Permit # Date Issued



## DIGITAL ALARM COMMUNICATOR TRANSMITTERS (DACT) UTILIZING MANAGED FACILITY VOICE NETWORKS (MFVN) VERIFICATION FORM

## **IDENTIFICATION**

Work Site Location	Bl	lock Lot	Qualification Code _	
Owner in Fee	Contractor			
Address				
		_)		
	License/Ce	ertification No		
	Federal En	np. ID No		
Compliance Checklist				
When a DACT's means of transmiss Network (MFVN) Service, this check to the Fire Protection Subcode Offici  DACT connected to qualified M  MFVN Provider Name and Telephone in	clist is to be completed by the lice ial of the Local Enforcing Agency FVN service	ensed/certified alarr	m service provider and sub	
DACT telephone circuit(s) config	gured and tested for loop start.			
DACT telephone circuit(s) config	gured and tested for line seizure.	ı.		
Minimum 8-hour standby battery	y installed and tested in MFVN co	ommunications equ	uipment.	
MFVN communications equipme access.	ent installed at the protected pre	mises with safegua	rds to prevent unauthorize	d
DACT alarm, trouble and superv	visory signal transmission reteste	ed to Supervising St	tation successfully.	
Alarm Service Provider name and telep	phone no.			
Supervising Station Service Provider N	lame and Telephone no.			
Signature		 Date		