



2760 Beverly Dr.
Suite 9
Aurora, IL 60502
630.506.5535
www.allegiantfire.net

Report to: Waveland Property Group Inc **Date:** 10/15/2025
Property: Rivers Edge Plaza, 105 Jackson Avenue **Job Number:** 44138757
Address: 105 Jackson Avenue **Technician:**
City: Naperville **Ariel Garcia**
State: IL **Zip:** 60540

ANNUAL FIRE ALARM INSPECTION REPORT

MONITORING INFORMATION

Monitoring Agency: naperville fd Account #: pos 726
Phone #: 630 420 6147 Transmission Type: radio OUT: sarah IN: sarah

FIRE ALARM CONTROL PANEL

Manufacturer: firelite Model: ms4 Last Inspection Date: 2024
Type: ☐ Addressable ☒ Conventional Location: 2nd floor common area closet

POWER

	YES	NO	N/A	Note #
Panel is powered by dedicated breaker?	☐	☐	☒	
Breaker location posted at FACP?	☐	☐	☒	
Breaker labeled properly?	☐	☐	☒	
Breaker locked?	☐	☐	☒	
Breaker Location: <u>-</u> Panel #: <u>-</u> Breaker: <u>-</u>				

BATTERIES

Description	Install Date	AMP/HR	Load Test %	PASS	FAIL	Notes
FACP	10/25	8ah	100	☒	☐	replaced
				☐	☐	
				☐	☐	
				☐	☐	
				☐	☐	
				☐	☐	
				☐	☐	
				☐	☐	
				☐	☐	
				☐	☐	

NAC PANELS

Number/Description	Location	PASS	FAIL	Notes
		☐	☐	
		☐	☐	
		☐	☐	
		☐	☐	
		☐	☐	



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DEVICE COUNTS							
Device Type	Quantity	Notes	Device Type	Quantity	PASS	FAIL	Notes
Manual pull stations	6		Horn		☐	☐	
Smoke detectors	9		Horn/Strobe	9	☒	☐	
Heat detectors	5		Strobe	2	☒	☐	
Duct smoke detectors			Speaker		☐	☐	
Beam detectors			Door Holder		☐	☐	
Water flow switches			Fire Dampers		☐	☐	
Tamper switches			Annunciators		☐	☐	
Pressure switches			Elevator Recall		☐	☐	

	YES	NO	N/A	Notes
Was a lift needed to access any initiating devices?	☐	☒	☐	
Is FACP status normal/clear upon departure?	☒	☐	☐	
Did all notification devices operate properly?	☒	☐	☐	
All signals confirmed with Central Station?	☒	☐	☐	
Are any initiating devices located in an elevator hoist way?	☐	☐	☒	
Are fire alarm documents being properly stored?	☒	☐	☐	

DEVICE LIST							
Location	Type	Zone/Address	Listed Sensitivity	Tested Sensitivity	Functional PASS	FAIL	Notes
2nd flr common area	Manual Station	1			☒	☐	
111 front entry	Manual Station	2			☒	☐	
2nd floor common area	Smoke Detector	1			☒	☐	
105 - suite 1	Heat-Fixed Temp	1			☒	☐	
105 - suite 2	Heat-Fixed Temp	1			☒	☐	
105 - suite 3	Heat-Fixed Temp	1			☒	☐	
105 - suite 4	Heat-Fixed Temp	1			☒	☐	
109 - front entry	Manual Station	3			☒	☐	
109 - outside hallway	Manual Station	3			☒	☐	
109 - middle ceiling	Heat-Fixed Temp	3			☒	☐	
233 - front entry	Manual Station	4			☒	☐	
233 - rear exit	Manual Station	4			☒	☐	
233 - sales floor north	Smoke Detector	4			☒	☐	
233 - sales floor center	Smoke Detector	4			☒	☐	
233 - sales floor south	Smoke Detector	4			☒	☐	

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[illegible]

By this signature, I certify: I state that the information on this form is correct at the time and place of my inspection, and that all equipment tested at this time was left in operational condition upon completion of this inspection except as noted in comments above.

Taylor

10/15/2025

Ariel Garcia

126139

NICET #



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