

# Application: Excellence Girls

Ashanti Herndon - aherndon@excellencecharter.org  
Annual Reports

## Summary

**ID:** 0000000340

**Status:** Annual Report Submission

## Entry 1 School Info and Cover Page

**Completed** Aug 3 2020

### Instructions

#### Required of ALL Charter Schools

Each Annual Report begins with completed School Information and Cover Page. The information is collected in survey format within Annual Report portal. When entering information in the portal, some of the following items may not appear, depending on your authorizer and/or your responses to related items.

## Entry 1 School Information and Cover Page

**(New schools that were not open for instruction for the 2019-20 school year are not required to complete or submit an annual report this year).**

Please be advised that you will need to complete this cover page (including signatures) before all of the other tasks assigned to you by your school's authorizer are visible on your task page. While completing this cover page task, please ensure that you select the correct authorizer **(as of June 30, 2020)** or you may not be assigned the correct tasks.

## BASIC INFORMATION

### a. SCHOOL NAME

(Select name from the drop down menu)

EXCELLENCE GIRLS CHARTER SCHOOL 331600860938

**a1. Popular School Name**

EGCS

**b. CHARTER AUTHORIZER (As of June 30th, 2020)**

Please select the correct authorizer as of June 30, 2020 or you may not be assigned the correct tasks.

SUNY BOARD OF TRUSTEES

**c. DISTRICT / CSD OF LOCATION**

CSD #16 - BROOKLYN

**d. DATE OF INITIAL CHARTER**

7/2009

**e. DATE FIRST OPENED FOR INSTRUCTION**

8/2009

**h. SCHOOL WEB ADDRESS (URL)**

<https://nyc.uncommonschools.org/excellence-girls-elementary/>

**i. TOTAL MAX APPROVED ENROLLMENT FOR THE 2019-2020 SCHOOL YEAR (exclude Pre-K program enrollment)**

1534

**j. TOTAL STUDENT ENROLLMENT ON JUNE 30, 2020 (exclude Pre-K program enrollment)**

1321

**k. GRADES SERVED IN SCHOOL YEAR 2019-2020 (exclude Pre-K program students)**

Check all that apply

Grades Served

K, 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12

**l1. DOES THE SCHOOL CONTRACT WITH A CHARTER OR EDUCATIONAL MANAGEMENT ORGANIZATION?**

Yes

## I2. NAME OF CMO/EMO AND ADDRESS

NAME OF CMO/EMO	Uncommon Schools
PHYSICAL STREET ADDRESS	826 Broadway, 9th Floor
CITY	New York
STATE	NY
ZIP CODE	10003
EMAIL ADDRESS	<a href="mailto:mblake@uncommonschoools.org">mblake@uncommonschoools.org</a>
CONTACT PERSON NAME	Michael Blake

## FACILITIES INFORMATION

### m. FACILITIES

Will the school maintain or operate multiple sites in 2020-2021?

	Yes, 3 sites
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### School Site 1 (Primary)

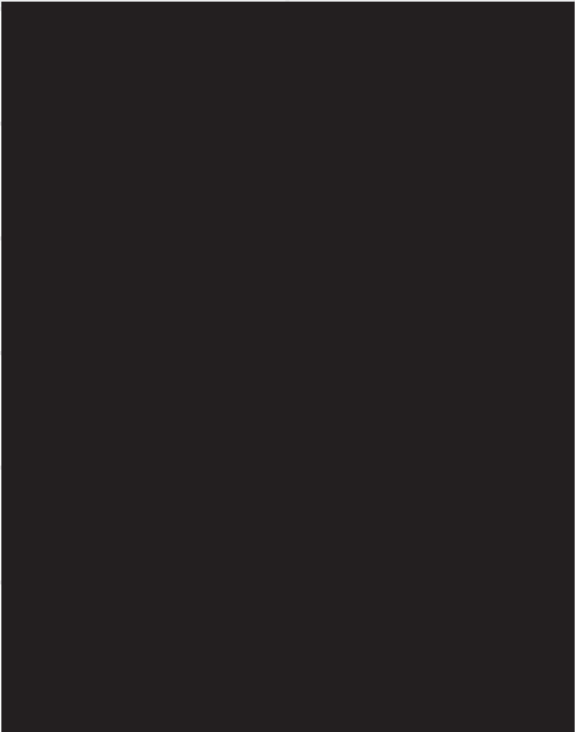


**m1. SCHOOL SITES**

Please provide information on Site 1 for the upcoming school year.

	Physical Address	Phone Number	District/CSD	Grades to be Served at Site for coming year (K-5, 6-9, etc.)	Receives Rental Assistance for Which Grades (If yes, enter the appropriate grades. If no, enter No).
Site 1	794 Monroe Street, 3rd Floor Brooklyn, NY 11221	718-638-1875	NYC CSD 16	K-12	No

**m1a. Please provide the contact information for Site 1.**

	Name	Work Phone	Alternate Phone	Email Address
School Leader	Nikki Bowen			<a href="mailto:nbowen@excellencecharter.org">nbowen@excellencecharter.org</a>
Operational Leader	Brian Thomas			<a href="mailto:bthomas@excellencecharter.org">bthomas@excellencecharter.org</a>
Compliance Contact	John Kim			<a href="mailto:john.kim@uncommonschoools.org">john.kim@uncommonschoools.org</a>
Complaint Contact	John Kim			<a href="mailto:john.kim@uncommonschoools.org">john.kim@uncommonschoools.org</a>
DASA Coordinator	Kenisha Smalls			<a href="mailto:kenisha.smalls@excellencecharter.org">kenisha.smalls@excellencecharter.org</a>
Phone Contact for After Hours Emergencies	Brian Thomas			<a href="mailto:bthomas@excellencecharter.org">bthomas@excellencecharter.org</a>

**m1b. Is site 1 in public (co-located) space or in private space?**

Co-located Space

**m1c. Please list the terms of your current co-location.**

	Date school will leave current co-location	Is school working with NYCDOE to expand into current space?	If so, list year expands on will occur.	Is school working with NYCDOE to move to separate space?	If so, list the proposed space and year planned for move	School at Full Capacity at Site
te 1	N/A	No		No		Yes

**IF LOCATED IN PRIVATE SPACE IN NYC OR IN DISTRICTS OUTSIDE NYC**

**m1d. Upload a current Certificate of Occupancy (COO) and the annual Fire Inspection Report for school site 1 if located in private space in NYC or located outside of NYC .**

**Certificate of Occupancy and Fire Inspection. Provide a copy of a current and non-expired certificate of occupancy (if outside NYC or in private space in NYC). For schools that are not in district space (NYC co-locations), provide a copy of a current and non-expired certificate of occupancy, and a copy of the current annual fire inspection results, which should be dated on or after July 1, 2020.**

**Site 1 Certificate of Occupancy (COO)**

**Site 1 Fire Inspection Report**


**School Site 2**

## m2. SCHOOL SITES

Please provide information on Site 2 for the upcoming school year.

	Physical Address	Phone Number	District/CSD	Grades to be Served at Site for coming year (K-5, 6-9, etc.)	Receives Rental Assistance for Which Grades (If yes, enter the appropriate grades. If no, enter No).
Site 2	1600 Park Place, 4th Floor Brooklyn, NY 11233	347-390-0555	NYC CSD 16	5-8	No

### m2a. Please provide the contact information for Site 2.

	Name	Work Phone	Alternate Phone	Email Address
School Leader	Sofia Mohammed			<a href="mailto:Sofia.Mohammed@excellencecharter.org">Sofia.Mohammed@excellencecharter.org</a>
Operational Leader	Justin Solomon			<a href="mailto:Justin.Solomon@excellencecharter.org">Justin.Solomon@excellencecharter.org</a>
Compliance Contact	Felix Li			<a href="mailto:fli@uncommonschoools.org">fli@uncommonschoools.org</a>
Complaint Contact	Felix Li			<a href="mailto:fli@uncommonschoools.org">fli@uncommonschoools.org</a>
DA A Coordinator	Mary Zanko			<a href="mailto:mary.zanko@excellencecharter.org">mary.zanko@excellencecharter.org</a>
Phone Contact for After Hours Emergencies	Justin Solomon			<a href="mailto:Justin.Solomon@excellencecharter.org">Justin.Solomon@excellencecharter.org</a>

**m2b. Is site 2 in public (co-located) space or in private space?**

Co-located Space

**m2c. Please list the terms of your current co-location.**


	Date school will leave current co-location	Is school working with NYCDOE to expand into current space?	If so, list year expands on will occur.	Is school working with NYCDOE to move to separate space?	If so, list the proposed space and year planned for move	School at Full Capacity at Site
te 2	N/A	No		No		Yes

**School Site 3****m3. SCHOOL SITES**

Please provide information on site 3 for the upcoming school year.

	Physical Address	Phone Number	District/CSD	Grades to be Served at Site for coming year (K-5, 6-9, etc.)	Receives Rental Assistance for Which Grades (If yes, enter the appropriate grades. If no, enter No).
Site 3	1485 Pacific Street Brooklyn, NY 11216	718-638-1868	NYC CSD 16	9-12	No

**m3a. Please provide the contact information for Site 3.**

	Name	Work Phone	Alternate Phone	Email Address
School Leader	Thomas O'Brien			<a href="mailto:tobrien@uncommonhs.org">tobrien@uncommonhs.org</a>
Operational Leader	Amy McDermott			<a href="mailto:Amy.McDermott@uncommonhs.org">Amy.McDermott@uncommonhs.org</a>
Compliance Contact	Lindsay Schilling			<a href="mailto:LSchilling@uncommonschools.org">LSchilling@uncommonschools.org</a>
Complaint Contact	Lindsay Schilling			<a href="mailto:LSchilling@uncommonschools.org">LSchilling@uncommonschools.org</a>
DASA Coordinator	Elodie St. Fleur			<a href="mailto:elodie.stfleur@uncommonhs.org">elodie.stfleur@uncommonhs.org</a>
Phone Contact for After Hours Emergencies	Amy McDermott			<a href="mailto:Amy.McDermott@uncommonhs.org">Amy.McDermott@uncommonhs.org</a>

**m3b. Is site 3 in public (co-located) space or in private space?**

Private Space

## IF LOCATED IN PRIVATE SPACE IN NYC OR IN DISTRICTS OUTSIDE NYC

**m3d. Upload a current Certificate of Occupancy (COO) and the annual Fire Inspection Report for school site 3 if located in private space in NYC or located outside of NYC .**

**Certificate of Occupancy and Fire Inspection. Provide a copy of a current and non-expired certificate of occupancy (if outside NYC or in private space in NYC). For schools that are not in district space (NYC co-locations), provide a copy of a current and non-expired certificate of occupancy, and a copy of the current annual fire inspection results, which should be dated on or after July 1, 2020.**

### **Site 3 Certificate of Occupancy (COO)**

[C of O for 1485 Pacific St.pdf](#)

**Filename:** C of O for 1485 Pacific St.pdf **Size:** 1.7 MB

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### **Site 3 Fire Inspection Report**

[UCHS Fire Inspection Reports.pdf](#)

**Filename:** UCHS Fire Inspection Reports.pdf **Size:** 6.3 MB

## **CHARTER REVISIONS DURING THE 2019-2020 SCHOOL YEAR**

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**n1. Were there any revisions to the school's charter during the 2019-2020 school year? (Please include approved or pending material and non-material charter revisions).**

Yes

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## n2. Summary of Charter Revisions

	Category (Select Best Description)	Specific Revision (150 word limit)	Date Approved by BOT (if applicable)	Date Approved by Authorizer (if applicable)
1	Change in student/family handbook	The school completed its annual revision of its student and family handbook in order to ensure compliance, clarify language for parents and students, and to reflect practice in schools.	June 18, 2020	
2	Change in teacher/staff handbook	The school completed its annual revision of its employee handbook in order to ensure compliance and to best support all staff.	June 18, 2020	
3	Other	UCHS added a 15:1 special education program to the existing charter	March 11, 2020	
4				
5				

**More revisions to add?**

No

**PLEASE NOTE CHARTER SCHOOLS WILL NO LONGER SUBMIT FINANCIAL STATEMENTS, ANNUAL BUDGETS, AND RELATED FISCAL DATA VIA THE ANNUAL REPORT. HOWEVER, NYSED BOARD OF REGENTS WOULD LIKE TO KNOW IF YOUR SCHOOL'S BOARD OF TRUSTEES HAS APPROVED A BUDGET FOR THE 2020-2021 FISCAL YEAR.**

**o. Has your school's Board of Trustee's approved a budget for the 2020-2021 FY?**

Yes

**ATTESTATION**

**p. Individual Primarily Responsible for Submitting the Annual Report.**

Name	Brian Thomas
Position	Director of Operations
Phone/Extension	718-638-1875
Email	<a href="mailto:bthomas@excellencecharter.org">bthomas@excellencecharter.org</a>

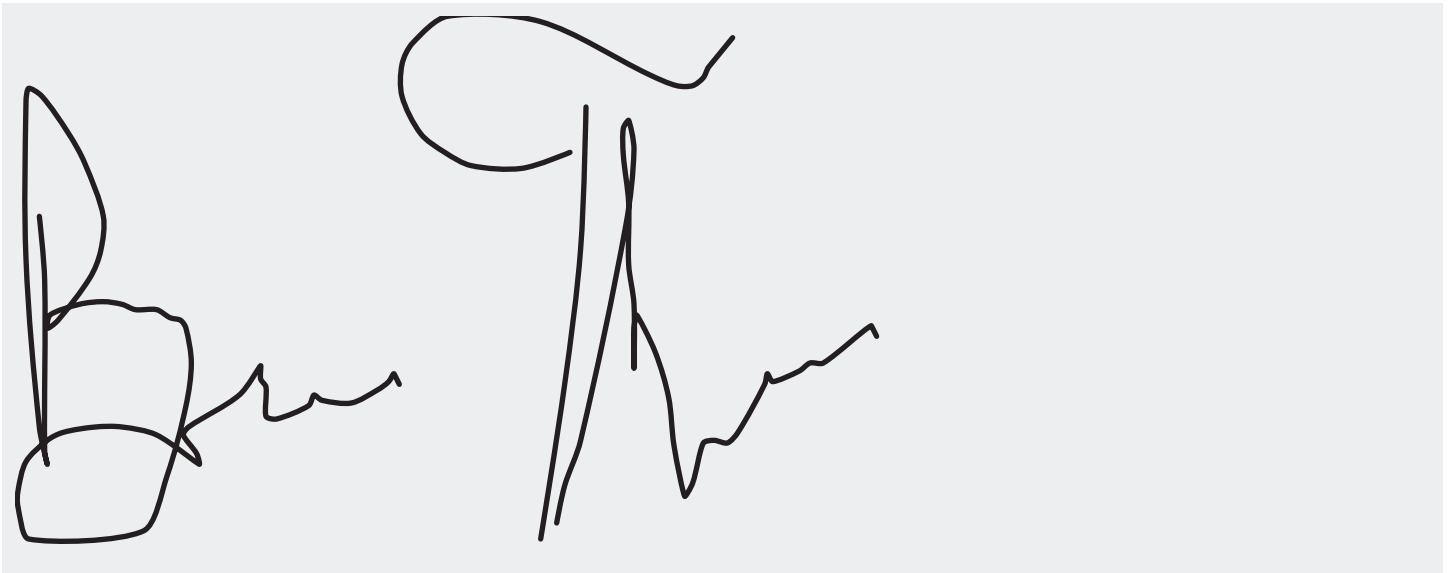


p. Our signatures (Executive Director/School Leader/Head of School and Board President) below attest that all of the information contained herein is truthful and accurate and that this charter school is in compliance with all aspects of its charter, and with all pertinent Federal, State, and local laws, regulations, and rules. We understand that if any information in any part of this report is found to have been deliberately misrepresented, that will constitute grounds for the revocation of our charter. Check **YES** if you agree and then use the mouse on your PC or the stylus on your mobile device to sign your name).

### Responses Selected:

Yes

Signature, Head of Charter School

A handwritten signature in black ink on a light gray background. The signature is stylized, starting with a large, looped 'H' and ending with a series of sharp, upward-pointing strokes.

**Signature, President of the Board of Trustees**



**Date**

Aug 3 2020

**Thank you.**



## **Entry 2 NYS School Report Card**

**Completed** Aug 3 2020

### **Instructions**

#### **SUNY-authorized charter schools only**

Provide direct web link to the most recent New York State School Report Card for the charter school (See <https://reportcards.nysed.gov/>) . This report captures school-level enrollment and demographic information, staff qualifications, electronic student records, and attendance rates, as prescribed by New York State statute (8 NYCRR 119.3).

## **Entry 2 NYS School Report Card Link**

**EXCELLENCE GIRLS CHARTER SCHOOL 331600860938**

## NEW YORK STATE REPORT CARD

Provide a direct URL or web link to the most recent New York State School Report Card for the charter school (See <https://reportcards.nysed.gov/>).

(Charter schools completing year one will not yet have a School Report Card or link to one.

Please type "URL is not available" in the space provided.)

<https://data.nysed.gov/essa.php?year=2019&instid=800000064231>

## Entry 3 Progress Toward Goals

**Incomplete** Hidden from applicant

## Instructions

Regents, NYCDOE, and Buffalo BOE-authorized charter schools

For the 2019-2020 school year, any academic or organization goals that cannot be evaluated due to school closure resulting in lack of data and changes in testing, surveying, and other usual practices should be reported as "N/A".

