIC#
Des Moines, IA 50306-9207		INSURER A: TRAVELERS IND CO OF AM	MER	25666
INSURED		INSURER B : MIDWEST BUILDERS CAS I	MUT CO	13126
Protex Central Inc. Attn: Kevin Turner		INSURER C: ATLANTIC SPECIALTY INS	s co	27154
P O Box 1467		INSURER D :		
1239 North Minnesota Avenue		INSURER E :		
Hastings, NE 68902		INSURER F:		~
COVEDACES	CERTIFICATE MUMBER, FORACCO			

COVERAGES CERTIFICATE NUMBER: 50708681 REVISION NUMBER:

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.

ISR .TR	TYPE OF INSURANCE	DDL SUBR	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	S
A	X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR		CO1500M613	04/01/17	04/01/18	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 1,000,000 \$ 500,000
						MED EXP (Any one person)	\$ 5,000
						PERSONAL & ADV INJURY	\$ 1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:	•				GENERAL AGGREGATE	\$ 2,000,000
	POLICY X PRO- X LOC			L		PRODUCTS - COMP/OP AGG	\$ 2,000,000
	OTHER:						\$
A.	AUTOMOBILE LIABILITY		8101500M613	04/01/17	04/01/18	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000
	X ANY AUTO					BODILY INJURY (Per person)	\$
	ALL OWNED SCHEDULED AUTOS					BODILY INJURY (Per accident)	\$
-	X HIRED AUTOS X NON-OWNED AUTOS					PROPERTY DAMAGE (Per accident)	\$
	X Comp \$1,000x Coll. \$1,000						\$
`	X UMBRELLA LIAB X OCCUR		CUP1500M613	04/01/17	04/01/18	EACH OCCURRENCE	\$ 5,000,000
	EXCESS LIAB CLAIMS-MADE					AGGREGATE	\$ 5,000,000
	DED X RETENTION \$ 10,000						\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY		17BWC1097	01/01/17	01/01/18	X PER OTH- STATUTE ER	· · · · · · · · · · · · · · · · · · ·
į	ANY PROPRIETOR/PARTNER/EXECUTIVE	1/A				E.L. EACH ACCIDENT	\$ 1,000,000
ſ	(Mandatory in NH) If yes, describe under					E.L. DISEASE - EA EMPLOYEE	\$ 1,000,000
_	DÉSCRIPTION OF OPERATIONS below					E.L. DISEASE - POLICY LIMIT	\$ 1,000,000
3	Inland Marine		710036354	04/01/17	04/01/18	Rented/Leased Equi	100,000
						Ded	1,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

City of Lincoln, Lancaster County, and Lincoln-Lancaster County Public Building Commission are Additional Insured on the General Liability and Auto Liability as required by written contract with the insured, per policy terms and conditions.

CERTIFICATE HOLDER	CANCELLATION
City of Lincoln; Lancaster County; Lincoln-Lancaster County Public Building Commission	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
555 S 10th St	AUTHORIZED REPRESENTATIVE
Lincoln, NE 68508 USA	Laure Lininger

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THIS ENDORSEMENT CHANGES THE POLICY, PLEASE READ IT CAREFULLY.

BLANKET ADDITIONAL INSURED – AUTOMATIC STATUS IF REQUIRED BY WRITTEN CONTRACT (CONTRACTORS)

This endorsement modifies insurance provided under the following: COMMERCIAL GENERAL LIABILITY COVERAGE PART

 The following is added to SECTION II – WHO IS AN INSURED:

Any person or organization that:

- You agree in a "written contract requiring insurance" to include as an additional insured on this Coverage Part; and
- b. Has not been added as an additional insured for the same project by attachment of an endorsement under this Coverage Part which includes such person or organization in the endorsement's schedule;

is an insured, but:

- a. Only with respect to liability for "bodily injury", "property damage" or "personal injury"; and
- b. Only as described in Paragraph (1), (2) or (3) below, whichever applies:
 - (1) If the "written contract requiring insurance" specifically requires you to provide additional insured coverage to that person or organization by the use of:
 - (a) The Additional Insured Owners, Lessees or Contractors – (Form B) endorsement CG 20 10 11 85; or
 - (b) Either or both of the following: the Additional Insured – Owners, Lessees or Contractors – Scheduled Person Or Organization endorsement CG 20 10 10 01, or the Additional Insured – Owners, Lessees or Contractors – Completed Operations endorsement CG 20 37 10 01;

the person or organization is an additional insured only if the injury or damage arises out of "your work" to which the "written contract requiring insurance" applies:

(2) If the "written contract requiring insurance" specifically requires you to provide additional insured coverage to that person or organization by the use of:

- (a) The Additional Insured Owners, Lessees or Contractors – Scheduled Person or Organization endorsement CG 20 10 07 04 or CG 20 10 04 13, the Additional Insured – Owners, Lessees or Contractors – Completed Operations endorsement CG 20 37 07 04 or CG 20 37 04 13, or both of such endorsements with either of those edition dates; or
- (b) Either or both of the following: the Additional Insured – Owners, Lessees or Contractors – Scheduled Person Or Organization endorsement CG 20 10, or the Additional Insured – Owners, Lessees or Contractors – Completed Operations endorsement CG 20 37, without an edition date of such endorsement specified;

the person or organization is an additional insured only if the injury or damage is caused, in whole or in part, by acts or omissions of you or your subcontractor in the performance of "your work" to which the "written contract requiring insurance" applies; or

- (3) If neither Paragraph (1) nor (2) above applies:
 - (a) The person or organization is an additional insured only if, and to the extent that, the injury or damage is caused by acts or omissions of you or your subcontractor in the performance of "your work" to which the "written contract requiring insurance" applies; and
 - (b) The person or organization does not qualify as an additional insured with respect to the independent acts or omissions of such person or organization.

COMMERCIAL GENERAL LIABILITY

- 2. The insurance provided to the additional insured by this endorsement is limited as follows:
 - a. If the Limits of Insurance of this Coverage Part shown in the Declarations exceed the minimum limits of liability required by the "written contract requiring insurance", the insurance provided to the additional insured will be limited to such minimum required limits of liability. For the purposes of determining whether this limitation applies, the minimum limits of liability required by the "written contract requiring insurance" will be considered to include the minimum limits of liability of any Umbrella or Excess liability coverage required for the additional insured by that "written contract requiring insurance". This endorsement will not increase the limits of insurance described in Section III - Limits Of Insurance.
 - b. The insurance provided to the additional insured does not apply to "bodily injury", "property damage" or "personal injury" arising out of the rendering of, or failure to render, any professional architectural, engineering or surveying services, including:
 - (1) The preparing, approving, or failing to prepare or approve, maps, shop drawings, opinions, reports, surveys, field orders or change orders, or the preparing, approving, or failing to prepare or approve, drawings and specifications; and
 - (2) Supervisory, inspection, architectural or engineering activities.
 - c. The insurance provided to the additional insured does not apply to "bodily injury" or "property damage" caused by "your work" and included in the "products-completed operations hazard" unless the "written contract requiring insurance" specifically requires you to provide such coverage for that additional insured during the policy period.
- 3. The insurance provided to the additional insured by this endorsement is excess over any valid and collectible other insurance, whether primary, excess, contingent or on any other basis, that is available to the additional insured. However, if the "written contract requiring insurance" specifically requires that this insurance apply on a primary basis or a primary and non-contributory basis, this insurance is primary to other insurance available to the additional insured under which that person or organization qualifies as a named insured, and we will not share with that other insurance. But the insurance provided to the additional insured by this endorsement still is excess over any valid

- and collectible other insurance, whether primary, excess, contingent or on any other basis, that is available to the additional insured when that person or organization is an additional insured, or is any other insured that does not qualify as a named insured, under such other insurance.
- 4. As a condition of coverage provided to the additional insured by this endorsement:
 - a. The additional insured must give us written notice as soon as practicable of an "occurrence" or an offense which may result in a claim. To the extent possible, such notice should include:
 - (1) How, when and where the "occurrence" or offense took place;
 - (2) The names and addresses of any injured persons and witnesses; and
 - (3) The nature and location of any injury or damage arising out of the "occurrence" or offense.
 - b. If a claim is made or "suit" is brought against the additional insured, the additional insured must:
 - Immediately record the specifics of the claim or "suit" and the date received; and
 - (2) Notify us as soon as practicable.

The additional insured must see to it that we receive written notice of the claim or "suit" as soon as practicable.

- c. The additional insured must immediately send us copies of all legal papers received in connection with the claim or "suit", cooperate with us in the investigation or settlement of the claim or defense against the "suit", and otherwise comply with all policy conditions.
- d. The additional insured must tender the defense and indemnity of any claim or "suit" to any provider of other insurance which would cover the additional insured for a loss we cover under this endorsement. However, this condition does not affect whether the insurance provided to the additional insured by this endorsement is primary to other insurance available to the additional insured which covers that person or organization as a named insured as described in Paragraph 3. above.
- 5. The following is added to the **DEFINITIONS** Section:

"Written contract requiring insurance" means that part of any written contract or agreement under which you are required to include a person or or-

COMMERCIAL GENERAL LIABILITY

ganization as an additional insured on this Coverage Part, provided that the "bodily injury" and "property damage" occurs, and the "personal injury" is caused by an offense committed, during the policy period and:

- **a.** After the signing and execution of the contract or agreement by you; and
- b. While that part of the contract or agreement is in effect.

WAIVER OF OUR RIGHT TO RECOVER FROM OTHERS ENDORSEMENT

We have the right to recover our payments from anyone liable for an injury covered by this policy. We will not enforce our right against the person or organization named in the Schedule. (This agreement applies only to the extent that you perform work under a written contract that requires you to obtain this agreement from us.)

This agreement shall not operate directly or indirectly to benefit anyone not named in the Schedule.

Schedule

Any person or organization that you perform work for that is liable for an injury, covered by this policy, that prior to the injury has a written contract requiring a waiver of our right to recover from them. This endorsement does not apply where prohibited by law.

> This endorsement changes the policy to which it is attached and is effective on the date issued unless otherwise stated. (The information below is required only when this endorsement is issued subsequent to preparation of the policy.)

Endorsement Effective

Insured

01/01/2017

Policy No. 17BWC1097

Endorsement No. WC 00 03 13

Premium \$ 25,616.27

Insurance Company MIDWEST BUILDERS' CASUALTY

Protex Central, Inc.

1100 Walnut Street, Suite 3010 Kansas City, MO 64106 (800) 374-7798

Carrier Code: 32131

Countersigned by

Protex Central, Inc. 3305 104th Street, Urbandale, 1A 50322

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

BUSINESS AUTO EXTENSION ENDORSEMENT

This endorsement modifies insurance provided under the following:

BUSINESS AUTO COVERAGE FORM

GENERAL DESCRIPTION OF COVERAGE – This endorsement broadens coverage. However, coverage for any injury, damage or medical expenses described in any of the provisions of this endorsement may be excluded or limited by another endorsement to the Coverage Part, and these coverage broadening provisions do not apply to the extent that coverage is excluded or limited by such an endorsement. The following listing is a general coverage description only. Limitations and exclusions may apply to these coverages. Read all the provisions of this endorsement and the rest of your policy carefully to determine rights, duties, and what is and is not covered.

- A. BROAD FORM NAMED INSURED
- **B. BLANKET ADDITIONAL INSURED**
- C. EMPLOYEE HIRED AUTO
- D. EMPLOYEES AS INSURED
- E. SUPPLEMENTARY PAYMENTS INCREASED LIMITS
- F. HIRED AUTO -- LIMITED WORLDWIDE COV-ERAGE -- INDEMNITY BASIS
- G. WAIVER OF DEDUCTIBLE GLASS

PROVISIONS

A. BROAD FORM NAMED INSURED

The following is added to Paragraph A.1., Who Is An Insured, of SECTION II — COVERED AUTOS LIABILITY COVERAGE:

Any organization you newly acquire or form during the policy period over which you maintain 50% or more ownership interest and that is not separately insured for Business Auto Coverage. Coverage under this provision is afforded only until the 180th day after you acquire or form the organization or the end of the policy period, whichever is earlier.

B. BLANKET ADDITIONAL INSURED

The following is added to Paragraph c. in A.1., Who Is An Insured, of SECTION II – COVERED AUTOS LIABILITY COVERAGE:

Any person or organization who is required under a written contract or agreement between you and that person or organization, that is signed and executed by you before the "bodily injury" or "property damage" occurs and that is in effect during the policy period, to be named as an additional insured is an "insured" for Covered Autos Liability Coverage, but only for damages to which

- H. HIRED AUTO PHYSICAL DAMAGE LOSS OF USE INCREASED LIMIT
- I. PHYSICAL DAMAGE TRANSPORTATION EXPENSES INCREASED LIMIT
- J. PERSONAL PROPERTY
- K. AIRBAGS
- L. NOTICE AND KNOWLEDGE OF ACCIDENT OR LOSS
- M. BLANKET WAIVER OF SUBROGATION
- N. UNINTENTIONAL ERRORS OR OMISSIONS

this insurance applies and only to the extent that person or organization qualifies as an "insured" under the Who Is An Insured provision contained in Section II.

C. EMPLOYEE HIRED AUTO

 The following is added to Paragraph A.1., Who Is An Insured, of SECTION I! - COV-ERED AUTOS LIABILITY COVERAGE:

An "employee" of yours is an "insured" while operating an "auto" hired or rented under a contract or agreement in an "employee's" name, with your permission, while performing duties related to the conduct of your business.

- The following replaces Paragraph b. in B.5., Other Insurance, of SECTION IV - BUSI-NESS AUTO CONDITIONS:
 - b. For Hired Auto Physical Damage Coverage, the following are deemed to be covered "autos" you own:
 - (1) Any covered "auto" you lease, hire, rent or borrow; and
 - (2) Any covered "auto" hired or rented by your "employee" under a contract in an "employee's" name, with your

COMMERCIAL AUTO

permission, while performing duties related to the conduct of your business.

However, any "auto" that is leased, hired, rented or borrowed with a driver is not a covered "auto".

D. EMPLOYEES AS INSURED

The following is added to Paragraph A.1., Who Is An Insured, of SECTION II – COVERED AUTOS LIABILITY COVERAGE:

Any "employee" of yours is an "insured" while using a covered "auto" you don't own, hire or borrow in your business or your personal affairs.

E. SUPPLEMENTARY PAYMENTS - INCREASED LIMITS

- The following replaces Paragraph A.2.a.(2), of SECTION II – COVERED AUTOS LIABIL-ITY COVERAGE:
 - (2) Up to \$3,000 for cost of bail bonds (including bonds for related traffic law violations) required because of an "accident" we cover. We do not have to furnish these bonds.
- The following replaces Paragraph A.2.a.(4), of SECTION II – COVERED AUTOS LIABIL-ITY COVERAGE:
 - (4) All reasonable expenses incurred by the "insured" at our request, including actual loss of earnings up to \$500 a day because of time off from work.

F. HIRED AUTO - LIMITED WORLDWIDE COV-ERAGE - INDEMNITY BASIS

The following replaces Subparagraph (5) in Paragraph B.7., Policy Period, Coverage Territory, of SECTION IV — BUSINESS AUTO CONDITIONS:

(5) Anywhere in the world, except any country or jurisdiction while any trade sanction, embargo, or similar regulation imposed by the United States of America applies to and prohibits the transaction of business with or within such country or jurisdiction, for Covered Autos Liability Coverage for any covered "auto" that you lease, hire, rent or borrow without a driver for a period of 30 days or less and that is not an "auto" you lease, hire, rent or borrow from any of your "employees", partners (if you are a partnership), members (if you are a limited liability company) or members of their households.

- (a) With respect to any claim made or "suit" brought outside the United States of America, the territories and possessions of the United States of America, Puerto Rico and Canada:
 - (i) You must arrange to defend the "insured" against, and investigate or settle any such claim or "suit" and keep us advised of all proceedings and actions.
 - (ii) Neither you nor any other involved "insured" will make any settlement without our consent.
 - (iii) We may, at our discretion, participate in defending the "insured" against, or in the settlement of, any claim or "suit".
 - (iv) We will reimburse the "insured" for sums that the "insured" legally must pay as damages because of "bodily injury" or "property damage" to which this insurance applies, that the "insured" pays with our consent, but only up to the limit described in Paragraph C., Limits Of Insurance, of SECTION II COVERED AUTOS LIABILITY COVERAGE.
 - (v) We will reimburse the "insured" for the reasonable expenses incurred with our consent for your investigation of such claims and your defense of the "insured" against any such "suit", but only up to and included within the limit described in Paragraph C., Limits Of Insurance, of SECTION II COVERED AUTOS LIABILITY COVERAGE, and not in addition to such limit. Our duty to make such payments ends when we have used up the applicable limit of insurance in payments for damages, settlements or defense expenses.
- (b) This insurance is excess over any valid and collectible other insurance available to the "insured" whether primary, excess, contingent or on any other basis.
- (c) This insurance is not a substitute for required or compulsory insurance in any country outside the United States, its territories and possessions, Puerto Rico and Canada.

You agree to maintain all required or compulsory insurance in any such country up to the minimum limits required by local law. Your failure to comply with compulsory insurance requirements will not invalidate the coverage afforded by this policy, but we will only be liable to the same extent we would have been liable had you complied with the compulsory insurance requirements.

(d) It is understood that we are not an admitted or authorized insurer outside the United States of America, its territories and possessions, Puerto Rico and Canada. We assume no responsibility for the furnishing of certificates of insurance, or for compliance in any way with the laws of other countries relating to insurance.

G. WAIVER OF DEDUCTIBLE - GLASS

The following is added to Paragraph D., Deductible, of SECTION III – PHYSICAL DAMAGE COVERAGE:

No deductible for a covered "auto" will apply to glass damage if the glass is repaired rather than replaced.

H. HIRED AUTO PHYSICAL DAMAGE – LOSS OF USE – INCREASED LIMIT

The following replaces the last sentence of Paragraph A.4.b., Loss Of Use Expenses, of SECTION III – PHYSICAL DAMAGE COVERAGE:

However, the most we will pay for any expenses for loss of use is \$65 per day, to a maximum of \$750 for any one "accident".

I. PHYSICAL DAMAGE - TRANSPORTATION EXPENSES - INCREASED LIMIT

The following replaces the first sentence in Paragraph A.4.a., Transportation Expenses, of SECTION III – PHYSICAL DAMAGE COVERAGE:

We will pay up to \$50 per day to a maximum of \$1,500 for temporary transportation expense incurred by you because of the total theft of a covered "auto" of the private passenger type.

J. PERSONAL PROPERTY

The following is added to Paragraph A.4., Coverage Extensions, of SECTION III – PHYSICAL DAMAGE COVERAGE:

Personal Property

We will pay up to \$400 for "loss" to wearing apparel and other personal property which is:

(1) Owned by an "insured"; and

(2) In or on your covered "auto".

This coverage applies only in the event of a total theft of your covered "auto".

No deductibles apply to this Personal Property coverage.

K. AIRBAGS

The following is added to Paragraph B.3., Exclusions, of SECTION III — PHYSICAL DAMAGE COVERAGE:

Exclusion 3.a. does not apply to "loss" to one or more airbags in a covered "auto" you own that inflate due to a cause other than a cause of "loss" set forth in Paragraphs A.1.b. and A.1.c., but only:

- a. If that "auto" is a covered "auto" for Comprehensive Coverage under this policy;
- The airbags are not covered under any warranty; and
- c. The airbags were not intentionally inflated.

We will pay up to a maximum of \$1,000 for any one "loss".

L. NOTICE AND KNOWLEDGE OF ACCIDENT OR LOSS

The following is added to Paragraph A.2.a., of SECTION IV – BUSINESS AUTO CONDITIONS:

Your duty to give us or our authorized representative prompt notice of the "accident" or "loss" applies only when the "accident" or "loss" is known to:

- (a) You (if you are an individual):
- (b) A partner (if you are a partnership);
- (c) A member (if you are a limited liability company);
- (d) An executive officer, director or insurance manager (if you are a corporation or other organization); or
- (e) Any "employee" authorized by you to give notice of the "accident" or "loss".

M. BLANKET WAIVER OF SUBROGATION

The following replaces Paragraph A.5., Transfer Of Rights Of Recovery Against Others To Us, of SECTION IV — BUSINESS AUTO CONDITIONS:

5. Transfer Of Rights Of Recovery Against Others To Us

We waive any right of recovery we may have against any person or organization to the extent required of you by a written contract signed and executed prior to any "accident" or "loss", provided that the "accident" or "loss" arises out of operations contemplated by

COMMERCIAL AUTO

such contract. The waiver applies only to the person or organization designated in such contract.

N. UNINTENTIONAL ERRORS OR OMISSIONS

The following is added to Paragraph B.2., Concealment, Misrepresentation, Or Fraud, of SECTION IV – BUSINESS AUTO CONDITIONS:

The unintentional omission of, or unintentional error in, any information given by you shall not prejudice your rights under this insurance. However this provision does not affect our right to collect additional premium or exercise our right of cancellation or non-renewal.

Addendum #1 ISSUE DATE 8/9/17 Annual Service - Fire Alarm Panel Inspection, Testing and Repair Bid 5682

Addenda are instruments issued by the City prior to the date for receipt of offers which will modify or interpret the specification document by addition, deletion, clarification or correction.

Please acknowledge receipt of this addendum in the space provided in the Attribute Section.

Be advised of the following changes and clarifications to the City's specification and bidding documents:

NOTE: Bid is extended to Wednesday, August 16, at 2:00pm

- 1. A new Fire Alarm Test Report has been added for Lincoln Lancaster County Health
- 2. A new Fire Alarm Test Report has been added for the K Street Complex.

All other terms and conditions shall remain unchanged.

Dated this 8th day of August, 2017.

Rachelle Hinze, Buyer

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ONITORED BY NECO			TIME 008 905	TIME BIS_		
SYSTEM COMPONENTS	TOTAL QUANTITY	# TESTED	DISCONNECT A.C. POWER & CHE	CK SYSTEM ON	EMERGENCY POW	
Manual Stations	17 16 16 16 16 10 42/80 11 1 1 2 2 10 11 1	TESTED / 2	Did Trouble Signal operate property? Did Alarm Signal operate property? BATTERY TEST VOLTAGE UNDER Emergency Power Battery Type Main Operating Power Type What Code is system Installed under? Is system operating according to Code? Comments: (Note any known deficients) List Current Repairs to System and Date (use back if needed)	Yes No Yes No Yes No ER 1 AMPERE TE SCA AC UFFA-72 VES-FRI Dies here)	Date: //s- Date: /²//s- Date: /²//s- ST LOAD Test Volts 136//3 Test Volts (Z.C) WSTAU Jak	
Range Hood						
STEM TYPE <u>(ANTRA) STATION</u> (ANDBY POWER TYPE QXX			Hofiker MODEL # Aff	_	[
	1015	844	TROUBLE BATTERY TYPE_c	ZXSCA	1075-(41	
noke detection calibration method used_	12/15					
ate 100% smoke calibration performed	, ~ //3′		Next Scheduled			
te 100% heat detection last performed			Next Scheduled		/	
spector		License #	Expiration	n Date	18	
ibscriber		C4.	te Fire Marshal			

FIRE ALARM AND EMERGENCY COMMUNICATION SYSTEM INSPECTION AND TESTING FORM

To be completed by the system inspector or tester at the time of the inspection or test.

Insert N/A in all unaved lines.

Attach additional sheets, data, or valculations as processary to provide a complete record.

