



University of Massachusetts- Lowell

Environmental & Emergency Management

220 Pawtucket Street, Suite 140, Lowell, MA 01854

(978) 934-2618

Fax (978) 934-4018

FINAL Inspection Request-Fire

1) Date(s) requested: _____
Please provide 3 dates with AM or PM requested

2) Location of Inspection: _____
Building Name Room(s)

Address of inspection: _____
Number Street Name

3) UML Project Manager: _____

DCAM/UMBA Project Manager: _____

4) Required attachments *as applicable to this request* for final inspection are:

- Fire Pump Manufacturers Acceptance Startup Report
- Third Party inspection reports of all active and passive fire protection
- Copies of all Fire Protection Systems Acceptance or Commissioning Reports(if complete).
- Forwarded to EEM 24 hours prior to scheduled inspection
 - a. Lowell FD Fire Alarm 100% Test Certificate Affidavit Form (If applicable).
 - b. Lowell FD Extinguishing Systems 100% Test Certificate Affidavit Form (If applicable).

5) Description of inspection request. (specify fire protection systems or items to be inspected):

Inspection day on-site requirements:

Installing Contractor(s) to be present for inspection and shall have on site original completed copies of the following for delivery to the Fire Department Inspector:

- Complete set of Fire Protection plans as stamped approved by the Fire Department
- UMass -Lowell Fire Alarm Final Acceptance Certification Form.
- UMass -Lowell Fire Sprinkler Final Acceptance Certification Form
- Copies of all applicable documents and attachments in item 4 above.

Requester: _____

Date of Request: _____

Firm: "" _____

Phone No.: _____

Email: "" _____

Fax: _____