## Entry 3 Progress Toward Goals

### PROGRESS TOWARD CHARTER GOALS

Board of Regents-authorized and NYCDOE-authorized charter schools only.

Complete the tables provided. List each goal and measure as contained in the school's currently approved charter, and indicate whether the school has met or not met the goal. Please provide information for all goals no later than November 2, 2020.

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## 1. ACADEMIC STUDENT PERFORMANCE GOALS

**For the 2019-2020 school year, any academic goals that cannot be evaluated due to school closure resulting in a lack of data and changes in testing, surveying, and other usual practices should be reported as “N/A”.**

### 2019-20 Progress Toward Attainment of Academic Goals

	Academic Student Performance Goal	Measure Used to Evaluate Progress Toward Attainment of Goal	Goal - Met, Not Met or Unable to Assess	If not met, describe efforts the school will take to meet goal. If unable to assess goal, type N/A for Not Applicable
Academic Goal 1				
Academic Goal 2				
Academic Goal 3				
Academic Goal 4				
Academic Goal 5				
Academic Goal 6				
Academic Goal 7				
Academic Goal 8				
Academic Goal 9				
Academic Goal 10				

## 2. Do have more academic goals to add?

(No response)

## 2019-2020 Progress Toward Attainment of Academic Goals

	Academic Student Performance Goal	Measure Used to Evaluate Progress Toward Attainment of Goal	Goal - Met, Not Met or Unable to Assess	2019-2020 progress toward attainment of goal Met/Not Met/Unable to Assess During Due to Closure
Academic Goal 11				
Academic Goal 12				
Academic Goal 13				
Academic Goal 14				
Academic Goal 15				
Academic Goal 16				
Academic Goal 17				
Academic Goal 18				
Academic Goal 19				
Academic Goal 20				

## 3. Do have more academic goals to add?

(No response)

## 2019-2020 Progress Toward Attainment of Academic Goals

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	Academic Student Performance Goal	Measure Used to Evaluate Progress Toward Attainment of Goal	Goal - Met, Not Met or Unable to Meet	If not met, describe efforts the school will take to meet goal. If unable to assess goal, type N/A for Not Applicable
Academic Goal 21				
Academic Goal 22				
Academic Goal 23				
Academic Goal 24				
Academic Goal 25				
Academic Goal 26				
Academic Goal 27				
Academic Goal 28				
Academic Goal 29				
Academic Goal 30				
Academic Goal 31				
Academic Goal 32				
Academic Goal 33				
Academic Goal 34				
Academic Goal 35				
Academic Goal 36				
Academic Goal 37				
Academic Goal 38				
Academic Goal 39				
Academic Goal 40				

#### 4. ORGANIZATION GOALS

**For the 2019-2020 school year, any organization goals that cannot be evaluated due to school closure resulting in a lack of data and changes in testing, surveying, and other usual practices should be reported as “N/A”.**

##### 2019-2020 Progress Toward Attainment of Organization Goals

	Organizational Goal	Measure Used to Evaluate Progress	Goal - Met, Not Met, or Unable to Assess	If not met, describe efforts the school will take to meet goal. If unable to assess goal, type N/A for Not Applicable
Org Goal 1				
Org Goal 2				
Org Goal 3				
Org Goal 4				
Org Goal 5				
Org Goal 6				
Org Goal 7				
Org Goal 8				
Org Goal 9				
Org Goal 10				
Org Goal 11				
Org Goal 12				
Org Goal 13				

Org Goal 14				
Org Goal 15				
Org Goal 16				
Org Goal 17				
Org Goal 18				
Org Goal 19				
Org Goal 20				

## 5. Do have more organizational goals to add?

(No response)

## 6. FINANCIAL GOALS

### 2019-2020 Progress Toward Attainment of Financial Goals

	Financial Goals	Measure Used to Evaluate Progress	Goal - Met, Not Met, or Partially Met	If not met, describe efforts the school will take to meet goal.
Financial Goal 1				
Financial Goal 2				
Financial Goal 3				
Financial Goal 4				
Financial Goal 5				

## 7. Do have more financial goals to add?

(No response)



## 2019-2020 Progress Toward Attainment of Financial Goals

	Financial Goals	Measure Used to Evaluate Progress	Goal - Met, Not Met, or Partially Met	If not met, describe efforts the school will take to meet goal.
Financial Goal 6				
Financial Goal 7				
Financial Goal 8				
Financial Goal 9				
Financial Goal 10				

Thank you.

## Entry 3 Accountability Plan Progress Reports

Incomplete

### Instructions

### **SUNY-Authorized Charter Schools ONLY**

SUNY-authorized charter schools must download an [Accountability Plan Progress Report template](#). After completing, schools must upload the document into the by September 15, 2020.

## Entry 7 Disclosure of Financial Interest Form

Completed Aug 3 2020

### Instructions - Multiple Uploads Permitted

#### **Required of ALL Charter Schools by August 3**

Each member of the charter school's Board of Trustees who served on a charter school education corporation governing one or more charter schools for any period during the 2019-2020 school year must complete a signed:

- **Regents, NYCDOE, and Buffalo BOE Authorized Schools: [Disclosure of Financial Interest Form](#)**

- **SUNY- Authorized Charter Schools:** [Trustee Financial Disclosure Form](#)

All completed forms must be collected and uploaded in .PDF format for each individual member. If a trustee is not able or available to complete the form by the deadline, the education corporation is responsible for doing so on behalf of the trustee. (Forms completed from past years will not be accepted).

Trustees serving on an education corporation that governs more than one school are not required to complete a separate disclosure for each school governed by the education corporation. In the Disclosure of Financial Interest Form, trustees must disclose information relevant to any of the schools served by the governing education corporation.

## Merged\_DisclosureFinanceForms

**Filename:** Merged\_DisclosureFinanceForms\_M7OH9Kd.pdf **Size:** 7.3 MB

## Entry 8 BOT Membership Table

**Completed** Aug 3 2020

## Instructions

### Required of All charter schools

ALL charter schools or education corporations governing multiple schools must complete the Board of Trustees Membership Table within the online portal. Please be sure to include and identify parents who are members of the Board of Trustees and indicate whether parents are voting or non-voting members.

## Entry 8 BOT Table

1. SUNY-AUTHORIZED charter schools are required to provide information for VOTING Trustees only.
2. REGENTS, NYCDOE, and BUFFALO BOE-AUTHORIZED charter schools are required to provide information for all --VOTING and NON-VOTING-- trustees.

### EXCELLENCE GIRLS CHARTER SCHOOL 331600860938

#### 1. 2019-2020 Board Member Information (Enter info for each BOT member)

Trustee Name	Position on the	Committ ee	Voting Member	Number of Terms	Start Date of	End Date of	Board Meetings

	and Email Address	Board	Affiliation s	Per By- Laws (Y/N)	Served	Current Term (MM/DD/ YYYY)	Current Term (MM/DD/ YYYY)	Attended During 2019- 2020
1	Liton Mann III - [REDACTED]	Chair	Executive , Academ c	Yes	4	06/01/20 19	06/01/20 22	5 or less
2	Brett Pe ser [REDACTED]	Other	N/A	Yes	5	06/01/20 19	06/01/20 22	5 or less
3	Chrystal Stokes Williams [REDACTED]	Other	Audit, Advocacy	Yes	4	06/01/20 20	06/01/20 23	5 or less
4	Ekwutozi a U. Nwabuzo r [REDACTED]	Other	Executive , Academ c	Yes	2	06/01/20 19	06/01/20 22	5 or less
5	John Greenstei [REDACTED]	Other	Finance, Advocacy	Yes	5	06/01/20 20	06/01/20 23	5 or less
6	John Kim [REDACTED]	Other	Finance	Yes	2	06/01/20 19	06/01/20 22	5 or less

7	Joseph F. Wayland [REDACTED]	Other	Executive , Finance	Yes	3	06/01/2019	06/01/2022	5 or less
8	Michael Hall [REDACTED]	Other	Advocacy	Yes	4	06/01/2008	06/01/2021	5 or less
9	Shakima Jones [REDACTED]	Other	Advocacy , Finance	Yes	3	06/01/2019	06/01/2022	5 or less

**1a. Are there more than    members of the Board of Trustees?**

Yes

**1b. Current Board Member Information**

	Trustee Name and Email Address	Pos t on on the Board	Committ ee Affiliation s	Vot ng Member Per By- Laws (Y/N)	Number of Terms Served	Start Date of Current Term (MM/DD/ YYYY)	End Date of Current Term (MM/DD/ YYYY)	Board Meetings Attended During 2019- 2020
10	Jabali Sawiki jabalisaw icki@gmail. <a href="mailto:jabalisawicki@gmail.com">il.com</a>	Other	Academic	Yes	1	12/01/20 19	06/01/20 23	5 or less
11	Ann Mathews Ann.Math ews@gs. com	Other	Academic	Yes	1	06/01/20 18	06/01/20 21	5 or less
12	Tony Pasquar e llo tony.pasq uariello@ <a href="mailto:tony.pasquariello@gs.com">gs.com</a>	Vice Chair	Executive	Yes	3	06/01/20 18	06/01/20 21	5 or less
13								
14								
15								

**1c. Are there more than 15 members of the Board of Trustees?**

No

## 2. INFORMATION ABOUT MEMBERS OF THE BOARD OF TRUSTEES

1. SUNY-AUTHORIZED charter schools provide response relative to VOTING Trustees only.
2. REGENTS, NYCDOE, and BUFFALO BOE-AUTHORIZED charter schools provide a response relative to all trustees.

a. Total Number of BOT Members on June 30, 2020	12
b.Total Number of Members Added During 2019-2020	1
c. Total Number of Members who Departed during 2019-2020	0
d.Total Number of members, as set in Bylaws, Resolution or Minutes	12

## 3. Number of Board meetings held during 2019-2020

5

## 4. Number of Board meetings scheduled for 2020-2021

4

Thank you.

## Entry 9 Board Meeting Minutes

**Incomplete** Hidden from applicant

### Instructions

Schools must upload a complete set of monthly board meeting minutes (July 2019-June 2020), which should match the number of meetings held during the 2019-2020 school year, as indicated in the above table. The minutes provided must be the final version approved by the school's Board of Trustees and may be uploaded individually or as one single combined file. Board meeting minutes must be submitted by August 3, 2020.

## Entry 10 Enrollment & Retention

Completed Aug 3 2020

### Instructions for submitting Enrollment and Retention Efforts

**ALL charter schools must complete this section.** Describe the efforts the charter school has made toward meeting targets in 2018-2019 to attract and retain enrollment of Students with Disabilities (SWDs), English Language Learners/Multilingual Learners (ELLs/MLLs), and students who are economically disadvantaged. In addition, describe the school's plans for meeting or making progress toward meeting its enrollment and retention targets in 2019-2020.

## Entry 10 Enrollment and Retention of Special Populations

### Instructions for Reporting Enrollment and Retention Strategies

Describe the efforts the charter school has made in 2019-2020 toward meeting targets to attract and retain enrollment of students with disabilities, English language learners/Multilingual learners, and students who are economically disadvantaged. In addition, describe the school's plans for meeting or making progress toward meeting its enrollment and retention targets in 2020-2021.

**EXCELLENCE GIRLS CHARTER SCHOOL 331600860938**

### Recruitment/Attraction Efforts Toward Meeting Targets

	Describe Recruitment Efforts in 2019-2020	Describe Recruitment Plans in 2020-2021
	<ul style="list-style-type: none"><li>• All Uncommon Schools in New York City worked together on community outreach and enrollment efforts. By combining our efforts and sharing information about all of our schools at one time, we were able to reach far more students in New York City than if our schools worked independently.</li><li>• Uncommon Schools NYC hosted</li></ul>	

a network-wide Community Day, in which all Uncommon Schools have come together to canvass across Brooklyn, while simultaneously partnering with community organizations to host events in some of our biggest Community School Districts.

- The School used a combined Uncommon Schools application that allowed families to apply to multiple Uncommon Schools with just one application. This made it easier for a family to learn about and access all of our schools and allows our schools to reach a broader population of students.

- In addition to the combined Uncommon Schools application, the School participated in the New York City Charter School Center's Common Application for all charter schools in NYC. By continuing to offer our application as part of the common application for all charter schools, we are able to reach an even broader population of students.

- The School sent out multiple mailings to prospective students throughout the year through Vanguard Direct, Inc., focusing on the zip codes near our schools that have the highest number of FRPL and ELL students. Materials were sent out in English and Spanish, and included a self-addressed, stamped envelope to limit the barrier to return the completed application.

- The School ran both English and Spanish language ads in the New York City Housing Authority Journal. On their website, the



## Economically Disadvantaged

NYCHA Journal says they are “hand-delivered to each of the 178,000 apartments in NYCHA’s 334 public housing developments throughout the five boroughs.” It was also be distributed to more than 10,000 NYCHA employees, and mailed to elected officials and community leaders. It was also available through email subscription.

- The School ran both online and in-print Spanish language ads in El Diario – a Spanish language daily newspaper with high circulation throughout Brooklyn.
- The School partnered with El Diario to send a direct Spanish-language email to families that live within our school zip-codes and have school-aged children.
- The School ran advertisements for enrollment on buses with strategic routes throughout the CSDs we serve in Brooklyn.
- Additionally, we implemented an MTA bus shelter advertisement in high pedestrian traffic areas of the neighborhoods in which our schools are located to reach families from within our community school district. The bus shelter advertisements included school-specific information as well as information about our schools, programs, and populations served.
- The School visited the NYCHA sites within our neighborhood on multiple occasions to hang flyers, leave applications and speak with residents to ensure that residents of these locations were

The school will continue the efforts at left to recruit economically disadvantaged students, and will also:

- Implement a more robust community canvassing plan that involves current families.
- Expand digital advertising efforts to reach a broader population.

	<p>aware of our school and have the necessary information and materials needed to apply.</p> <ul style="list-style-type: none"> <li>• The School ran a digital advertisement campaign that targeted families that live in zip codes near our schools and that have a high number of FRPL eligible and ELL students.</li> <li>• The School participated in education, health, and career fairs in our school neighborhoods to share information about individual schools and our admissions and application process.</li> <li>• In order to continue efforts to widely disseminate information about our School to prospective families, this year, the School worked with broadcasting agency, Entercom to run advertisements on two popular NYC radio stations.</li> </ul>	
	<p>See the response to “economically disadvantaged students” above. In addition, the school:</p> <ul style="list-style-type: none"> <li>• Used Census tract data to create maps showing the distributions of the populations of the top five most spoken languages after English.</li> <li>• Using these maps, we created community canvassing walks for the School to take to travel through those neighborhoods. On the walks, school staff and families visited local stores, organizations, shelters, and apartment buildings and hung flyers and left brochures and applications in English and Spanish at each location. In</li> </ul>	

addition, school staff spoke to residents along the way (in English and in Spanish) to spread the word about our schools.

- We will continue to translate all our outreach materials that are distributed by our schools.

Materials were produced and disseminated in English and Spanish will include our enrollment website and online lottery and waitlist applications, paper lottery applications, full color brochures and flyers, posters, informational packets, and tear away information sheets.

- We utilized the New York City Charter School Center's Common Application, which is available to families in six different languages.

- We identified high priority local community organizations to reach out to, based on factors including location, age group served, and proximity to high non- English-speaking populations. Each organization received a call from the regional admissions office by a fluent Spanish speaking staff member and a mailing including brochures, flyers and applications in all relevant languages.

- We met with the Committee for Hispanic Children, a non-profit referral service which helps Hispanic families find daycares, schools and enrichment programs for their students, to ensure that they were aware of our schools as an option for their families and provided them with

The school will continue the efforts at left to recruit ELL students, and will also:

- Implement a more robust

English Language  
Learners/Multilingual Learners

outreach materials that they could share with the families that they serve.

- A Spanish speaking staff member was available at our admissions office by phone and email 40 hours a week during student recruitment season.
- We took advantage of the DOE's Over-the-phone Interpretation Services, which allowed our school staff members to communicate with a parent with the assistance of an interpreter on the phone. This service increased our capacity to connect with families who speak a wider range of languages.
- We also know that families of our current ELL students are our best resource to reach new ELL students. All families at our schools will continue to receive applications to distribute to family and friends in English and Spanish. Families of ELL students will continue to receive extra applications. In addition, we worked to identify ELL families interested in volunteering to support student admissions efforts. These families met with a school staff member to learn about a variety of ways that they could get the word out about our schools and distribute applications to others. These families were encouraged to speak at their churches, or other local organizations to spread the word about our schools.
- We ran Spanish language ads with El Diario – a Spanish publication with the largest readership increase than any

community canvassing plan that involves current families.

- Expand digital advertising efforts to reach a broader population.
- Implement Spanish-Language transit advertisements.