Date of this inspection or test: Time of inspection or test: 1. PROPERTY INFORMATION Name of property: City / County World Department
Address: 4621 NW 47th Sure Lincoln NE Occupancy type: OFFHE Name of property representative: Phone: 2. INSTALLATION, SERVICE, AND TESTING CONTRACTOR INFORMATION Service and/or testing organization for this equipment: Decrease Contracting Company Address: 6501 North 70th St. - Lincoln, NE Phone: (402) 466-8274 Service technician or tester:

Qualifications of technician or tester: Nebraska Fire Alam: Inspectors Liscence # 277 Contract number: Permit sounder: FA 170006 sot number 16010 Monitoring organization for this equipment: Account# Phone: 3. TYPE OF SYSTEM OR SERVICE Fire alarm system (nonvoice) Pire alarm with in-building fire emergency voice alarm communication system (EVACE) Mass notification system (MNS) Combination system, with the following components: [] EVACS Fire alarm Two-way, in building, envergency communication system: 3.1 Control Unit Model ramber 1976 b Manafacturer: Sichers NFPA 72 edition: 2002 Inspection Type Weekly Monthly Quarterly Semianmedia Harmony Sharectories Healthrotten

	3.2 Mass Notification System		
	☑ This system does not incorporate an MNS. ** UNC	Desiod Declude Mass Ho	telcation system form
	3.1 System Documentation		
	An owner's manual, a copy of the manufacturer's in record drawings are stored on site. Location:		ce of operation, and a copy of the record
	3.4 System Software	This system doe	a not nove altereble site-specific software.
	Software revision number:	Software last updated	oa:
	A copy of the site-specific software in stored on site.	Location	and a state of the
Ġ.	SYSTEM POWER *Additional Power Sheets	s Attached ☐ YES ☐ N	O
	*Uninterruptible Fower System	⊠ Thi	s building/systems does not have a UPS
	4.1 Control Unit		
	4.1.1 Primary Power (FACP) Location:		
	Input voltage of control panel: 120 V		
	4.1.2 Engine-Driven Generator (FACP)		[4] This system does not have a generator.
	Location of generator.	mana a managaman managa na arabir da managa pamanan dibir da 1 h din 1 militar	
	Location of fuel storage:	Type of fise	d:
	4.1.3 Batteries (FACP)		
	Location: In Panel Type: seeled	Nominal voltage:	ZIIF Armylican rating:
	Calculated especity of batteries to drive the system:		
	In staniby mode (hours):	In elarm mode (rains	ies):
	Batteries are marked with date of manufacture.		
	4.2 In Building Fire Emergency Voice Alarm Coun	underston System (EVAC	S
	This system does not have an EVACS panel.	This is combination FA	CP+EVACS system.
	4.2.1 Primary Power (EVACS) Location:		Company of the second s
	Input voltage of EVACS panel:	EVACS pa	nel amps:
	4.2.2 Engine-Drives Generator (EVACS)		This system does not have a generator
	Location of generator:		Color for the board for the second se
	Location of fuel storage:	Type of fael:	
	4.2.4 Batteries (EVACS)		
	Location: Type:	Manima voltage:	Amplican rating:
	Calculated capacity of batteries to drive the system:		
	In standby mode (hours):	in alam mode (mia	rtes):
	[] Batteries are marked with date of manufacture		

Date 3-24-17

FACP+Extender+BVACS+Fire Phones

	<u> 45 Noutherton a pritance Pures Sales</u>	der Paucis		This system does	not have power extender panel			
	4.1.1 Primary Power (Extender Panel)	Location	0/02 1	207. 2207	, 3207			
	Imput voltage of power extender panel(s):							
	43.2 Emples-Driven Concretor (Extend	er Paueis)		Q-This syst	em does not have a generator.			
	Lossion of generals:		•					
	Location of fiel access:							
	4.3.4 Batteries (Extender Panels)	man' rann an music r superarram an						
	Location Is facell type:	See test	Newsinal real	iona 262	A mryhour ralino			
	Calculated capacity of battaries to drive th		3 53) SEREERED 19 422	2/-	1 211 1/2 11 1/4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
	• •	-	Tax and market and	4 - (ii	•			
	lu standby mode (hours):		an weam n	iode (ninues).	and the state of t			
	Di-Butteries are marked with date of man	uficture.						
i.	ANNUNCIATORS			[] This sys	em does not have annunciators			
	5.3 Location and Description of Annea	deiote						
	Anuncisto: 1:	-	Amorac	ator4:				
	Assumedator 2: Assumedator 5:							
	Amenicipa of 3: Amenicator 6:							
Ĉì.	HOTESCATIONS MADE PRIOR TO		3					
	Monitoring organization Contact	ar - seems of buffer to Prince						
	Building management Contact							
	Healting occupants Contact	PART PART NAME OF PART	ra mar dimensioni (Mar di de La Lacente, deve constantino de la cale	racional sur Physiologic performancements i serial delever behavior del celebration (celebration).	Time:			
7	Testing results							
~ •	7.1 Costrol Unit and Related Equipme	mi irace)						
	The state of the s		TT		,			
	Description 1	Visnal aspection	Fuertional Test	t – darlar alaman, skylvina för pankara samkrans och andriballar	Сонция			
	Control unit	ट	e e	hage control of primary reports of a miles for the track and to place the second and the second and the second				
	Lamps/LEDe/LCDs	E .		of delical Magazing Colombia (1984 - 1984), and the special contract of the Mandalor (1984), and the special contract of the Mandalor (1984), and the special contract of the Mandalor (1984), and the special contract of the				
	Fases	<u>e</u>	E I	L				
	Trouble signals	E_	<u>o</u>		والمواقعة والمتاريخ والمتارك والمتا			
	Discoursect switches	<u> </u>	<u> </u>		a time was made as a survey black block to the first the change and the party of the column and the column as a			
	Ground-fault monitoring	. [1]	8	yanisari yan danigata i gari sin 1 Atau i Mahammay naginti Mahammaya pemerina				
	Supervision		<u> </u>	manda 1 , es de desar acestar de la constitución de la constitución de la constitución de la constitución de l	The second se			
	Focal autominist	<u> </u>	<u> </u>	and the second s	and the state of t			
	Remota annunciators	<u>[7]</u>	6 1		agan san aga ur nan ar Jun 1 Aganny mg nga manyan gang ka 1 An managan ma 18 dalam 1 alabahan 180			

The same in the company was to company to the company of the compa			PACP+Extender+EVACS+Fire Phones
ix-scription	Visuai Inspection	Fusctional Test	Совитенс
Power extender panels		E -	
Isolation modules (Surge Protect.)	6		
7.2 Control Unit Power Supplies (FACP)	7	
Description	Visual Inspection	Functional Lest	Courients
120-volt power	<u> </u>	<u> </u>	
Generalor or UPS		<u>rí</u>	
Battery condition		<u>l</u>	
Load voltage	<u>lo</u>	<u> </u>	
Discharge test		Ø	
Charger test			
7.3 in-Duilding Fire Emergency Vo	oice Alarm Con	ununications E	iquipmeni (EVACS Fanel)
Description	Visual !uspection	Functional Test	Consense
Control unit	ń		
Lemps/LEDs/LCDs		E	
Fnees	۵Ť	m´	
Primary power supply		d	
Secondary power supply		Q	
Trouble signals	ď		
Disconnect switches		B	
Ground-fault monitoring	Ú	Ó	
Penel supervision	[2]		
System performance	ľ	ď	
Sound pressure levels	O		
Occupied Yes No			
Ambisni dBA			
Alarm dBA			
(attach report with locations, values, and weather conditions)			(Tasting only required during acceptance or re-acceptance NPPA 72 2010 Table 14.4.2.2 section 45)
System intelligibility			
□csi □sm			
(attach report with locations, values, and weather conditions)			(Cesting only required during acceptance or re-acceptance. NFPA 72 2010Table 14.4.2.2 section 15)

Dase 7-14.17

NACP+Batender+EVACS+Fire Phones

Notification Apphance Power Ex	iender Panels		A TECH - (THE PROPERTY - ADDITIONS 1 IT OF EXPENSE
Description	Visue! Inspection	Functional Test	Comments
Lamps/LEDs/LCDs	<u> </u>	ď	
Fuses	<u> </u>	Ď	
Primary power supply		[]	
Secondary power supply	[7]	Ď	
Trouble signals	<u> ď</u>	lj.	
Ground-fieult monitoring		r <u>í</u>	A CONTROL OF THE PARTY OF THE P
Panel supervision		CÍ	
7.6 Two-Way Communications E	quipment (Fire l	Phones)	
Description	Visuai Inspection	Functionni Test	Comments
Phone handsets			NA
Phone jacks TOTAL=			
Off-hook indicator		[]	
Call-in aignai			
System performance			
System audibility			
System intelligibility			
Radio communications enhancement system			
Area of refuge communication system			
Elevator emergency communications system			
7.7 Combination Systems	-		
Description	Visual Inspection	Functional Test	Comments
Fire extinguishing monitoring levices/system			NA
Carbon monoxide detector/system	ם		
Combination fire/security system	ם		The state of the s
7.6 Special Hazard Sysiems			
Description (specify)	Visual Inspection	Fest Test	Comments
il than the one story have a sur business and have diffuse the morning diagnosis and an electronic desired by experience.			
one and the state of the state		<u> </u>	

Date				

7.5 Emergency Communications 8	witeni (Voice F	Nac Mic & Fire I		gertsvaldtrue rogges
[Visual	Source (& Drove 5	Cross Pelaci Cor a Sim .	and the same of th	
Functional				
Simulated operation				
7.10 Monitored Systems				
Description (specify)	Visuai Inspection	Turctional Test	Come	existo
Engine-driven generator	1 SESPECTATE	X 655	NA	14.22.0
Fire pairip				anderen der Mei Angelle der gestellt forsteller, se desse untersteller before til en en besteller besteller be
Special suppression systems				ngar ya manayang dan Pandagang an ang at samanan ay a sami ay ang dang ag Panday da Mahamayah salaha da Arten
7.11 Auxiliary Functions	1	11		and the state of t
The Island of th		<u> </u>		ar againment a translation come province come property by the get all the enter the second region for
Description	Visud Inspection	Functional Tost	Comm	ents
Door-releasing devices	⊠		NA	
Fan simtdown			/	
Smoke management/smoke control				and the state of t
Snucke damper operation		C		
Smoke shritter release				
Door welocking		[]		
Elevator recali			1	and an extension of the control of t
Elevator shout trip			and the state of t	er yanda yayayin kerinera, riga kender amanyaya ya tarif amin'i kala ka ana ayan aran a
7.12 Alarm Initiating Device				
Device test results sheet attached	i listing all devic	en tested and the	results of the testing	
7.33 Supervisory Alarm Initiating	Device			
Device test results sheet estached		es tested and the	results of the testing	
710 Alarm Notification Appliance	es and Circuit I	nformalken	•	
Quantity of Appliances Installed Circuit Style		ty of Devices reaky Tested	Quantity of Applications Visualty Inspected	
The special section of the last section of the sect				Belis
		graphes Marriage and Area (A. 18)		Home
- 37 B	100 mm and	7	72 - 2	Chimes
22	Angelong Matter Algebray (19	72	2.2	Strobes
		***	The state of the s	Speakers
No. of alam notification appliance cit	cuits:	Age city	enits medicared for integrity?	□Y≈ □No

Dete Page 6 07

FACP+Extender+EVACS+Fire Phones

Description	Yes	No	Time	Comments
Alarm signal	ď			The second secon
Alarm restoration	<u> </u>	D	T - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	and an angle of the first section of the section of
Trouble signal				TTR damment which have an extraphing the about equiphing they are no mathetic about the colour half have that experts, days a year to
Trouble restoration	ď			And dispute speciments. We have all all binary to an intelligible or paper, they are not as an assessment of the same of
Supervisory signal	o d			و د چونون په در د د د د د د د د د د د د د د د د د د
Supervisory restoration				
MOTIFICATIONS THE	AT TESTING IS COMPL	EE		
Monitoring organization	Contact:			Time:
Boliding management	Contact:	er i errekki undusungan haraw nar upkat pikhika yar maku upkan	erwen fan der enne antstekk het skiel gen geggenskens e	Time:
Building occupants	Contact:			Time:
Dete:	Time:	yeline water to the properties and a	arra managa-arra-arra-arra-arra-arra-arra-arra	
Comments:				
Comments:	or makes to the second of the support of the support of the second of th			
Compents:		// -		
Companis:				
Comments:				
Combests:				
CERTIFICATION	Rota:			
CERTIFICATION 10.1 Inspector Certificati	erein, has been inspected an	d tested scoord	ing to all NFPA star	ndards cited herein.
CERTIFICATION 16.1 Inspector Certificati Clus system, as specified h	kon: erein, has been inspected an	K.	ing to all NFPA star	ndards cited herein.
CERTIFICATION 10.1 Inspector Certificati Thin system, as specified in	erein, has been inspected an	K.	Ja Tholon	7 Date: 3-24-17
CERTIFICATION 10.1 Inspector Certification in the system, as specified in the system. The system is specified in the system in	erain, has been inspected an Printed Contracting Company	name: Ko	Ja Tholon	ndards cited herein. 7 Deta: 3-24-17 402) 466-8274
CERTIFICATION 10.1 Inspector Certificati Chic system, as specified in Signed: Drganization: Electronic U.2 Acceptabase (VISINE)	erain, has been inspected an	name: Ki	Ja Tholon	7 Date: 3-24-17
CERTIFICATION 10.1 Inspector Certificati This system, as specified h Signed: Dryanization: Flectronic 10.2 Acceptable: Visible Signed:	erain, has been inspected an Printed Contracting Company Fire Mershal or CRYWire	name:	Ja Tholon	7 Deta: 3-24-17 402) 466-8274 3/24/26
CERTIFICATION 10.1 Inspector Certificati This system, as specified h Signed: Organization: Flectronic 10.2 Acceptable (Visible)	erain, has been inspected an Printed Contracting Company Fire interstal or CRYPPe	name: Ko	Ja Tholon	7 Deta: 3-24-17 402) 466-8274 3/24/26

				SEQ #
			•	DATE 11 1/16/16
	4			Area: ⁵ Customer: 148
Customer:			Location:	Area: ⁵ Customer: ¹⁴⁸
LINCOLN LANCASTER COUNTY HEALT	TH DEPT		Location;	
3140 N STREET				
ONITORED BY NECO			TIME OOS 830	TIME DIE
			1	TIME BIS
SYSTEM COMPONENTS	TOTAL QUANTITY	# TESTED	DISCONNECT A.C. POWER & CHECK	K SYSTEM ON EMERGENCY POWER No Date: 8/16
Manual Stations	17	17	Did Alarm Signal operate properly?	
Heat Detectors			II	
Fixed Temp. Non-Restorable Line Type	0		BATTERY TEST VOLTAGE UNDER 1	AMPERE TEST LOAD
Fixed Temp. Non-Restorable Spot Type	0		Battery Install Date	12/130
Fixed Temp./Rate of Rise/Restorable	0		Emergency Power Battery Type	
Restorable Line Type, Pneumatic	0			Test Volts 100
Smoke Detectors	-		What Code is system Installed unde	
Functional			is system operating according to Co	
Calibrated	49	44	Comments: (Note any known defici	encies here)
Beam, infrared or other detectors	0			
Ouct Detectors	11	11		
Waterflow Devices (Time to Activate)	4	7 Justio		
upervisory Switches	5	127/11		
udible/Visual Devices	59/61	59/10/		
nnunciators	1	1		
Control Unit				
Lamps and LED's	0	LUD		
Fuses	1			
Primary Power Supply	1			
Secondary Supply	3	3		
Magnetic Hold-open Devices	2	2	List Current Repairs to System and D	ate of Repairs
an Relays	5	-5	(use back if needed)	
oice Alarm and 2-way phone	1			
rouble Signals				
Alarm Circuit	3	3		
Zone Initiating Circuit	0	1000		
Supervisory Signals	5	5		
Ground Fault	1			
levator Controls	3	3		
owered Fire and Smoke Dampers	2	7		
ange Hood	0			
TEM TYPE <u>CENTRALSTATION</u>				
		URER SIEMENS	/SK5129 MODEL # MXL-V	SERIAL #
NDBY POWER TYPE 2 X SLA 1165 55AH			TROUBLE BATTERY TYPE 2 X SL	1165 55AH
oke detection calibration method used	Then	NAI		
te 100% smoke funcional performed			Next Scheduled	
e 100% smoke calibration performed	-08/1 5 & //(0		
e 100% hear detection at performed_			Next Scheduled	
pectar		License #	Expira	tion Date 18
scriber	· · · · · · · · · · · · · · · · · · ·	Sta	te Fire Marshal	
BRASKA STATE FIRE MARSHAL				
SUPPLY A STATE FIRE WAS VALUE				



FIRE ALARM TEST REPORT

DATE 22 Marile

2900 SOUTH 70TH STREET . SUITE 330 . LINCOLN, NE 68506 Area: 5 Customer: 14811 Customer: Location: LINCOLN LANCASTER COUNTY HEALTH DEPT 3140 N STREET MONITORED BY NECO TIME OOS TIME BIS TOTAL DISCONNECT A.C. POWER & CHECK SYSTEM ON EMERGENCY POWER SYSTEM COMPONENTS QUANTITY # TESTED Manual Stations.... Did Trouble Signal operate properly? 17 Did Alarm Signal operate properly? (Yes Heat Detectors Fixed Temp. Non-Restorable Line Type.. BATTERY TEST VOLTAGE UNDER 1 AMPERE TEST LOAD Fixed Temp. Non-Restorable Spot Type.. 0 **Emergency Power Battery** Test Volts Fixed Temp./Rate of Rise/Restorable..... 0 Main Operating Power Restorable Line Type, Pneumatic..... 0 What Code is system Installed under? 12 Smoke Detectors Is system operating according to Code VES-pu WAL Functional..... Comments: (Note any known deficiencies here) Calibrated..... Beam, Infrared or other detectors..... 0 Duct Detectors.... 11 Waterflow Devices (Time to Activate)...... 4 Supervisory Switches 5 Audible/Visual Devices..... 61 Annunciators..... 1 Control Unit Lamps and LED's.... 0 Primary Power Supply..... Secondary Supply..... Magnetic Hold-open Devices..... List Current Repairs to System and Date of Repairs Fan Relays..... (use back if needed) Voice Alarm and 2-way phone Trouble Signals Alarm Circuit 3 Zone Initiating Circuit..... Supervisory Signals.... Ground Fault..... Elevator Controls.... Powered Fire and Smoke Dampers. Range Hood..... SYSTEM TYPE CENTRALSTATION MANUFACTURER SIEMENS/SK5129 MODEL # MXL-V STANDBY POWER TYPE 2 X SLA 1165 55AH TROUBLE BATTERY TYPE 2 X SLA 1165 55AH Smoke detection calibratio n method used Date 100% smoke calibration performed 08/15 Next Scheduled Date 100% heat Actection last peri Next Scheduled THA 1 Elecense # Inspector **Expiration Date** Subscriber State Fire Marshal NEBRASKA STATE FIRE MARSHAL

Acceptance

Re-Acceptance



NEBRASKA STATE FIRE MARSHAL

FIRE ALARM TEST REPORT

Acceptance G

Re-acceptance	G	Date:	7	7	
Periodic 1 G	2G :	.		**************************************	

Customer County City 1	roperty M	15 150 12 0 10	a li . L				
Address 575 S /INF	<i>N</i> \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	aring CD	ZEMT				
Premises Protected Cancas H	<u> </u>	7 2				 	
Address 605 South 10	H ST	ty cor	rections			·····	
Type of System & Add ressa	1 1		· · · · · · · · · · · · · · · · · · ·				
Manufacturer Jiemens	ble		XLS	Stand	by Power typ	e : 1 141.	4
Installed By And S		Serial #		Trout	le Battery Typ	oe 🎉	
				and V	oltage		
System remotely monitored by ARA			Date 100%	smoke calil	pration perform	ned	
Type of Inspection	a de diferent de				Next schedule		······································
Time inspection completed and system	m back in service	9	Date 100%	heat detect	ion last perfor	mod	
Smoke Detection Calibration Test me	thod used				Next Schedul		
SYSTEM COMPONENTS Manual Stations	TOTAL QUANTITY	# TESTED	DISCONNECT	AC POWER AN	D CHECK SYSTEM	A ON EME	BOENOW BOULE
Heat Detectors	4	i)	Did Trouble Sign	al operate properly	? Yes No	Date	UGENCA POMEN
Fixed Temp Non-Restorable Line Type		1	Did Alarm Signal		Yes No	Date	
	1 1				1 AMPERE TEST	LOAD	<u> </u>
Fixed Temp Non-Restorable Spot Type Fixed Temp/Rate of Rise/Restorable	3		Emergency Powe		Туре	1 1 1 1 1	Test Volts
Restorable Line Type, Preumatic	7		Main Operating P	ower	Туре	-114()	Test Volts
Smoke Detectors	7		What code is syst	em installed under	1 1/11/21/1	7.7	The Alfabers against A
Functional	7		is system operation	ng according to co	de?		To Parago
Calibrated	?		Comments (Note	any known deficie	ncies here)		
Beam, Infrared or other detectors	 	 					
Duct Delectors	 	 	1. J. 4	ritel A	1 Vila 1	7 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	18562
Water flow Devices (Time to Activate)	 	0			NG TOTAL		
Supervisory Switches		 	T 3. 6 (7.7) (1.	15 g) 1 1 1 1	National Control		
Audibia/Visual Devices	10/10	0/0	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	gradina di Araba da Santa da S	as the state of	77.7	
Annuciators	10/40	10/0					
Control Unit			List Curron Banal		erses este este este este este este este	·	
Lamps and LEDs	91	 	Dat Christit Hebsit	s to System and C	ale of Repairs (use I	ack if need	ied)
Fuses	12 KG		 				
Primary Power Supply	(d)	1	 				
Secondary Supply	1	 					
Magnetic Hold-open Devices	У,			in the second			
Fan Relays	2	4%			vision in the		
Voice Alarm and 2-way phone	7 t at 1 t 4 t		100 100 100 100 100 100	error er er er	PROTECTION OF THE		
Trouble Signals Alarm Circuit				************		······································	· · · · · · · · · · · · · · · · · · ·
Zone Initiating Circuit	2 1/2						
Supervisory Signals							Parket wight
Ground Fault						·	1 (1.5.15)
Elevator Controls	e de Hai			ertend.			·
Powered Fire and Smoke Dampers							**************************************
Inspector	ing the second s						·
Control of the Contro		License # /	> ? ?	itness		***************************************	
Expiration Date				(For a	ccept ace test only)	**********	· · · · · · · · · · · · · · · · · · ·
Subscriber							· · · · · · · · · · · · · · · · · · ·
· 经国的公司 医马克勒 医皮肤 1、皮肤 1、皮肤 1、皮肤 1。				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	e a central de la companya de la co		

Customer hereby releases, discharges and aggress to hold

Company hamless from any and all claims, liabilities, damages, loses or expenses arising from or cause by any hazard, accident or incident of any nature in or on the premises of customer weather said claim is made by customer, customers agent, or place of business. Customer acknowledges, consents and aggress that company is not an insurer and that customer assumes all risk of loss or damage to customers premises or the convents there of as a result of a non operation of or malfunction of or the failure of the system to perform for any reason.

Protex Central, Inc. Account # 150401

FIRE ALARM INSPECTION Area: K

Bill To:

Lancaster County Corrections

605 South 10th Street Lincoln, NE 68508

Facility: Downtown

> 605 South 10th Street Lincoln, NE 68508

Contact: Bob Jarrett 402-450-5671

Panel Type: Simplex 4100 100% Smoke Test: 08/23/2013

Remote Connection:

100% Heat Test: 08/23/2013

Frequency: 2, 8,

Calibration: -

Notification does not disable through disable buttons. System must be in walk test.

