

Micro-Eye Security Systems Inc.  
13939 S. Kildare  
Crestwood, IL 60418  
Tel :1(708)388-7233 Fax: 1(708)388-2266



Invoice Number  
Sale Date  
Due Date

51273  
7/7/2021  
8/5/2021

CSID

\* EMAILED 7-14-21 TO KYLE  
AT KARNOLD@WAVELANDPROP.COM

DOC-1710 North Randall Road MOB, LLC  
117 W. Willow  
Wheaton, IL 60187

**Service Address**  
RANDALL MEDICAL BUILDING  
ACC.# 970665  
1710 North Randall Road  
Elgin, IL 60123

Description	Qty	Price	Net	Tax	Total
ANNUAL 2021 FIRE ALARM SYS INSPECTION AND TE	1	\$0.00	\$0.00	\$0.00	\$0.00
ANNUAL 2021 FIRE ALARM INSPECTION & TESTING HAS ALREADY BEEN PAID!					
PP12V8AH BACKUP BATTERIES	10	\$44.50	\$445.00	\$0.00	\$445.00
<b>TOTALS</b>			<b>\$445.00</b>	<b>\$0.00</b>	<b>\$445.00</b>

For Service Provided As Per Work Order Number 20356

7/7/2021 PERFORMED ANNUAL 2021 FIRE ALARM SYSTEM INSPECTION AND TESTING. THE FOLLOWING NAC PANEL BATTERIES FAILED LOAD TESTING AND WE REPLACED THEM. A TOTAL OF 10 PP12V8AH BACKUP BATTERIES; 2 FOR NAC PANEL IN 1ST FL ELECTRIC ROOM (1A), 2 FOR 2ND FLOOR NAC PANEL IN ELECTRIC ROOM (2A), 2 FOR 3RD FLOOR NAC PANEL IN ELECTRIC ROOM (2B), 2 FOR 3RD FLOOR NAC PANEL IN ELECTRIC ROOM (3B) AND 2 FOR 3RD FLOOR NAC PANEL IN ELECTRIC ROOM (3C). A COPY OF OUR COMPLETED 2021 FIRE ALARM SYSTEM NFPA REPORT WAS EMAILED TO KYLE ON JULY 14, 2021 AT karnold@wavelandprop.com.

Return Stub Below

Please return this portion of your invoice with your payment. Thank you!

Customer : DOC-1710 North Randall Road MOB, LLC



Due This Inv. \$445.00 Amount Remitted

Payment Method Check ☐ Check Number

Invoice Number 51273  
Bill Payer ID: 2982  
(Primary) CSID:  
Date Remitted

Please remit to : Micro-Eye Security Systems Inc., 13939 S. Kildare, Crestwood, IL 60418

Inv No. 51273

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SECURITY SYSTEMS, INC.

13939 S. KILDARE AVE. CRESTWOOD, IL

"We're Looking Out For You"

## MICRO-EYE SECURITY SYSTEMS, INC.

13939 S. Kildare Ave.

State of Illinois Alarm License: 127.00719

Crestwood, IL 60418-2356

Office: (708)388-SAFE (7233) Fax: (708)388-2266 Email: [microi@aol.com](mailto:microi@aol.com)

### Systems Test Inspection Report

Customer Name: **RANDALL MEDICAL BUILDING**

Location: **1710 NORTH RANDALL ROAD ELGIN, IL 60123**

Date: **07/07/2021**

#### A. System Details

New System

Inspection

1. **Fire Alarm**

Security

Other

2. Is system connected to remote monitoring? **YES** NO

3. If yes, who is notified? **Central Station [X]** Fire Dept. [ ] Security [ ] Other [ ]

4. Communication: Digital [ ] Reverse polarity [ ] Tones Transmission [ ] **AES Radio [X]**

#### B. Test And Inspection Of System

**Radio #970665**

1. Were Control Panel Operation Functions Tested? **YES** NO NA

2. Did Operations Function Properly? **YES** NO NA

If No See, Deficiency Report.

3. Is Emergency Power Provided? **YES** NO NA

4. Battery Condition: **10-NEW PP12v8ah 07/07/2021 & 2-NEW PP12V7AH 03/08/2019**

DC Volts: **fire panel batts 13.47-13.46** Amp Hours: **12/18ah 12.3/18ah**

5. Charging Circuit Voltage Output: **27.23v**

#### C: Detectors

1. Did Smoke Detectors Function Properly?(electric rm) **YES** NO NA

2. Were All Heats Inspected? except elevator hoistway. **YES** NO NA

3. Detector Type

Are They Supervised?

Smoke **YES** NO NA

Heat **YES** NO NA

Duct **YES** NO NA

Other **YES** NO NA

1. Were All Switches Tested?

**YES** NO **NA**

2. Switch Type

Are They Supervised?

Water Flow *Sprinkler tested & serviced by* **YES** NO NA

Tamper *Shabaugh & Sons 888-217-7055* **YES** NO NA

Manual Pull **YES** NO NA

Other **YES** NO **NA**

3. Checked: Horn/Strobe & Strobe

**YES** NO NA

5. Did Audibles operate to Spec?

**YES** NO NA

6. Did Visuals Operate to Spec?

**YES** NO NA

7. Did Trouble Signals Operate?

**YES** NO NA

#### E. Annunciator

1. Working Properly?

**YES** NO **NA**

#### F. Tested: Communication To:

Central Station [ ]

**Fire Dept./Central Dispatch [X]**

Other [ ]

1. Communication Was Tested For: Fire Alarm Signal **[X]** Trouble Signal **[X]** Secure Signal **[X]**  
Supervisory **[X]**

G. System Returned To Normal Operation?

**YES** NO

If No Please See Deficiency Report.

TECHNICIAN SIGNATURE: *Peter J. Angelus*

DATE: **07/07/2021**