	<p>other daily newspaper in New York. Uncommon Schools will also place bilingual advertisements in the NYCHA Journal and several neighborhood weekly publications throughout the student recruitment cycle.</p> <ul style="list-style-type: none"> <li>• Uncommon Schools NYC ran Google and additional digital ads in Spanish so that families searching for information about schools in New York City in Spanish see ads for our school and be directed to our Spanish webpages and applications.</li> <li>• Each applicant, whether they are selected in the lottery or placed on the waitlist, will receive a letter in both Spanish and English telling them the results of the lottery and the next steps to enrolling in the school.</li> </ul>	
	<p>See the response to “economically disadvantaged students” above. In addition, the school:</p> <ul style="list-style-type: none"> <li>• Identified and targeted all preschools that are certified to offer services to students with disabilities in our school communities. Head Starts will be included in this search, as they are mandated to serve a student body with at least 10% students with disabilities.</li> <li>• Identified a list of preschools, Pre-K programs, and early childhood development centers that are high priority for our schools due to their location and student population. These high priority sites received calls, visits, and recruitment materials</li> </ul>	

## Students with Disabilities

for both elementary and middle school.

- Worked to build strong connections with our Committee on Special Education to ensure they know we are an option for students, should they wish to recommend students to join us.
- Reached out to related service agencies that we work with/have worked with in the past, to talk about the supports we offer students and asked if they had any students who could be recommended to apply.
- Confirmed that application materials clearly stated that all students, including those with disabilities, are eligible to apply. This language appeared on our enrollment websites, Kindergarten and 5th grade lottery applications, waitlist applications for all grades, the brochures that were distributed to organizations and mail to 24,000 Brooklyn families, as well as in the presentations given at our information sessions.
- Our admissions office and school-based staff will continue to be trained on this question so that they could answer the concerns of any families of potential applicants with special needs who called in.
- Revised our admissions brochure to explicitly mention our high-quality intervention programs that our schools offer of tutoring and small group instruction.
- We created a one-page overview of Special Education Services at Uncommon to share

The school will continue the efforts at left to recruit students with disabilities, and will also:

- Implement a more robust community canvassing plan that involves current families.
- Expand digital advertising efforts to reach a broader population

with prospective families.

### Retention Efforts Toward Meeting Targets

	Describe Retention Efforts in 2019-2020	Describe Retention Plans in 2020-2021
Economically Disadvantaged	<p>In accordance with our mission to prepare students for college, we want all of our students, including FRPL, ELL and students with disabilities, to stay with us through high school graduation. The School has had historically high levels of persistence for these sub-populations. We believe that creating high-quality educational program, hiring and training highly qualified teachers, and communicating regularly with families of all students has helped us to achieve high rates of persistence across our student body. We will continue to analyze our data to ensure that we are serving students from these populations as effectively as all other students and keeping them in our schools in the same numbers.</p>	<p>We will continue the efforts described at left in 2019 to ensure that high numbers of economically disadvantaged students are given the supports they need to persist in the School.</p>
English Language Learners/Multilingual Learners	<p>See response for retention of economically disadvantaged students. In addition, each school has an English as a New Language teacher in its school, to more directly and completely ensure that students learning English are supported in the school and are provided with direct English instruction by a qualified teacher as needed.</p>	<p>We will continue the efforts described at left in 2019 to ensure that high numbers of ELL students are given the supports they need to persist in the School.</p>

Students with Disabilities	See response for retention of economically disadvantaged students.	We will continue the efforts described at left in 2019 to ensure that high numbers of students with disabilities are given the supports they need to persist in the School.
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## Entry 12 Percent of Uncertified Teachers

**Incomplete** Hidden from applicant

### Instructions

#### **Required of Regents, NYCDOE, and Buffalo BOE Authorized Charter Schools ONLY**

The table below reflects the information collected through the online portal for compliance with New York State Education Law 2854(3)(a-1) for teaching staff qualifications. Uncertified teachers are those not certified pursuant to the State Certification Requirements established by the NYSED Commissioner of Education.

## Entry 12 Uncertified Teachers

**School Name:** EXCELLENCE GIRLS CHARTER SCHOOL 331600860938

## Instructions for Reporting Percent of Uncertified Teachers

#### **Required of Regents, NYCDOE, and Buffalo BOE Authorized Charter Schools**

The table below reflects the information collected through the online portal for compliance with New York State Education Law 2854(3)(a-1) for teaching staff qualifications. Uncertified teachers are those not certified pursuant to the State Certification Requirements established by the NYSED Commissioner of Education. Enter the relevant full-time equivalent (FTE) count of teachers in each column. For example, a school with 20 full-time teachers and 5 half-time teachers would have an FTE count of 22.5.

If more than one line applies to a teacher, please include in only one FTE uncertified category. Please do not include paraprofessionals, such as teacher aides.



**CATEGORY A. 30% OR 5 UNCERTIFIED TEACHERS WHICHEVER IS LESS**

	FTE Count
i. FTE count of uncertified teacher with at least three years of elementary, middle or secondary classroom teaching experience (as of June 30, 2020)	
ii. FTE count of uncertified teachers who are tenured or tenure track college faculty (as of June 30, 2020)	
iii. FTE count of uncertified teachers with two years of Teach for America experience (as of June 30, 2020)	
. FTE count of uncertified teachers with exceptional business, professional, artistic, athletic, or military experience (as June 30, 2020)	
Total Category A: 5 or 30% whichever is less	0

**CATEGORY B. PLUS FIVE UNCERTIFIED TEACHERS IN MATHEMATICS, SCIENCE, COMPUTER SCIENCE, TECHNOLOGY OR CAREER AND TECHNICAL EDUCATION.**

	FTE Count
i. FTE count of uncertified teacher with at least three years of elementary, middle or secondary classroom teaching experience (as of June 30, 2020)	
ii. FTE count of uncertified teachers who are tenured or tenure track college faculty (as of June 30, 2020)	
iii. FTE count of uncertified teachers with two years of Teach for America experience (as of June 30, 2020)	
. FTE count of uncertified teachers with exceptional business, professional, artistic, athletic, or military experience (as June 30, 2020)	
Total Category B: not to exceed 5	0

**CATEGORY C: PLUS 5 ADDITIONAL UNCERTIFIED TEACHERS**

	FTE Count
i. FTE count of uncertified teacher with at least three years of elementary, middle or secondary classroom teaching experience (as of June 30, 2020)	
ii. FTE count of uncertified teachers who are tenured or tenure track college faculty (as of June 30, 2020)	
iii. FTE count of uncertified teachers with two years of Teach for America experience (as of June 30, 2020)	
. FTE count of uncertified teachers with exceptional business, professional, artistic, athletic, or military experience (as June 30, 2020)	
Total Category C: not to exceed 5	0

**CATEGORY D: TOTAL FTE COUNT OF UNCATEGORIZED, UNCERTIFIED TEACHERS**

(Include teachers who do not fit in one of these categories or if did fit would exceed the numerical limits for that category)

	FTE Count
Total Category D	

**CATEGORY E: TOTAL FTE COUNT OF CERTIFIED TEACHERS**

	FTE Count
Total Category E	

## CATEGORY F: TOTAL FTE COUNT OF ALL TEACHERS

Please do not include paraprofessionals, such as teacher aides.

	FTE Count
Total Category F	



Thank you.

## Entry 13 Organization Chart

**Incomplete** Hidden from applicant

### Instructions

#### **Required of Regents, NYCDOE, and Buffalo BOE Authorized Charter Schools ONLY**

Upload the 2019-2020 **Organization Chart**. The organization chart should include position titles and reporting relationships. Employee names should not appear on the chart.

## Entry 14 School Calendar

**Completed** Aug 3 2020

### Instructions for submitting School Calendar

#### **Required of ALL Charter Schools**

Given these uncertain and changing times, charter schools may or may not have school calendar ready to upload by the submission deadline this year of August 3, 2020. If the charter school has tentative calendar based on available information and guidance at the time, please submit with the August 3<sup>rd</sup> submission. Charter schools will be able to upload updated school calendar into the portal at any time but no later than **September 15, 2020**.

School calendars must meet the [minimum instructional requirements](#) adopted by the Board of Regents in 2018.

**Board of Regents-authorized charter schools are required to submit school calendars that clearly indicate the start and end date of the instructional year AND the number of instructional hours and/or instructional days for each month.**

#### **UncommonCalendar 20-21 BrooklynLeader v1**

**Filename:** UncommonCalendar 20 21 BrooklynLeader Rhwg3Bu.pdf **Size:** 300.7 kB

## Entry 15 Links to Critical Documents on School Website

**Incomplete** Hidden from applicant

## Instructions

### **Required of Regents, NYCDOE, and Buffalo BOE Authorized Charter Schools ONLY**

By law, each charter school is required to maintain certain notices and policies listed on its website. Please insert the link from the school's website for each of the items:

1. Most recently filed Annual Report (i.e., 2018-19 Annual Report);
2. Most recent board meeting notice, documents to be discussed at the meeting (if any), and webcast of Board meetings (if held virtually per Governor's Executive Order);
3. Link to New York State School Report Card;
4. Lottery Notice announcing date of lottery;
5. Authorizer-approved DASA Policy;
6. District-wide safety plan and Authorizer-approved Discipline Policy (as per August 29, 2019 [Emergency Response Plan Memo](#));
7. Authorizer-approved FOIL Policy; and
8. Subject matter list of FOIL records.
9. Link to School Reopening Plan

## **Form for Entry 15 Links to Critical Documents on School Website**

**School Name:** Excellence Girls

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**Required of Regents, NYCDOE, and Buffalo BOE Authorized Charter Schools ONLY**

**By law, each charter school is required to maintain certain notices and policies listed on its website. Please insert the link from the school's website for each of the items:**

	Link to Documents
1. Most Recent Annual Report (i.e., 2018-19)	
2. Most Recent Board Meeting Notice and Related Agenda Item Documents	
2a. Webcast of Board Meetings (per Governor's Executive Order)	
3. Link to NYS School Report Card	
4. Most Recent Lottery Notice Announcing Lottery	
5. Authorizer-Approved DASA Policy	
6. District-wide Safety Plan	
6a. Authorizer-Approved Discipline Policy (as per August 29, 2019 Emergency Response Plan Memo)	
7. Authorizer-Approved FOIL Policy	
8. Subject matter list of FOIL records	
9. Link to School Reopening Plan	

**Thank you.**



## **Entry 16 COVID 19 Related Information**

**Completed** Aug 3 2020

### **Instructions**

#### **Required of ALL charter schools**

Please provide the number of students attending instruction on the last day instruction was provided within physical school facilities and the number of students participating in virtual programming on the last day such programming was offered for the 2019-2020 school year.

If applicable, please provide the name and publisher of all end of year assessments provided by grade level as well as the number of participating students. Board of Regents-authorized charter schools are

encouraged to refer to Appendix B of the [Remote Monitoring and Oversight Plan Spring 2020](#) remote for best practices regarding end of year assessments in remote learning environment.

## Entry 16 COVID 19 Related Information

**School Name:** Excellence Girls

### TABLE 1: 2019-2020 Enrollment, Attendance and Participation Between March-June 2020

Please provide the number of students attending instruction on the last day instruction was provided within physical school facilities and the number of students participating in virtual programming on the last day such programming was offered for the 2019-2020 school year.

	Number of students enrolled in school on the last day instruction was provided within physical school facilities	Number of students attending instruction on the last day instruction was provided within physical school facilities	Number of students participating in virtual programming on the last day such programming was offered for the 2019-20 school year
	1321	753	1231

### Table 2: 2019-2020 Assessments and Grade Participation

If applicable, please provide the name and publisher of all end of year assessments provided by grade level as well as the number of participating students. Board of Regents-authorized charter schools are encouraged to refer to Appendix B of the [Remote Monitoring and Oversight Plan Spring 2020](#) remote for best practices regarding end of year assessments in a remote learning environment.

Assessment Title	Grade K	Grade 1	Grade 2	Grade 3	Grade 4	Grade 5	Grade 6	Grade 7	Grade 8	Grade 9	Grade 10	Grade 11	Grade 12	Number of Participants

[illegible]



		x	x	x	x	x	x	x	x	x	x	x	x	x	
		x	x	x	x	x	x	x	x	x	x	x	x	x	
		x	x	x	x	x	x	x	x	x	x	x	x	x	
Tota															0
I															

Entry 17 Staff Roster - NEW TASK For Regents Schools Only

Incomplete Hidden from applicant

INSTRUCTIONS - NEW TASK FOR REGENTS-AUTHORIZED CHARTER SCHOOLS

Please provide the full name of **ANY and ALL** instructional and non-instructional employees and their respective positions/titles, and employment start dates in the charter school by clicking on the MS Excel file link to the [Staff Roster](#).



**DISCLOSURE OF FINANCIAL INTEREST  
BY A NOT-FOR-PROFIT CHARTER SCHOOL  
EDUCATION CORPORATION TRUSTEE**

1. Name of education corporation: Uncommon / Collegiate Board of Trustees
2. Trustee's name (print): John Greenstein
3. Position(s) on board, if any: (e.g., chair, treasurer, committee chair, etc.):  
none (member of Finance Advisory Committee)


8. Is Trustee an employee of the education corporation? \_\_\_ Yes. ☒ No. If you checked yes, please provide a description of the position you hold, your salary and your start date.

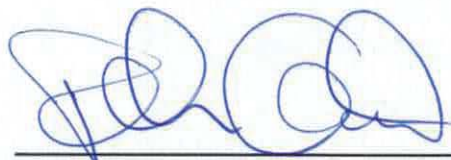
9. Identify each interest/transaction (and provide the requested information) that you or any of your immediate family members have held or engaged in with the education corporation during the prior school year. If there has been no such financial interest or transaction, please write "None." Please note that if you answered yes to Question 8, you need not disclose again your employment status, salary, etc.

Date(s)	Nature of Financial Interest/Transaction	Steps Taken to Avoid a Conflict of Interest, (e.g., did not vote, did not participate in discussion)	Identity of Person Holding Interest or Engaging in Transaction (e.g., you and/or immediate family member (name))
<p>← NONE →</p> <p>Please write "None" if applicable. Do not leave this space blank.</p>			

✓

10. Identify each individual, business, corporation, union association, firm, partnership, committee proprietorship, franchise holding company, joint stock company, business or real estate trust, non-profit organization, or other organization or group of people doing business with the education corporation *and* in which such entity, during the preceding school year (July 1 – June 30), you and/or your immediate family member(s) had a financial interest or other relationship. If you are a member, director, officer or employee of an organization formally partnered with the education corporation that is doing business with the education corporation through a management or services agreement, you need not list every transaction between such entity and the education corporation that is pursuant to such agreement; rather, please identify only the name of the entity, your position in the entity as well as the relationship between such entity and the education corporation. If there was no financial interest, please write "None."

Entity Conducting Business with the Education Corporation	Nature of Business Conducted	Approximate Value of the Business Conducted	Name of Trustee and/or Immediate Family Holding an Interest in the Entity Conducting Business with the Education Corporation and the Nature of the Interest	Steps Taken to Avoid Conflict of Interest
 <p>Please write "None" if applicable. Do not leave this space blank.</p>				



Signature

6/17/20

Date



FOR INSTITUT US ONLY

FILING FOR SCHOOL  
YEAR: \_\_\_\_\_

DAT RECEIVED: \_\_\_\_\_

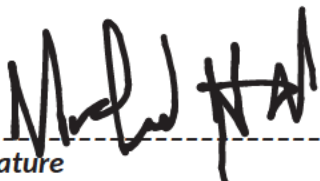
**DISCLOSURE OF FINANCIAL INTEREST  
BY A NOT-FOR-PROFIT CHARTER SCHOOL  
EDUCATION CORPORATION TRUSTEE**

1. Name of education corporation: \_\_\_\_\_
2. Trustee's name (print): \_\_\_\_\_
3. Position(s) on board, if any: (e.g., chair, treasurer, c mmittee chair, etc.): \_\_\_\_\_  
\_\_\_\_\_
4. Home address: \_\_\_\_\_
5. Business Address: \_\_\_\_\_
6. Daytime phone: \_\_\_\_\_
7. E-mail: \_\_\_\_\_
8. Is Trustee an employee of the education corporation? \_\_\_\_Yes. \_\_\_\_No. If y u checked yes, please provide a description of the position you hold, your salary and y ur start date.  
\_\_\_\_\_
9. Identify each interest/transaction (and provide the requested information) that you or any f your immediate family members have held r engaged in with the education c rporation during the pri r sch l year. If there has been n such financial interest r transaction, please write "None." Please note that if you answered yes t Question 8, you need n t discl se again y ur employment status, salary, etc.

Date(s)	Nature of Financial Interest/ Transaction	Steps Taken to Avoid a Conflict of Interest, (e.g., did not vote, did not participate in discussion)	Identity of Person Holding Interest or ngaging in Transaction (e.g., you and/or immediate family member (name))
Please write "None" if applicable. Do not leave this space blank.			

10. Identify each individual, business, corporation, union association, firm, partnership, committee proprietorship, franchise holding company, joint stock company, business or real estate trust, non-profit organization, or other organization or group of people doing business with the education corporation *and* in which such entity, during the preceding school year (July 1 – June 30), you and/or your immediate family member(s) had a financial interest or other relationship. If you are a member, director, officer or employee of an organization formally partnered with the education corporation that is doing business with the education corporation through a management or services agreement, you need not list every transaction between such entity and the education corporation that is pursuant to such agreement; rather, please identify only the name of the entity, your position in the entity as well as the relationship between such entity and the education corporation. If there was no financial interest, please write “None.”