1. Circuits	Actual SLC	Tested SLC	Additional Questions
2. Pull Stations	18	18	Code the system installed under: As Accepted
3. Remote Annunciato	rs <u>0</u>	0	2. Is the Ground Fault Functioning? Yes
4. Heat Detectors	0	0	3. Signals received at receiving station? Not Applicable
5. Smoke Detectors	<u>272</u>	272	Are system components functioning properly? Yes
6. Duct Detectors	21	21	•
7. Flow Switches	9	9	Did Trouble Signal Operate Properly? Yes
8. Pressure Switches	0	0	6. Checked System on emergency power? No
9. Tamper Switches	23	23	7. Elevator Recall ? Not Applicable
10. Audibles	41	41	
11. Visuals	41	41	8. Main Power (110V AC) Test Value 120 vac (Secondary Low Voltage)
12. Door Holders	0	0	
13. Fan Relays	<u>0</u>	<u>o</u>	9. Emergency Power (Gel Cell) Test Value 27.8 vdc (Choices: Gel Cell, Dry Cell, or Wet Cell)
14. Smoke Relays	0	0	10. Battery Changeout Date 11/01/2010
15. FCPS	0	0	17/01/2010

desired agrinkler devices with Mahoney. Batteries should be replaced - smoke detector in ADM34, is not secured to building - system test good.

Inspector 1	Chad Riddle	License #	792
Inspector 2		License #	
A.H.J.		Customer	
Insp. Date Start Drive Time	August 23, 2013	Insp. Start Time	Insp. End Time
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NEBRASKA STATE FIRE MARSHAL

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FIRE ALARM 1	TEST REPO)RT	Re-acceptance	e G. Da	ite: 7/3 -	4/4/6/14	
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Type of System		711		Standby P	ower type		STATE OF STREET
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Subscriber 17	Fin						

Customer hereby releases, discharges and aggress to hold

harmless from any and all claims, liabilities, damages, loses or expenses arising from or cause by any hazard, accident or incident of any nature in or on the premises of customer weather said claim is made by customer, customers agent, customers invitance company, customers employees, customers invitees, or any other parties claiming under or through customers or by reason of customers business or place of business. Customer acknowledges, consents and aggress that company is not an insurer and that customer assumes all risk of loss or damage to customers premises or the convents there of as a result of a non operation of or malfunction of or the failure of the system to perform for any reason.

NEBRASKA STATE FIRE MARSHAL

FIRE ALARM TEST REPORT

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Customer 🗐 Premises Protected Address Standby Power type 15 4/44 Type of System Trouble Battery Type 5 (A Manufacturer Serial # and Voltage Installed By Date 100% smoke calibration performed System remotely monitored by 1/2003 Next scheduled Type of Inspection Date 100% heat detection last performed Time inspection completed and system back in service Next Scheduled Smoke Detection Calibration Test method used DISCONNECT AC POWER AND CHECK SYCTEM ON EMERGENCY POWER # TESTED SYSTEM COMPONENTS TOTAL QUANTITY Did Trouble Signal operate properly? Yes No Date " Manual Stations Yes No Did Alarm Signal operate properly Heat Delectors BATTERY TEST VOLTAGE UNDER 1 AMPERE TEST LOAD Fixed Temp Non-Restorable Line Type Type & L.V Yest Volts Emergency Power Baltery Fixed Temp Non-Restorable Spot Type Type (III) Test Vote Fixed Temp/Rate of Rise/Restorable Main Operating Power What code is system installed under? Restorable Line Type, Pneumatic is system operating according to code? Smoke Detectors Comments (Note any known deficiencies here) Functional Calbrated Beam, infrared or other detectors **Duct Datectors** Water flow Devices (Time to Activate) Supervisory Switches Audible/Visual Devices Annudators Control Unit List Current Repairs to System and Dale of Repairs (use back it needed) Lamps and LEDs Primery Power Supply Secondary Supply Magnetic Hold-open Devices Fen Relays Voice Alarm and 2-way phone Trouble Signals Alarm Circuit Zone Initiating Circuit Supervisory Signals Ground Fault Bevetor Controls Powered Fire and Smoke Dampers License # Witness (For accept ace last only) Expiration Date Subscriber

Customer hereby releases, discharges and aggress to hold harmless from any and all claims, tiabilities, damages, loses or expenses arising from or cause by any hazard, accident or incident of any nature in or on the premises of customer weather said claim is made by customer, customers agent, customers insurance company, customers employees, customers invitees, or any other parties claiming under or through outstomers or by reason of customers business or place of business. Customer acknowledges, consents and aggress that company is not an insurer and that customer assumes all risk of loss or damage to customers premises or the convents there of as a result of a non-operation of or malfunction of or the failure of the system to perform for any reason.

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Restorable Line Type	3	-6	What code is system installed under? NFPA 72
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Beam, Infrared or Other Detectors			4/9242 English - 72 88/18/11 + 12 83/83/11
uct Detectors	14	14	
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Lamps and LEDs	\$ 47 FM		
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Customer: CITY OF LINCOLN - MSC 901 WEST BOND			Area: 1 Customer:
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SYSTEM COMPONENTS	TOTAL QUANTITY	#TESTED	DISCONNECT A.C. POWER & CHECK SYSTEM ON EMERGENCY PO
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FIRE ALARM TEST REPORT

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Type of System:	Model #: XR-4		Standby Power Type: Batt
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SYSTEM COMPONENTS	QUANTITY	TESTED	DISCONNECT AC POWER AND CHECK SYSTEM ON EMERGENCY POWER
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Heat Detectors			Did Alarm Signal operate properly? Yes No Date: 6 2 146
Fixed Temp Non-Restorable Line Type			BATTERY TEST VOLTAGE UNDER 1 AMPERE TEST LOAD
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Functional Calibrated Beam, Infrared or Other Detectors Duct Detectors Waterflow Devices (Time to Activate) Supervisory Switches Audible/Visual Devices Visual Only Devices Audible Only Devices Audible Only Devices Annunciators Control Unit Lamps and LEDs Fuses Primary Power Supply Secondary Power Supply Magnetic Door Holders Fan Relays Fire Phones			Comments (Note any known deficiencles here): Panul 13.0 S.2AH BPS 12.94 S6AH - 13.0 S.ORH TESTER OK
Functional Calibrated Beam, Infrared or Other Detectors Duct Detectors Waterflow Devices (Time to Activate) Supervisory Switches Audible/Visual Devices Visual Only Devices Audible Only Devices Audible Only Devices Annunciators Control Unit Lamps and LEDs Fuses Primary Power Supply Secondary Power Supply Magnetic Door Holders Fan Relays Fire Phones Trouble Signals			Comments (Note any known deficiencles here): Panul 13.0 S.2AH BPS 12.94 S6AH - 13.0 S.ORH TESTER OK
Functional Calibrated Beam, Infrared or Other Detectors Duct Detectors Waterflow Devices (Time to Activate) Supervisory Switches Audible/Visual Devices Visual Only Devices Audible Only Devices Auduble Only Devices Annunciators Control Unit Lamps and LEOs Fuses Primary Power Supply Secondary Power Supply Magnetic Door Holders Fan Relays Fire Phones Trouble Signals Alarm Circuit			Comments (Note any known deficiencles here): Panul 13.0 S.2AH BPS 12.94 S6AH - 13.0 S.ORH TESTER OK
Functional Calibrated Beam, Infrared or Other Detectors Duct Detectors Waterflow Devices (Time to Activate) Supervisory Switches Audible/Visual Devices Visual Only Devices Audible Only Devices Auduble Only Devices Annunciators Control Unit Lamps and LEOs Fuses Primary Power Supply Secondary Power Supply Secondary Power Supply Magnetic Door Holders Fan Relays Fire Phones Trouble Signals Alarm Circuit Zone Initiating Circuit			Comments (Note any known deficiencles here): Panul 13.0 S.2AH BPS 12.94 S6AH - 13.0 S.OAH TESTER OK
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Functional Calibrated Beam, Infrared or Other Detectors Duct Detectors Waterflow Devices (Time to Activate) Supervisory Switches Audible/Visual Devices Visual Only Devices Audible Only Devices Annunciators Control Unit Lamps and LEDs Fuses Primary Power Supply Secondary Power Supply Secondary Power Supply Magnetic Door Holders Fan Relays Fire Phones Trouble Signals Alarm Circuit Zone Initiating Circuit Supervisory Signals Ground Fault Elevator Controls Powered Fire and Smoke Dampers		License #*	Comments (Note any known deficiencies here): Parvel (3.0 S.2AH BPS 19.94 S6AH — 18.0 S.OAH TESTER OK List Current Repairs to System and Date of Repairs:
Functional Calibrated Beam, Infrared or Other Detectors Duct Detectors Waterflow Devices (Time to Activate) Supervisory Switches Audible/Visual Devices Visual Only Devices Audible Only Devices Annunciators Control Unit Lamps and LEOs Fuses Primary Power Supply Secondary Power Supply Magnetic Door Holders Fan Relays Fire Phones Trouble Signals Alarm Circuit Zone Initiating Circuit Supervisory Signals Ground Fault Elevator Controls Powered Fire and Smoke Dampers		License #1	Comments (Note any known deficiencles here): Panul 13.0 S.2AH BPS 12.94 S6AH - 13.0 S.ORH TESTER OK
Functional Calibrated Beam, Infrared or Other Detectors Duct Detectors Waterflow Devices (Time to Activate) Supervisory Switches Audible/Visual Devices Visual Only Devices Audible Only Devices Annunciators Control Unit Lamps and LEDs Fuses Primary Power Supply Secondary Power Supply Secondary Power Supply Magnetic Door Holders Fan Relays Fire Phones Trouble Signals Alarm Circuit Zone Initiating Circuit Supervisory Signals Ground Fault Elevator Controls Powered Fire and Smoke Dampers		License #1	Comments (Note any known deficiencies here): Parvel (3.0 S.2AH BPS 19.94 S.6AH — 18.0 S.OAH TESTER OK List Current Repairs to System and Date of Repairs:

SEQ#_ DATE 24 My (4

		NE 68:	506		Arca:	Customer:
Customer:				Location:	7	
Planeers Park Pr	avie I	inherp redict	e cuh	FIRE	Security	,
<u> </u>						
MONITORED BY	1			TIME OOS 315	TIME BIS	
				1		
SYSTEM COMPONENTS		TOTAL QUANTITY	4 TESTED	DISCONNECT A.C. POWER		3/
Manual Stations		<u> </u>	3	Did Trouble Signal operate pro Did Alarm Signal operate prope		
Heat Defectors				1		
Fixed Temp. Non-Restorable	* * *			BATTERY TEST VOLTAGE	UNDER 1 AMPERE TI	1 - 7
Fixed Tomp. Non-Restorable				Emergency Power Battery I	ypo SIA	Test Volts 45
Fixed Temp./Rate of Rise/Re				3 F	уре Д	Test Volts 20
Restorable Line Type, Pneur	iatic			What Code is system Installed		INSTALL dele
Smoke Detectors		9		Is system operating according to		CHITTAU OUTS
Functional				Comments: (Note any known o	deficiencies here)	
Calibrated					Wallake	
Beam, Infrared or other detec						
Duct Detectors.						
Waterflow Devices (Time to Ac						
Supervisory Switches					····	
Audible/Visual Devices		210	2/6			
Annunciators	#4***E *E * * * * * * * * * * * * * * * *					
Control Unit	}	200	200			
Lamps and LED's			200			
Fuses	1					
Primary Power Supply				137/140	<u> </u>	
Secondary Supply						
Magnetic Hold-open Devices				List Current Repairs to System		
Fan Relays				(use hack if needed)	· · · · · · · · · · · · · · · · · · ·	
Voice Alarm and 2-way phone.						
Trouble Signals		,	,			
Alarm Circuit.		4000	1000			
Zone Initiating Circuit			MIK			
Supervisory Signals						
Ground Pault						
Elevator Controls	***************************************				· · · · · · · · · · · · · · · · · · ·	
Powered Fire and Smoke Dampe	rs					
Range Hood	*************			[]		
VOTEM TVUE A	STATION	/ MANITE	ACTURER 5	DMP MODEL#	X240 SERI	AT. #
SYSTEM TYPE <u>COMTEN</u> STANDBY POWER TYPE	XSU	1 1055	SA		~ /	COST SA
Smoke detection calibratio na	nethod used					
Date 100% smoke calibration p		9/1	′3	Next Schedule	×i	
Date 100% heat detection lasts				Next Schedule		
_	LCT THE STATE OF		License #		expiration Date	1/5
Inspector		·	License#		лриацоп раке	
Subscriber		***	[§]	State Fire Marshal		
NEBRASKA STAT	ומות קי	E MARSH	TAT.			
			rurs	Acceptance Re	-Acceptance Peri-	odic 21 2
FIRE ALARM TEST	REPOR	T	L		•	لسا تصرر

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DAMASHAL - FIRE ALARM TEST REPORT

The second second second second	and the second		INSPECTION DATE: /-2.5-/3
SPECTION TYPE: 100 CALIBRATION			
TO MANUTENANCE (COMPANY:		
AME OF INSTALLEROMAINTENENT; LINC DDRESS: 0501 NORTH 70TH STREET; LINC	OLN, NE. 68507		
			TY/STATE: LINCOLN, NE
CUSTOMER: CENTER DIRECTOR ADDRESS: F STREET COMMUNITY CENTER	LINCOLN, NE 68508-	<u>C</u>	III / SIRIL
ODRESS: FRIEE CO.	The state of the s		
PREMISES PROTECTED: F STREET CO	AMINITY CENTER	C	ITY / STATE: LINCOLN, NE
ADDRESS: 1225 F STREET			STANDBY PAIR TYPE: BATTERIES
	SB MODE	NO: MXL-IQ EVAX	TROUBLE BATT. TYPE: GEL CELL
YPE OF SYSTEM: LOCAL PROTECTIVE - CLAS	SERIA	NO: NA	TROUBLE VOLTAGE: 24 VDC
SANUFACTURER: PYROTRONICS NSTALLED BY: GREG ELECTRIC			
		DATE O	FLAST 100% SMOKE CALIBRATION: 1-25-1
SYSTEM MONITORED BY: NECO			NEXT SCHEDULED: 2017
	OF IN REPUICE.	DATE OF	LAST 100% HEAT DETECTOR TEST: 1-25-
THE WEST COMPLETED & SYSTEM DA	CEN DANE		NEXT SCHEDULED: 2014
SMOKE DETECTOR CALIBRATION METHOD U	SCU: PAVGL	T	ER & CHECK SYSTEM ON EMERGENCY POWE
SYSTEM CORPONENTS	TOTAL & TESTED	AD TORE COMMINICAL	RATE PROPERLY? / YES)- NO DATE: 1-25-
MANUAL STATIONS	12 12	THE ALASM SIGNAL OPE	RATE PROPERLY YES NO DATE: 1-25-
COURT OF TENTORS		A AMERICAN TROP SANS TAG	AS I MANSE CARS AMPERE TEST LOAD;
CITED TEME NON-RETORABLE SPOT TYPE	_NA_NA	CMCOA DAR RATTERY	TYPE GEL CELL 1531 YULIO CALLET
FIXED TEMP/RATE OF RISE/RESTORABLE		MAIN OPERATING PWR	TYPE CITY-120VAC TEST VOLTS
SYDKE DETECTORS	40 11.	WHAT CODE IS SYSTEM	NSTALLED UNDERY NEW 12 SERGES
FLINCTIONAL	10 10	IS SYSTEM OPERATING	ACCORDING TO CODE?
CALIBRATED		COMMENTS; (NOTE DE	FICIENCIES HERE)
BEAM, INFRARED OR OTHER DETECTORS	NA NA	***************************************	
DUCT DETECTORS	3 2		The second secon
WATERFLOW DEVICES (TIME DELAY)	3 3		
SUPERVISORY SWITCHES			
AUDINE DEVICES	20 <u>20</u> 48 <u>48</u>		
VISUAL DEVICES	1/4 1/4		
AMAZINCIATORS MAGNETIC HOLD-OPEN DEVICES	10 //2		
PAN RELAYS	2 2		
VOICE ALARM AND TWO-WAY PHONE	NA NA		S TO SYSTEM / DATE OF REPAIRS;
ELEVATOR CONTROLS	3 3	(USE BACK IF NEEDED	
POWERED FIRE AND SMOKE DAMPERS	NA NA		
TROUBLE SIGNALS	. 2		
AUDIBLEWISUAL CIRCUIT	3 3	-	
ZONE INITIATING CIRCUIT			
SUPERVISORY SIGNALS GROUND FAULT	1 1		
CONTROL UNIT	Marine Marine		
LAMPS AND LED'S	10 10		
FUSES	3 7		
PRIMARY POWER SUPPLY	_1		
SECONDARY POWER SUPPLY			
INSPECTOR	LI D	CENSE# i	
INSPECTOR		ON DATE: 2 ALA	WITNESS: (FOR ACCEPTANCE TEST ONLY)
			LARM TEST REPORT
NEBRASKA STATE	THE WARN	4/44 D-4 /4	proper with the second
The state of the s			
SUBSCRIBER:			STATE FIRE MARSHAL
			- · · · · · · · · · · · · · · · · · · ·

Fire Alarm Inspection/Testing Form

Property name: YOUTH SERVICE CENTER				A	PPKUVING	AGENCY	
Address:	1200 RADCLI	FF STREET LINCOLN NE	Contact				
Contact:	Contact: GREG		Telephone:				·
	Telephone: 402-432-6852		•				······································
•			ONITORING E	hanna ann an ann an ann an ann an ann an			
Contact:	LULAI	. relephone:		 	A	œount No:	
	TYPE TRANSMI	SSION		SE	RVICE		
☐ McCulloh	☐ Digital	☐ Reverse Priority		Weekiy		Monthly	☐ Quarterly
☐ Multiplex	☐ RF	Dther: LOCAL		Semi-Annual	Ø	Annual	☐ Acceptance
Control Unit Man	ufacturer:	SIMPLAX		el No:			4100
Circuit Styles:		LLASS B	No.	of Lircuits:		····	
Software Rev:			Last	Date System W	as Sen	viced:	
Last Inspection Da	te and Inspecto	or:		JAMIE GUSTA	AFSON	7-2016	**************************************
QUANTITY	QTY TESTED			QUANTITY		TY TESTED	
		Fire Pump Power		COMMITTI		(III IESIED	Building Temp.
		Fire Pump Running	ļ		1		Site Water Temp
		Fire Pump Auto Pos.	1		-i		Site Water Level
		Fire Pump/Control Trout	ole -				Switch Transfer
		Generator in Auto Pos.					Generator Engine
		Generator/Controller Tro	ouble		T		Other:
	SUPERV	 TSORY SIGNAL/ALARM IN		ICES AND CIRC	JIT IN	FORMATIO	
QUANTITY	QTI TESTED	•		QUANTITY		ा हिल्ल	
22	22	Manual Fire Alarm Boxes		Q07441111	Т —	(I I I I I I I I I I I I I I I I I I I	Bells
150	150	Smoke Detectors	·		 		Horns
13	13	Duct Detectors				····	Chimes
		Fixed Temp Heat Detecto	215 T		1		Horn/Strobes
5	5	Rate of Rise Heat Detect	ors	109	1	109	Strobes
		Hood System		10 9	1	i us	
2	NIFCO	Waterflow Switches					Fan Relays
2	NIFCO	Supervisory Switches		6		6	Door Holders
		Elev Control					Other:
		Other:		No. of Alarm No	tificatio	ın App. Circı	ıks: 7
Alarm verificat	ion feature is:	✓ Disabled	Enabled				***************************************
		ALAKM MUHHLAHUM AH	YUANLES AN	BURGUII IMI	UHINEAI	IUN	
	Are circuits m	onitoring for integrity?	129	Ves		No	
			년 GLE LINE CIRC				
	Quantity and	style of signaling line circ			e NFPA	72. Table 6	(6.1.):
Quantity:							CLASS B
•		***************************************				*************************************	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
			FIM THE CHE	UII5			
(a) Primary (Main)		Nominal Voltage		120		Amps_	20
			В	REAKER		Amps_	20
Loc	ation (of Prima	ry Supply Panelboard): _			L	XA	
	Disconne	ection Means Location:			1	¥8	

SYSTEM LINE CIRCUITS Continued...

