



APPLICATION FOR FIRE ALARM MONITORING

FIRE ALARM MONITORING

QUEENSLAND FIRE AND EMERGENCY SERVICES



Phone: 1800 449 992

Email: qfes.alarms@qfes.qld.gov.au

Important Information

This application is for fire alarm monitoring and involves an Alarm Signalling Equipment (ASE) with Telstra and Optus wireless communication paths. As the solution's carrier paths are wireless, two internal antennas are provided.

If the signals are below the required alarm signal standard, an external antenna will be required. **This cost is not met by Queensland Fire and Emergency Services (QFES).**

Please complete all sections below, QFES is unable to proceed with this application unless ALL sections are completed. Section 4 Registered Owner details are to be the current owners as per Titles Office.

SECTION 1 PROPERTY DETAILS

Premises Name

Street Number Street Name

City/Suburb State Postcode

Lot and Plan Premises Usage

QFES Turnout Address - provide if different to above

Is a slave device required NO YES Slave FCA

Is a sub premises required NO YES Sub Premises FCA

QFES Building Approval Number Building Class(es)

SECTION 2 ALARM PANEL DETAILS

Manufacturer Model

Location of Fire Indicator Panel

SECTION 3 DETECTION *Please indicate the detection to be monitored on each input*

	Input 1	Input 2	Input 3	Input 4
Smoke	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Thermal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MCP	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sprinkler	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

SECTION 4 FIRE PROTECTION COMPANY DETAILS

Company Name

Contact Details - this is the person that QFES will correspond with throughout the connection process

Name Office

Email Mobile

SECTION 5 REGISTERED OWNER DETAILS - AS LISTED IN THE TITLES OFFICE

Owners Name

ABN/ACN

Street/PO Box

City/Suburb State Postcode

Contact Details - this is the person that QFES will send the Alarm Management Agreement to

Name Office

Email Mobile

SECTION 6 IMPORTANT INFORMATION REQUIRED

Date Monitoring Required by

This should be two (2) weeks prior to the expected QFES Building Approval final inspection.

Telstra Signal available at installation point? YES NO

Optus Signal available at installation point? YES NO

Alarm, Fault and Isolate wired (AS1670.3)? YES NO

Sprinkler on separate input? YES NO

Mounting Bracket(s) installed for ASE? * YES NO

* When a Dual Sim ASE bracket is required, the bracket must be ordered and fitted prior to requesting QFES to install the Alarm Signalling Equipment.

Permanent Power to the FIP? YES NO

Power Supply Unit (PSU) monitored? YES NO

12-24 VDC output to power ASE? YES NO

Automatic jacking Pump installed YES NO

SECTION 7 APPLICANTS DECLARATION

Please note: Should the application remain pending for a period that exceeds three (3) months, the application will become invalid and a new application will be required to be submitted.

Australian Standards and Installation Information

Before a technician from ADT can be engaged to attend site to install the ASE, the FIP must be compliant with relevant Australian Standards. Examples are:

AS2118.1 AUTOMATIC FIRE SPRINKLER SYSTEM SECTION 3.2

An alarm "upon actuation of the sprinkler system a distinctive alarm signal shall be automatically transmitted to a fire brigade receiving centre"

AS1670.3 FIRE DETECTION, WARNING, CONTROL AND INTERCOM

The monitoring centre, indicating and logging equipment shall be capable of receiving and processing the following:

- (a) Alarm, fault and isolate signals annunciated and the control and indicating equipment.
- (b) Test signals for alarm, fault and isolate conditions from the control and indicating equipment.
- (c) Network faults.

AS1670.1.3.16.4 - BATTERY CAPACITY

The capacity of the battery shall be such that in the event of failure of the primary power source the batteries shall be capable of maintaining the system in normal working (quiescent) condition for at least 72 h, after which sufficient capacity shall remain to operate two worst case alarm zones and associated ancillary control functions for 30 min. Where the power supply failure is externally monitored, the 72 h requirement may be reduced to 24 h.

Power Fault

A Power Fault input is provided on the ASE for connecting to the Power Supply Fault output. This output should be a Relay contact that is Normally Open and pulled to 0V on fault (Minimum: < 1.5 V [sink current 2 mA maximum]).

ASE Commissioning

We will only schedule an ASE install once we have confirmation of the above information. Example: Fault and isolate relays are programmed, Sprinkler is on a separate input to FIP, FIP is operational and full power is on. At time of commissioning if any of these items are not in fact available our technician will leave site. This will incur additional fees and charges. QFES Fire Alarm Monitoring must be notified once the defects have been rectified so we can reschedule a commissioning date.

Fees and Equipment Charges

A New Connection fee is payable upon application as per the Schedule of Fees and Charges. Payment can be made by cheque payable to Queensland Fire and Emergency Services or via Credit Card.

Contact Details

Phone: 1800 449 992 Email: qfes.alarms@qfes.qld.gov.au

Mail: Queensland Fire and Emergency Services, Fire Alarm Monitoring, GPO Box 1425 Brisbane QLD 4001

I/We hereby apply for a New Connection of Fire Alarm Monitoring and certify that all the information supplied in the application is true and correct and understand the requirements outlined in Section 6.

Applicant's Name

Signature

(A signature is not required for forms submitted electronically)

Date

SECTION 8 INVOICING DETAILS

INVOICING DETAILS FOR CONNECTION FEE

QFES Customer Number If the Customer Number is known, leave the fields below blank.

Company Name

C/- if any

Postal Address

Accounts Contact Details

Name Office

Email Mobile

Preferred Method of Payment

INVOICING DETAILS FOR MANAGEMENT FEE - OWNER AS LISTED IN THE TITLES OFFICE

Tick here if the owner's invoicing details have already been provided above.

QFES Customer Number If the Customer Number is known, leave the fields below blank.

Company Name

C/- if any

Postal Address

Accounts Contact Details

Name Office

Email Mobile

Preferred Method of Payment

SECTION 9 SUBMIT APPLICATION FOR ALARM MONITORING

If you try to submit the form without these fields filled out an error message will appear. Close the error message and return to the form and enter the required information before re-submitting.

Once you click "Submit Electronically" a dialog box will appear asking you to "**Select Email Client**".

If you are using a desktop email client such as MICROSOFT OUTLOOK, select the first option and click "OK". This will automatically send the form to QFES Fire Alarm Monitoring. Otherwise select the second option. You will then need to select a place to save the form on your computer. Attach the file and send to qfes.alarms@qfes.qld.gov.au as you would a normal email.

If no dialog box appears the enhanced functions of this form are not working. Please save the form on your computer, attached the saved file and email to us. Alternatively, please scan and email or print and return by post to:

Email: qfes.alarms@qfes.qld.gov.au **Mail:** QFES Fire Alarm Monitoring, GPO Box 1425 Brisbane QLD 4001

Privacy Policy: This information is being collected for the purposes of administering the provision of fire and emergency services in Queensland, including the management of fire alarm monitoring services. It may be disclosed to partnering agencies of the QFES for the purpose of providing fire alarm monitoring services. For more information on our privacy policy, please go to <http://www.qld.gov.au/legal/privacy/>.