Entity Conducting Business with the Education Corporation	Nature of Business Conducted	Approximate Value of the Business Conducted	Name of Trustee and/or Immediate Family Holding an Interest in the Entity Conducting Business with the Education Corporation and the Nature of the Interest	Steps Taken to Avoid Conflict of Interest
<i>Please write “None” if applicable. Do not leave this space blank.</i>				

  
 -----  
 Signature

6/18/2020  
 -----  
 Date

**DISCLOSURE OF FINANCIAL INTEREST  
BY A NOT-FOR-PROFIT CHARTER SCHOOL  
EDUCATION CORPORATION TRUSTEE**

1. Name of education corporation: \_\_\_\_\_
2. Trustee's name (print): \_\_\_\_\_
3. Position(s) on board, if any: (e.g., chair, treasurer, committee chair, etc.): \_\_\_\_\_  
\_\_\_\_\_
4. Home address: \_\_\_\_\_
5. Business Address: \_\_\_\_\_
6. Daytime phone: \_\_\_\_\_
7. E-mail: \_\_\_\_\_
8. Is Trustee an employee of the education corporation? \_\_\_\_Yes. \_\_\_\_No. If you checked yes, please provide a description of the position you hold, your salary and your start date.  
\_\_\_\_\_
9. Identify each interest/transaction (and provide the requested information) that you or any of your immediate family members have held or engaged in with the education corporation during the prior school year. If there has been no such financial interest or transaction, please *write "None."* Please note that if you answered yes to Question 8, you need not disclose again your employment status, salary, etc.

Date(s)	Nature of Financial Interest/Transaction	Steps Taken to Avoid a Conflict of Interest, (e.g., did not vote, did not participate in discussion)	Identity of Person Holding Interest or Engaging in Transaction (e.g., you and/or immediate family member (name))
<i>Please write "None" if applicable. Do not leave this space blank.</i>			



10. Identify each individual, business, corporation, union association, firm, partnership, committee proprietorship, franchise holding company, joint stock company, business or real estate trust, non-profit organization, or other organization or group of people doing business with the education corporation *and* in which such entity, during the preceding school year (July 1 – June 30), you and/or your immediate family member(s) had a financial interest or other relationship. If you are a member, director, officer or employee of an organization formally partnered with the education corporation that is doing business with the education corporation through a management or services agreement, you need not list every transaction between such entity and the education corporation that is pursuant to such agreement; rather, please identify only the name of the entity, your position in the entity as well as the relationship between such entity and the education corporation. If there was no financial interest, please *write "None."*

Entity Conducting Business with the Education Corporation	Nature of Business Conducted	Approximate Value of the Business Conducted	Name of Trustee and/or Immediate Family Holding an Interest in the Entity Conducting Business with the Education Corporation and the Nature of the Interest	Steps Taken to Avoid Conflict of Interest
<i>Please write "None" if applicable. Do not leave this space blank.</i>				

*Shakima Jones*

**Signature**

**Date**



**DISCLOSURE OF FINANCIAL INTEREST  
BY A NOT-FOR-PROFIT CHARTER SCHOOL  
EDUCATION CORPORATION TRUSTEE**

1. Name of education corporation: \_\_\_\_\_
2. Trustee's name (print): \_\_\_\_\_
3. Position(s) on board, if any: (e.g., chair, treasurer, committee chair, etc.): \_\_\_\_\_  
\_\_\_\_\_
4. Home address: \_\_\_\_\_
5. Business Address: \_\_\_\_\_
6. Daytime phone: \_\_\_\_\_
7. E-mail: \_\_\_\_\_
8. Is Trustee an employee of the education corporation? \_\_\_\_Yes. \_\_\_\_No. If you checked yes, please provide a description of the position you hold, your salary and your start date.  
\_\_\_\_\_
9. Identify each interest/transaction (and provide the requested information) that you or any of your immediate family member have held or engaged in with the education corporation during the prior school year. If there has been no such financial interest or transaction, please *write "None."* Please note that if you answered yes to Question 8, you need not disclose again your employment status, salary, etc.

Date(s)	Nature of Financial Interest/Transaction	Steps Taken to Avoid a Conflict of Interest, (e.g., did not vote, did not participate in discussion)	Identity of Person Holding Interest or Engaging in Transaction (e.g., you and/or immediate family member (name))
<i>Please write "None" if applicable. Do not leave this space blank.</i>			



10. Identify each individual, business, corporation, union association, firm, partnership, committee proprietorship, franchise holding company, joint stock company, business or real estate trust, non-profit organization, or other organization or group of people doing business with the education corporation *and* in which such entity, during the preceding school year (July 1 – June 30), you and/or your immediate family member(s) had a financial interest or other relationship. If you are a member, director, officer or employee of an organization formally partnered with the education corporation that is doing business with the education corporation through a management or services agreement, you need not list every transaction between such entity and the education corporation that is pursuant to such agreement; rather, please identify only the name of the entity, your position in the entity as well as the relationship between such entity and the education corporation. If there was no financial interest, please *write "None."*

Entity Conducting Business with the Education Corporation	Nature of Business Conducted	Approximate Value of the Business Conducted	Name of Trustee and/or Immediate Family Holding an Interest in the Entity Conducting Business with the Education Corporation and the Nature of the Interest	Steps Taken to Avoid Conflict of Interest
Please write "None" if applicable. Do not leave this space blank.				

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**



**DISCLOSURE OF FINANCIAL INTEREST  
BY A NOT-FOR-PROFIT CHARTER SCHOOL  
EDUCATION CORPORATION TRUSTEE**

1. Name of education corporation: Uncommon Charter Schools New York City
2. Trustee's name (print): Linton Mann III
3. Position(s) on board, if any: (e.g., chair, treasurer, committee chair, etc.): Chair


8. Is Trustee an employee of the education corporation? \_\_\_\_ Yes. X No. If you checked yes, please provide a description of the position you hold, your salary and your start date.

9. Identify each interest/transaction (and provide the requested information) that you or any of your immediate family members have held or engaged in with the education corporation during the prior school year. If there has been no such financial interest or transaction, please *write "None."* Please note that if you answered yes to Question 8, you need not disclose again your employment status, salary, etc.

Date(s)	Nature of Financial Interest/Transaction	Steps Taken to Avoid a Conflict of Interest, (e.g., did not vote, did not participate in discussion)	Identity of Person Holding Interest or Engaging in Transaction (e.g., you and/or immediate family member (name))
None			

10. Identify each individual, business, corporation, union association, firm, partnership, committee proprietorship, franchise holding company, joint stock company, business or real estate trust, non-profit organization, or other organization or group of people doing business with the education corporation *and* in which such entity, during the preceding school year (July 1 – June 30), you and/or your immediate family member(s) had a financial interest or other relationship. If you are a member, director, officer or employee of an organization formally partnered with the education corporation that is doing business with the education corporation through a management or services agreement, you need not list every transaction between such entity and the education corporation that is pursuant to such agreement; rather, please identify only the name of the entity, your position in the entity as well as the relationship between such entity and the education corporation. If there was no financial interest, please write "None."

Entity Conducting Business with the Education Corporation	Nature of Business Conducted	Approximate Value of the Business Conducted	Name of Trustee and/or Immediate Family Holding an Interest in the Entity Conducting Business with the Education Corporation and the Nature of the Interest	Steps Taken to Avoid Conflict of Interest
None				

  
Signature

6-19-2020  
Date

**DISCLOSURE OF FINANCIAL INTEREST  
BY A NOT-FOR-PROFIT CHARTER SCHOOL  
EDUCATION CORPORATION TRUSTEE**

1. Name of education corporation: Uncommon Schools New York City
2. Trustee's name (print): Ann Mathews
3. Position(s) on board, if any: (e.g., chair, treasurer, committee chair, etc.): Member



please provide a description of the position you hold, your salary and your start date.

9. Identify each interest/transaction (and provide the requested information) that you or any of your immediate family members have held or engaged in with the education corporation during the prior school year. If there has been no such financial interest or transaction, please *write "None."* Please note that if you answered yes to Question 8, you need not disclose again your employment status, salary, etc.

Date(s)	Nature of Financial Interest/Transaction	Steps Taken to Avoid a Conflict of Interest, (e.g., did not vote, did not participate in discussion)	Identity of Person Holding Interest or Engaging in Transaction (e.g., you and/or immediate family member (name))
None			
<i>Please write "None" if applicable. Do not leave this space blank.</i>			

10. Identify each individual, business, corporation, union association, firm, partnership, committee proprietorship, franchise holding company, joint stock company, business or real estate trust, non-profit organization, or other organization or group of people doing business with the education corporation *and* in which such entity, during the preceding school year (July 1 – June 30), you and/or your immediate family member(s) had a financial interest or other relationship. If you are a member, director, officer or employee of an organization formally partnered with the education corporation that is doing business with the education corporation through a management or services agreement, you need not list every transaction between such entity and the education corporation that is pursuant to such agreement; rather, please identify only the name of the entity, your position in the entity as well as the relationship between such entity and the education corporation. If there was no financial interest, please *write "None."*

Entity Conducting Business with the Education Corporation	Nature of Business Conducted	Approximate Value of the Business Conducted	Name of Trustee and/or Immediate Family Holding an Interest in the Entity Conducting Business with the Education Corporation and the Nature of the Interest	Steps Taken to Avoid Conflict of Interest
None				
<i>Please write "None" if applicable. Do not leave this space blank.</i>				

Ann Mathews  
Signature

06/19/2020  
Date

**DISCLOSURE OF FINANCIAL INTEREST  
BY A NOT-FOR-PROFIT CHARTER SCHOOL  
EDUCATION CORPORATION TRUSTEE**

1. Name of education corporation: \_\_\_\_\_
2. Trustee's name (print): \_\_\_\_\_
3. Position(s) on board, if any: (e.g., chair, treasurer, committee chair, etc.): \_\_\_\_\_  
\_\_\_\_\_
4. Home address: \_\_\_\_\_
5. Business Address: \_\_\_\_\_
6. Daytime phone: \_\_\_\_\_
7. E-mail: \_\_\_\_\_
8. Is Trustee an employee of the education corporation? \_\_\_\_Yes. \_\_\_\_No. If you checked yes, please provide a description of the position you hold, your salary and your start date.  
\_\_\_\_\_
9. Identify each interest/transaction (and provide the requested information) that you or any of your immediate family members have held or engaged in with the education corporation during the prior school year. If there has been no such financial interest or transaction, please *write "None."* Please note that if you answered yes to Question 8, you need not disclose again your employment status, salary, etc.

Date(s)	Nature of Financial Interest/Transaction	Steps Taken to Avoid a Conflict of Interest, (e.g., did not vote, did not participate in discussion)	Identity of Person Holding Interest or Engaging in Transaction (e.g., you and/or immediate family member (name))
<i>Please write "None" if applicable. Do not leave this space blank.</i>			

10. Identify each individual, business, corporation, union association, firm, partnership, committee proprietorship, franchise holding company, joint stock company, business or real estate trust, non-profit organization, or other organization or group of people doing business with the education corporation *and* in which such entity, during the preceding school year (July 1 – June 30), you and/or your immediate family member(s) had a financial interest or other relationship. If you are a member, director, officer or employee of an organization formally partnered with the education corporation that is doing business with the education corporation through a management or services agreement, you need not list every transaction between such entity and the education corporation that is pursuant to such agreement; rather, please identify only the name of the entity, your position in the entity as well as the relationship between such entity and the education corporation. If there was no financial interest, please *write "None."*

Entity Conducting Business with the Education Corporation	Nature of Business Conducted	Approximate Value of the Business Conducted	Name of Trustee and/or Immediate Family Holding an Interest in the Entity Conducting Business with the Education Corporation and the Nature of the Interest	Steps Taken to Avoid Conflict of Interest
<i>Please write "None" if applicable. Do not leave this space blank.</i>				

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**Signature**

---

**Date**





**DISCLOSURE OF FINANCIAL INTEREST  
BY A NOT-FOR-PROFIT CHARTER SCHOOL  
EDUCATION CORPORATION TRUSTEE**

1. Name of education corporation: UNCOMMON SCHOOLS NPC
2. Trustee's name (print): ANTHONY W. PASQUARZELLO
3. Position(s) on board, if any: (e.g., chair, treasurer, committee chair, etc.): VZEE-CHAIR

8. Is Trustee an employee of the education corporation? ☐ Yes. ☒ No. If you checked yes, please provide a description of the position you hold, your salary and your start date.

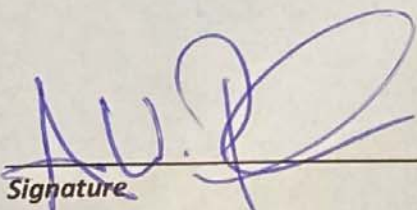
9. Identify each interest/transaction (and provide the requested information) that you or any of your immediate family members have held or engaged in with the education corporation during the prior school year. If there has been no such financial interest or transaction, please write "None." Please note that if you answered yes to Question 8, you need not disclose again your employment status, salary, etc.

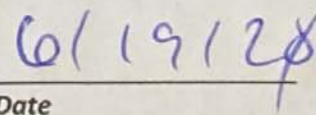
Date(s)	Nature of Financial Interest/Transaction	Steps Taken to Avoid a Conflict of Interest, (e.g., did not vote, did not participate in discussion)	Identity of Person Holding Interest or Engaging in Transaction (e.g., you and/or immediate family member (name))
Please write "None" if applicable. Do not leave this space blank.			



10. Identify each individual, business, corporation, union association, firm, partnership, committee proprietorship, franchise holding company, joint stock company, business or real estate trust, non-profit organization, or other organization or group of people doing business with the education corporation *and* in which such entity, during the preceding school year (July 1 – June 30), you and/or your immediate family member(s) had a financial interest or other relationship. If you are a member, director, officer or employee of an organization formally partnered with the education corporation that is doing business with the education corporation through a management or services agreement, you need not list every transaction between such entity and the education corporation that is pursuant to such agreement; rather, please identify only the name of the entity, your position in the entity as well as the relationship between such entity and the education corporation. If there was no financial interest, please write "None."

Entity Conducting Business with the Education Corporation	Nature of Business Conducted	Approximate Value of the Business Conducted	Name of Trustee and/or Immediate Family Holding an Interest in the Entity Conducting Business with the Education Corporation and the Nature of the Interest	Steps Taken to Avoid Conflict of Interest
Please write "None" if applicable. Do not leave this space blank. <b>NONE</b>				

  
Signature

  
Date



FOR INSTITUTE USE ONLY

FILING FOR SCHOOL  
YEAR: \_\_\_\_\_

DATE RECEIVED: \_\_\_\_\_

**DISCLOSURE OF FINANCIAL INTEREST  
BY A NOT-FOR-PROFIT CHARTER SCHOOL  
EDUCATION CORPORATION TRUSTEE**

1. Name \_\_\_\_\_ of \_\_\_\_\_ education corporation: \_\_\_\_\_ Uncommon Schools  
NYC \_\_\_\_\_
2. Trustee's \_\_\_\_\_ name \_\_\_\_\_ (print): \_\_\_\_\_ Brett  
Peiser \_\_\_\_\_
3. Position(s) on board, if any: (e.g., chair, treasurer, committee chair,  
etc.): \_\_\_\_\_ None \_\_\_\_\_

[Redacted area]

8. Is Trustee an employee of the education corporation? \_\_\_\_ Yes. ☒ No. If you checked yes, please provide a description of the position you hold, your salary and your start date.

9. Identify each interest/transaction (and provide the requested information) that you or any of your immediate family members have held or engaged in with the education corporation during the prior school year. If there has been no such financial interest or transaction, please *write "None."* Please note that if you answered yes to Question 8, you need not disclose again your employment status, salary, etc.

Date(s)	Nature of Financial Interest/Transaction	Steps Taken to Avoid a Conflict of Interest, (e.g., did not vote, did not participate in discussion)	Identity of Person Holding Interest or Engaging in Transaction (e.g., you and/or immediate family member (name))
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I am the CEO of Uncommon Schools which is Uncommon NYC's educational partner. I recuse myself from all discussions and votes when there's any conflict of interest.			

10. Identify each individual, business, corporation, union association, firm, partnership, committee proprietorship, franchise holding company, joint stock company, business or real estate trust, non-profit organization, or other organization or group of people doing business with the education corporation *and* in which such entity, during the preceding school year (July 1 – June 30), you and/or your immediate family member(s) had a financial interest or other relationship. If you are a member, director, officer or employee of an organization formally partnered with the education corporation that is doing business with the education corporation through a management or services agreement, you need not list every transaction between such entity and the education corporation that is pursuant to such agreement; rather, please identify only the name of the entity, your position in the entity as well as the relationship between such entity and the education corporation. If there was no financial interest, please *write "None."*

Entity Conducting Business with the Education Corporation	Nature of Business Conducted	Approximate Value of the Business Conducted	Name of Trustee and/or Immediate Family Holding an Interest in the Entity Conducting Business with the Education Corporation and the Nature of the Interest	Steps Taken to Avoid Conflict of Interest
I am the CEO of Uncommon Schools which is Uncommon NYC's educational partner. I recuse myself from all discussions and votes when there's any conflict of interest.				