Storage Battery: Amp-Hr Rating: 100AH X2 Calculated capacity in: AH Amp-Hrs to operate system for: 24 hours Engine-driven generator dedicated to fire alarm system: YES Location of fuel storage: INDER GENERATOR TYPE BATTERY Dry Cell Lead-Acid Nickel-Cadmium Sealed Lead Acid Other:				BATTERY					
Engine-driven generator dedicated to fire alarm system: YES Location of fuel storage: INNDER GENERATOR TYPE BATTERY Dry Cell Lead-Acid Nickel-Cadmium Sealed Lead Acid Other:					100AH	K2.			
Location of fuel storage: TYPE BATTERY TYPE BATTERY TYPE BATTERY Sealed Lead Acid Other: Article 700 or 701 PRIOR TO ANY TESTING NOTIFICATIONS ARE MADE YES NO WHO TIME Monitoring Entity Other: Sealed Lead Acid Other: Sealed Lead Acid Other: Sealed No. Article 700 or 701 PRIOR TO ANY TESTING OCAL OCAL Building Management Other: Sealed Lead Acid Other: Sealed No. Article 700 or 701 PRIOR TO ANY TESTING OCAL OCAL Building Management Other: Sealed Lead Acid Other: Sealed No. Article 700 or 701 PRIOR TO ANY TESTING OCAL OCAL Building Management Other: Sealed Lead Acid Other: Sealed No. Article 700 or 701 PRIOR TO ANY TESTING NO. ARTICLE 700 TYPE Visual Functional Comments SECONDARY POWER OCAL OCAL OCAL OCAL Battery Condition OCAL OCAL OCAL OCAL Battery Condition OCAL OCAL OCAL OCAL Bischarge Test OCAL OCAL OCAL OCAL Bischarge Test OCAL OCAL OCAL BISCHARD OCAL OCAL OCAL OCAL BISCHARD OCAL OCAL OCAL OCAL BISCHARD OCAL OCAL OCAL BISCHARD				-Hrs to oper	ate system for:	24	hours		
TYPE BATTERY Dry Cell						YES			
TYPE BATTERY Dry Cell	location of fuel stor	2001			I hinen course comme				
Dry Cell	The state of the s				DRUFE GENERATOR				
(c) Emergency or standby system used as a backup to primary power supply, instead of using a secondary power supply: Emergency system described in NFPA 70 , Article 700 Legally required standby described in NFPA 70 , Article 701 requirements of Article 700 or 701 PRIOR TO ANY TESTING NOTIFICATIONS ARE MADE YES NO WHO TIME Monitoring Entity	D parcett								
Emergency system described in NFPA 70, Article 700 Legally required standary described in NFPA 70, Article 701 requirements of Article 700 or 701 PRIOR TO ANY TESTING NOTIFICATIONS ARE MADE YES NO WHO TIME Monitoring Entity D D LOCAL Building Occupants D D D LOCAL Building Management D D D D D D D D D D D D D D D D D D D			î.	보 Sealed L	ead Acid 🔲 O				
Legally required standby described in NFPA /U, Arbicle /U1						ower sup	ply:		
PRIOR TO ANY TESTING	E	nergency system ac	escribe:	I in NFPA 70	, Article 700				
PRIOR TO ANY TESTING	<u> </u>	gally required stan	aby des	cribea in NE	PA /V. Anicie /VI				
PRIOR TO ANY TESTING NOTIFICATIONS ARE MADE YES NO WHO TIME Monitoring Entity					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		•		
Monitoring Entity					•				
Monitoring Entity	NOTIFICATI	ONS ARE MADE	YES	NO	WHO		TIME		
Other (Specify)		Monitoring Entity		\Box	LOCAL				
Building Management ☑ □ Other (Specify) □ □ AHU Notified of Any Impairments □ □ SYSTEM TESTS AND INSPECTIONS TYPE Visual Functional Comments Control Unit ☑ ☑ Interface Equipment □ □ □ Lamps/LEDs ☑ ☑ Fuses ☑ ☑ Primary Power Supply ☑ ☑ Trouble Signals ☑ ☑ Ground-Fault Monitoring □ ☑ SECONDARY POWER TYPE Visual Functional Comments Battery Condition ☑ SECONDARY POWER TYPE Visual Functional Comments Battery Condition ☑ GOOD Load Voltage ☑ 12.90 70AH 12.91 77AH Discharge Test ☑ ☑ 13.22-13.28 Charger Test ☑ ☑ 13.48-13.45	9	wilding Geoupants							
AHJ Notified of Any impairments	Buik	ding Management	Ø				<u> </u>		
AHJ Notifed of Any Impairments SYSTEM TESTS AND INSPECTIONS TYPE Visual Functional Comments Control Unit W W W IMPAIRMENT COMMENT COMMENTS Interface Equipment IMPAIRMENT COMMENTS Lamps/LEDs W W W IMPAIRMENT COMMENTS Fuses W W W IMPAIRMENT COMMENTS Primary Power Supply W W W W IMPAIRMENT COMMENTS Primary Power Supply W W W W IMPAIRMENT COMMENTS Bisconnect Switches W W W IMPAIRMENT COMMENTS SECONDARY POWER TYPE Visual Functional Comments Battery Condition W GOOD Load Voltage W 12.00 70AN 12.01 77AU Discharge Test W 13.22-13.28 Charger Test W 13.48-13.45	Other (Specify)			F3					
SYSTEM TESTS AND INSPECTIONS TYPE Visual Functional Comments Control Unit \(\frac{1}{2} \) \(\frac{1}{2} \) Interface Equipment \(\frac{1}{2} \) \(\frac{1}{2} \) Lamps/LEDs \(\frac{1}{2} \) \(\frac{1}{2} \) Fuses \(\frac{1}{2} \) \(\frac{1}{2} \) Primary Power Supply \(\frac{1}{2} \) \(\frac{1}{2} \) Trouble Signals \(\frac{1}{2} \) \(\frac{1}{2} \) Disconnect Switches \(\frac{1}{2} \) \(\frac{1}{2} \) Ground-Fault Monitoring \(\frac{1}{2} \) \(\frac{1}{2} \) SECONDARY POWER TYPE Visual Functional Comments Battery Condition \(\frac{1}{2} \) \(1	AHJ Notifed of	Any Impairments	П			·	***		
Control Unit Interface Equipment Lamps/LEDs Fuses Primary Power Supply Trouble Signals Disconnect Switches Ground-Fault Monitoring SECONDARY POWER TYPE Visual Functional Comments Battery Condition Journal Voltage Discharge Test Charger Test Specific Gravity			TESTS A		IONS				
Interface Equipment Lamps/LEDs Fuses Prises Primary Power Supply Trouble Signals Disconnect Switches Ground-Fault Monitoring SECONDARY POWER TYPE Visual Functional GOOD Load Voltage Discharge Test Charger Test Specific Gravity C U U U U U U U U U U U U	TYPE	Visual	Funct	ional	C	omments	S		
Lamps/LEDs Fuses Primary Power Supply Trouble Signals Disconnect Switches Ground-Fault Monitoring SECONDARY POWER TYPE Visual Functional Comments Battery Condition Load Voltage Discharge Test Charger Test Specific Gravity	Control Unit	M	1	<u></u>					
Fuses Primary Power Supply Trouble Signals Disconnect Switches Ground-Fault Monitoring SECONDARY POWER TYPE Visual Functional Comments Battery Condition GOOD Load Voltage Discharge Test Charger Test Specific Gravity			ı						
Primary Power Supply Trouble Signals Disconnect Switches Ground-Fault Monitoring SECONDARY POWER TYPE Visual Functional Comments Battery Condition GOOD Load Voltage Discharge Test Charger Test Specific Gravity Trouble Signals SECONDARY POWER Functional Comments GOOD 12.80 78AN 12.91 77AN 13.22-13.28 13.48-13.45	• •								
Trouble Signals Disconnect Switches Ground-Fault Monitoring SECONDARY POWER TYPE Visual Functional Comments Battery Condition Load Voltage Discharge Test Charger Test Specific Gravity				-	····				
Disconnect Switches Ground-Fault Monitoring SECONDARY POWER TYPE Visual Functional Comments Battery Condition GOOD Load Voltage Discharge Test Charger Test Specific Gravity Disconnect Switches GOOD 1.000 Test				***					
SECONDARY POWER TYPE Visual Functional Comments Battery Condition	•								
SECONDARY POWER TYPE Visual Functional Comments Battery Condition GOOD Load Voltage E 12.00 70A!! 12.01 77A!! Discharge Test E 13.22-13.28 Charger Test E 13.48-13.45 Specific Gravity		=		~~~~					
TYPE Visual Functional Comments Battery Condition				-					
Battery Condition	TYPE				Comment	'S			
Load Voltage E 12.00 70All 12.01 77All Discharge Test Z 13.22-13.28 Charger Test Z 13.48-13.45 Specific Gravity C	Battery Condition	Ø							
Discharge Test Charger Test Specific Gravity Discharge Test	Load Voltage	_	5		12,55.75		77611		
Charger Test	Discharge Test								
Specific Gravity	Charger Test				· · · · · · · · · · · · · · · · · · ·	*****			
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	•	П							
REMOTE ANNUNCIATORS	REMOTE ANNUNCIATORS		•						

SECONDARY POWER Cont...

TYPE		Visual	Functional	Co	mments	
RUTHICATION A	prijance2					
	Audible	Ø	Ø			
	Visible	Ø	Ø			
	Speakers	\square	V			
	Voice Clarity					
	milan	VU ANU SUPEKI	VISURT DEVIL	e 16515 and inspec	HUNS	
Loc & S/N	Device Type	Visual Check	Func. Test	Factory Setting	Setting Pass I	-ail
						
		L	 	·		L
			П			
			П			
Comments:		u	13			
			MARKET LANGE LA			
EMERGENCY COMMUNIC Phone Set	CATIONS EQUIPME	NT	Visual	Functional	Comments	5
Prione Set						· · · · · · · · · · · · · · · · · · ·
Off-Hook Indicator			D U	Ц		
Amplifier(s)						
Tone Generator(s)			H	H		···
Call-in Signal				ă		
System Performance	2					
CUMBINATION 5YSTEMS				Device Operation	Stimulated Operation	Visual
Fire Exting. Monitoring Device/System						
Carb	on Monoxide Det	ector/System				
	0	ther(Specify):				

INTERFACE EQUIPMENT					
(Specify)					П
(Specity)				ā	
(Specify)			ō		
SPECIAL HAZARD SYSTEMS			_	4 	1
(Specify)			П		П
(Specify)			ם	П	<u>п</u>
(Specity)			L	L	n
Special Procedures:		·	4····	<u></u>	L

Comments:					
SUPERVISING STATION MONITORING	Yes	No	Time	Comments	
Alarm Signal		☑ _		LOCAL	
Alarm Restoration		Y		LOCAL	
Trouble Signal	□	3 _		LOCAL	
Trooble Signal Restoration Supervisory Signal				LOCAL	
Supervisory Signal Restoration		2		LOCAL	
NOTIFICATION THAT TESTING IS COMPLETE		_ Z		LOCAL	
Building Management	Yes	No	Who	Time	
Monitoring Agency	2		GREG		
Duning Occupants			LOCAL		
Other (Specify)					
Carrier (Specially)		Ч —			
The following did not operate correctly:		······································			
	ALL TI	STED OK			
System restored to normal operation:		Date:	1/13/2017	Time:	
i hid 1e511mg was penfuni	Rhots the Me o and				
THE STATE OF THE PARTY OF THE P	NEW IN ACCUM	TOWNER AND	in applicable m	PPA STAMDANDS	
Name of Inspector:		/Dgte: 1/:	13/2017	Time:	
Signature:					
License No. Name of Representative:					
Name of Representative:					
Signature:				· · · · · · · · · · · · · · · · · · ·	
			The same and the s		

	RMTE	Acceptance Re-Acceptan Periodic
JOBSITE COUNTY Youth Service Center O Redciff Street coin, NE 58512		CUSTOMER
	TO THE STATE OF	A DETAIL
of System: IntellyClass & Model #: 4100 outsiturer: Simples Serial #:		Standby Power Type: (3/) Trouble Battery Type: (3/) Battery Voltage: 340cV)
em installed by: note Montloring: Local Signal Royd: g of Inspection:	YN	100% Smoke Calibration Date: Next Scheduled Outer 100% Heat Detection Date:
E in inspection. E inspection Completed and back in service: TEM COMPONENTS QUANTITY.	TESTED.	Next Scheduled Date: DISCONNECT AC PONEEWER AND CHECK SYSTEM ON EMERGENCY POW
nual Stations 22 it Detections sed Temp Non-Restorable Une Type		Did Trouble Signal operate properly? Ves. No. Date: /)?-/ Did Alarm Signal operate properly? Pet. No. Date: 7> BATTERY TEST VIX TAGE UNIVER & AMPERE TEST LOAD.
seel Temp Non-Restorable Spot Type seel Temp/Rate of Rise Restorable 5 estorable Line Type		Emergency Power Battery Type: SLA Text Volts: 2/2 Whith Decrating Power Type: AC Text Volts: 2/2 What code is system installed and er? NFPA 72
oka Detriction 150		is system operating to code?
nam, Infraredior Other Datectors 1 Detectors 19 terflow Devices (Time to Autivate) 2		Pand buts 1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-
servisory Switches 2 Libie/Visual Devices 104/109 uni/Only/Devices		
lible Only Devices Suncist ons stroi Unit		TESTE OR
emps and LEDs 49 & LED uses 5 (Injury Rower Supply 1		Lhit Current Repairs to System and Date of Repairs:
rcondery Power Supply 1 gnetic Door Holders 6 r Releys 8		
: Priories nible Signals Jami Clesult		
one initiating Growth upersteory Signals round Fault		
vator Controls wered Fire and Smoke Dampers		

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Customer: DOWNTOWN SENIOR CENTER 1005 'O' STREET			Location:
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	TOTAL		ANGONING LA GROVEN & GUERNA ANGONIANA ANGONIAN
SYSTEM COMPONENTS	QUANTITY	# TESTED	DISCONNECT A.C. POWER & CHECK SYSTEM ON EMERGENCY POWER
Manual Stations	5_	_3_	Did Trouble Signal operate properly Yes No Date 73
Heat Detectors			Did Alarm Signal operate properly? Yes No Date: 12/13
Fixed Temp. Non-Restorable Line Type	0		BATTERY TEST VOLTAGE UNDER 1 AMPERE TEST LOAD 7/
Fixed Temp. Non-Restorable Spot Type	0		Emergency Power Battery Type St. Test Volts 19/10
Fixed Temp./Rate of Rise/Restorable	3		Main Operating Power Type AC Test Volts 120
Restorable Line Type, Pneumatic	0 -		What Code is system Installed under? PVRPA-72
Smoke Detectors			Is system operating according to Code? PU-IN MAN dusc
Functional	14	14	Comments: (Note any known deficiencies here)
Calibrated	0		
Beam, Infrared or other detectors	l		Installer MES) Bollerin
Duct Detectors	l	2	The state of the s
Waterflow Devices (Time to Activate)	1		2X, SLA RS 1250 FT 12U 15 AH
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Supervisory Switches	11 / 17	11/13	
Audible/Visual Devices		444	
Annunciators	0		
Control Unit			
Lamps and LED's		699	
Fuses			
Primary Power Supply	1	<u></u>	
Secondary Supply			,
Magnetic Hold-open Devices		<u></u>	List Current Repairs to System and Date of Repairs
Fan Relays		l	(use back if needed)
Voice Alarm and 2-way phone	0		
Trouble Signals			
Alarm Circuit	1		
Zone Initiating Circuit	1		
Supervisory Signals	0		
Ground Fault	1		
Elevator Controls	3		
Powered Fire and Smoke Dampers	0		
Range Hood.	0		
YSTEM TYPE CENTRALSTATION	MANUF	ACTURER_S	PECTRONICS MODEL # 641/IPA SERIAL #
TANDBY POWER TYPE 2 X St. 4 100	COM PS-12	SOFI S	A 14 TROUBLE BATTERY TYPE 2 X SLA 1856 SANT PS 1250
moke detection calibratio n method used			
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Pate 100% heat desction last performed	09/07		Next Scheduled ,
and 10070 fight days from floor performed	7.	License #	271 Expiration Date 1/15
ispector Andrew			
ubscriber	<u></u>		State Fire Marshal

Acceptance

FIRE ALARM TEST REPORT

Re-Acceptance Periodic 1

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SYSTEM DETAIL Type of System: Model #: TFP-400 Standby Power Type: Karterial	POSICIONAL PROCESSA CONTRACTOR DE LA CONTRACTOR DE L	n para di periodo de la companio de		Inspection Date: 1/- 70-16
System: Model 4:		E ALA	RM TI	EST REPORT Re-Acceptance Periodic
System Model 8:				CUSTOMER
System: Model 8: 575-460 Standard Power Type: Karllegins	Lancaster County Motor Vehicle			
System: Model #: FFP-VO Standby Power Type: Arther'r Trouble Battery Type: Set Serial #: Battery Voltage: Serial #: Serial	625 North 46th Street			
Standby Power Type: Cathletic Serial #: Trouble Battery Type: Scattery Type: Sc	Lincoln, NE 68503			
Standby Power Type: Cathletic Serial #: Trouble Battery Type: Scattery Type: Sc				
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Datery Voltage:	Type of System:		P-400	
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Time Inspection Completed and back in service: //		Signal Rcvd:	(Y) N	
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Heat Detectors Did Alarm Signal operate property? Feb No Date: 1/-30-16		QUANTITY	IFZIED	
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aviament control and a view and	TOTAL		DISCONNECT A.C. POWER & CHECK SYSTEM ON EMERGENCY POWER
SYSTEM COMPONENTS	QUANTITY	#TESTED	Did Trouble Signal operate properly? Yes No Date:
Manual Stations	<u> </u>		Did Alarm Signal operate properly? Pres? No Date: "// 3
Heat Detectors			
Fixed Temp. Non-Restorable Line Type	0		BATTERY TEST VOLTAGE UNDER 1 AMPERE TEST LOAD
Fixed Temp. Non-Restorable Spot Type	2		Emergency Power Battery Type 504 Test Volts 13 /B
Fixed Temp./Rate of Rise/Restorable	0		Main Operating Power Type Ac Test Volts / 120
Restorable Line Type, Pneumatic	0		What Code is system Installed under? WFRA-72
Smoke Detectors			Is system operating according to Code? yes - pu 121726(of
Functional	55		Comments: (Note any known deficiencies here)
Calibrated.	0		, v
Beam, Infrared or other detectors			* System Should be Broagh
Duct Detectors	0		Ces To Cools
	0		1
Waterflow Devices (Time to Activate)			
Supervisory Switches	0	1-11-	
Audible/Visual Devices	6/6	6/6	
Annunciators	0		
Control Unit		1 . ~	
Lamps and LED's	13	1 _ 1 3 _	
Fuses	7	7	
Primary Power Supply	1		
Secondary Supply	1	17	
Magnetic Hold-open Devices	0		List Current Repairs to System and Date of Repairs
Fan Relays	0		(use back if needed)
Voice Alarm and 2-way phone			
Trouble Signals		1	
Ť	1		
Alarm Circuit	1		
Zone Initiating Circuit	6		WILLIAM ST. POOP BLACK SEC. 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Supervisory Signals	0		
Ground Fault	0		
Elevator Controls	0		
Powered Fire and Smoke Dampers	0		
Range Hood	0		
YSTEM TYPE CENTRALSTATION	MANTIF	ACTURER N	OTIFIER MODEL# MD SERIAL#
TANDBY POWER TYPE 2 X NP4/12 4			TROUBLE BATTERY TYPE 2 X NP4/12 4AH
		1—3:4—A-MA-	THOODIL DITTERN THE ARM THE THIS
moke detection calibration method used			New Caladalad
ate 100% smoke calibration performed_			Next Scheduled
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FIRE ALARM TEST REPORT

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IONITORED BY NECO			TIME 008 //30 TIME BIS
SYSTEM COMPONENTS	TOTAL QUANTITY	# TESTED	DISCONNECT A.C. POWER & CHECK SYSTEM ON EMERGENCY, POV
Manual Stations	10	10	Did Trouble Signal operate properly Yes No Datc:
Heat Detectors			Did Alarm Signal operate properly? Yes No Date: 1/3
Fixed Temp. Non-Restorable Line Type	0		BATTERY TEST VOLTAGE UNDER 1 AMPERE TEST LOAD 7/
Fixed Temp. Non-Restorable Spot Type	0		Emergency Power Battery Type SA Test Volts / 3
Fixed Temp./Rate of Rise/Restorable	0		Main Operating Power Type Test Volts 12 O
Restorable Line Type, Pneumatic	0		What Code is system Installed under? VEPA-72
Smoke Detectors			
Functional	0	i /	Is system operating according to Code? LES - Des INSTALL dad. Comments: (Note any known deficiencies here)
Calibrated	1		(1700 dif Allowit derioteticles nere)
Beam, Infrared or other detectors	9		
Duct Detectors	0		
Vaterflow Devices (Time to Activate)	1		
upervisory Switches	1		
Audible/Visual Devices	12 / 36	12/30	
Innunciators	0		
ontrol Unit			
Lamps and LED's	^ 0	100	
Fuses	1	7	
Primary Power Supply	1		
Secondary Supply	1		
fagnetic Hold-open Devices	0		List Current Panaire to Courters and Dut. CD.
an Relays	0		List Current Repairs to System and Date of Repairs
oice Alarm and 2-way phone	0		(use back if needed)
rouble Signals			
Alarm Circuit	4	4	
Zone Initiating Circuit	0	Am	
Supervisory Signals	0		Walter and the same of the sam
Ground Fault	1		
evator Controls	0		
owered Fire and Smoke Dampers	0		
inge Hood.	0		
TEM TYPE CENTRALSTATION	MANTERNA	CHIDED NO	
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NDBY POWER TYPE 2 X SLA NFT	12-7AH-111		TROUBLE BATTERY TYPE T X SLA NP742 SAH SOLL
oke detection calibratio n method used			
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2 100% smoke calibration performed	0====	<u> </u>	Next Scheduled
2 100% heat detection last performed	1		Next Scheduled
ector Sun Stalle	<u></u>	License #	Expiration Date
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	TOTAL		DISCONNECT A.C. POWER & CE	ieck system on	EMERGENCY POWER
YSTEM COMPONENTS	QUANTITY	# TESTED	The Marchia Signal operate properly	Yes No	Date:
	4	4	Did Alarm Signal operate properly?	No	Date:
Sanual Stations		,	BATTERY TEST VOLTAGE UN	men 1 AMPERET	STLOAD EA ->
Test Detectors		\	BATTERY TEST VOLTAGE OF	~ \1 27	1000 1000 1
Fixed Temp. Non-Restorable Line Type			THE PARTY I TAIL	A4 /	Test Volts 12.0
Fixed Temp. Non-Restorable Spot Type	2		Main Operating Power Type	1001 -77-	1
Fixed Temp./Rate of Rise/Restorable			Main Operating Fower 1792 What Code is system installed under 18 system operating according to Co	TO LOW OF A	INSTALL SLAVE
Restorable Line Type, Pneumatic			To exertery operating according to the	· · · · · · · · · · · · · · · · · · ·	1 44 1/
Smoke Detectors		1	Comments: (Note any known defic	nencies here)	
Functional	72	1			
Calibrated			 		······································
Beam, Infrared or other detectors	2/				
Duct Detectors					
Waterflow Devices (Time to Activate)	·	1			
Supervisory Switches	77767	8/8			
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Annunciators					
Control Unit	1 .	ப			
Lamps and LED's		1-3-			
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Primary Power Supply					
Secondary Supply			List Current Repairs to System ar	d Date of Repairs	
Magnetic Hold-open Devices,			(use back if needed)		
Magnetic Hom-open Devices.	_2_		(use dack is necessa)		
Voice Alarm and 2-way phone			-		
Trouble Signals	1 /				
Alarm Circuit	Doe	DOOL			
Zone Initiating Circuit					
Supervisory Signals			_		
Ground Fault			_		
Elevator Controls		-			
Powered Fire and Smoke Dampers		-			
Range Hood				1111	SERIAL#
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SYSTEM TYPE CONTRAL STAT		2	AG TROUBLE BATTERY	TYPE SO	<u> </u>
STANDBY POWER TYPE 2X	C4.5		IKUUBLE BALLEK		•
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Smoke detection calibratio n method t	used	1.2	Next Schedu	ied	
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Area: 5 Customer: 10160 68506 Location: Customer: FIRE/SECURITY/ELEVATOR PHONE BENNETT MARTIN LIBRARY(FIRE) 14TH & 'N' STREETS TIME BIS TIME OOS MONITORED BY NECO TOTAL DISCONNECT A.C. POWER & CHECK SYSTEM ON EMERGENCY POWER OUANTITY #TESTED SYSTEM COMPONENTS Did Trouble Signal operate property? Yes 20 20 Manual Stations..... Did Alarm Signal operate properly? (Yes Heat Detectors BATTERY TEST VOLTAGE UNDER 1 AMPERE TEST LOAD Fixed Temp. Non-Restorable Line Type... 0 Emergency Power Battery Type 0 Fixed Temp. Non-Restorable Spot Type... Type Main Operating Power Fixed Temp./Rate of Rise/Restorable...... What Code is system Installed under? AIFIA 0 Restorable Line Type, Pneumatic... Is system operating according to Code? (100-pm Smoke Detectors Comments: (Note any known deficiences here) 0 Ponctional..... 98 Calibrated..... 0 Beam, Infrared or other detectors. 0 Duct Detectors..... 1 Waterflow Devices (Time to Activate)..... 0 Supervisory Switches.... 43 Audible/Visual Devices..... 0 Annunciators... Control Unit 0 Lamps and LED's..... 3 Primary Power Supply..... Secondary Supply..... List Current Repairs to System and Date of Repairs Magnetic Hold-open Devices...... (use back if needed) Voice Alarm and 2-way phone...... Trouble Signals 1 Alarm Circuit. 0 Zone Initiating Circuit..... 0 Supervisory Signals..... 1 Ground Fault..... 0 Elevator Controls..... Powered Fire and Smoke Dampers..... 0 Range Hood..... SERIAL# MANUFACTURER SECURTRON MODEL # MR-2100 SYSTEM TYPE CENTRALSTATION TROUBLE BATTERY TYPE 2 X SLA 1075 7AH STANDBY POWER TYPE 2 X SLA 1075 7AH Smoke detection calibration method used Next Scheduled D2/12 Date 100% smoke calibration performed___ Next Scheduled Date 100% heat detection last performed _ Expiration Date License # ___ Inspector State Fire Marshal Subscriber NEBRASKA STATE FIRE MARSHAL Periodic 52 Re-Acceptance Acceptance

