

CITY OF VANCOUVER
 SECURITY ALARM SYSTEM BY-LAW
 ALARM SYSTEM INSPECTION REPORT

Important - Prior to commencing any inspection work on the alarm system, notify the Monitoring Station that the alarm system is being tested/inspected.

Do not be the cause of a false alarm!!

Inspection Objective

The objective of this inspection report is to evaluate and report upon the condition and use of a security alarm system. The use of the alarm system and the system's operational stability will be examined and evaluated for the express purpose of identifying the causes of false alarms and for making recommendations for improvements to the use or condition of the system to reduce/eliminate false alarms.

General Purpose

The Alarm Inspector will evaluate the quality of the system components and standard of installation as a means to determine the system's ability to operate without causing false alarms from electronic failure or malfunction. The Alarm Inspector will also review all available information relating to recent alarm activity, maintenance and installation design attributes, and will interview the user(s) of the alarm system to establish the probable causes of false alarms.

Through the completion of the Alarm System Inspection Report, the Alarm Inspector will provide information to the Chief Constable of the Vancouver Police Department and/or the Alarm Co-ordinator. This report will be used to determine the conditions of the reinstatement of a cancelled Alarm Permit, or as the basis to issue an Alarm Permit in the first instance.

The Alarm Inspector will also make recommendations for: the improvement of system design, maintenance of the alarm system, change in alarm or monitoring company procedures, and/or training of the alarm user(s), as a means to correct the past false alarm record of the system.

ALARM SYSTEM DETAILS Alarm Permit#: _____ Permit Holder Name: _____ Contact Person: _____ Address: _____ Phone: _____ Fax: _____ Date of Alarm System Installation: _____ BRAND NAME OF MODEL NUMBER OF CONTROL PANEL: _____	DATE OF INSPECTION _____ / _____ / _____ ALARM INSPECTION INFORMATION Inspector: _____ <div style="display: flex; justify-content: space-between; font-size: small;"> LAST NAME FIRST NAME </div> Security Employee File #: _____ T.Q. #: _____ Alarm Company Name: _____ Phone: _____ BY: Invoice / Work Order / Estimate (circle one)
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1) Alarm System Activity

Review recent system activity and record the possible causes for the false alarms. (Attach Activity Report for monitored alarm systems)

5) Is the Reference/Guard information current and correct? Yes No

6) Is the alarm company phone number known and is there 24 hour emergency service available? Yes No

2) Evaluation of the Alarm System

Determine the alarm system's ability to operate without causing false alarms. Report the problems(s) identified as result of your inspection. Consider the following common causes of false alarms:

- | | |
|----------------------------------|-----------------------------|
| A) User Error | D) Service/Maintenance |
| B) System Design | E) Equipment Malfunction |
| C) System Installation Standards | F) Monitoring Station Fault |
| | G) Telephone Line fault |

3) **Test all zones. For monitored alarms, check for the correct transmission of event codes to the monitoring station. Provide monitoring company Alarm Report upon request.**

_____ Done
 INSPECTOR'S INITIALS

4) Miscellaneous

- 1) Does the alarm user have written operation instructions readily available? Yes No
- 2) Is the time delay for entry and exit sufficient for false alarm free operation? Yes No
- 3) Is the monitoring centre phone number known to the user(s) to cancel alarm signals in the event of an error? Yes No
- 4) Does the alarm user have information from the alarm company that will assist in minimizing/eliminating false alarms? Yes No

Alarm Inspector

A) From the list in section 2, please indicate below the main causes of false alarms as determined from this Inspection Report.

B) I certify that this alarm system is functionally:
 Not currently capable Currently capable
 of operating without causing excessive false alarms.

Signature: _____
 ALARM INSPECTOR

C) The users of this alarm system:
 Require Do not require
 training and/or written operating instructions on the proper use of this alarm system.

Signature: _____
 ALARM INSPECTOR

If the alarm system or the users of the alarm system are not currently capable of operating the alarm system without causing excessive false alarms - indicate on additional pages, the specific problem(s) that are, or could be, the cause(s) of excessive false alarms from this system.

D) The problems identified on this report, or on attached pages to this report, have been corrected to my satisfaction and that the corrections are likely to reduce or eliminate false alarms from this security alarm system.

 SIGNATURE OF ALARM INSPECTOR SECURITY EMPLOYEE FILE #

Attach Work Orders, Purchase Orders, Receipts, User Instruction Information, Signatures of System Trained Users etc. as proof of the above.

NOTE: REINSTATEMENT, ISSUANCE, OR REFUSAL TO ISSUE AN ALARM PERMIT PURSUANT TO THIS INSPECTION REPORT IN NO WAY CONSTITUTES A REPRESENTATION OR WARRANTY BY THE CITY OF VANCOUVER/VANCOUVER POLICE DEPARTMENT AS TO THE EFFECTIVENESS OR OTHERWISE OF THE ALARM SYSTEM