*Bruce Rose*

**Signature**

**6/19/20**

**Date**

*Form Revised November 16, 2015*



**DISCLOSURE OF FINANCIAL INTEREST  
BY A NOT-FOR-PROFIT CHARTER SCHOOL  
EDUCATION CORPORATION TRUSTEE**

1. Name of education corporation: Uncommon Schools
2. Trustee's name (print): Jabali Sawicki
3. Position(s) on board, if any: (e.g., chair, treasurer, committee chair, etc.): N/A

8. Is Trustee an employee of the education corporation? \_\_\_\_ Yes. ☒ No. If you checked yes, please provide a description of the position you hold, your salary and your start date.

9. Identify each interest/transaction (and provide the requested information) that you or any of your immediate family members have held or engaged in with the education corporation during the prior school year. If there has been no such financial interest or transaction, please write "None." Please note that if you answered yes to Question 8, you need not disclose again your employment status, salary, etc.

Date(s)	Nature of Financial Interest/Transaction	Steps Taken to Avoid a Conflict of Interest, (e.g., did not vote, did not participate in discussion)	Identity of Person Holding Interest or Engaging in Transaction (e.g., you and/or immediate family member (name))
	NONE		→

Please write "None" if applicable. Do not leave this space blank.

10. Identify each individual, business, corporation, union association, firm, partnership, committee proprietorship, franchise holding company, joint stock company, business or real estate trust, non-profit organization, or other organization or group of people doing business with the education corporation *and* in which such entity, during the preceding school year (July 1 – June 30), you and/or your immediate family member(s) had a financial interest or other relationship. If you are a member, director, officer or employee of an organization formally partnered with the education corporation that is doing business with the education corporation through a management or services agreement, you need not list every transaction between such entity and the education corporation that is pursuant to such agreement; rather, please identify only the name of the entity, your position in the entity as well as the relationship between such entity and the education corporation. If there was no financial interest, please write "None."

Entity Conducting Business with the Education Corporation	Nature of Business Conducted	Approximate Value of the Business Conducted	Name of Trustee and/or Immediate Family Holding an Interest in the Entity Conducting Business with the Education Corporation and the Nature of the Interest	Steps Taken to Avoid Conflict of Interest
Please write "None" if applicable. Do not leave this space blank. None →				

  
Signature

6/30/2020  
Date



**DISCLOSURE OF FINANCIAL INTEREST  
BY A NOT-FOR-PROFIT CHARTER SCHOOL  
EDUCATION CORPORATION TRUSTEE**

1. Name of education corporation: Uncommon NYC
2. Trustee's name (print): Joseph Wayland
3. Position(s) on board, if any: (e.g., chair, treasurer, committee chair, etc: Chair of Finance Committee; Member of Executive Committee



8. Is Trustee an employee of the education corporation? \_\_\_\_Yes. ☒ No. If you checked yes, please provide a description of the position you hold, your salary and your start date.

9. Identify each interest/transaction (and provide the requested information) that you or any of your immediate family members have held or engaged in with the education corporation during the prior school year. If there has been no such financial interest or transaction, please *write "None."* Please note that if you answered yes to Question 8, you need not disclose again your employment status, salary, etc.

Date(s)	Nature of Financial Interest/Transaction	Steps Taken to Avoid a Conflict of Interest, (e.g., did not vote, did not participate in discussion)	Identity of Person Holding Interest or Engaging in Transaction (e.g., you and/or immediate family member (name))
NONE <i>Please write "None" if applicable. Do not leave this space blank.</i>			

10. Identify each individual, business, corporation, union association, firm, partnership, committee proprietorship, franchise holding company, joint stock company, business or real estate trust, non-profit organization, or other organization or group of people doing business with the education corporation *and* in which such entity, during the preceding school year (July 1 – June 30), you and/or your immediate family member(s) had a financial interest or other relationship. If you are a member, director, officer or employee of an organization formally partnered with the education corporation that is doing business with the education corporation through a management or services agreement, you need not list every transaction between such entity and the education corporation that is pursuant to such agreement; rather, please identify only the name of the entity, your position in the entity as well as the relationship between such entity and the education corporation. If there was no financial interest, please *write "None."*

Entity Conducting Business with the Education Corporation	Nature of Business Conducted	Approximate Value of the Business Conducted	Name of Trustee and/or Immediate Family Holding an Interest in the Entity Conducting Business with the Education Corporation and the Nature of the Interest	Steps Taken to Avoid Conflict of Interest
NONE				
<i>Please write "None" if applicable. Do not leave this space blank.</i>				

**Joseph Wayland (electronically)**  
Signature

**June 18, 2020**  
Date





**DISCLOSURE OF FINANCIAL INTEREST  
BY A NOT-FOR-PROFIT CHARTER SCHOOL  
EDUCATION CORPORATION TRUSTEE**

1. Name of education corporation: Uncommon Schools NYC
2. Trustee's name (print): Chrystal Stokes Williams
3. Position(s) on board, if any: (e.g., chair, treasurer, committee chair, etc.): \_\_\_\_\_  
Audit Committee Chair

8. Is Trustee an employee of the education corporation? \_\_\_\_ Yes. ☒ No. If you checked yes, please provide a description of the position you hold, your salary and your start date.

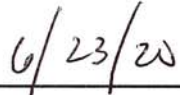
9. Identify each interest/transaction (and provide the requested information) that you or any of your immediate family members have held or engaged in with the education corporation during the prior school year. If there has been no such financial interest or transaction, please write "None." Please note that if you answered yes to Question 8, you need not disclose again your employment status, salary, etc.

Date(s)	Nature of Financial Interest/Transaction	Steps Taken to Avoid a Conflict of Interest, (e.g., did not vote, did not participate in discussion)	Identity of Person Holding Interest or Engaging in Transaction (e.g., you and/or immediate family member (name))
	<u>NONE</u> <i>Please write "None" if applicable. Do not leave this space blank.</i>		

10. Identify each individual, business, corporation, union association, firm, partnership, committee proprietorship, franchise holding company, joint stock company, business or real estate trust, non-profit organization, or other organization or group of people doing business with the education corporation *and* in which such entity, during the preceding school year (July 1 – June 30), you and/or your immediate family member(s) had a financial interest or other relationship. If you are a member, director, officer or employee of an organization formally partnered with the education corporation that is doing business with the education corporation through a management or services agreement, you need not list every transaction between such entity and the education corporation that is pursuant to such agreement; rather, please identify only the name of the entity, your position in the entity as well as the relationship between such entity and the education corporation. If there was no financial interest, please write "None."

Entity Conducting Business with the Education Corporation	Nature of Business Conducted	Approximate Value of the Business Conducted	Name of Trustee and/or Immediate Family Holding an Interest in the Entity Conducting Business with the Education Corporation and the Nature of the Interest	Steps Taken to Avoid Conflict of Interest
<p>Please write "None" if applicable. Do not leave this space blank.</p> <p>None</p>				

  
 Signature

  
 Date

[illegible]

KEY	
	Staff Survey/360s/LOA
	PD Days, Leader Meetings, and Retreats
	Other Assessments
	IA Dates
	Holidays or Early Release Day
	Data or Collaborative Scoring Half-Days
	CAI led Meeting
	State Testing Days
	Start / End Dates for Staff, Students
	Working Group Meeting
	Other

# July 2020

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
			1	2	3	4
5	6 ACOOs Return 1st/2nd Year DOOs Return	7	8	9	10	11
12	13 3+ Year DOOs Return K-12 DOO Meeting 2pm to 5pm	14	15	16	17	18
19	20	21	22 ACOO Meeting Asups Return	23 ACOO/Asup Meeting	24 Asup Meeting	25
26	27	28	29	30	31	
			Special Ed. Summer Institute			
	1st Year Principal PD		Principal PD	Principal/DCI PD	DCI PD	
	1st/2nd Year Principals and 1st Year DCIs Return		3+ Year Principals Return All Fellows Return DCIs and DOSs Return	DOO-Principal PBJ	Ubuntu K-12 Leader Meeting	
					Annual Report Due	

# August 2020

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
						1
2	3	4	5 s and DCI Fellows Return New DCI PD	6	7	8
9	10	11 Regional August PD HS Family Orientation SEC Operations PD	12 K-12 DOO Meeting 2pm to 5pm Returning Teachers Begin	13 DOS Behavior Intervention	14 Brooklyn Roadshow SEC & SW Behavior Intervention PD	15
16	17	18 Elementary and Middle School Family Orientation Window SPED Roadshow	19	20	21	22
23 Week 1	24	25	26	27	28	29 SAT Administration
30 Week 2	31 First day of school for students					

# September 2020

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
		1	2 ACOO Meeting	3	4 SMS Sustainability 1/2 Day HS Full Day Sustainability	5
6 Week 3	7 Labor Day (All Schools Closed)	8 HSC Kickoff Meeting	9	10	11 Fall Practice SAT	12
13 Week 4	14	15 Asup Inspection (All)	16 MS Back to School Night	17 Working Group ES Back to School Night	18	19
20 Week 5	21	22	23 STEP Round 1 (K-4)	24	25	26
		Asup Inspection (select) HSC Immersion Day at HS	ACOO Meeting HS Back to School Night SAT School Day	Fall Staff Survey Principal/DCI PD HS Princ PD/Meeting	Staff Complete Staff Survey during Friday PD	
27 Week 6	28	29 STEP Round 1 (K-4) Fall Staff Survey	30 K-12 DOO Meeting 2pm to 5pm			

# October 2020

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
				1 STEP Round 1 (K-4) Fall Staff Survey Ops Institute Working Group	2 Working Group	3
4 Week 7	5	6	7 Fall Staff Survey	8	9	10
			4th Graders Visit Middle Academies			
	HS Open House and Info Night 8th Graders visit HS (KCCS, LPBV, BSC, WCCS)	Asup Inspection (select) 8th Graders visit HS (LPCN, LPOH, LPBS, EBCCS)	8th Graders visit HS (OHC, BVC, BEC, EGCS)	IL/DCI Fellow PD HSC Meeting #2 K-8 Recruitment Ambassador Kickoff	All Gradespans Sust. 1/2 Day	
11 Week 8	12 All Schools Closed	13	14	15	16	17
			MS 5-8 ELA/Math/History/Science IA#1 SAT School Day	Inst. Inspection #1	5-8 Collab Scoring MS 11:30 Dismissal	
18 Week 9	19	20	21 ACOO Meeting	22 Principal/DCI PD HS Princ PD/Meeting	23 5-8 Analysis (Schools)	24 Early Voting Begins DASA Workshop
25 Week 10	26	27	28	29 HS IA#1 Inst. Inspection #2	30 3-4 Collab Scoring End of Q1 (ES/MS/HS)	31



# November 2020

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
1 Week 11	2	3	4	5	6	7
	Last Day to Mail in Absentee Ballot		Mid-Round STEP (K-4 students far below grade-level)			
	Election Day	Asup Inspection (Select)		HOSS		
		HS LLP PD	Inst Inspection #3	New Student App. Launch		
		K-12 DOO Meeting 2pm to 5pm		Working Group	Q1 Founders Day (HS)	
8 Week 12	9	10	11	12	13	14
			Mid-Round STEP (K-4 students far below grade-level)			
	HOSS					
	ES K-4 Math IA #1	Veteran's Day				
	HS DA Day - No Students	3-4 Math Collab Scoring		Inst Inspection #4	K-2 Math Collab Scoring	
15 Week 13		8th Grade Fall Mixers	MS RCC #1		Working Group	
			MS 1/2 Day			
	16	17	18	19	20	21
	HOSS					
		Asup Inspection (All)	ACOO Inspection	IL/DCI Fellow PD		
22 Week 14	23	24	25	26	27	28
			HS RCC#1	Recruitment Ambassador Meeting #2		
			HS 1/2 Day			
				Thanksgiving (All Schools Closed)		
29 Week 15	30					
	STEP Round 2 (K-4)					

# December 2020

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
		1	2	3	4	5
			MS 5-8 Math & ELA IA #2 STEP Round 2 (K-4)			
		Asup Inspection (HS, Select)		360s		
				Working Group	5-8 Collab Scoring	
				ES RCC #1	MS 11:30 Dismissal	
				ES 1/2 Day	Working Group	
6 Week 16	7	8	9	10	11	12
			STEP Round 2 (K-4)			
			360s			
			K-12 DOO Meeting 2pm to 5pm	Ops Fellow Winter Training		
				Principal/DCI PD	5-8 Analysis (Schools)	
				HS Princ PD/Meeting		
13 Week 17	14	15	16	17	18	19
				Inst Inspection #5	All Gradespans Sust. 1/2 Day	
			ACOO Meeting	Working Group		
20	21	22	23	24	25	26
			Winter Break (All Schools Closed)			
27	28	29	30	31		
			Winter Break (All Schools Closed)			

# January 2021

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
					1 Winter Break (All Schools Closed)	2
3 Week 18	4	5	6	7 Mid Year Survey Inst Inspection #6 ES DCI Development Day	8 Staff Complete Mid Year Survey During Friday PD	9
10 Week 19	11	12	13	14 Mid Year Survey ES K-2 ELA IA#1 Inst Inspection #7 MS DCI Development Day K-4 ELA Collab Scoring	15 All Gradespans Sust. 1/2 Day	16
17 Week 20	18	19	20	21 Mid Year Survey HS IA #2	22	23
	MLK Day (All Schools Closed)	Asup Inspection (select) Student Recruitment Ambassador Meeting #3	ACOO Meeting	Working Group	End of Q2 (ES/MS/HS) Working Group	
24 Week 21	25	26	27	28	29	30
		MS 5-8 ELA/Math/History/Science IA #3	Mid-Round STEP (K-4 students far below grade-level)			
		ES K-4 Math IA#2	Regents Exams	K-2 Math Collab Scoring		
		3-4 Math Collab Scoring	Q2 Founders Day (HS)	5-8 Collab Scoring		
		HS LLP PD		MS 11:30 Dismissal Working Group		
31				HS DA Day - No Students		

# February 2021

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Week 22	1	2	3	4	5	6
	HS Interest Fair (EGCS, BSC, LPBV, LPCN)	Mid-Round STEP (K-4 students far below grade-level)			5-8 Analysis (Schools) Winter Practice SAT	
		Asup Inspection (Select)	HS Interest Fair (KCCS, EBCS, BVC, BEC)	Principal/DCI PD		
		HS Interest Fair (WCCS, LPBS, OHC, LPOH)		HS Princ PD/Meeting		
				Recruitment Ambassador Meeting #4		
7	8	9	10	11	12	13
	Family Appreciation Week					
		MS RCC #2	HS RCC #2	IL/DCI Fellow PD	ES/MS Sustainability 1/2 Day	
		MS 1/2 Day	HS 1/2 Day		HS Full Day Sustainability	
14	15	16	17	18	19	20
	President's Day (All Schools Closed)	February Break: NYC Closed				
21	22	23	24	25	26	27
		HS Acceptance Ceremony at MS (EGCS, BSC, LPBV, LPCN)	ACOO Meeting	Inst Inspection #8	Mid Year Review	
			HS Acceptance Ceremony at MS (WCCS, LPBS, OHC, LPOH)	DCI Fellow Inspection	Conversations End for School Staff	
				HS Acceptance Ceremony at MS (KCCS, EBCS, BVC, BEC)	Working Group	
28						

# March 2021

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Week 26	1	2	3	4	5	6
		STEP Round 3 (K-2, 3-4 students in jeopardy of promotion)	HOLD : DOE School Day SAT K-12 DOO Meeting 2pm to 5pm	Inst Inspection #9 DCI Fellow Inspection	All Gradespans Sust. 1/2 Day	
7 Week 27	8	9	10	11	12	13
		Window for NY MS ELA Stamina Test			3-4 NY ELA Collab Scoring	SAT Administration
		STEP Round 3 (K-2, 3-4 students in jeopardy of promotion)		Working Group	Staff LOAs Issued	
14 Week 28	15	16	17	18	19	20
		Asup Inspection (Select) K-8 Lottery Prep Day for Ambassadors	Teacher & Social Work Appreciation Week			
					MS Math IA #4 (NY)	
					5-8 Collab Scoring	
21 Week 29	22	23	24	25	26	27
			ES 3-4 Math IA #3 (NY)	HS IA #3		
		Asup Inspection (All)	ACOO Meeting		5-8 Analysis (Schools)	
			HOLD : DOE School Day SAT 3-4 NY Math Collab Scoring		Staff LOAs Returned	
28 Week 30	29	30	31			
		NYC Spring Break				

# April 2021

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday
				1 NYC Spring Break	2 Good Friday
4 Week 30 Easter	5 NYC Spring Break NYC K & 5th Lottery	6 Mid-Round STEP (K-4 students far below grade-level) HS LLP PD	7 K-12 DOO Meeting 2pm to 5pm	8 HS Founders Day	9 Working Group End of Q3 (ES, MS, HS)
			Ops Appreciation Week		
11 Week 31	12	13	14	15	16 HS DA Day - No Students
			K-8 New Student Registration Window		
			Mid-Round STEP (K-4 students far below grade-level)		
				Principal/DCI PD	ACOO Meeting
				HS Princ PD/Meeting	
18 Week 32	19	20	21	22	23
			Grades 3-8 NYS ELA Test	HS RCC #3	
			MS 12:30 Dismissal	HS 1/2 Day	
25 Week 33	26	27	28	29	30
			K-8 New Student Registration Window		
				ESMS RCC #3	
				ESMS 1/2 Day	

Saturday					
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May 2021

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday
					1
2 Week 34	3	4	5	6	7
			AP Exams		
			Grades 3-7 NYS Math Test		
			Grade 8 Math & Science Mock Regents (NY)		
			MS 12:30 Dismissal		
9 Week 35	10	11	12	13	14
			AP Exams		
			Ops Fellow Spring Training	Recruitment Ambassador Meeting #6	K-2 Collab Scoring
			ES K-2 ELA IA #2		
16 Week 36	17	18	19	20	21
			STEP Round 4 (K-4)		
				ACOO Meeting	K-2 Collab Scoring
			ES K-2 Math IA #3		
			K-12 DOO Meeting 2pm to 5pm		
23 Week 37	24	25	26	27	28
			STEP Round 4 (K-4)		
			DCI Bootcamp	HS LLP Kick Off	ESIMS Sustainability 1/2 Day
			UCC Senior Signing Day	UPC Senior Signing Day	HS Full Day Sustainability
			Grade 4 Science Performance Test Window Starts	UCHS Senior Signing Day	
30 Week 38	31				
			Memorial Day (All Schools Closed)		





Saturday		Administration				
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# June 2021

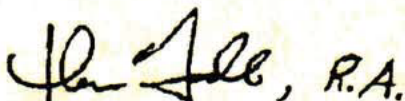
Sunday	Monday	Tuesday	Wednesday	Thursday	Friday
Week 38		1	2	3	4
			MS Math/ELA/History/Science IA#5 (NY)		
					5-8 Collab Scoring
					ES/MS End of Q4
					Grade 4 Science Test Window Ends
6	7	8	9	10	11
Week 39	HS Closeout and Field Day		HS IA #4		
	Grade 4 Science Written Test	9th Grade Registration	ACOO Meeting	MS Stepping Up ES/MS 1/2 Day	NYS ES & MS Last Day HS End of Q4
13	14	15	16	17	18
Week 40	UCC Graduation	ACOO Planning		*Regents Exams	
		ULC Graduation	UPC Graduation	UCHS Graduation	**NYS HS Last Day
20	21	22	23	24	25
		*Regents Exams			
27	28	29	30		
		*In NY, 8th grade/HS proctors and students will have to come in after the last day of school for the Regents exams.			