FIRE ALARM TEST REPORT

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SYSTEM COMPONENTS	QUANTITY	# TESTED	DISCONNECT A.C. POWER &		/0/	
Mantial Stations.		10	Did Trouble Signal operate proper Did Alarm Signal operate proper	No No	Date: 10/13	
Heat Detectors Fixed Temp, Non-Restorable Line Type				-		
Fixed Temp. Non-Restorable Spot Type			BATTERY TEST VOLTAGE	UNDER 1 AMPERE TI	EST LOAD	
Pixed Temp./Rate of Rise/Restorable	**********		Emergency Power Battery 1); Main Operating Power Ty	pe	Test Volte 18"//8	
Restorable Line Type, Pneumatic			What Code is system testalled us		ICSE YORK LZ.C.	
Smoke Detectors			is system operating according to		Inspail del	
Fanctional	15		Comments: (Note any known da	ficientin here)	· Tarin base of the	
Calibrated			II .	interpretation		
Beam, infrared or other detectors						
Duct Detectors						
Waterflow Devices (Time to Activate)						
Supervisory Switches	3					
Audible/Visual Devices	40/46	***************************************				
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Control Unit	يسدهم از					
Lamps and LED's	-	100				
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Voice Alarm and 2-way phone.			/ densit it McArlaci)			
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Alanıı Cirovit	12	İ				
Zone Initiating Circuit	ADDI					
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Ground Fault			***	(47)		
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owered Fire and Smoke Dampers		#-44				
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STEM TYPE CENTRAL STATION	1 1442000	CTIPED I	H G	AFOUR	A. P. M.	
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ANDRY POWER TYPE 2X V	1075	84	TROUBLE BATTERY T	YPE ZXSU	107 5 879	
ocke detection calibration method used_						
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Customer: Bethany Branch 1810 North ONITORED BY NECO SYSTEM COMPONENTS Manual Stations Heat Detectors Fixed Temp. Non-Restorable Line Type Fixed Temp. Non-Restorable Spot Type			DATE 9 OF NO. Area: Customer: Location: TIME OOS 12.5 TIME BIS
Customer: Bethany Branch /8/0 North ONITORED BY NECO SYSTEM COMPONENTS Manual Stations Heat Detectors Fixed Temp. Non-Restorable Line Type	Libra: Co the TOTAL QUANTITY	<u> </u>	Location: TIME OOS 12.5 TIME BIS
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SYSTEM COMPONENTS Manual Stations Heat Detectors Fixed Temp. Non-Restorable Line Type	TOTAL QUANTITY		
SYSTEM COMPONENTS Manual Stations Hest Detectors Fixed Temp. Non-Restorable Line Type	TOTAL QUANTITY		
SYSTEM COMPONENTS Manual Stations	QUANTITY	# TESTED	
Manual Stations	QUANTITY	# TESTED	
Manual Stations		#TESTED	DISCONNECT A.C. POWER & CHECK SYSTEM ON EMERGENCY POWER
Hest Detectors Fixed Temp. Non-Restorable Line Type	2	1 4	Did Trouble Signal operate properly Yes No Date: 1/3
Fixed Temp. Non-Restorable Line Type		2	Did Alarm Signal operate properly? Yas No Date: 20/13
			BATTERY TEST VOLTAGE UNDER 1 AMPERE TEST LOAD
			Remergency Power Battery Type SLA Test Voits 13/16
Fixed Temp./Rate of Rise/Restorable			Main Operating Power Type At Test Volts 120
Restorable Line Type, Pneumatic			What Code is system installed under? A)=PA-72
Smoke Detectors			Is system operating according to Code? 405-per 115741 dest
Functional	_8_	18	Comments: (Note any known deficiencies here)
Calibrated			
Beam, Infrared or other detectors			
Duct Datectors			
Waterflow Devices (Time to Activate)			
•]	
Supervisory Switches	2/5	3/-	
Audible/Visual Devices	<u>~/~</u>		
Animinciators.			
Control Unit		12	
Lamps and LED's	/- _ -		
Puscs		 	
Primary Power Supply		/	
Secondary Supply			Ying and Date of Date
Magnetic Hold-open Devices		l	List Current Repairs to System and Date of Repairs
Fan Relays			(use back if needed)
Voice Alerm and 2-way phone	 		
Trouble Signals	,	,	
Alarm Circuit			
Zone Initiating Circuit	_Z	2	
Supervisory Signals			
Ground Fault			
Elevator Controls			
Powered Fire and Smoke Dampers		<u> </u>	
Range Hood		ļ	
annal Com	A TO MAINTING	ACTIDER 5	decembs MODEL # EST- / SERIAL #
	N 10.5	Y Y A	TROUBLE BATTERY TYPE ZX SLA (0.55
moke detection calibratio n method used_	I		
ate 100% smoke calibration performed	10/13		Next Scheduled
Date 100% heat offication last perferred_			Next Scheduled
nspecto		_ License #	Bxpiration Date // 5
Subscriber			State Fire Marshal
,			

nam Yak 1/3	SEQ#	
BATE/X C/C/C/C/C/C/	DATE LOCK	7/3

Arce: 6 Customer: 10322 68506 Customer: Location: CHARLES H. GERE LIBRARY FIRE & SECURITY INSPECTION 2400 SOUTH 56TH STREET MONITORED BY NECO TIME OOS TIME BIS TOTAL DISCONNECT A.C. POWER & CHECK SYSTEM ON EMERGENCY POWER SYSTEM COMPONENTS QUANTITY #TESTED Did Trouble Signal operate properly? Yes Montal Stations. Did Alarm Signal operate properly Heat Detectors Fixed Temp. Non-Restorable Line Type... 0 BATTERY TEST VOLTAGE UNDER 1 AMPERE TEST LOAD , Fixed Temp, Non-Restorable Spot Type ... 0 Emergency Power Battery Type Fixed Temp./Rate of Rise/Restorable...... 0 Main Operating Power Турс Restorable Line Type, Pneumatic...... Ú What Code is system installed under? Smuke Detectors is system operating according to Code? Punctional Comments: (Note any known deficiencies here) Calibrated . . Bearn, Infrared or other detectors....... Duct Detectors..... Waterflow Devices (Time to Activate)...... Supervisory Switches...... Audible/Vienal Devices..... Annuncistors Ò Control Unit 26 Lamps and LED's 4 Funce..... Primary Power Supply..... 1 Secondary Supply...... 0 Magnetic Slold-open Devices..... List Current Repairs to System and Date of Repairs Fan Relays..... 2 (use back if needed) Voice Alarm and 2-way phone...... 0 Trouble Signals Alarm Circuit...... Zone Initiating Circuit..... б Supervisory Signals..... 2 0 Elevator Controls..... Powered Pire and Smoke Dampers...... Range Hood..... MANUFACTURER GAMEWELL MODEL # ZANS400 SYSTEM TYPE CENTRALSTATION SERIAL# STANDBY POWER TYPE 2 X SLA NP7/12 7AH TROUBLE BATTERY TYPE 2 X SLA NP7/12 7AH Smoke detection calibration method used Date 100% smoke calibration performed 04/13 Next Scheduled Date 100% heat detection last performed_ Next Scheduled Inspector License # **Expiration Date** State Fire Marshal Subscriber NEBRASKA STATE FIRE MARSHAL Acceptance Re-Acceptance Periodic FIRE ALARM TEST REPORT

(4) 18.18.18.18.19.19.19.19.19.19.19.19.19.19.19.19.19.	Charles and Alley Stable Services and Alley and Alley Charles
一种性质的 经通过的 医电影 医大脑性 化二氯化苯酚 对各族 人名英格兰 医结膜炎 电转换电路电	그리고 있는 것은 경우 그렇게 하지 않는 것은 그는 그를 모르는 것 같다.
그는 그를 가는 사람들이 가지 않는 것이 살아 나는 것이 없는데 그들은 것이 없는데 없었다.	Carrie Co. 11
그는 사람들이 가게 잘 살아는 그들이 살아 가는 것이 되었다. 이 사람들은 사람들	SEQ#
그냥 하지만 얼마를 살았다. 이 중요한 이 교회를 된 사이가 하는 것이라고 되었다면, 다른	
네 가는 바다 가장 하나 있는데 그는 나는 사람들이 되었다.	m 1 mm 1/ //
그를 잘 돌아들은 이번호를 마음이는 그 이번 그를 들고 하는 요요? 그리 작업이다.	DATE ICO CLI/3.
그러워하다 그 유럽한 음악 시간 그 가지 않는데 집 한 번 수 있어 하나가 한 것으로 나고 있는지 않아요?	
그래도 하는 이 가는 것이 보는 사람들은 그들의 경우 이 없다고 있다.	그리고 그들이 얼마를 가지 않아 걸다 하나 하는 그들이 없다.
NID COCAC	Area: Customer:

	NE 68	390	Area: Customer;
Customer: LOPEN C Elseley Lil 1530 Supen INITORED BY NECO	24.47.73 24.47.73		Location:
ONITORED BY NECK			TIME OOS_325 TIME BIS_
YSTEM COMPONENTS	TOTAL QUANTITY	#TESTED	DISCONNECT A.C. POWER & CHECK SYSTEM ON EMERGENCY POWE
Annual Stations leaf Detectors Fixed Temp. Non-Restorable Line Type. Fixed Temp. Non-Restorable Spot Type. Fixed Temp./Rate of Rise/Restorable. Restorable Line Type, Pneumatic. moke Detectors Functional. Calibrated. Beam. Infrared or other detectors. luct Detectors. laterflow Devices (Time to Activate). upervisory Switches. undible/Visual Devices. nnunciators. ontrol Unit Lamps and I ED's. Fuses. Primary Power Supply. Secondary Supply. lagnetic Hold-open Devices. an Relays. oice Alarm and 2-way phone. rouble Signals Alarm Circuit. Zone Initiating Circuit. Supervisory Signals. Ground Fault. levator Controls. owered Fire and Smoke Dampers.		200 7	Did Trouble Signal operate properly? As No Date: 75 Did Alarm Signal operate properly? As No Date: 75 BATTERY TEST VOLTAGE UNDER! AMPERE TEST LOAD Emergency Power Battery Type 7 Test Volts 13 //3 Main Operating Power Type 7 Test Volts 12 O What Code is system Installed under? 15 PA - 72 Is system operating according to Code? 15 PA 10 DTOM Code Comments: (Note any known deficiencies here) List Current Repairs to System and Date of Repairs (use back if nieeded)
STEM TYPE COCTOAL STORE) MANUF	ACTURER A	Hitres MODEL #AFP-400 SERIAL#
ANDBY POWER TYPE 2X S.I. oke detection calibration method used to 100% smoke calibration performed_ to 100% hear detection last performed_	1075 4113	824	Next Scheduled Next Scheduled
pecio-		License#	Expiration Date // 5

SEQ#_				
DATE_	18	1	火	13

Manual Stations	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	#TESTED	Location: FIRE & SECURITY INSPECTION TIME OOS
SOUTH BRANCH LIBRARY 2675 SOUTH STREET ONITORED BY NECO SYSTEM COMPONENTS Manual Stations	3 0 0 0	# TESTED	TIME OOS CONNECT A.C. POWER & CHECK SYSTEM ON EMERGENCY POWER Did Trouble Signal operate properly Yes No Date: Did Alarm Signal operate properly Yes No Date: BATTERY TEST VOLTAGE UNDER 1 AMPERE TEST LOAD Emergency Power Battery Type A Test Volts 3
SYSTEM COMPONENTS Manual Stations	3 0 0 0	# TESTED	DISCONNECT A.C. POWER & CHECK SYSTEM ON EMERGENCY POWER Did Trouble Signal operate properly Yes No Date: Did Alarm Signal operate properly Yes No Date: BATTERY TEST VOLTAGE UNDER 1 AMPERE TEST LOAD Emergency Power Battery Type A Test Volts 3
Manual Stations	3 0 0 0		Did Trouble Signal operate properly? Yes No Date: Did Alarm Signal operate properly? Yes No Date: BATTERY TEST VOLTAGE UNDER 1 AMPERE TEST LOAD Emergency Power Battery Type A Test Volts 3
Manual Stations	3 0 0 0		Did Trouble Signal operate properly? Yes No Date: Did Alarm Signal operate properly? Yes No Date: BATTERY TEST VOLTAGE UNDER 1 AMPERE TEST LOAD Emergency Power Battery Type A Test Volts 3
Heat Detectors Fixed Temp. Non-Restorable Line Type Fixed Temp. Non-Restorable Spot Type Fixed Temp./Rate of Rise/Restorable Restorable Line Type, Pneumatic Smoke Detectors Functional	0 0 0		Did Alarm Signal operate properly Yes No Date: 3 BATTERY TEST VOLTAGE UNDER 1 AMPERE TEST LOAD 7 Emergency Power Battery Type A Test Volts 3
Fixed Temp. Non-Restorable Line Type Fixed Temp. Non-Restorable Spot Type Fixed Temp./Rate of Rise/Restorable Restorable Line Type, Pneumatic Smoke Detectors Functional	0		BATTERY TEST VOLTAGE UNDER 1 AMPERE TEST LOAD Test Volts 3
Fixed Temp. Non-Restorable Spot Type Fixed Temp./Rate of Rise/Restorable Restorable Line Type, Pneumatic Smoke Detectors Functional	0		Emergency Power Battery Type A Test Volts 18/18
Fixed Temp. Non-Restorable Spot Type Fixed Temp./Rate of Rise/Restorable Restorable Line Type, Pneumatic Smoke Detectors Functional	0		Emergency Power Battery Type XA Test Volts 6 118
Fixed Temp./Rate of Rise/Restorable Restorable Line Type, Pneumatic Smoke Detectors Functional			11 Δ
Restorable Line Type, Pneumatic	Ö	{	Main Operating Power Type At Test Volts 12.0
Smoke Detectors Functional			What Code is system Installed under?
Punctional			is system operating according to Code To - per instail elaste
	10	20	Comments: (Note any known deficiencies here)
Calibrated.	Ü		
Beam, Infrared or other detectors	0		
Duct Detectors.	Ü		HEdged The Busheries
Waterflow Devices (Time to Activate)	0		
Supervisory Switches	0		DXXX 1015 - (TERMINI)
Audible/Visual Devices	2 / 8	2/8	
Annunciators	1		
Control Unit		, _	
Lamps and LED's	0	200	
Puses	1		
Primary Power Supply	11		
Secondary Supply	1		
Magnetic Hold-open Devices	0		List Current Repairs to System and Date of Repairs
Fan Relays	0		(use back if needed)
Voice Alann and 2-way phone	00		
Trouble Signals		-	
Alarm Circuit	2		
Zone Initiating Circuit	11		
Supervisory Signals	0		
Ground Fault.	0		
Elevator Controls	0		
1	0	ļ	
Powered Fire and Smoke Dampers			
Range Hood	0		
	3 6 4 3 3 4 7	DA CATIDADO - C	SILENT KNIGHT MODEL # 4821 SERIAL #
YSTEM TYPE CENTRALSTATION	_ MANU		
STANDBY POWER TYPE 2 X SLA NES		075 87	TROUBLE BATTERY TYPE 2 X SLA-MINUS TAH 1075
Smoke detection calibration method used		11:0	Mart Cahadulad
Date 100% Shore bandrador partition	7	123	Next Scheduled
Date 100% heat desection last performed			
• • • • • • • • • • • • • • • • • • •		License #	Expiration Date /15
Inspecto			State Fire Marshal
Subscriber			Mare I lie istatoma

FIRE ALARM TEST REPORT

Acceptance G Re-acceptance Periodic (1 G

State Fire Marshal

	0											
Customer CITY OF LINCOLN	PREMO											
Address												
Premises Protected RFA ON	E GARAGI	C			<u>,</u>							
	+11 (1)	vach 1	U€.									
7100.00	. /	Model #		Standby Po	ower type							
Type of System F/A		Serial #		Trouble Ba	ttery Type							
Manufacturer SCIMENS	Object #	and Voltage										
Installed By												
System remotely monitored by	m remotely monitored by LOCAL					Date 100% smoke calibration performed Next scheduled						
Type of Inspection												
Time inspection completed and system	back in service		Date 100% hea									
Smoke Detection Calibration Test met	nod used				Schedule							
SYSTEM COMPONENTS	TOTAL QUANTITY	# TESTED	DISCONNECT AC P				RGENCY POWER					
Manual Stations		l	Did Trauble Signed ope		Ø8⊃No	Date	-5 /24/17 -					
Heat Detectors			Did Alarm Signal opera		(Yes) No	1						
Fixed Temp Non-Restorable Line Type			BATTERY TEST VOLT	AGE UNDER I AM	PERE TEST U	UAU 77	Test Volts /2 v					
Fixed Temp Non-Restorable Spot Type	<u>:</u>		Emergency Power Ball		GELCE	<u>u</u>	Test Volis / 7 01/47					
Fixed Temp/Azte of Rise/Restorable	i	<u> </u>	Main Operating Power	Тург		0000						
Restorable Line Type, Prieumatic			What cude is system in		AS AC YES	CCPIS	· L					
Smake Datectors	18	2	is system operating ac									
Functional			Comments (Note any I	mown deligiencies	nere)							
Calibrated		!	ļ <u>.</u>			(D)	<i>M</i>					
Beam, intrared or other detectors		<u> </u>		54STEM	76319	SP L	//\					
Duci Delectors	<u> </u>	<u> </u>										
Water flow Devices (Time to Activate)	i 											
Supervisory Switches	·	1										
Audiote/Visual Devices	14/14	14/14					······································					
Armudiators		<u> </u>	List Current Repairs to	Cuelam and Date	of Reneirs (NEC	back if ne	ededì					
Control Unit	<u> </u>	 	List Current Hepatia to	System and Care	or tropiana (4							
Lampe and LEDs		 		STOMEL	1.1/1	ROV	TAC6					
Fuses	<u> </u>	ļ				<u> </u>	ON THIS					
Primary Power Supply			70716	(16) - [13	W.	EDC P	1 YOK UNIC					
Secondary Supply	 											
Magnetic Hold-open Dovices		 										
Fan Relays		 										
Voice Alarm and 2-way phone		- 	 									
Trouble Signals		 										
Alarm Circuit	_		 									
Zone Indisting Circuit		 -	<u> </u>									
Supervisory Signals				·								
Ground Faull				,	····							
Elevator Controls		 										
Powered Fire and Smoke Dampers		License #	6/5 WH	ness								
inspector (Mister trans	5T	License #	013 1111		ept ace test on	ly)						
Expiration Date /2/19		_	1									
and IV V last Co			1				·					

Customer heraby releases, discharges and aggress to hold

Company harmless from any and all claims, Habilities, damages, loses or expenses arising from or cause by any hazard, accident or incident of any nature in or on the premises of customer washer said claim is made by customer, customers agent, customers insurance company, customers employees, customers invitees, or any other parties claiming under or through customers or by reason of customers business or place of business. Customer acknowledges, consents and aggress that company is not an insurer and that customer assumes all risk of loss or damage to customers premises or the convents there of as a result of a non operation of or malfunction of or the failure of the system to perform for any reason.

FIRE ALARM TEST REPORT

Acceptance G
Re-acceptance G Date: 5/23/17
Periodic 1 G 2 G

Customer CTY OF LINCO	LN PARKI	NG				
Address						
Premises Protected LUMBER	WORKS GA	<u>RAGE</u>				
Address 700 N. ST.	CINCOLN,	NE. 6	8508	·		
Type of System	Model #		Standby P			
Manufacturer S/EMENS	Senal #		Trouble Ba	ttery Type	CEITELL	
Installed By			and Voltag	e 24	VOC	
	70/		Date 100% smo			ed
	CAL				scheduled	
Type of Inspection			Date 100% hea			
Time inspection completed and system	back in service		Date 100% flea		Scheduled	
Smoke Detection Calibration Test met			CHOOCH PLEAT AG TH			ON EMERGENCY POWER
SYSTEM COMPONENTS	TOTAL GUANTITY	# TESTED	Did Trouble Signal ope		Yas No	
Manual Stations	ļ		Did Alarm Signal opera		Yes No	Date 5/23/17
Heat Detectors			BATTERY TEST VOLT			DAD
Fixed Temp Non-Restorable Line Type			Emergency Power Ball			Test Volts / ZVAC
Fixed Temp Non-Restorable Spot Type	÷		Main Operating Power	Typ	• • • • • • • • • • • • • • • • • • • •	Test Volts /2 UAG
Fixed Temp/Aste of Riss/Restorable	<u> </u>		What code is system in			
Resionable Line Type, Pneumatic	 -72/	2_	is system operating ac			
Smoke Detectors	1-17		Comments (Note any k		here)	
Functional						
Calibrated			\$ 5457E/	a TESTO	FD (1/ 1/ 1/ 1/ 1/ 1/ 1/ 1/ 1/ 1/ 1/ 1/ 1/ 1	
Beam, Infrared or other detectors						
Duct Datectors		~				
Water flow Devices (Time to Activate)			ROTERIES	WILL BI	S CUAL	ISCD OUT BY
Supervisory Switches			CUCTOMER	PCR 7	DMC5.	
Audihie/Visual Devices			CASTATION			
Annuclators	 		List Current Repairs to	System and Date	of Repairs (use t	pack il needed)
Control Unit	+	س	 			
Lamps and LEDs	+	_ 				
Fuses	+ · · · · · · · ·					
Primary Power Supply	+					
Secondary Supply	 					
Magnetic Hold-open Devices	<u> </u>					
Fan Relays	 					
Voice Alarm and 2-way phone	·					
Trouble Signals						
Alarm Circuit						
Zona Intiating Circuit	·					
Supervisory Signals Ground Fault		i				
Elevator Controls						
Powered Fire and Smoke Dampers /	1		T			
	C HAWIKEN	License #	615 With	1055		
7.	> TITULITIES !	1		(For acc	ept ace lesi only	7)
Expiration Date 12/19				., <u>. ,</u>		
Subscriber () Sc	· Wren			State Fi	re Marshal	

Customer hereby releases, discharges and aggress to hold

Company harmless from any and all claims, liabilities, damages, toses or expenses arising from or cause by any hazard, accident or incident of any naure in or on the premises of customer weather said claim is made by customer, customers agent, customers insurance company, customers employees, customers invitees, or any other parties claiming under or through customers or by reason of customers business or place of business. Customer acknowledges, consents and aggress that company is not an insurer and that customer assumes all risk of loss or damage to customers premises or the convents there of as a result of a non operation of or malfunction of or the failure of the system to perform for any reason.