Saturday	Administration					
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**Certificate of Occupancy****CO Number: 310134468F**

This certifies that the premises described herein conforms substantially to the approved plans and specifications and to the requirements of all applicable laws, rules and regulations for the uses and occupancies specified. No change of use or occupancy shall be made unless a new Certificate of Occupancy is issued. *This document or a copy shall be available for inspection at the building at all reasonable times.*

<b>A.</b>	<b>Borough:</b> Brooklyn <b>Address:</b> 1485 PACIFIC STREET <b>Building Identification Number (BIN):</b> 3397030	<b>Block Number:</b> [REDACTED] <b>Lot Number(s):</b> [REDACTED] <b>Building Type:</b> New	<b>Certificate Type:</b> Final <b>Effective Date:</b> 08/09/2011
<i>For zoning lot metes &amp; bounds, please see BISWeb.</i>			
<b>B.</b>	<b>Construction classification:</b> [REDACTED] (1968 Code) <b>Building Occupancy Group classification:</b> [REDACTED] (1968 Code) <b>Multiple Dwelling Law Classification:</b> None		
	<b>No. of stories:</b> [REDACTED]	<b>Height in feet:</b> [REDACTED]	<b>No. of dwelling units:</b> 0
<b>C.</b>	<b>Fire Protection Equipment:</b> Standpipe system, Fire alarm system, Sprinkler system, Fire Suppression system		
<b>D.</b>	<b>Type and number of open spaces:</b> None associated with this filing.		
<b>E.</b>	<b>This Certificate is issued with the following legal limitations:</b> None		
<b>Borough Comments:</b> None			



Borough Commissioner



Commissioner



# Certificate of Occupancy

CO Number:

310134468F

## Permissible Use and Occupancy

All Building Code occupancy group designations are 1968 designations, except RES, COM, or PUB which are 1938 Building Code occupancy group designations.

Floor From To	Maximum persons permitted	Live load lbs per sq. ft.	Building Code occupancy group	Dwelling or Rooming Units	Zoning use group	Description of use
------------------	---------------------------------	---------------------------------	--	---------------------------------	---------------------	--------------------



2ND AND 4TH FLOORS SHALL BE LIMITED TO 755 PERSONS (INCLUDING GYMNASIUMS) WHEN CLASSROOMS ARE FULLY OCCUPIED, NON-SIMULT ANEOUS OCCUPANCY.

END OF SECTION

*[Signature]*

Borough Commissioner

*[Signature]*

Commissioner

# Certificate of Occupancy

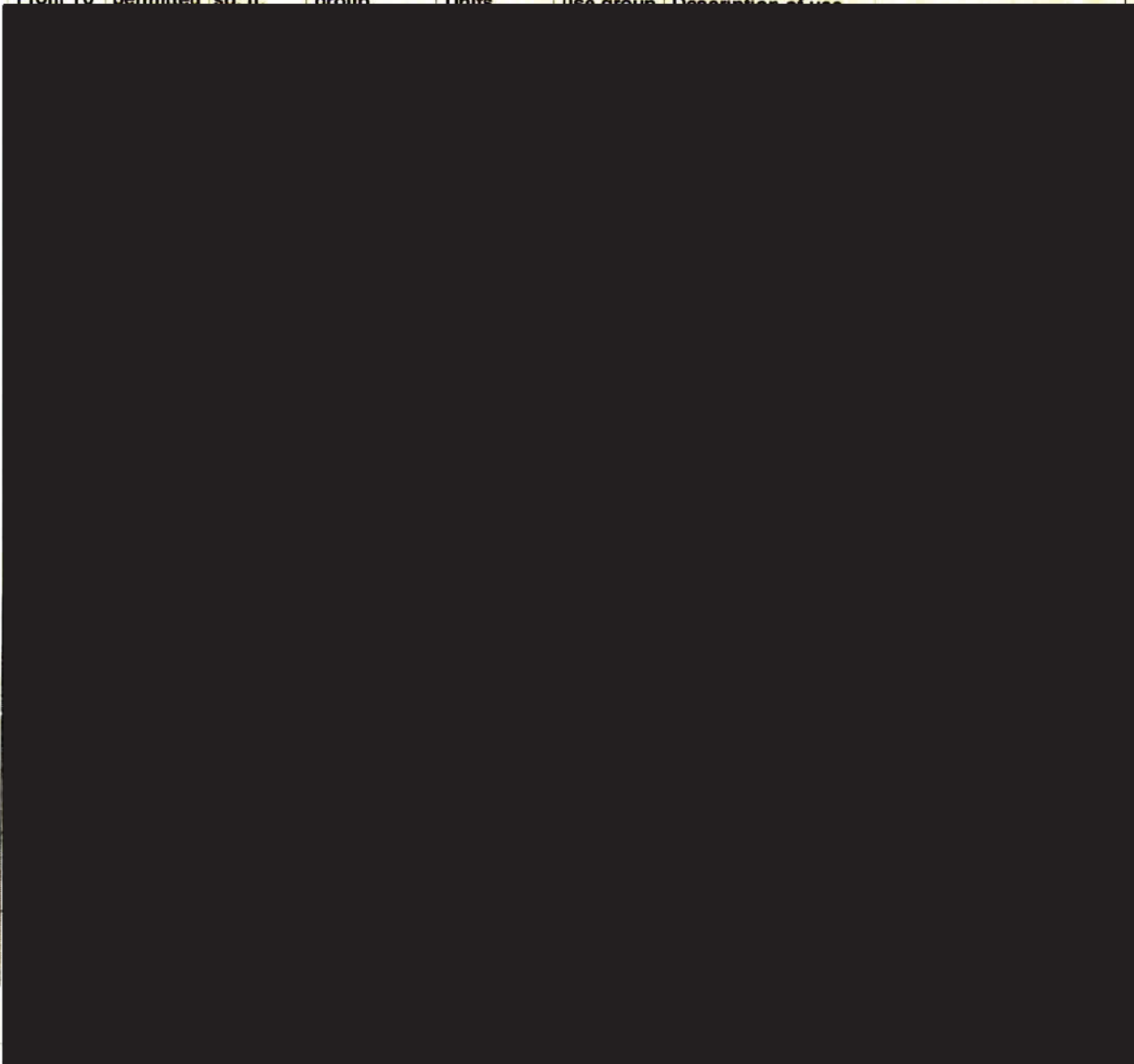
CO Number:

310134468F

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Floor From To	Maximum persons permitted	Live load lbs per sq. ft.	Building Code occupancy group	Dwelling or Rooming Units	Zoning use group	Description of use
------------------	---------------------------------	---------------------------------	--	---------------------------------	---------------------	--------------------



*John Lee, P.A.*

Borough Commissioner

*Robert K. Liu*

Commissioner



**ADVANCED**  
FLAMEPROOFING CORP.

FLAMEPROOFING SPECIALISTS  
OF DECORATIVE FABRICS  
855 E 7<sup>th</sup> Street, #7B, BROOKLYN, NY 11230  
TEL (347) 587-7383; FAX (347) 312-3892  
www.AdvancedFlameproofing.com

103417

## AFFIDAVIT OF FLAMEPROOFING

STATE OF NEW YORK  
CITY OF NEW YORK

DATE OF ANNUAL TEST: 03/11/2020  
NEXT TEST DATE: 03/11/2021

**MATERIAL TESTED FOR:** Crown Heights Charter High School  
1485 Pacific Street  
Brooklyn, NY 11216

This is to certify that, in accordance with FC 805.01(e) following items were tested using NFPA 701 small scale standard methods of Fire test for Flame resistant textiles approved by and registered with NYC Fire Department.

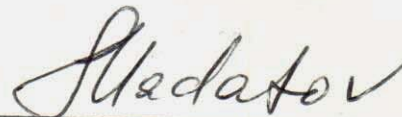
Qty	Description	Size	Fabric Manufacture	Location
1	White backdrop	14' x 70'	Fred Krieger & Co., Inc.	Cafetorium, stage
6	Black panels	14' x 10'	KM Fabrics, Inc.	Cafetorium, stage
6	Black panels	6' x 10'	KM Fabrics, Inc.	Cafetorium, stage
2	Blue drapes	14' x 60'	KM Fabrics, Inc.	Cafetorium, stage
1	Blue Roll Down Curtain	18' x 65'	Vintex Inc.	Cafetorium, divider
2	Blue curtains	20' x 90'	Vintex Inc.	Gym dividers 2 <sup>nd</sup> fl & 4 <sup>th</sup> fl
	Gym wall mats	3180 sq. feet	Vintex Inc	Gym 2 <sup>nd</sup> fl & 4 <sup>th</sup> fl

### NYC Fire Department certificate of approval #5022

I certify that fabric described above consist of non-combustible materials, making the fabric Inherently flame-retardant for the life of the fabric. Washing these fabrics will not remove the non-combustible characteristics.

The NYC Fire Department in accordance with FC 805.1.1 requires annual testing of the fabric. Due to accumulation of the air-borne dust and oils, the flame resistance can diminish over time.

Sworn Before Me This  
11<sup>th</sup> Day of March, 2020



Marat Madatov

Certificate of fitness #83501668  
With expiration on: 02/20/2023

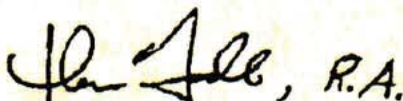




**Certificate of Occupancy****CO Number: 310134468F**

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	<b>No. of stories:</b> [REDACTED]	<b>Height in feet:</b> [REDACTED]	<b>No. of dwelling units:</b> 0
<b>C.</b>	<b>Fire Protection Equipment:</b> Standpipe system, Fire alarm system, Sprinkler system, Fire Suppression system		
<b>D.</b>	<b>Type and number of open spaces:</b> None associated with this filing.		
<b>E.</b>	<b>This Certificate is issued with the following legal limitations:</b> None		
<b>Borough Comments:</b> None			



Borough Commissioner



Commissioner



# Certificate of Occupancy

CO Number:

310134468F

## Permissible Use and Occupancy

All Building Code occupancy group designations are 1968 designations, except RES, COM, or PUB which are 1938 Building Code occupancy group designations.

Floor From To	Maximum persons permitted	Live load lbs per sq ft	Building Code occupancy	Dwelling or Rooming	Zoning
------------------	---------------------------------	-------------------------------	-------------------------------	------------------------	--------



NOTE: MAXIMUM OCCUPANCY OF 2ND AND 4TH FLOOR GYMNASIUMS IS LIMITED TO 950 PERSONS EACH. OCCUPANCY OF THE 2ND AND 4TH FLOORS SHALL BE LIMITED TO 755 PERSONS (INCLUDING GYMNASIUMS) WHEN CLASSROOMS ARE FULLY OCCUPIED, NON-SIMULT ANEOUS OCCUPANCY.

END OF SECTION

*[Signature]*

Borough Commissioner

*[Signature]*

Commissioner

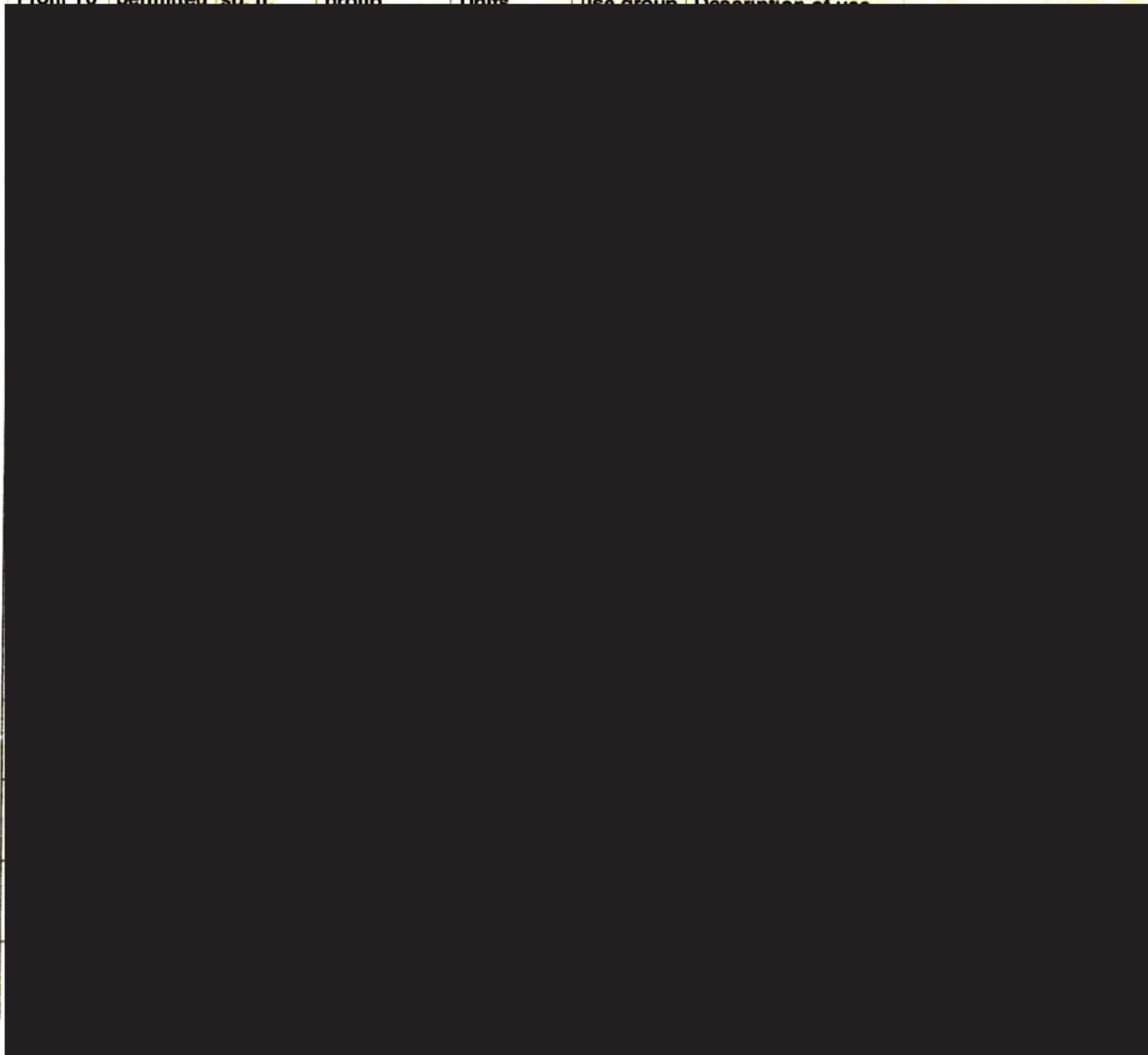
# Certificate of Occupancy

CO Number:

310134468F

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Floor From To	Maximum persons permitted	Live load lbs per sq. ft.	Building Code occupancy group	Dwelling or Rooming Units	Zoning use group	Description of use
						

*John Lee, P.E.*

Borough Commissioner

*Robert K. Liu*

Commissioner



DO NOT REMOVE  
BY ORDER OF THE FDNY

<input checked="" type="checkbox"/>	ABC (Dry Chem)
<input type="checkbox"/>	AFFF/FFFP
<input type="checkbox"/>	BC (Dry Chem)
<input type="checkbox"/>	PURPLE K (PK)
<input type="checkbox"/>	CARBON DIOXIDE
<input type="checkbox"/>	CLASS D (Dry Powder)
<input type="checkbox"/>	CLASS K
<input type="checkbox"/>	FE-36
<input type="checkbox"/>	FM 200
<input type="checkbox"/>	HALON 1211
<input type="checkbox"/>	HALON 1301



<input type="checkbox"/>	HALOTRON
<input type="checkbox"/>	WATER
<input type="checkbox"/>	LOADED STREAM
<input type="checkbox"/>	WET CHEM
<input type="checkbox"/>	CLEAN AGENT
<input type="checkbox"/>	INTERGEN
<input type="checkbox"/>	WATER MIST
<input type="checkbox"/>	FE-13
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	

THIS PORTABLE FIRE EXTINGUISHER HAS BEEN SERVICED  
AS REQUIRED BY NYC FIRE CODE 906.2.1.2

☒ **2019**  
☐ **2020**  
☐ **2021**

**FIRE FOE**

36-23 REVIEW AVE.  
L.I.C., N.Y. 11101  
(718) 937-9700 (212) 912-1889  
(516) 766-8442

PROOF OF COMPLIANCE FOR USE BY CERTIFIED  
PORTABLE FIRE EXTINGUISHER SERVICING COMPANY

VOID 1 YR. FROM MONTH PUNCHED

SERVICED				NEW				RECHARGED			
JAN	FEB	MAR	APR	MAY	JUNE	JULY	AUG	SEPT	OCT	NOV	DEC

# Fire Alarm and Life Safety System Inspection Certificate

*For*

CROWN HEIGHTS CHARTER  
SCHOOL  
1485 Pacific Street  
Brooklyn, NY 11216

Tested to NFPA 72 Standards

*This Inspection was performed in accordance with applicable NFPA Standards. The subsequent pages of this report provide performance measurements, listed ranges of acceptable results, and complete documentation of the inspection. Whenever discrepancies exist between acceptable performance standards and actual test results, notes and/or recommended solutions have been proposed or provided for immediate review and approval.*

*Semi-Annual Inspection  
Inspection Date  
Jun 1, 2020*

Building: CROWN HEIGHTS CHARTER SCHOOL  
Contact: Joe Ciccione  
Title: Manager

Company: New York Fire Service, Inc.  
Contact: Donovan Tieu  
Title: Technician

# Executive Summary

Generated by: BuildingReports.com

Building Information		
<b>Building:</b> CROWN HEIGHTS CHARTER SCHOOL	<b>Contact:</b> Joe Ciccione	
<b>Address:</b> 1485 Pacific Street	<b>Phone:</b> 646-302-7405	
<b>Address:</b>	<b>Fax:</b>	
<b>City/State/Zip:</b> Brooklyn, NY 11216	<b>Mobile:</b>	
<b>Country:</b> United States of America	<b>Email:</b>	
Inspection Performed By		
<b>Company:</b> New York Fire Service, Inc.	<b>Inspector:</b> Donovan Tieu	
<b>Address:</b> 1230 Port Washington Blvd.	<b>Phone:</b> [REDACTED]	
<b>Address:</b>	<b>Fax:</b>	
<b>City/State/Zip:</b> Port Washington, New York 11050	<b>Mobile:</b>	
<b>Country:</b> United States	<b>Email:</b> [REDACTED]	
Monitoring		
<b>Company:</b>	<b>Phone:</b>	<b>Account #:</b>
Central Station Signal Verification		
<b>Type:</b>	<b>Mfg:</b>	<b>Model #:</b>
<b>Test Time/Date:</b>	<b>Restore Time:</b>	

Inspection Summary								
Category:	Total Items		Serviced		Passed		Failed/Other	
	Qty	%	Qty	%	Qty	%	Qty	%
Monitor	102	27.27%	0	0%	0	0%	0	0%
Auxiliary	96	25.67%	0	0%	0	0%	0	0%
Initiating	166	44.39%	113	68.07%	113	100.00%	0	0%
Indicating	10	2.67%	3	30.00%	3	100.00%	0	0%
Totals	374	100%	116	31.02%	116	100.00%	0	0%
Certification								
Company: New York Fire Service, Inc. Inspector: Donovan Tieu				Building: CROWN HEIGHTS CHARTER SCHOOL Contact: Joe Ciccione				
Donovan Tieu Certifications								
Certification Type						Number		
NICET Fire Alarm Systems Level I								



# *Notes & Recommendations*

*Generated by: BuildingReports.com*

**Building: CROWN HEIGHTS CHARTER SCHOOL**

*The Notes & Recommendations Report details additional inspection notes made by the Inspectors during the course of the building inspection. Notes are grouped by Category.*

## **General Note**

CONDITION FOUND: horn strobe riser trouble

SERVICE PERFORMED:

A) horn strobe riser trouble

--booster battery trouble, other tech replace with new battery set

--trouble restore and clear

B) 1st Half Maintenance Test; 1st visit

-----  
Semi-Annual Maintenance Tested --%50

Horns / Strobes / Speakers Tested -- yes

Door Holders Tested -- no

Elevator Recall Tested -- no

Fan Shutdown Tested -- no

Any Program Changes -- no

--see email/contact NY Fire regard Building Report paperwork

--need return/next visit to continue remain maintenance on Building Report paperwork for 100% complete

\*NOTE\*

--customer to schedule the following company/vendor to assist technician

-----  
1. Elevator company

--to test elevator recall function

--to test smoke top elevator shaft

--to test smoke bottom elevator pit

--to test elevator shaft damper/vent

2. Hvac/ac fan or engineer

--to test fan and damper shutdown function

--to test smoke purge fan/damper control

3. Door/Hatch release vendor or engineer

--to test fire gate servery

--to test top of stair a,b,c,d,e hatch release

4. Generator vendor or engineer

--to test Generator signal (run/fail)

--to test emergency light/power

5. plumber sprinkler company or engineer

--to test waterflow and tamper

--to test fire pump signal (run,fail,phase reverse)

--to test deluge panel

CONDITION LEFT; normal no trouble

=====6.1.20

Inspected all devices, tested over 75% of devices

All devices that were tested operated properly

Sensitivity on all devices are in normal range

Live test was conducted, all systems worked

# Inspection & Testing

Generated by: BuildingReports.com

Building: CROWN HEIGHTS CHARTER SCHOOL			Control Panel: 1	
<i>The Inspection &amp; Testing section lists all of the items inspected in your building. Items are grouped by Passed or Failed/Other. Items are listed by Category. Each item includes the services performed, and the time &amp; date at which testing occurred.</i>				
Device Type	Location	Service	Time	Date
Passed				
Indicating				
Indicating Device		Tested	12:14:10 PM	06/01 /2020
Indicating Device		Tested	12:14:14 PM	06/01 /2020
Indicating Device		Tested	12:14:25 PM	06/01 /2020
Initiating				
Heat Detector		Visually Checked	11:04:15 AM	06/01 /2020
Heat Detector		Visually Checked	11:04:02 AM	06/01 /2020
Heat Detector		Visually Checked	11:04:21 AM	06/01 /2020
Heat Detector		Visually Checked	11:04:08 AM	06/01 /2020
Pull Station		Tested	11:02:56 AM	06/01 /2020
Pull Station		Tested	11:01:47 AM	06/01 /2020
Pull Station		Tested	11:01:35 AM	06/01 /2020
Pull Station		Tested	11:02:08 AM	06/01 /2020
Pull Station		Tested	11:00:30 AM	06/01 /2020
Pull Station		Tested	11:00:41 AM	06/01 /2020
Pull Station		Tested	11:01:39 AM	06/01 /2020
Pull Station		Tested	11:01:42 AM	06/01 /2020
Pull Station		Tested	11:00:34 AM	06/01 /2020
Pull Station		Tested	11:02:35 AM	06/01 /2020

Device Type	Location	Service	Time	Date
<i>Passed</i>				
Pull Station		Tested	11:03:14 AM	06/01/2020
Pull Station		Tested	11:03:21 AM	06/01/2020
Pull Station		Tested	11:03:11 AM	06/01/2020
Pull Station		Tested	11:02:21 AM	06/01/2020
Pull Station		Tested	11:02:52 AM	06/01/2020
Pull Station		Tested	11:03:00 AM	06/01/2020
Pull Station		Tested	11:00:37 AM	06/01/2020
Pull Station		Tested	11:02:05 AM	06/01/2020
Pull Station		Tested	11:01:54 AM	06/01/2020
Pull Station		Tested	11:02:49 AM	06/01/2020
Pull Station		Tested	11:03:33 AM	06/01/2020
Pull Station		Tested	11:02:24 AM	06/01/2020
Pull Station		Tested	11:02:32 AM	06/01/2020
Pull Station		Tested	11:03:26 AM	06/01/2020
Pull Station		Tested	11:02:28 AM	06/01/2020
Pull Station		Tested	11:00:44 AM	06/01/2020
Pull Station		Tested	11:02:40 AM	06/01/2020
Pull Station		Tested	11:03:04 AM	06/01/2020
Pull Station		Tested	11:03:18 AM	06/01/2020
Pull Station		Tested	11:02:01 AM	06/01/2020
Pull Station		Tested	11:02:17 AM	06/01/2020
Pull Station		Tested	11:00:51 AM	06/01/2020
Pull Station		Tested	11:00:48 AM	06/01/2020

Device Type	Location	Service	Time	Date
<i>Passed</i>				
Pull Station		Tested	11:02:14 AM	06/01/2020
Pull Station		Tested	11:00:25 AM	06/01/2020
Pull Station		Tested	11:03:08 AM	06/01/2020
Pull Station		Tested	11:03:37 AM	06/01/2020
Pull Station		Tested	11:03:30 AM	06/01/2020
Pull Station		Tested	11:02:43 AM	06/01/2020
Pull Station		Tested	11:01:57 AM	06/01/2020
Pull Station		Tested	11:01:50 AM	06/01/2020
Smoke Detector		Tested	11:07:15 AM	06/01/2020
Smoke Detector		Tested	11:06:34 AM	06/01/2020
Smoke Detector		Tested	11:09:35 AM	06/01/2020
Smoke Detector		Tested	11:09:50 AM	06/01/2020
Smoke Detector		Tested	11:07:37 AM	06/01/2020
Smoke Detector		Tested	11:08:00 AM	06/01/2020
Smoke Detector		Tested	11:04:49 AM	06/01/2020
Smoke Detector		Tested	11:07:10 AM	06/01/2020
Smoke Detector		Tested	11:08:36 AM	06/01/2020
Smoke Detector		Tested	11:06:09 AM	06/01/2020
Smoke Detector		Tested	11:05:39 AM	06/01/2020
Smoke Detector		Tested	11:08:54 AM	06/01/2020
Smoke Detector		Tested	11:07:52 AM	06/01/2020
Smoke Detector		Tested	11:08:17 AM	06/01/2020
Smoke Detector		Tested	11:05:34 AM	06/01/2020

Device Type	Location	Service	Time	Date
<i>Passed</i>				
Smoke Detector		Tested	11:05:30 AM	06/01/2020
Smoke Detector		Tested	11:06:21 AM	06/01/2020
Smoke Detector		Tested	11:06:00 AM	06/01/2020
Smoke Detector		Tested	11:07:48 AM	06/01/2020
Smoke Detector		Tested	11:08:26 AM	06/01/2020
Smoke Detector		Tested	11:06:17 AM	06/01/2020
Smoke Detector		Tested	11:06:24 AM	06/01/2020
Smoke Detector		Tested	11:09:05 AM	06/01/2020
Smoke Detector		Tested	11:05:27 AM	06/01/2020
Smoke Detector		Tested	11:05:50 AM	06/01/2020
Smoke Detector		Tested	11:08:32 AM	06/01/2020
Smoke Detector		Tested	11:09:09 AM	06/01/2020
Smoke Detector		Tested	11:06:28 AM	06/01/2020
Smoke Detector		Tested	11:05:19 AM	06/01/2020
Smoke Detector		Tested	11:05:15 AM	06/01/2020
Smoke Detector		Tested	11:05:06 AM	06/01/2020
Smoke Detector		Tested	11:09:42 AM	06/01/2020
Smoke Detector		Tested	11:08:59 AM	06/01/2020
Smoke Detector		Tested	11:06:47 AM	06/01/2020
Smoke Detector		Tested	11:06:38 AM	06/01/2020
Smoke Detector		Tested	11:06:04 AM	06/01/2020
Smoke Detector		Tested	11:05:55 AM	06/01/2020
Smoke Detector		Tested	11:07:01 AM	06/01/2020

Device Type	Location	Service	Time	Date
<i>Passed</i>				
Smoke Detector		Tested	11:07:33 AM	06/01/2020
Smoke Detector		Tested	11:04:54 AM	06/01/2020
Smoke Detector		Tested	11:06:53 AM	06/01/2020
Smoke Detector		Tested	11:09:31 AM	06/01/2020
Smoke Detector		Tested	11:09:46 AM	06/01/2020
Smoke Detector		Tested	11:07:43 AM	06/01/2020
Smoke Detector		Tested	11:07:25 AM	06/01/2020
Smoke Detector		Tested	11:08:21 AM	06/01/2020
Smoke Detector		Tested	11:09:55 AM	06/01/2020
Smoke Detector		Tested	11:06:42 AM	06/01/2020
Smoke Detector		Tested	11:08:44 AM	06/01/2020
Smoke Detector		Tested	11:09:14 AM	06/01/2020
Smoke Detector		Tested	11:07:29 AM	06/01/2020
Smoke Detector		Tested	11:09:59 AM	06/01/2020
Smoke Detector		Tested	11:08:50 AM	06/01/2020
Smoke Detector		Tested	11:09:21 AM	06/01/2020
Smoke Detector		Tested	11:09:39 AM	06/01/2020
Smoke Detector		Tested	11:06:57 AM	06/01/2020
Smoke Detector		Tested	11:09:26 AM	06/01/2020
Smoke Detector		Tested	11:08:40 AM	06/01/2020
Smoke Detector		Tested	11:09:17 AM	06/01/2020
Smoke Detector		Tested	11:05:11 AM	06/01/2020
Smoke Detector		Tested	11:07:07 AM	06/01/2020

Device Type	Location	Service	Time	Date
<i>Passed</i>				
Smoke Detector		Tested	11:05:00 AM	06/01 /2020
Smoke Detector		Tested	11:08:12 AM	06/01 /2020
Smoke Detector		Tested	11:07:56 AM	06/01 /2020
Smoke Detector		Tested	11:05:44 AM	06/01 /2020
Smoke Detector		Tested	11:06:13 AM	06/01 /2020
Smoke Detector		Tested	11:07:20 AM	06/01 /2020
Smoke Detector		Tested	11:08:04 AM	06/01 /2020
Smoke Detector		Tested	11:08:04 AM	06/01 /2020
Device Type	Location	Service	Time	Date
<i>Untested</i>				
<b>Auxiliary</b>				
Damper Control				
Damper Control				
Damper Control				
Damper Control				
Damper Control				
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Damper Control				



[illegible]


Device Type	Location	Service	Time	Date
<i>Untested</i>				
Fan Shutdown				
Fan Shutdown				
Fan Shutdown				
Fan Shutdown				
Fan Shutdown				
Fan Shutdown				
Fan Shutdown				
Fan Shutdown				
Fan Shutdown				
Fan Shutdown				
Programmable Relay				
Programmable Relay				
Programmable Relay				
Programmable Relay				
Programmable Relay				
Programmable Relay				
Programmable Relay				
Programmable Relay				
Programmable Relay				
Programmable Relay				
Programmable Relay				
Releasing Device				
Releasing Device				
Releasing Device				
<b>Indicating</b>				
Indicating Device				
Indicating Device				
Indicating Device				
Indicating Device				
Indicating Device				
Indicating Device				
<b>Initiating</b>				
Smoke Detector				
Smoke Detector				
Smoke Detector				
Smoke Detector				
Smoke Detector				
Smoke Detector				
Smoke Detector				

Device Type	Location	Service	Time	Date
<i>Untested</i>				
Smoke Detector				
Smoke Detector				
Smoke Detector				
Smoke Detector				
Smoke Detector				
Smoke Detector				
Smoke Detector				
Smoke Detector				
Smoke Detector				
Smoke Detector				
Smoke Detector				
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Smoke Detector				
Smoke Detector				
Smoke Detector				
Smoke Detector				
Smoke Detector				
Smoke Detector				
Smoke Detector				
Smoke Detector				
Waterflow Switch				
Waterflow Switch				

Device Type	Location	Service	Time	Date
<i>Untested</i>				
Waterflow Switch				
Waterflow Switch				
Waterflow Switch				
Waterflow Switch				
Waterflow Switch				
Waterflow Switch				
Waterflow Switch				
Waterflow Switch				
Waterflow Switch				
Waterflow Switch				
<b>Monitor</b>				
Damper				
Damper				
Damper				
Damper				
Damper				
Damper				
Damper				
Damper				
Damper				
Damper				
Damper				
Damper				
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Damper				
Damper				
Damper				
Damper				
Damper				
Damper				
Damper				
Damper				

[illegible]

[illegible]

Device Type	Location	Service	Time	Date
<i>Untested</i>				
Monitor Device				
Monitor Device				
Monitor Device				
Monitor Device				
Monitor Device				
Monitor Device				
Monitor Device				