FIRE ALARM TEST REPORT

Acceptance

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Re-acceptance Periodic 1 G

G 2 G Date: 5/23/17

Customer CHY OF LINGS	N. Parker	/ -							
Customer - 17 4 OF LINUSC	10 / MAKING				7				
Address	Q								
Premises Protected MARKET I									
Address 925 @ ST.	CINOSCN	1NG.							
Type of System F/A		Mode: #		Standby Po					
Manufacturer PYRO TRONIC	,5	Serial #		Trouble Ba	ttery Type				
Installed By		and Voltage							
System remotely monitored by		Date 100% smoke calibration performed							
Type of Inspection			Next scheduled						
Time inspection completed and system	n back in service		Date 100% h	eat detection la	st perform	ed			
Smoke Detection Calibration Test met	hod used				Scheduled				
SYSTEM COMPONENTS	TOTAL QUANTITY	# TESTED	DISCONNECT AC	POWER AND CHE			YPOWER		
Manual Stations			Did Trouble Signal o	perate property?	You No	Date 5	123/17		
Heat Detectors			Did Alarm Signal op		(Ves) No	Date 2			
Fixed Temp Non-Resignable Line Type	1		BATTERY TEST VO	LTAGE UNDER 1 AM			177		
Fixed Temp Non-Restorable Spot Type	3	<u> </u>	Emergency Power D	·	GEL CC	Test \			
Fixed Temp/Rate of Rise/Restorable		<u> </u>	Main Operating Pow			CEP (t P	/046		
Restorable Line Type, Pneumatic	 		What cude is system		182 UC	USE (E P			
Smoke Detectors	1.17		is system operating						
Functional		<u> </u>	 	y known deliciencies h		- 12			
Calibrated		: !	 > 4	STEM-T	CSTC	0 0/			
Beam, infrared or other detectors		ļ							
Duct Detectors	4	 							
Water flow Davices (Time to Activate)	·		 						
Supervisory Switches	·		 						
Auxible/Visual Devices	·- ·	 	 						
Annuciators	-	 	List Current Repairs	to System and Date o	Repairs (use b	ack ii nesded)			
Control Unit									
Fuses									
Primary Power Supply	1						<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>		
Secondary Supply		1							
Magnetic Hold-open Devices		<u> </u>	<u> </u>						
Fan Relays	1	<u> </u>							
Voice Atam and 2-way phone									
Trouble Signals									
Altern Cheuit	1	<u> </u>							
Zone Initiating Circuit	I	ļ							
Supervisory Signals						·			
Ground Fauli	<u> </u>	<u> </u>	 						
Elevator Controls		 	 			~ - ··-·			
Powered Fire and Smoke Dampers	<u> </u>	 	130	24					
Inspector (hour flam the		License # 6	515 W	litness (For acce	pt ace last only)	,		
Expiration Date 12/10	<u></u>		T						
Subscriber als at	Tung-		<u> </u>						

Customer hereby releases, discharges and aggress to hold

Company hermisss from any end all claims, liabililies, damages, loses or expenses arising from or cause by any hazard, accident or incident of any matter in or on the premises of customer weather said claim is made by customer, customers agent, customers insurance company, customers employees, customers invitees, or any other parties claiming under or through customers or by reason of customers business or place of business. Customer acknowledges, consents and aggress that company is not an insurer and that customer assumes all risk of loss or damage to customers premises or the convents there of as a result of a non operation of or malfunction of or the failure of the system to perform for any reason.

FIRE ALARM TEST REPORT

Acceptance G
Re-acceptance G Date: 5/24/17
Periodic 1 G 2 G

Siste Fire Marchal

Customer CITY OF LINGUA	I PARKING				····		·····	
Address					····			
Premises Protected CENTER PR	ARK GARA	SE						
Address //20 N ST.	LINCOLN,							
Type of System F/A	Model #		Ctood	hu Danian tura		····		
Manufacturer NOTIFER		Serial #						
Installed By		Senai #	Trouble Buttery Type					
				and Vo				
System remotely monitored by Loc	AL		Date 100%	6 smoke calib	ration perform	ed		
Type of Inspection	Inspection Next schedulers Nex				Next scheduled	3		
Time inspection completed and system back in service			Date 100%	heat detection	on last perform	ed		************
Smoke Detection Calibration Test meth	nod used				Next Scheduled			
SYSTEM COMPONENTS	TOTAL QUANTITY	# TESTED	DISCONNECT	AC POWER AND	CHECK SYSIEM	ON EME	RGENCY P	OWER
Manuel Stations				nal operate properly		Date	r/0	1/17
Heat Delectors			Old Alarm Signa	l operate properly	(Yes) No	Date	5/2	*/
Fixed Temp Non-Basionable Line Type			BATTERY TEST	VOLTAGE UNDER	1 AMPERE TEST LO	OAD	· · · · · · · · · · · · · · · · · · ·	
Fixed Temp Non-Restorable Spot Type	·		Emergency Pow	er Ballery	Type GEL CO	SU	Test Volts	12.VDC
Fixed Temp/Rate of Rise/Restorable			Main Operating F	-awer	Type AC		Test Volts	120VA
Restorable Line Type, Preumatic			What code is system installed under? AS ACCEPTOD				D	
Smoke Detectors			ls system operat	ing according to coo	de? <i>(/ <u>C_</u>S</i>		· · · · · · · · · · · · · · · · · · ·	
Functional		· · · · · · · · · · · · · · · · · · ·	Comments (Note	any known delicier			1	
Celibrated			SYSTEM TESTED BK				K	
Beam, Infrared or other detectors	<u>-</u>							
Duct Delectors	· · · · · · · · · · · · ·							
Water flow Devices (Time to Activate)				-				
Supervisory Switches			$\mathcal{N}_{\mathcal{O}}$	<u> 105P.</u>	REPORTS	ON	577	
Audible/Visual Devices Annuciators			ļ		~~·			
Control Unit					·			
Lamps and LEDs			List Curront Repa	irs to System and O	ate of Repairs (use ba	ack II nee	dedj	
Fuses				~~~~	7. 177	7		
Primary Power Supply	·			45 TOMCK	WILL 1	CPL		
Secondary Supply		 -		BATTCRIES	DEK.	TAN	165	
Magnetic Hold-open Devices					·		 	
Fan Relays		·····	 					
Voice Alarm and 2-way phone			 					
Trouble Signals			 				····	
Alarm Circuit								
Zone Instituting Circuit								
Supervisory Signate								
Ground Fauli				- 				 -
Elevator Controls					·····		······································	
Powered Fire and Smoke Dampers						·		
Inspector this Houte		License # 0	5/5 V	Vitness		······································	····	
Expiration Date /2//9		<u> </u>			accept ace test only)			
Subscriber // // // //	>_							

Customer hereby releases, discharges and aggress to hold

Company harmless from any and all claims, liabilities, damages, loses or expenses arising from or cause by any hazard, accident or incident of any nature in or on the premises of customer weather said claim is made by customer, customers agent, customers insurance company, customers employees, customers invitees, or any other parties claiming under or through oustomers or by reason of customers business or place of business. Customer acknowledges, consents and aggress that company is not an insurer and that customer assumes all risk of loss or damage to customers premises or the convents there of as a result of a non operation of or malfunction of or the failure of the system to perform for any reason.

FIRE ALARM TEST REPORT

Acceptance G

He-acceptance G

Date: 5/24/17

Periodic 14 2 G

	Αροκ									
Customer CITY OF LINCO	IN PHRAI	VG						· · · · · · · · · · · · · · · · · · ·		
Address										
Premises Protected CARRIAGE	FPARK	*************************************								
Address 1129 L ST		N,NE.								
Type of System F/A		Stand	dby Pow	er type		-				
Manufacturer PYROTRONICS	·····	Model #			ole Batte			····		
Installed By	······································		****		/oltage	iy rypo				
System remotely monitored by Loc	-AL-		Date 100%	6 smoke cali)edorme	2d			
Type of Inspection			1 2000		Next sc					
Time inspection completed and system	hack in service		Date 100%	heat detect					~~~~	
Smoke Detection Calibration Test meth			Date 100%	TIEST DETECT	Next Sc					
SYSTEM COMPONENTS	TOTAL QUANTITY	# TESTED	DISCONNECT	AC POWER AN				DOENCY D	OWER	
Manual Stations			···	nadorq etarego far		as No	Date	·		
Heal Delectors	8			operate properly		as) No	Date	-5/ <i>L</i>	4/1/	
Fixed Temp Non-Restorable Line Type				VOLTAGE UNDE						
Fixed Temp Non-Restorable Spot Type	;	·-·	Emergency Pow			EL CE		Test Volis	12DC	
Fixed Temp/Rate of Rise/Restorable			Main Operating I		Type A		-	Test Volta	SOVA	
Restorable Line Type, Pneumatic			~ 	stem installed unde		ACC	LP 70		, , , , , ,	
Smoke Detectors	1	7		ling according to co		165		**************************************		
Functional			·	any known delici		- 				
Calibrated	1			SYSTER	M TO	CSTER	> 5/6			
Beam, Infrared or other detectors			T							
Duct Datectors						· · · · · · · · · · · · · · · · · · ·				
Water flow Devices (Time to Activate)									-	
Supervisory Switches										
Audibia/Visual Devices			<u> </u>							
Annuciators										
Control Unit			List Current Repa	airs to System and	Date of Rep	eau) erie	ick if need	1ed)		
Lamps and LEDs		<u> </u>	ļ <u>, , , , , , , , , , , , , , , , ,</u>	200		,,	A + 100	**************************************		
Fuses	٠٠-١٠٠٠ - ١٠٠٠ - ا		<i>CU</i>	STOMER	Wil	4	KEPU	NCE_		
Primary Power Supply			72/1				79.72			
Secondary Supply Magnetic Hold-open Devices			12T	TEGUES.	PO		MUCS			
Fan Relays										
Voice Alarm and 2-way phone										
Trouble Signals		* -	 							
Alarm Circuit			<u> </u>		· · · · · · · · · · · · · · · · · · ·					
Zone Indiating Circuit			 		·	·····				
Supervisory Signals							····			
Ground Fauli										
Elevator Controls						~~~~~ ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~				
Powered Fire and Smoke Dampuns			 		 -					
Inspector (pris Haulton)	>	License# (1/5	Witness	· · · · · · · · · · · · · · · · · · ·	······································				
Expiration Date /2//9			·	(For	raccept ace	test only)		·		
Subscriber Modellic									· 	

Customer hereby releases, discharges and aggress to hold

Company harmloss from any and all claims, liabilities, damages, loses or expenses arising from or cause by any hazard, accident of incident of any nature in or on the premises of customer weather said claim is made by customer, customers agent, customers insurance company, customers employees, customers invitees, or any other parties claiming under or through customers or by reason of customers business or place of business. Customer acknowledges, consents and aggress that company is not an insurer and that customer assumes all risk of loss or damage to customers premises or the convents there of as a result of a non operation of or melfunction of or the failure of the system to perform for any reason.

FIRE ALARM TEST REPORT

Acceptance G
Re-acceptance G Date: 5/24/17.
Periodic 1 G 2 G

						·		
Customer				 				
Address		-						
Premises Protected QUE PLA	CE GAM	16€						
Address //// () ST.	UNGW, A	16.						
Type of System F/A		Model #		Standby	Power type			
Manufacturer SimPLEX		Serial #		Trouble i	Battery Type			
Installed By			and Volta	age				
System remotely monitored by Lo		Date 100% smoke calibration performed						
Type of Inspection	<u></u>			· · · · · · · · · · · · · · · · · · ·	xt scheduled			
Time inspection completed and system	n back in service		Date 100% h	eat detection		ed		
Smoke Detection Calibration Test met					xt Scheduled			
SYSTEM COMPONENTS	TOTAL QUANTITY	# TESTED	DISCONNECT A			N EMERGENCY POWER		
Manuel Stations			Did Trouble Signal	operate property?	(Yes)No	Date = / 0/// =		
Heat Delectors	1		Did Alarm Signal or	perate properly	Yes No	Date / Collin		
Fixed Temp Non-Restorable Line Type			BATTERY TEST V	OLTAGE UNDER 1				
Fixed Temp Non-Restorable Spot Type	:		Emergency Power I	attery Ty	DO GELB CI	LL Yest Volts / LIV		
Fixed Temp/Rate of Rise/Restorable	i		Main Operating Pov	ver Ty	pe AC	Test Volts / 2011		
Resiorable Line Type, Prieumatic			What cude is syster	n installed under?	AS ACC	EPTED.		
Smoke Detectors	19	2	ls system operating	according to code?	455			
Functional	7 7		Comments (Note a	ny known deficiencie		1.		
Calibrated			5	>4STEM	TOSTEL) U/L_		
Beam, Infrared or other detectors								
Duct Delectors								
Water flow Devices (Time to Activate)								
Supervisory Switches								
Audible/Visual Devices								
Annuciators								
Control Unit	<u> </u>	·	List Current Repairs	to System and Date	o! Flepairs (use ba	ck if needed)		
Lamps and LEOs						7)		
Fuses	<u> </u>			ES AS	WILL	ROPIDIC		
Primary Power Supply			BATTER	LEC 02	NEEDED	PU TAMOS.		
Secondary Supply			ļ					
Magnetic Hold-open Devices			 					
Fan Relays	}		 					
Voice Alam and 2-way phone			ļ					
Trouble Signals		 -						
Alarm Circuit	<u> </u>				· · · · · · · · · · · · · · · · · · ·			
Zone Intering Circuit	ļ							
Supervisory Signals								
Ground Fault			- 	· · · · · · · · · · · · · · · · · · ·				
Elevator Controls			1					
Powered Fire and Smoke Dampers	<u>i</u>	13						
Inspector (hour tauther		License # (615 W	ilness (For acc	capt ace lest only)			
Expiration Date 12/19	2							
Subscriber / //								
11101				State Fi	re Matchal			

Customer hereby releases, discharges and aggress to hold

Company harmless from any and all claims, liabilities, damages, loses or expenses arising from or cause by any hazard, accident or incident of any nature in or on the premises of customer weather said claim is made by customer, customers agent, customers insurance company, customers employees, customers invitees, or any other parties claiming under or through customers or by reason of customers business or place of business. Customer acknowledges, consents and aggress that company is not an insurer and that customer assumes all risk of loss or damage to customers premises or the convents there of as a result of a non operation of or malfunction of or the failure of the system to perform for any reason.

FIRE ALARM TEST REPORT

Acceptance G

Date:

Re-acceptance G
Periodic 1 G 2 G

ate: 5/23/17

	0	 _				
Customer CITY OF LINGS	N PARKINI	<u></u>				
Autorio						
Premises Protected GREEN #	z GARAGE					
Address		1		Standby Power ty	pe	
Type of System SI EMENS F	-/A	Model #		Trouble Battery T	ype	
Type of System 31 cv (c)		Serial #		and Voltage		
Manufacturer			Date 100% smoke calibration performed			
Installed By	CAL		Date 100% sm	Next sched	uled	
System temotory	<u>UNL</u>			Next screen	ormed	
Type of Inspection	- book in service		Date 100% hea	at detection last perf Next Sched	fuled	
completed and system	m back in service			Next Scried	I EM ON EMERGENCY POWER	
Smoke Detection Calibration Test me	TOTAL QUANTITY	# TESTED	DISCONNECT AC I	POWER AND CHECK 31	No Date 5/23/17	
SYSTEM COMPONENTS	TOTAL GOAL		Did Trouble Signal op	erate property:		
Manual Stations			Did Alarm Signal ope	ALLEDON TO	ST LOAD	
Heat Detectors			BATTERY TEST VOL	TAGE UNDER TANKE LE	CCU Test Valls 12	
Fixed Temp Non-Restorable Line Type			Emergency Power Bo	Tune AC	1831 4010	
Fixed Temp Non-Restorable Spot Type	·		Main Operating Powe	·	ACCEPTED	
Fixed Temp/Rate of Risa/Restomb/e		<u> </u>	What cude is system	according to code? YES		
Restorable Line Type, Pneumatic	18	1 2	(a system operating	Lineaux deficiencies fiero	1	
Smoke Detectors		<u> </u>	Commisms (Note are	S4STEAR-	TCTCDOF	
Functional		!		3 15 1tp	7077	
Calibrated		<u> </u>	_		ACTION ACTIONS	
Beam, infrared or other detectors Duct Detectors			CHECK	met wilson	PERUACE TS ATTERIES-	
Water flow Devices (Time to Activate)				- PCA - JA1	165	
Supervisory Switches						
Audible/Visual Devices					ture bark il needed	
Amuniaiors			List Current Repairs	s to System and Date of Repa	ins (use back it in the	
Control Unit				, <u></u>		
Lamps and LEDs						
Fuses				<u></u>		
Primary Power Supply		1				
Secondary Supply						
Magnetic Hold-open Devices						
Fan Relays						
Voice Alarm and 2-way phone						
Trouble Signals						
Alarm Circuit						
Zone Indisting Circuit						
Supervisory Signals						
Ground Fault Elevator Controls		}				

SEQ#		
DATES	April	16

	NE 68	K506		Area: 1	Customer: 11294
Customer: CITY OF LINCOLN - MSC 949 WEST BOND			Location:		
IONITORED BY NECO			TIME OOS SSO	TIME BIS_	
SYSTEM COMPONENTS	TOTAL	# TESTED	DISCONNECT A.C. POWER	& CHECK SYSTEM ON	EMERGENCY POW
Manual Stations	0 0 0 0 0 97 0	97.	Main Operating Power What Code is system Installed Is system operating according Comments: (Note any known	perly Yes No	Test Volts (36) (3 Test Volts (20)
Duct Detectors	2 3 24 / 24 1 73 2 1 1 1 10 3	24/24 173 2 1 10 3	List Current Repairs to System (use back if needed)	and Date of Repairs	
Frouble Signals Alarm Circuit	20	_3 _27 			
STEM TYPE <u>CENTRALSTATION</u> SANDBY POWER TYPE 2 X PC7/12F	MANUFA	CTURER_NO		4885-2 SERIAI	70
oke detection calibration method used_ te 100% smoke calibration performed te 100% heat detection last herformed	10/13- 4/	6	Next Schedule Next Schedule	d	NAME
pector		License #		xpiration Date 1/1	8

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NEBRASKA STATE FIRE MARSHAL

FIRE ALARM TEST REPORT

Acceptance G
Re-acceptance G Date: 5/9///
Periodic 1 G 2 G

State Fire Marshal

Lancaster Com	1. 1211				
Customer	my Diag				
Address 555 South	1 12 th Cl	110		f: C1	<u></u>
Premises Protected Same	10'M ST	Un	coln, Ne	68508	
Address					
Type of System	<u> </u>	Model #	MXL-IQ	Standby Power type	Scaled SLA
Manufacturer /		Serial #		Trouble Battery Type	SLA
Installed By				and Voltage	24.V
	0 /* y!		Date 100% smo	ke calibration perform	ed / - 5 : - 1 **
Type of Inspection Assessed				Next schedule	
Time inspection completed and system	back in service	7.8/6"	Date 100% hea	t detection last perforn	
Smoke Detection Calibration Test meti	rod used		18.65 \$ 56,5 \$ 56	Next Schedule	
SYSTEM COMPONENTS	TOTAL QUANTITY	# TESTED	DISCONNECT AC PO	OWER AND CHECK SYSTEM	
Manual Stations	110	110	Did Trouble Signal oper		Date
Heat Delectors	, 4,		Did Alarm Signal opera		Date
Fixed Temp Non-Restorable Line Type			 	GE UNDER 1 AMPERE TEST L	A
Fixed Temp Non-Restorable Spot Type			Emergency Power Batte		Test Volts
Fixed Temp/Rate of Rise/Restorable	3		Main Operating Power	Type	Test Volts
Restorable Line Type, Pneumatic				isked under? NEPA =	
Smoke Detectors			Is system operating acc	ording to code?	
Functional	27	0	Comments (Note any lo		
Calibrated				138 Harre 814	And the second
Beam, infrared or other detectors			1. 19 10 20 20 20 20		
Duct Oelectors	5				With E CLOV RA
Water flow Devices (Time to Activate)	8	7	V 1861 82 11 12 1		
Supervisory Switches	12	10	Cara Capación		property and the second
Audible/Visual Devices	A ₄ ,		X Room In		Jet Betern
Annuciators		1		A TEMPLE	
Control Unit	in the second	5.5		ystem and Date of Repairs (use b	pack il needed)
Lamps and LEDs	110	رب	t et transporter,	Argarakiya pinaninya	
Fuses	52	V	The Royales	inc 10 handle	way for the same of the same o
Primary Power Supply	γ	-	Ť.		*
Secondary Supply		レ			
Magnetic Hold-open Devices	6				
Fan Relays		Ĭ			
Voice Alarm and 2-way phone		1.4.4.5	8 8 8 8 No. 10 10 10 10 10 10 10 10 10 10 10 10 10		Notes that the second
Trouble Signals	i)				
Alarm Circuit		v			
Zone Initiating Circuit		V			
Supervisory Signals	- 5	V			
Ground Fauli		V			A CONTRACTOR OF THE STATE OF TH
Elevator Controls	- 6	Co			
Powered Fire and Smoke Dampers	11	N/A			
Inspector		License# 🧞	/ \$ Witne	SS	
Expiration Date				(For accept ace test only)	
Subscriber					Leading to the second of the s

William or to make

Customer hereby releases, discharges and aggress to hold

Company harmless from any and all claims, liabilities, damages, loses or expenses arising from or cause by any hazard, accident or incident of any nature in or on the premises of customer weather said claim is made by customer, customers agent, customers insurance company, customers employees, customers invitees, or any other parties claiming under or through customers or by reason of customers business or place of business. Customer acknowledges, consents and aggress that company is not an insurer and that customer assumes all risk of loss or damage to customers premises or the convents there of as a result of a non operation of or malfunction of or the failure of the system to perform for any reason.



FIRE ALARM TEST REPORT

Acceptance

G G

Re-acceptance Periodic 1 G Date: 5-9-17

	-1							
Customer C, 14 - Court Address C33 5, 9 th	house p	beg						
Address 6335,94h								
Premises Protected Building								
Address		······································				·	······	
Type of System Sienes		Model #	£5250	Stand	by Power type	.5	A	
Manufacturer		Serial #			e Battery Type	R	٠,,,	
Installed By				and Vo			CT 1-004	*********
System remotely monitored by NE	(1)		Date 100% sn		ration performe	d		
Type of Inspection		· · · · · · · · · · · · · · · · · · ·			Vext scheduled			
Time inspection completed and system	m back in service		Date 100% he		on last perform			
Smoke Detection Calibration Test me	thod used				Next Scheduled			
SYSTEM COMPONENTS	TOTAL QUANTITY	# TESTED	DISCONNECT AC		CHECK SYSTEM C		RGENCY PO	WER
Manuel Stations	11	7	Did Trouble Signal or		*****	Date		
Heat Delectors			Did Alarm Signal ope	rate properly	(Yes) No	Date		
Fixed Temp Non-Restorable Line Type			BATTERY TEST VOL	TAGE UNDER	I AMPERE TEST LO	AD		
Fixed Temp Non-Restorable Spot Type			Emergency Power Ba	ittery	Туре		Test Volts	
Fixed Temp/Rate of Rise/Restorable			Main Operating Powe	r	Туре		Test Volta	12
Restorable Line Type, Pneumatic			What code is system	installed under	NFPAT	12	·····	 -
Smoke Detectors	10	0	is system operating a	ecording to coo				
Functional			Comments (Note any	known delicier	ncles here)			
Calibrated								
Eeam, Infrared or other detectors			Batte	Mes	tested	ol	۷	
Duct Detectors	<u> </u>	0						
Water flow Devices (Time to Activate)	ļ <u>I</u>							
Supervisory Switches	3	NIFCO						
Audible/Visual Devices	2.3	23						
Annuciators	32	3.2						
Control Unit			List Current Repairs to	System and D	ate of Repairs (use bu	ick if nes	ded)	
Lamps and LEDs		 			·····			
Fuses			No	Acces	s to Ele	<u>~4c</u>	C RM	
Primary Power Supply Secondary Supply	ļ <u>.</u>	 			· · · · · · · · · · · · · · · · · · ·		······································	
Magnetic Hold-open Devices					***			
Fan Relays				·				
Voice Alarm and 2-way phone			 			· · · · · · · · · · · · · · · · · · ·		
Trouble Signals	 							
Alarm Circuit	20							
Zone Initiating Circuit	30	· · · · · · · · · · · · · · · · · · ·					·	
Supervisory Signals							***************************************	
Ground Fauli		<u></u>	 					
Elevator Controls							·····	
Powered Fire and Smoke Dampers								
Inspector Chrs		License # C	15 Witr	ness	**************************************	·····		
Expiration Date					accept ace test only)			
Subscriber								

Customer heraby releases, discharges and aggress to hold

Company harmless from any and all claims, liabilities, damages, loses or expenses arising from or cause by any hazard, accident or incident of any nature in or on the premises of customer weather said claim is made by customer, customers agent, customers insurance company, customers employees, customers invitees, or any other parties claiming under or through customers or by reason of customers business or place of business. Customer acknowledges, consents and aggress that company is not an insurer and that customer assumes all risk of loss or damage to customers premises or the convents there of as a result of a non operation of or malfunction of or the failure of the system to perform for any reason.

SEQ #_				
DATE	4	A	۷ì	17

	06		Area: Customer:
Customer: Lincoln Pol	ica Dai	<u></u>	Location:
	27		
MONITORED BY (C)CA		-	TIME OOS 1045 TIME BIS
MONTORED BI	T		TIME OOS
SYSTEM COMPONENTS	TOTAL QUANTITY	# TESTED	DISCONNECT A.C. POWER & CHECK SYSTEM ON EMERGENCY POWER
	2	7	Did Trouble Signal operate properly Yes No Date: 4/17
Manual Stations Heat Detectors			Did Alarm Signal operate properly? Yes No Date: 4//7
Fixed Temp. Non-Restorable Line Type			BATTERY TEST VOLTAGE UNDER 1 AMPERE TEST LOAD
Fixed Temp. Non-Restorable Spot Type			Battery Install Date 5/15
Fixed Temp./Rate of Rise/Restorable	0		Emergency Power Battery Type SLA Test Volts 13/18 Main Operating Power Type Test Volts 13/18
Restorable Line Type, Pneumatic			Main Operating Power Type Test Volts Column Installed under? NFPA 72
Smoke Detectors			Is system operating according to Code? 185-per (NTAN OUT)
Functional			Comments: (Note any known deficiencies here)
Calibrated	 		
Beam, Infrared or other detectors			
Duct Detectors			
Supervisory Switches	70		
Audible/Visual Devices	12/12	12/12	
Annunciators	. 47, 4		
Control Unit			
Lamps and LED's	(CD	(3)	
Fuses	_4_	4	
Primary Power Supply	7		
Secondary Supply			List Current Repairs to System and Date of Repairs
Magnetic Hold-open Devices UNIOCIC			(use back if needed)
Fan Relays Voice Alarm and 2-way phone	THE		
Trouble Signals			
Alarm Circuit	7_	フ	
Zone Initiating Circuit	4	-2	
Supervisory Signals			
Ground Fault			
Elevator Controls			W. C.
Powered Fire and Smoke Dampers	***************************************		
Range Hood			
SYSTEM TYPE LOCAL-Frie		RER PXR	0//
SYSTEM TYPE COCS / The	MANUFACTU	RER FA	MODEL# PX SERIAL#
STANDBY POWER TYPE 2 X FOI	210	(AH	TROUBLE BATTERY TYPE 2X POIC 10
Smoke detection calibration method used_			
Date 100% smoke functional performed		· · · · · · · · · · · · · · · · · · ·	Next Scheduled
Date 100% smoke calibration performed		· · · · · · · · · · · · · · · · · · ·	Next Scheduled
Date 100% hear distancion labelhorfolmen		·	Next Scheduled
Inspector	<u></u>	License #	Expiration Date
Subscriber		State	e Fire Marshal

NEBRASKA STATE FIRE MARSHAL FIRE ALARM TEST REPORT

	A
	Acceptance



SPECIAL PROVISIONS FOR TERM CONTRACTS

PURCHASING DEPARTMENT CITY OF LINCOLN/LANCASTER COUNTY, NEBRASKA

1. ESTIMATED QUANTITIES

- 1.1 The quantities set forth in the line items and specification document are approximate and represent the estimated requirements for the contract period.
- 1.2 Items listed may or may not be an inclusive requirements for this category.
- 1.3 Category items not listed, but distributed by bidder are to be referred to as <u>kindred items</u>. Kindred items shall receive the same percentage of discount or pricing structure as items listed in the specification document.
- 1.4 The unit prices and the extended total prices shall be used as a basis for the evaluation of bids. The actual quantity of materials necessary may be more or less than the estimates listed in the specification document, but the City/County shall be neither obligated nor limited to any specified amount. If possible, the Owners will restrict increases/decreases to 20% of the estimated quantities listed in the specification document.

2. CONTRACT PERIOD

- 2.1 The material shall be delivered as ordered during the contract period, beginning from the date of contract execution and ending as indicated in the specifications or in the Attribute Section of the bid.
- 2.2 Bidder must indicate in the Bid, if extension renewals are an option.
- 2.3 By mutual consent of both parties it is understood and agreed that the contract may be renewed at the same prices and/or under the same conditions governing the original contract.

3. BID PRICES

- 3.1 Bidders must state in the Attribute Section if the bid prices will remain firm for the full contract period; or if the bid prices will be subject to escalation/de-escalation.
- 3.2 <u>Escalation/De-escalation Clause</u>: In the event that prevailing market conditions warrant an adjustment in bid prices contained in the contract, the following escalation/de-escalation clause shall be the only clause applicable or acceptable:
 - 1. Contractor shall give written notice to the Purchasing Agent of any proposed changes from contract prices not less than thirty (30) calendar days prior to the effective date of said price changes.
 - 2. Such notice must be accompanied by a certified copy of the supplier's advisory or notification to the contractor of price changes.
 - 3. No price escalation will be authorized in excess of the amount of the increase referred to on the supplier's notice.
 - 4. Purchasing shall issue a contract Addendum with revised pricing upon receipt and approval. The Addendum will be executed by both parties for the remaining term of the contract.
 - 5. The approved price change shall be honored for all orders received by the contractor after the effective date of such price change.
 - 6. Approved price changes are not applicable to orders already issued and in process at time of price change.

- 7. Purchasing reserves the right to audit and/or examine any pertinent books, documents, papers, records or invoices relating directly to the contract transaction in question after reasonable notice and during normal business hours.
- 8. The Purchasing Agent retains the right to determine whether or not such proposed price changes are in the best interests of the City/County.
- 9. If in the opinion of the Purchasing Agent any proposed increase is found unacceptable, the Purchasing Agent reserves the right to cancel the contract upon thirty (30) calendar days written notice.
- 10. Contractors must tie any price change clause to an industry-wide or otherwise nationally recognized index, or some other form of verifiable document. Contractor will put the Purchasing Agent on the mailing lists for such publication so that the Purchasing Agent can monitor said changes. Such membership will be no cost to the Owners.

4. CONTRACT ADMINISTRATION

- 4.1 The Purchasing Division will issue a Contract to all successful bidders. Such contract will incorporate the specifications and all other forms used during the bid process.
- 4.2 Orders for materials will be made as needed by the various Agencies following execution by all parties.
- 4.3 Contractor may be asked to assist the Purchasing Agent with the development of a list of repetitively purchased commodities, to periodically update such list, and to assist in the development of a list of suitable substitutions.
- 4.4 Contractor shall provide technical advice upon request, and assist in the evaluation of new products.
- 4.5 Contractor shall monitor orders to ensure the highest possible fill rate and minimize back-orders.

5. QUARTERLY REPORT

- 5.1 Upon request, the contractor shall provide to the Purchasing Agent a quarterly report, showing all purchases made under the terms and conditions of the contract.
- 5.2 Such quarterly report shall itemize the following information:
 - 1. Each ordering department.
 - 2. Items and quantities purchased by department.
 - 3. Total dollar amount of purchases by department.

Annual Requirements Fire Alarm Inspection, Testing and Repair

1. SUPPLEMENTAL TO INSTRUCTIONS TO BIDDERS

- 1.1 The City of Lincoln, Lancaster County and Public Building Commission (hereafter referred to as "Owners") are requesting bids from qualified companies, hereinafter referred to as Vendor(s) for the Annual Requirements Fire Alarm Inspection, Testing and Repair.
 - 1.1 Vendor shall be responsible for furnishing all materials, supplies, equipment, parts and labor for service, maintenance, inspection, testing, calibration, modifications, retrofit and/or repairs.
- 1.2 Any deviation from these Specifications or any other bid document must be provided on Company letterhead and attached to the Supplier Response section of your ebid response.
- 1.3 The contract term shall be a one (1) year term with the option of three (3) additional one year terms from the date of execution upon approval by both parties.
- 1.4 Pricing shall not deviate for a period of one year from date of execution unless stated in the attribute section.
 - 1.4.1 Any price deviation shall be sent on company letterhead to City of Lincoln, Purchasing to amend the contract with a 30 day notification.
- 1.5 Bidder shall submit bid documents and all supporting material via e-bid.
- 1.6 All inquiries regarding these specifications shall be directed via e-mail to Rachelle Hinze, Buyer (rhinze@lincoln.ne.gov).
 - 1.6.1 These inquiries and/or responses shall be distributed to prospective bidders electronically as an addendum.
 - 1.6.2 No direct contact is allowed between Vendor and other Owner's staff throughout the bid process.
 - 1.6.2.1 Failure to comply with this directive may result in contractor bid being rejected.
- 1.7 The awarded contract is not assignable without the written approval of the Owners in the form of a contract amendment.

2. CONTRACTOR INSURANCE

- 2.1 The awarded Vendor shall furnish the Owners with a Certificate of Insurance ACORD and associated endorsements in the kinds and minimum amounts as detailed in the attached "Insurance Requirements for all Contracts" at time of award.
- 2.2 All certificates of insurance and endorsements shall be filed with the Owners on the standard ACORD Certificate of Insurance form showing specific limits of insurance coverage required and showing City of Lincoln as "Named Additional Insured" as pertains to these services.
- 2.3 Vendors are strongly encouraged to send the insurance requirements and endorsement information to their insurance Agent during the bid process in order to ensure contract execution within 5 days of award notice.

3. VENDORS RESPONSIBILITY

- 3.1 Testing, inspections and repair will be completed on normal business days. (Monday Friday 8:00am 4:00pm).
 - 3.1.1 Vendor shall contact the department representative to schedule the testing, inspection, maintenance and repairs 24 hours prior to the service.
- 3.2 Vendor shall provide one (1) semiannual (partial) and one (1) 100% annual mechanical/electrical inspection and testing fire alarms and equipment at each location.

- 3.3 All testing, inspection and repairs must comply with Nebraska State Fire Marshal regulations, City of Lincoln, State and Federal regulations as well as the National Fire Protection Association, OSHA and manufacturers recommended procedures, as applicable.
- 3.4 Vendor shall obtain a permit and register with the City of Lincoln for testing & installation of fire alarm systems.
 - 3.4.1 Any vendor testing the system they must be registered with the State of Nebraska.
- 3.5 Vendor must be a licensed for low voltage or carry an electrician's license with the State of Nebraska.
- 3.6 Upon completion of testing the vendor shall leave a written State Fire Marshal alarm test and inspection report inside the panel or with the designated representative of the department.
 - 3.6.1 If the system should have any deficiencies the vendor shall send an inspection report to the Bureau of Fire Prevention.
- 3.7 Unit price shall include a flat rate for services including the cost of labor, direct and indirect cost, travel, fuel and all other charges per location.
- 3.8 To help minimize false alarms, and in accordance with NFPA, accessible smoke detection devices shall be cleaned using manufacturer's recommended procedures.
- 3.9 Vendor shall not bill additional trip charges for needed materials for repairs.
- 3.10 Fuel surcharges or any other charges are <u>not</u> acceptable.

4. REPAIRS

- 4.1 If required as a result of a test inspection or a service call the device indicating trouble shall be adjusted for proper operation.
 - 4.1 If repair cannot be made at the service call time vendor shall inform designated representative of the issue.
- 4.2 Sufficient amounts of spare parts for all systems shall be maintained at all times by the service company to prevent an extended shutdown due to the malfunction of the systems.
- 4.3 Estimates and work orders shall be signed by designated department representative prior to completion of work.
 - 4.3.1 Any invoices that are presented for payment, that do not have a signed work order backup, by an Owner's representative, will not be paid by the Owners.
- 4.4 All parts replaced must be U.L approved.
- 4.5 If equipment requires parts/replacement it shall be at the Owner's expense.

5. EXAMINATION OF THE EQUIPMENT AND PREMISES

- 5.1 The Vendor shall take all precautions to protect the Owner's property from injury.
- 5.2 Any corresponding damages shall be replaced, repaired, and paid by the contractor to the satisfaction of all parties.
- 5.3 Vendor shall be held responsible for all employees or any person or persons, instruments or devices directly or indirectly employed by him.

6. EVALUATION CRITERIA

- 6.1 Evaluation of bids will consist of the following:
 - 6.1.1 Contract will be awarded to the lowest, responsible, responsive Vendor whose bid substantially meets all of the required specifications, terms and conditions as defined in this request.
 - 6.1.2 Total price of contract and other pricing factors that will amount to the best value to the Owners.
 - 6.1.3 Ability to provide labor and services as required in this Specification.
 - 6.1.4 Vendor's terms and conditions.

In furtherance of Neb. Rev. Stat. §84-712 et seq., all proposals or responses received may be subject to a public records request. Responses to public records requests may include the entire proposal or response. Bidders must request that proprietary information be excluded from the posting. The bidder must identify the proprietary information, mark the proprietary information according to state law, and submit the proprietary information in a separate container or envelope marked conspicuously in black ink with the words "PROPRIETARY INFORMATION". The bidder must submit a detailed written showing that the release of the proprietary information would give a business advantage to named business competitor(s) and explain how the named business competitor(s) will gain an actual business advantage by disclosure of information. The mere assertion that information is proprietary or that a speculative business advantage might be gained is not sufficient. (See Attorney General Opinion No. 92068, April 27, 1992) THE BIDDER MAY NOT ASSERT THAT THE ENTIRE PROPOSAL IS PROPRIETARY. COST PROPOSALS WILL NOT BE CONSIDERED PROPRIETARY AND ARE A PUBLIC RECORD IN THE STATE OF NEBRASKA. The City and/or County will then determine, in its discretion, if the interests served by nondisclosure outweighs any public purpose served by disclosure. (See Neb. Rev. Stat. § 84-712.05(3)) The Bidder will be notified of the agency's decision. Absent a City and/or County determination that information is proprietary, the City and/or County will consider all information a public record subject to release regardless of any assertion that the information is proprietary. If the agency determines it is required to release proprietary information, the bidder will be informed. It will be the bidder's responsibility to defend the bidder's asserted interest in nondisclosure. To facilitate such public postings, with the exception of proprietary information, the City of Lincoln and/or Lancaster County reserves a royaltyfree, nonexclusive, and irrevocable right to copy, reproduce, publish, post to a website, or otherwise use any contract, proposal, or response to this RFP for any purpose, and to authorize others to use the documents. Any individual or entity awarded a contract, or who submits a proposal or response to this bid/RFP, specifically waives any copyright or other protection the contract, proposal, or response to the bid/RFP may have; and, acknowledges that they have the ability and authority to enter into such waiver. This reservation and waiver is a prerequisite for submitting a proposal or response to this RFP, and award of a contract. Failure to agree to the reservation and waiver will result in the proposal or response to the bid/RFP being found nonresponsive and rejected. Any entity awarded a contract or submitting a proposal or response to the bid/RFP agrees not to sue, file a claim, or make a demand of any kind, and will indemnify and hold harmless the City and/or County and its employees, volunteers, agents, and its elected and appointed officials from and against any and all claims, liens, demands, damages, liability, actions, causes of action, losses, judgments, costs, and expenses of every nature, including investigation costs and expenses, settlement costs, and attorney fees and expenses, sustained or asserted against the City and/or County, arising out of, resulting from, or attributable to the releasing of the contract or the proposals and responses to the RFP, awards, and other documents in accordance with the state public records laws.

INSTRUCTIONS TO BIDDERS

City of Lincoln, Nebraska, County of Lancaster, Public Building Commission E-Bid

1. BIDDING PROCEDURE

- 1.1 Sealed bid, formal and informal, subject to Instructions and General Conditions and any special conditions set forth herein, will be received in the office of the Purchasing Division, 440 So. 8th St., Lincoln, NE 68508, until the bid closing date and time indicated for furnishing the City of Lincoln, Lancaster County and Building Commission, hereafter referred to as "Owners" the materials, supplies, equipment or services shown in the electronic bid request.
- 1.2 Bidders shall use the electronic bid system for submitting bids and must complete all required fields. If you do not care to bid, please respond to the bid request and note your reason.
- 1.3 Identify the item you will furnish by brand or manufacturer's name and catalog numbers. Also furnish specifications and descriptive literature if not bidding the specific manufacturer or model as listed in the specifications.
- 1.4 Any person submitting a bid for a firm, corporation, or other organization must show evidence of his authority so to bind such firm, corporation, or organization.
- 1.5 Bids received after the time and date established for receiving bids will be rejected.
- 1.6 The Bidders and public are invited, but not required, to attend the formal opening of bids. At the opening, prices will be displayed electronically and/or read aloud to the public. The pricing is also available for immediate viewing on-line. No decisions related to an award of a contract or purchase order will be made at the opening.
- 1.7 If bidding on a construction contract, the City's Standard Specifications for Municipal Construction 2011 shall apply.
 - 1.7.1 Bidders may obtain this document from the City's Design Engineering Division of the Public Works & Utilities Department for a small fee.
 - 1.7.2 Said document can be reviewed at Design Engineering or the office of the Purchasing Division.
 - 1.7.3 Said document is available on the web site.

 http://www.lincoln.ne.gov/city/pworks/engine/dconst/standard/stndspec/index.htm

2. BID SECURITY

- 2.1 Bid security, as a guarantee of good faith, in the form of a certified check, cashier's check, or bidder's bond, may be required to be submitted with this bid document, as indicated on the bid.
 - 2.1.1 Bid security, if required, shall be in the amount specified on the bid. The bid security must be scanned and attached to the "Response Attachments" section of your response or it can be faxed to the Purchasing Office at 402-441-6513. The original bid security should then be sent or delivered to the office of the Purchasing Division, 440 S. 8th St., Ste. 200, Lincoln, NE 68508 to be received within three (3) days of bid closing.
 - 2.1.2 If bid security is not received in the Office of the Purchasing Division as stated above, the vendor may be determined to be non-responsive.
- 2.2 If alternates are submitted, only one bid security will be required, provided the bid security is based on the amount of the highest gross bid.
- 2.3 Such bid security will be returned to the unsuccessful Bidders when the award of bid is made.
- 2.4 Bid security will be returned to the successful Bidder(s) as follows:
 - 2.4.1 For single order bids with specified quantities: upon the delivery of all equipment or merchandise, and upon final acceptance by the Owners.
 - 2.4.2 For all other contracts: upon approval by the Owners of the executed contract and bonds.
- 2.5 Owners shall have the right to retain the bid security of Bidders to whom an award is being considered until either:
 - 2.5.1 A contract has been executed and bonds have been furnished.
 - 2.5.2 The specified time has elapsed so that the bids may be withdrawn.
 - 2.5.3 All bids have been rejected.
- 2.6 Bid security will be forfeited to the Owners as full liquidated damages, but not as a penalty, for any of the following reasons, as pertains to this specification document:
 - 2.6.1 If the Bidder fails or refuses to enter into a contract on forms provided by the Owners, and/or if the Bidder fails to provide sufficient bonds or insurance within the time period as established in this specification document.

3. BIDDER'S REPRESENTATION

- 3.1 Each Bidder by electronic signature and submitting a bid, represents that the Bidder has read and understands the specification documents, and the bid has been made in accordance therewith.
- 3.2 Each Bidder for services further represents that the Bidder has examined and is familiar with the local conditions under which the work is to be done and has correlated the observations with the requirements of the bid documents.

4. CLARIFICATION OF SPECIFICATION DOCUMENTS

- 4.1 Bidders shall promptly notify the Purchasing Agent of any ambiguity, inconsistency or error which they may discover upon examination of the specification documents.
- 4.2 Bidders desiring clarification or interpretation of the specification documents for formal bids shall make a written request which must reach the Purchasing Agent at least five (5) calendar days prior to the date and time for receipt of formal bids.
- 4.3 Changes made to the specification documents will be issued electronically. All vendors registered for that bid will be notified of the addendum. Subsequent Bidders will only receive the bid with the addendum included.
- 4.4 Oral interpretations or changes to the bidding documents made in any manner other than written form will not be binding on the Owners; and Bidders shall not rely upon such interpretations or changes.

5. ADDENDA

- 5.1 Addenda are instruments issued by the Owners prior to the date for receipt of bids which modify or interpret the specification document by addition, deletion, clarification or correction.
- 5.2 Addenda notification will be made available to all registered vendors immediately via e-mail for inspection on-line.
- 5.3 No formal bid addendums will be issued later than forty-eight (48) hours prior to the date and time for receipt of formal bids, except an addendum withdrawing the invitation to bid, or an addendum which includes postponement of the bid.

6. INDEPENDENT PRICE DETERMINATION

By signing and submitting this bid, the Bidder certifies that the prices in this bid have been arrived at independently, without consultation, communication or agreement, for the purpose of restricting competition, as to any matter relating to such prices with any other Bidder or with any competitor; unless otherwise required by law, the prices which have been quoted in this bid have not been knowingly disclosed by the Bidder prior to bid opening directly or indirectly to any other Bidder or to any competitor; no attempt has been made, or will be made, by the Bidder to induce any person or firm to submit, or not to submit, a bid for the purpose of restricting competition.

7. ANTI-LOBBYING PROVISION

7.1 During the period between the bid advertisement date and the contract award, Bidders, including their agents and representatives, shall not lobby or promote their bid with any member of the City or County staff or officers except in the course of Owner sponsored inquiries, briefings, interviews, or presentations, unless requested by the Owners.

8. BRAND NAMES

- 8.1 Wherever in the specifications or bid that brand names, manufacturer, trade name, or catalog numbers are specified, it is for the purpose of establishing a grade or quality of material only; and the term "or equal" is deemed to follow.
- 8.2 It is the Bidder's responsibility to identify any alternate items offered in the bid, and prove to the satisfaction of the Owners that said item is equal to, or better than, the product specified.
- 8.3 Bids for alternate items shall be stated in the appropriate space on the e-bid form, or if the proposal form does not contain blanks for alternates, Bidder MUST attach to its bid document on Company letterhead a statement identifying the manufacturer and brand name of each proposed alternate, plus a complete description of the alternate items including illustrations, performance test data and any other information necessary for an evaluation.
- 8.4 The Bidder must indicate any variances by item number from the specification document no matter how slight.
- 8.5 If variations are not stated in the bid, it will be assumed that the item being bid fully complies with the Owners' bidding documents.

9. **DEMONSTRATIONS/SAMPLES**

- 9.1 Bidders shall demonstrate the exact item(s) proposed within seven (7) calendar days from receipt of such request from the Owners.
- 9.2 Such demonstration can be at the Owners delivery location or a surrounding community.
- 9.3 If items are small and malleable, the Bidder is proposing an alternate product, the Bidder shall supply a sample of the exact item. Samples will be returned at Bidder's expense after receipt by the Owners of acceptable goods. The Bidder must indicate how samples are to be returned.

10. <u>DELIVERY (Non-Construction)</u>

- 10.1 Each Bidder shall state on the bid the date upon which it can make delivery of all equipment or merchandise.
- 10.2 The Owners reserve the right to cancel orders, or any part thereof, without obligation, if delivery is not made within the time(s) specified on the bid.
- 10.3 All bids shall be based upon **inside** delivery of the equipment/ merchandise F.O.B. the Owners at the location specified by the Owners, with all transportation charges paid.
- 10.4 At the time of delivery, a designated Owner employee will sign the invoice/packing slip. The signature will only indicate that the order has been received and the items actually delivered agree with the delivery invoice. This signature does not indicate all items met specifications, were received in good condition and/or that there is not possible hidden damage or shortages.

11. WARRANTIES, GUARANTEES AND MAINTENANCE

- 11.1 Copies of the following documents, if requested, shall accompany the bid proposal for all items being bid::
 - 11.1.1 Manufacturer's warranties and/or guarantees.
 - 11.1.2 Bidder's maintenance policies and associated costs.
- 11.2 As a minimum requirement of the Owners, the Bidder will guarantee in writing that any defective components discovered within a one (1) year period after the date of acceptance shall be replaced at no expense to the Owners. Replacement parts of defective components shall be shipped at no cost to the Owners. Shipping costs for defective parts required to be returned to the Bidder shall be paid by the Bidder.

12. ACCEPTANCE OF MATERIAL

- 12.1 All components used in the manufacture or construction of materials, supplies and equipment, and all finished materials, shall be new, the latest make/model, of the best quality, and the highest grade workmanship.
- 12.2 Material delivered under this proposal shall remain the property of the Bidder until:
 - 12.2.1 A physical inspection and actual usage of the material is made and found to be acceptable to the Owners;
 - 12.2.2 Material is determined to be in full compliance with the bidding documents and accepted proposal.
- 12.3 In the event the delivered material is found to be defective or does not conform to the specification documents and accepted proposal, the Owners reserves the right to cancel the order upon written notice to the Bidder and return materials to the Bidder at Bidder's expense.
- 12.4 Awarded Bidder shall be required to furnish title to the material, free and clear of all liens and encumbrances, issued in the name of the Owner, as required by the specification documents or purchase orders.
- 12.5 Awarded Bidder's advertising decals, stickers or other signs shall not be affixed to equipment. Vehicle mud flaps shall be installed blank side out with no advertisements. Manufacturer's standard production forgings, stampings, nameplates and logos are acceptable.

13. BID EVALUATION AND AWARD

- 13.1 The electronic signature shall be considered an offer on the part of the Bidder. Such offer shall be deemed accepted upon issuance by the Owners of purchase orders, contract award notifications, or other contract documents appropriate to the work.
- 13.2 No bid shall be modified or withdrawn for a period of ninety (90) calendar days after the time and date established for receiving bids, and each Bidder so agrees in submitting the bid.
- 13.3 In case of a discrepancy between the unit prices and their extensions, the unit prices shall govern.
- 13.4 The bid will be awarded to the lowest responsible, responsive Bidder whose bid will be most advantageous to the Owners, and as the Owners deem will best serve the requirements and interests of the Owners.
- 13.5 The Owners reserves the right to accept or reject any or all bids; to request rebids; to award bids item-by-item, with or without alternates, by groups, or "lump sum"; to waive minor irregularities in bids; such as shall best serve the requirements and interests of the Owners.
- 13.6 In order to determine if the Bidder has the experience, qualifications, resources and necessary attributes to provide the quality workmanship, materials and management required by the plans and specifications, the Bidder may be required to complete and submit additional information as deemed necessary by the Owners. Failure to provide the information requested to make this determination may be grounds for a declaration of non-responsive with respect to the Bidder.
- 13.7 The Owners reserves the right to reject irregular bids that contain unauthorized additions, conditions, alternate bids, or irregularities that make the Bid Proposal incomplete, indefinite or ambiguous.
- 13.8 Any governmental agency may piggyback on any contract entered into from this bid.

14. INDEMNIFICATION

- 14.1 The Bidder shall indemnify and hold harmless the Owners from and against all losses, claims, damages, and expenses, including, attorney's fees arising out of or resulting from the performance of the contract that results in bodily injury, sickness, disease, death, or to injury to or destruction of tangible property, including the loss of use resulting therefrom and is caused in whole or in part by the Bidder, any subcontractor, any directly or indirectly employed by any of them or anyone for whose acts any of them may be liable. This section will not require the Bidder to indemnify or hold harmless the Owners for any losses, claims damages, and expenses arising out of or resulting from the sole negligence of the Owners.
- 14.2 In any and all claims against the Owners or any of its members, officers or employees by an employee of the Bidder, any subcontractor, anyone directly or indirectly employed by any of them or by anyone for whose acts made by any of them may be liable, the indemnification obligation under paragraph 14.1 shall not be limited in any way by any limitation of the amount or type of damages, compensation or benefits payable by or for the Bidder or any subcontractor under worker's compensation acts, disability benefit acts or other employee benefit acts.

15. TERMS OF PAYMENT

15.1 Unless stated otherwise, the Owners will begin processing payment within thirty (30) calendar days after all labor has been performed and all equipment or other merchandise has been delivered, and all such labor and equipment and other materials have met all contract specifications.

16. LAWS

- The laws of the State of Nebraska shall govern the rights, obligations, and remedies of the parties under this proposal and any contract reached as a result of this process.
- 16.2 Bidder agrees to abide by all applicable local, state and federal laws and regulations concerning the handling and disclosure of private and confidential information concerning individuals and corporations as to inventions, copyrights, patents and patent rights.

17. EQUIPMENT TAX ASSESSMENT

17.1 Any bid for public improvement shall comply with Nebraska Revised Statutes Section 77-1323 and 77-1324. Indicating; every person, partnership, limited liability company, association or corporation furnishing labor or material in the repair, alteration, improvement, erection, or construction of any public improvement shall sign a certified statement which will accompany the contract. The certified statement shall state that all equipment to be used on the project, except that acquired since the assessment date, has been assessed for taxation for the current year, giving the county where assessed.

18. AFFIRMATIVE ACTION

8.1 The City of Lincoln-Lancaster County provides equal opportunity for all Bidders and encourages minority businesses, women's businesses and locally owned business enterprises to participate in our bidding process.

19. INSURANCE

19.1 All Bidders shall take special notice of the insurance provisions required for all City/County and Building Commissions contracts (see *Insurance Requirements for City, County, Building Commission*).

20. EXECUTION OF AGREEMENT

- 20.1 Depending on the type of service and commodity provided, one of the following methods will be employed. The method applicable to this contract will be checked below:
- a. PURCHASE ORDER, unless otherwise noted.
 - This Contract shall consist of a City of Lincoln, Lancaster County and City-County Public Building Commission Purchase Order.
 - A copy of the Bidder's bid response (or referenced bid number) attached and that the same, in all
 particulars, becomes the contract between the parties hereto: that both parties thereby accept and agree
 to the terms and conditions of said bid documents.
- X b. CONTRACT, unless otherwise noted.
 - City, County and City-County Public Building Commission will furnish copies of a Contract to the successful Bidder who shall prepare attachments as required. Insurance as evidenced by a Certificate of Insurance (as required), surety bonds properly executed (as required), and Contract signed and dated.
 - The prepared documents shall be returned to the Purchasing Office within 10 days (unless otherwise noted).
 - 3. The City, County and City-County Public Building Commission will sign and date the Contract.
 - Upon approval and signature, the City, County and City-County Public Building Commission will return one copy to the successful Bidder.

21. TAXES AND TAX EXEMPTION CERTIFICATE

- 21.1 The Owners are generally exempt from any taxes imposed by the state or federal government. A Tax Exemption Certificate will be provided as applicable.
- 22.2 The Water Division of the City of Lincoln is taxable per Reg. 066.14A and no exemption certificate will be issued.

22. CITY AUDIT ADVISORY BOARD

22.1 All parties of any City agreement shall be subject to audit pursuant to Chapter 4.66 of the Lincoln Municipal Code and shall make available to a contract auditor, as defined therein, copies of all financial and performance related records and materials germane to the contract/order, as allowed by law.

23. E-VERIFY

In accordance with Neb. Rev. Stat. 4-108 through 4-114, the contractor agrees to register with and use a federal immigration verification system, to determine the work eligibility status of new employees performing services within the state of Nebraska. A federal immigration verification system means the electronic verification of the work authorization program of the Illegal Immigration Reform and Immigrant Responsibility Act of 1996, 8 U.S.C. 1324 a, otherwise known as the E-Verify Program, or an equivalent federal program designated by the United States Department of Homeland Security or other federal agency authorized to verify the work eligibility status of a newly hired employee pursuant to the Immigration Reform and Control Act of 1986. The Contractor shall not discriminate against any employee or applicant for employment to be employed in the performance of this section pursuant to the requirements of state law and 8 U.S.C.A 1324b. The contractor shall require any subcontractor to comply with the provisions of this section. For information on the E-Verify Program, go to www.uscis.gov/everify.

INSURANCE CLAUSE FOR ALL CITY OF LINCOLN, LANCASTER COUNTY AND PUBLIC BUILDING COMMISSION CONTRACTS

Vendors must provide coverage & documents related to the items with a check mark in Sections 1-1.9. This includes endorsements and waivers as required below.

All Vendors must comply with Sections 2-7.

Insurance; Coverage Information

The contractor shall, prior to beginning work, provide proof of insurance coverage in a form satisfactory to the City/County/PBC, which shall not withhold approval unreasonably. The coverages and minimum levels required by this contract are set forth below and shall be in effect for all times that work is being done pursuant to this Contract. No work on the Project or pursuant to this Contract shall begin until all insurance obligations herein are met to the satisfaction of the City/County/PBC, which shall not unreasonably withhold approval. Self-insurance shall not be permitted unless consent is given by the City/County/PBC prior to execution of the Agreement and may require submission of financial information for analysis. Deductible levels shall be provided in writing from the Contractor's insurer and will be no more than \$25,000.00 per occurrence. Said insurance shall be written on an OCCURRENCE basis, and shall be PRIMARY, with any insurance coverage maintained by the City/County/PBC being secondary or excess.

Certificates

The Contractor shall provide certificates of insurance and endorsements evidencing compliance with these requirements. The Contractor shall provide a Certificate of Insurance demonstrating the coverage required herein and the necessary endorsements and waivers described herein and below before being permitted to begin the work or project. All certificates, endorsements and endorsement forms (where required) must be acceptable to the City Attorney or County Attorney as appropriate. Certificates shall include an endorsement to provide for at least thirty (30) days' firm written notice in the event of cancellation. During the term of the Agreement and during the period of any required continuing coverages, the Contractor shall provide, prior to expiration of the policies, certificates and endorsement forms evidencing renewal insurance coverages. The parties agree that the failure of City/County/PBC to object to the form of a certificate and/or additional insured endorsement or endorsement forms provided shall not constitute a waiver of this requirement.

X 1. Commercial General Liability

The Contractor shall provide proof of Commercial General Liability Insurance with a minimum limit of not less than \$1,000,000.00 each occurrence and \$2,000,000.00 aggregate. These minimum limits can be met by primary and umbrella liability policies. Coverage shall include: Premises-Operations, Products/ Completed Operations, Contractual, Broad Form Property Damage, and Personal Injury. Such coverage shall be endorsed for the general aggregate to be on a **PER PROJECT** basis, and the contractor shall provide an additional insured endorsement acceptable to the City/County/PBC. The required insurance must include coverage for all projects and operations of Contractor or similar language that meets the approval of the City/County/PBC, which approval shall not be unreasonably withheld.

X 1.1 Additional Insured (Requires an Endorsement Form)

An Additional Insured Endorsement Form showing the City/County/PBC as Additional Insured for Commercial General Liability, Auto Liability and such other coverages as may be required by the City/County/PBC.

X 1.2 Automobile Liability

The Contractor shall provide proof of Automobile Liability coverage, which shall include: Owned, Hired and Non-Owned. Bodily Injury and Property Damage Combined Single Limit shall be at least \$1,000,000 Per Accident.

1.3 Garage Keepers / Garage Liability

The Contractor shall provide garage insurance, if required. Coverage shall include Garage Liability and Garage Keepers on a Direct Primary Basis, including Auto Physical Damage, with limits of not less than \$1,000,000 each accident Bodily Injury and Property Damage combined liability and Actual Cash Value auto physical damage. Coverage symbol(s) 30 and 21 shall be provided, where applicable.

X 1.4 Workers' Compensation; Employers' Liability

The Contractor shall provide proof of workers' compensation insurance of not less than minimum statutory requirements under the laws of the State of Nebraska and any other applicable State. Employers' Liability coverage with limits of not less than \$500,000.00 each accident or injury shall be included. The Contractor shall provide the City/County/PBC with an endorsement for waiver of subrogation. The contractor shall also be responsible for ensuring that all subcontractors have workers' compensation insurance for their employees before and during the time any work is done pursuant to this Contract.

1.5 <u>Builder's Risk Insurance</u> (Required only if appropriate)

The Contractor shall purchase and maintain property insurance for all sites upon which construction is occurring as provided by Contract and all storage sites where equipment, materials, and supplies of any kind purchased pursuant to the Contract are being held or stored unless the Contractor receives notice that the City/County/PBC has obtained a builder's risk policy for itself. Except to the extent recoverable by Contractor from another subcontractor, deductibles shall be the responsibility of the Contractor. In the event the Contractor procures the builder's risk policy herein, the Contractor shall provide an endorsement to the City/County/PBC, in a form approved by the City/County/PBC demonstrating additional insured coverage for the City/County/PBC. Approval of such endorsement shall not be unreasonably withheld by the City/County/PBC.

*Coverage required whenever work under contract involves construction or repair of a building structure or bridge.

1.5.1 Waiver of Builder's Risk Insurance Carrier's Subrogation Rights

The Contractor and its Subcontractor(s) waive all rights of action and subrogation that the insurance company providing the builder's risk policy may have against each of them and/or the City/County/PBC, Architect, and the officers, agents and employees of any of them, for all claims, damages, injuries and losses, to the extent covered by such property insurance. Such waiver of subrogation shall be effective for such persons even though such persons would otherwise have a duty of indemnification or contribution, contractual or otherwise, and even though such persons did not pay the insurance premium directly or indirectly, and whether or not such persons had an insurable interest in any property damaged.

1.6 Pollution Liability (Required only if appropriate)

Contractors shall provide proof of pollution liability insurance arising out of all operations of the Contractors and subcontractors, due to discharge, dispersal, release, or escape of contaminants or pollutants into or upon land, the atmosphere or any watercourse or body of water with bodily injury and property damage limits of not less than \$1,000,000 per occurrence and \$2,000,000 annual aggregate for:

- 1) Bodily injury, sickness, disease, mental anguish or shock sustained by any person, including death;
- 2) Property damage including physical injury to or destruction of tangible property including the resulting loss of use thereof, clean-up costs, and the loss of use of tangible property that has not been physically injured or destroyed;
- 3)Defense including loss adjustment costs, charges and expenses incurred in the investigation, adjustment or defense of claims for such compensatory damages;
- 4) Definition of pollution conditions shall include asbestos, lead, and mold so that these risks are covered if caused by contractor/successful candidate's work or operations.
- 5) Coverage is required on an occurrence form.
- *Coverage required whenever work under contract involves pollution risk to the environment.

_____1.7 <u>Errors and Omissions;</u> <u>Professional Liability</u> (Required only if appropriate)

Errors and Omissions or Professional Liability insurance, as may be required, covering damages arising out of negligent acts, errors, or omissions committed by Contractor in the performance of this Agreement, with a liability limit of not less than \$1,000,000 each claim. Contractor shall maintain this policy for a minimum of two (2) years after completion of the work or shall arrange for a two year extended discovery (tail) provision if the policy is not renewed. The intent of this policy is to provide coverage for claims arising out of the performance of professional Services under this contract and caused by any error, omission, breach or negligent act, including infringement of intellectual property (except patent and trade secret) of the Contractor.

*Required whenever service provider is required to be certified, licensed or registered by a regulatory entity and/or where the provider's judgment in planning and design could result in economic loss to City/County/PBC.

1.8 Railroad Contractual Liability Insurance (Required only if appropriate) If work is to be performed within 50 feet of any railroad property and affecting any railroad bridge or trestle, tracks, road beds, tunnel, underpass or railroad crossing, the Contractor must provide an endorsement (ISO® form CG24170193 or newer) that removes or deletes any exception for such work in the Contractor's commercial general liability policy. Any endorsement not described herein shall be subject to the approval of the City/County/PBC Attorney.

1.8.1 Railroad Protective Liability (Required only if appropriate)

If work is to be performed within 50 feet of any railroad property and affecting any railroad bridge or trestle, tracks, road beds, tunnel, underpass or crossing or otherwise required by the Special Provisions or applicable requirements of an affected railroad, the Contractor shall provide Railroad Protective Liability Insurance naming the affected railroad/s as insured with minimum limits for bodily injury and property damage of \$2,000,000 per occurrence, \$6,000,000 aggregate, or such other limits as required in the Special Provisions or by the affected railroad. The original of the policy shall be furnished to the railroad and a certified copy of the same furnished to the City/County/PBC Purchasing Department prior to any related construction or entry upon railroad premises by the Contractor or for work related to the Contract.

_1.9 <u>Cyber Insurance</u> (Required only if appropriate)

The Contractor shall maintain network risk and cyber liability coverage (including coverage for unauthorized access, failure of security, breach of privacy perils, as well at notification costs and regulatory defense) in an amount of not less than \$1,000,000.00. Such insurance shall be maintained in force at all times during the

term of the agreement and for a period of two years thereafter for services completed during the term of the agreement.

2. Risk of Loss

Except to the extent covered by the builder's risk insurance, the Contractor shall have the sole responsibility for the proper storage and protection of, and assumes all risk of loss of, any Subcontractor's Work and tools, materials, equipment, supplies, facilities, offices and other property at or off the Project site. The Contractor shall be solely responsible for ensuring each subcontractor shall take every reasonable precaution in the protection of all structures, streets, sidewalks, materials and work of other subcontractors. Contractor shall protect its Work from damage by the elements or by other trades working in the area.

3. Umbrella or Excess Liability

The Contractor may use an Umbrella, Excess Liability, or similar coverage to supplement the primary insurance stated above in order to meet or exceed the minimum coverage levels required by this Contract.

4. Minimum Scope of Insurance

All Liability Insurance policies shall be written on an "Occurrence" basis only. All insurance coverage are to be placed with insurers authorized to do business in the State of Nebraska and must be placed with an insurer that has an A.M. Best's Rating of no less than A:VII unless specific approval has been granted otherwise.

5. Indemnification

To the fullest extent permitted by law the Contractor shall indemnify, defend, and hold harmless the Owner, its elected officials, officers, employees, agents, consultants, and employees of any of them from and against claims, damages, losses and expenses, including but not limited to attorney fees, arising out of or resulting from performance of the Work, provided that such claim, damage, loss or expense is attributable to bodily injury, sickness, disease or death, or to injury to or destruction of tangible or intangible property, including the Work itself, but only to the extent caused by the negligent, wrongful, or intentional acts or omissions of the Contractor, a subcontractor, anyone directly or indirectly employed by them or anyone for whose acts they may be liable, regardless of whether or not such claim, damage, loss or expense is caused in part by the negligence of a party indemnified hereunder. In the event the claim, damage, loss or expense is caused in part by the negligence of a party indemnified hereunder, the indemnification by the Contractor shall be prorated based on the extent of the liability of the party indemnified hereunder. Such obligation shall not be construed to negate, abridge, or reduce obligations of indemnity which would otherwise exist as to a party or person described in this Section. Nothing herein shall be construed to be a waiver of sovereign immunity by the Owner.

6. Reservation of Rights

The City/County/PBC reserves the right to require a higher limit of insurance or additional coverages when the City/County/PBC determines that a higher limit or additional coverage

is required to protect the City/County/PBC or the interests of the public. Such changes in limits or coverages shall be eligible for a change order or amendment to the Contract.

7. Sovereign Immunity

Nothing contained in this clause or other clauses of this Agreement/Contract shall be construed to waive the Sovereign Immunity of the City/County/PBC.

For questions regarding Insurance Requirements, please contact Risk Management.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

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). CONTACT NAME: PRODUCER PHONE (A/C, No. Ext): E-MAIL FAX (A/C, No) ADDRESS: INSURER(S) AFFORDING COVERAGE NAIC# INSURER A: INSURED INSURER B INSURER C INSURER D INSURER E INSURER E **COVERAGES** CERTIFICATE NUMBER: **REVISION NUMBER:** 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. POLICY EFF POLICY EXP
(MM/DD/YYYY) (MM/DD/YYYY ADDL SUBR LIMITS TYPE OF INSURANCE **POLICY NUMBER** COMMERCIAL GENERAL LIABILITY EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) CLAIMS-MADE MED EXP (Any one person) \$ \$ PERSONAL & ADV INJURY GENERAL AGGREGATE GEN'L AGGREGATE LIMIT APPLIES PER: PRODUCTS - COMP/OP AGG \$ POLICY Loc \$ OTHER: OMBINED SINGLE LIMIT AUTOMOBILE HABILITY BOOL VINJURY (Per person) s ANY AUTO OWNED AUTOS ONLY SCHEDULED BODIL NURY (Per accident) AUTOS NON-OWNED PROPERTY DAMAGE AUTOS ONLY (Per accident) **AUTOS ONLY** \$ UMBRELLA LIAB EACH OCCURRENCE 5 OCCUR **EXCESS LIAB** AGGREGATE CLAIMS-MADE DED RETENTION \$ WORKERS COMPENSATION STATUTE AND EMPLOYERS' LIABILITY ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? E.L. EACH ACCIDENT NIA E.L. DISEASE - EA EMPLOYEE \$ (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below E.L. DISEASE - POLICY LIMIT DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) City of Lincoln and/or Lancaster County and/or City of Lincoln/Lancaster County Public Building Commission are listed as additionally insured. CERTIFICATE HOLDER CANCELLATION City of Lincoln and/or SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. Lancaster County and/or City of Lincoln/Lancaster County Public Building Commission 555 South 10th Street **AUTHORIZED REPRESENTATIVE** Lincoln, NE 68508

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THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – OWNERS, LESSEES OR CONTRACTORS – SCHEDULED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

Name of Person or Organization:

City of Lincoln and/or Lancaster County and/or City of Lincoln/Lancaster County Public Building Commission

(If no entry appears above, information required to complete this endorsement will be shown in the Declarations as applicable to this endorsement.)

- A. Section II Who is An Insured is amended to include as an insured the person or organization shown in the Schedule, but only with respect to Iability arising cut of your ongoing operations performed for that insured.
- B. With respect to the insurance afforded to these additional insureds, added:
 - 2. Exclusions

This insurance does not apply to "bodily injury" or "property damage" occurring after:

- (1) All work, including materials, parts or equipment furnished in connection with such work, on the project (other than service, maintenance or repairs) to be performed by or on behalf of the additional insured(s) at the site of the covered operations has been completed; or
- (2) That portion of 'your work' out of which the injury or damage arises has been but to its intended use by any person or organization other than another contractor or subcontractor engaged in performing operations for a principal as a part of the same project.

(Ed. 4-84)

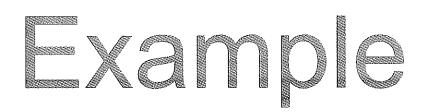
WAIVER OF OUR RIGHT TO RECOVER FROM OTHERS ENDORSEMENT

We have the right to recover our payments from anyone liable for an injury covered by this policy. We will not enforce our right against the person or organization named in the Schedule. (This agreement applies only to the extent that you perform work under a written contract that requires you to obtain this agreement from us.)

This agreement shall not operate directly or indirectly to benefit anyone not named in the Schedule.

Schedule

City of Lincoln and/or Lancaster County and/or City of Lincoln/Lancaster County Public Building Commission



This endorsement changes the policy to which it is attached and is effective on the date issued unless otherwise stated.

(The information below is required only when this endorsement is issued subsequent to preparation of the policy.)

Endorsement Insured	Effective Policy No.	Endorsement No. Premium
Insurance Company	Countersigned by	

WC 00 03 13 (Ed. 4-84)