# Service Summary

Generated by: BuildingReports.com

Building: CROWN HEIGHTS CHARTER SCHOOL		
The Service Summary section provides an overview of the services performed in this report.		
Device Type	Service	Quantity
<i>Passed</i>		
Heat Detector	Visually Checked	4
Indicating Device	Tested	3
Pull Station	Tested	41
Smoke Detector	Tested	68
<b>Total</b>		<b>116</b>
<i>Untested</i>		
Damper Control		53
Damper		52
Fan Running		10
Fan Shutdown		27
Indicating Device		7
Monitor Device		40
Programmable Relay		13
Releasing Device		3
Smoke Detector		42
Waterflow Switch		11
<b>Total</b>		<b>258</b>
<b>Grand Total</b>		<b>374</b>



# Auxiliary Functions Testing

Generated by: BuildingReports.com

Building: CROWN HEIGHTS CHARTER SCHOOL			Control Panel: 1	
<i>The Auxiliary Functions Testing section lists each of the ancillary items, systems, and emergency equipment that are controlled by the system control unit. Items are grouped by Passed or Failed/Other. The items are listed by device type, and a check box is provided to indicate if the test conducted was simulated.</i>				
Type	Location	Comment	ScanID	Simulated
Untested				
Damper Control			5279753237	<input type="checkbox"/>
			5281229379	<input type="checkbox"/>
			5279752070	<input type="checkbox"/>
			5279429699	<input type="checkbox"/>
			5279754074	<input type="checkbox"/>
			5279427800	<input type="checkbox"/>
			5279752926	<input type="checkbox"/>
			5279752490	<input type="checkbox"/>
			5279751974	<input type="checkbox"/>
			5281229799	<input type="checkbox"/>
			5279420917	<input type="checkbox"/>
			5279428296	<input type="checkbox"/>
			5285542627	<input type="checkbox"/>
			5281223148	<input type="checkbox"/>
			5281107738	<input type="checkbox"/>
			5279611667	<input type="checkbox"/>
			5281229416	<input type="checkbox"/>
			5279158209	<input type="checkbox"/>
			5279753718	<input type="checkbox"/>
			5281302911	<input type="checkbox"/>
			5279752483	<input type="checkbox"/>
			5281397153	<input type="checkbox"/>
			5281302621	<input type="checkbox"/>
			5280000115	<input type="checkbox"/>
			5286958281	<input type="checkbox"/>
			5281397672	<input type="checkbox"/>
			5279753527	<input type="checkbox"/>
			5279428319	<input type="checkbox"/>
			5279460692	<input type="checkbox"/>
			5279429972	<input type="checkbox"/>
			5279752728	<input type="checkbox"/>

*The Auxiliary Functions Testing section lists each of the ancillary items, systems, and emergency equipment that are controlled by the system control unit. Items are grouped by Passed or Failed/Other. The items are listed by device type, and a check box is provided to indicate if the test conducted was simulated.*

Type	Location	Comment	ScanID	Simulated
Untested				
Damper Control			5279752537	<input type="checkbox"/>
		5279749452	<input type="checkbox"/>	
		5279752148	<input type="checkbox"/>	
		5279752520	<input type="checkbox"/>	
		5279752865	<input type="checkbox"/>	
		5279754067	<input type="checkbox"/>	
		5279752261	<input type="checkbox"/>	
		5279752407	<input type="checkbox"/>	
		5279752827	<input type="checkbox"/>	
		5279207884	<input type="checkbox"/>	
		5279752438	<input type="checkbox"/>	
		5279754111	<input type="checkbox"/>	
		5279752995	<input type="checkbox"/>	
		5279752650	<input type="checkbox"/>	
		5279749612	<input type="checkbox"/>	
		5279749322	<input type="checkbox"/>	
		5279752414	<input type="checkbox"/>	
		5279428111	<input type="checkbox"/>	
		5279421006	<input type="checkbox"/>	
		5279430145	<input type="checkbox"/>	
		5279428067	<input type="checkbox"/>	
		5279427527	<input type="checkbox"/>	
Fan Shutdown				5200077210
	5279207280		<input type="checkbox"/>	
	5279207235		<input type="checkbox"/>	
	5279207389		<input type="checkbox"/>	
	5279208706		<input type="checkbox"/>	
	5279207297		<input type="checkbox"/>	
	5279207549		<input type="checkbox"/>	
	5279207624		<input type="checkbox"/>	
	5279208843		<input type="checkbox"/>	
	5279207907		<input type="checkbox"/>	

*The Auxiliary Functions Testing section lists each of the ancillary items, systems, and emergency equipment that are controlled by the system control unit. Items are grouped by Passed or Failed/Other. The items are listed by device type, and a check box is provided to indicate if the test conducted was simulated.*

Type	Location	Comment	ScanID	Simulated
<b>Untested</b>				
<b>Fan Shutdown</b>				
			5279207570	<input type="checkbox"/>
			5204743975	<input type="checkbox"/>
			5279208577	<input type="checkbox"/>
			5279207471	<input type="checkbox"/>
			5279207464	<input type="checkbox"/>
			5279208249	<input type="checkbox"/>
			5279207600	<input type="checkbox"/>
			5279208560	<input type="checkbox"/>
			5279207655	<input type="checkbox"/>
			5279207457	<input type="checkbox"/>
			5279208805	<input type="checkbox"/>
			5279207679	<input type="checkbox"/>
			5279208164	<input type="checkbox"/>
			5282841846	<input type="checkbox"/>
			5278918910	<input type="checkbox"/>
			5279158100	<input type="checkbox"/>
			5279208638	<input type="checkbox"/>
<b>Programmable Relay</b>				
NS Output			5279428470	<input type="checkbox"/>
NS Output			5279460821	<input type="checkbox"/>
NS Output			5279160981	<input type="checkbox"/>
NS Output			5279421235	<input type="checkbox"/>
NS Output			5279207273	<input type="checkbox"/>
NS Output			5279612244	<input type="checkbox"/>
NS Output			5279420658	<input type="checkbox"/>
NS Output			5279460555	<input type="checkbox"/>

Building: CROWN HEIGHTS CHARTER  
SCHOOL


Control Panel: 1

*The Auxiliary Functions Testing section lists each of the ancillary items, systems, and emergency equipment that are controlled by the system control unit. Items are grouped by Passed or Failed/Other. The items are listed by device type, and a check box is provided to indicate if the test conducted was simulated.*

Type	Location	Comment	ScanID	Simulated
Untested				
Programmable Relay				
NS Alarm Output			5278783655	<input type="checkbox"/>
NS Alarm Output			5279626623	<input type="checkbox"/>
NS Alarm Output			5278783259	<input type="checkbox"/>
NS Alarm Output			5278780975	<input type="checkbox"/>
NS Alarm Output			5278783365	<input type="checkbox"/>
Releasing Device				
Door Holder			5279420672	<input type="checkbox"/>
Door Holder			5281222653	<input type="checkbox"/>
Door Holder			5281229294	<input type="checkbox"/>

# Smoke Management Testing

Generated by: BuildingReports.com

Building: CROWN HEIGHTS CHARTER SCHOOL			Control Panel: 1	
<i>The Smoke Management Testing section details the test and inspection of device items that are involved in controlling the spread of smoke in a building. Items are grouped by Passed or Failed/ Other.</i>				
Location	Description	Comment	ScanID	Simulated
<i>Untested</i>				
Fan Shutdown				
			5200077210	<input type="checkbox"/>
			5279207280	<input type="checkbox"/>
			5279207235	<input type="checkbox"/>
			5279207389	<input type="checkbox"/>
			5279208706	<input type="checkbox"/>
			5279207297	<input type="checkbox"/>
			5279207549	<input type="checkbox"/>
			5279207624	<input type="checkbox"/>
			5279208843	<input type="checkbox"/>
			5279207907	<input type="checkbox"/>
			5279207570	<input type="checkbox"/>
			5204743975	<input type="checkbox"/>
			5279208577	<input type="checkbox"/>
			5279207471	<input type="checkbox"/>
			5279207464	<input type="checkbox"/>
			5279208249	<input type="checkbox"/>
			5279207600	<input type="checkbox"/>
			5279208560	<input type="checkbox"/>

Location	Description	Comment	ScanID	Simulated
			5279207655	<input type="checkbox"/>
			5279207457	<input type="checkbox"/>
			5279208805	<input type="checkbox"/>
			5279207679	<input type="checkbox"/>
			5279208164	<input type="checkbox"/>
			5282841846	<input type="checkbox"/>
			5278918910	<input type="checkbox"/>
			5279158100	<input type="checkbox"/>
			5279208638	<input type="checkbox"/>
<b>Releasing Device</b>				
	Door Holder		5279420672	<input type="checkbox"/>
	Door Holder		5281222653	<input type="checkbox"/>
	Door Holder		5281229294	<input type="checkbox"/>
<b>Fan Running</b>				
	Fan On/Off		4834933152	<input type="checkbox"/>
	Fan On/Off		4834571033	<input type="checkbox"/>
	Fan On/Off		4834933107	<input type="checkbox"/>
	Fan On/Off		4834566596	<input type="checkbox"/>
	Fan On/Off		4834567852	<input type="checkbox"/>
	Fan On/Off		4834566220	<input type="checkbox"/>
	Fan On/Off		4834565988	<input type="checkbox"/>
	Fan On/Off		4834566305	<input type="checkbox"/>
	Fan On/Off		4834566336	<input type="checkbox"/>
	Fan On/Off		4834567166	<input type="checkbox"/>

# Inventory & Warranty Report

Generated by: BuildingReports.com

Building: CROWN HEIGHTS CHARTER SCHOOL	Control Panel: 1
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The Inventory & Warranty Report lists each of the devices and items that are included in your Inspection Report. A complete inventory count by device type and category is provided. Items installed within the last 90 days, within the last year, and devices installed for two years or more are grouped together for easy reference.

Device or Type	Category	% of Inventory	Quantity
Damper	Monitor	13.90%	52
Damper Control	Auxiliary	14.17%	53
Fan Running	Monitor	2.67%	10
Fan Shutdown	Auxiliary	7.22%	27
Monitor Device	Monitor	10.70%	40
Programmable Relay	Auxiliary	3.48%	13
Indicating Device	Indicating	2.67%	10
Releasing Device	Auxiliary	0.80%	3
Smoke Detector	Initiating	29.41%	110
Waterflow Switch	Initiating	2.94%	11
Pull Station	Initiating	10.96%	41
Heat Detector	Initiating	1.07%	4

Type	Qty	Model #	Description	Install Date
<b><i>In Service - 1 Year to 2 Years</i></b>				
<b>EST</b>				
Damper	52	CT2	Damper Position	12/27/2018
Damper Control	53	CR		12/27/2018
Fan Running	10	CT1	Fan On/Off	12/27/2018
Fan Shutdown	27	CR		12/27/2018
Heat Detector	1	CT1		12/27/2018
Heat Detector	2	CT2		12/27/2018
Heat Detector	1	HFS		12/27/2018
Indicating Device	1	CC1	Audible	12/27/2018
Indicating Device	4	MCC1	Visual	12/27/2018
Indicating Device	1	MCC1S	Visual	12/27/2018
Monitor Device	13	CT1	Tamper	12/27/2018
Monitor Device	2	CT2		12/27/2018
Monitor Device	13	CT2	Tamper	12/27/2018
Programmable Relay	5	CR	NS Alarm Output	12/27/2018
Programmable Relay	1	CR	NS Output	12/27/2018
Pull Station	40	CT1		12/27/2018
Releasing Device	1	CR	Door Holder	12/27/2018
Smoke Detector	103	PS		12/27/2018

### ***In Service - 25 Years or Older***

<b>EST</b>				
Indicating Device	1	CC1	Audible	12/31/1969
Indicating Device	2	CC1	Visual	12/31/1969
Indicating Device	1	MCC1	Visual	12/31/1969
Monitor Device	7	CT1	Supervisory	12/31/1969
Monitor Device	5	CT2	Supervisory	12/31/1969
Programmable Relay	7	CR	NS Output	12/31/1969
Pull Station	1	CT1		12/31/1969
Releasing Device	2	CR	Door Holder	12/31/1969
Smoke Detector	7	PS		12/31/1969
Waterflow Switch	1	CT1		12/31/1969
Waterflow Switch	10	CT2		12/31/1969




# Zone Address Report

Generated by: BuildingReports.com

Building: CROWN HEIGHTS  
CHARTER SCHOOL

Control Panel: 1

*The Zone Address Report lists all of the devices and items that have an individual address, or are grouped together under a common zone. The device type, location, and description are included for your reference.*

Address	Device Type	Location	Type	ScanID
<b>Zone/Circuit: 02</b>				
0001	Smoke Detector			3988955294
0002	Smoke Detector			3988428637
0003	Smoke Detector			3988955416
0004	Smoke Detector			3989823103
0005	Smoke Detector			3989822823
0006	Smoke Detector			3989822809
0007	Smoke Detector			3988955461
0008	Smoke Detector			3988961745
0009	Smoke Detector			3988955508
0010	Smoke Detector			3988955522
0011	Smoke Detector			3989798746
0012	Smoke Detector			3989822625
0013	Smoke Detector			3988955386
0014	Smoke Detector			3988955362
0015	Smoke Detector			3988955324
0016	Smoke Detector			3988955195
0017	Smoke Detector			3988961998
0018	Smoke Detector			3995907323
0019	Smoke Detector			3988955072
0020	Smoke Detector			3988955102
0021	Smoke Detector			3988955089
0022	Smoke Detector			3988955270
0023	Smoke Detector			3988955218
0025	Smoke Detector			3988955331
0026	Smoke Detector			3988955317
0027	Smoke Detector			3988955485
0029	Smoke Detector			3988955249
0030	Smoke Detector			3988955119
0031	Smoke Detector			3988955430
0033	Smoke Detector			3989822748
0034	Heat Detector			3603174352
0035	Smoke Detector			3989822649
0037	Smoke Detector			3989822786
0038	Smoke Detector			3989822663
0039	Smoke Detector			3989823196

Address	Device Type	Location	Type	ScanID
0041	Smoke Detector			3989822885
0042	Smoke Detector			3988961776
0043	Smoke Detector			3988961769
0044	Smoke Detector			3995907330
0045	Smoke Detector			3995938587
0046	Smoke Detector			3995938488
0047	Smoke Detector			3989822908
0048	Smoke Detector			3989822588
0049	Smoke Detector			3988955492
0050	Smoke Detector			3988955201
0051	Smoke Detector			3989822946
0052	Smoke Detector			3989803860
0053	Smoke Detector			3988428798
0054	Smoke Detector			3989822656
0055	Smoke Detector			3988955164
0056	Smoke Detector			3988955232
0057	Smoke Detector			3988434102
0058	Smoke Detector			3988433990
0059	Smoke Detector			3988429276
0060	Smoke Detector			3989823073
0061	Smoke Detector			3989822960
0062	Smoke Detector			3988955263
0063	Smoke Detector			3988955287
0064	Smoke Detector			3988955539
0065	Smoke Detector			3989822892
0066	Smoke Detector			3988955096
0067	Smoke Detector			3988428590
0068	Smoke Detector			3989822830
0069	Smoke Detector			3989823066
0070	Smoke Detector			3989823080
0071	Smoke Detector			3989822601
0072	Smoke Detector			3989822793
0073	Smoke Detector			3989822571
0126	Pull Station			4834933800
0127	Pull Station			4835014324
0128	Pull Station			4834566978
0129	Pull Station			4834933299
0130	Pull Station			4834933831
0131	Pull Station			4835015680
0132	Pull Station			4834567883
0133	Pull Station			4834933930
0134	Pull Station			4835016052
0135	Pull Station			4835016328
0136	Pull Station			4835015932
0137	Pull Station			4834936085

Address	Device Type	Location	Type	ScanID
0138	Programmable Relay		NS Alarm Output	5278780975
0139	Releasing Device		Door Holder	5279420672
0140	Fan Shutdown			5200077210
0141	Programmable Relay		NS Alarm Output	5278783259
0142	Damper Control			5279460692
0143	Damper		Damper Position	4942248568
0144	Damper		Damper Position	4942248575
0145	Damper Control			5279427800
0146	Programmable Relay		NS Alarm Output	5278783655
0147	Damper		Damper Position	4942278404
0148	Damper		Damper Position	4942278411
0149	Heat Detector			4942279067
0150	Heat Detector			4942279074
0151	Heat Detector			4835014799
0152	Releasing Device		Door Holder	5281222653
0153	Releasing Device		Door Holder	5281229294
0154	Monitor Device		Tamper	4802139753
0155	Monitor Device		Supervisory	4942534548
0156	Monitor Device		Supervisory	4942534555
0157	Monitor Device		Supervisory	4834933572
0158	Monitor Device		Supervisory	4941881605
0159	Waterflow Switch			4941881612
0160	Monitor Device		Tamper	4834565926
0161	Monitor Device		Tamper	4942278480
0162	Monitor Device		Tamper	4942278497
0163	Monitor Device		Tamper	4835020905
0164	Monitor Device		Tamper	4834933626
0165	Monitor Device		Tamper	4834567197
0166	Monitor Device		Tamper	4834933466
0167	Waterflow Switch			4942279685
0168	Monitor Device		Tamper	4942279692
0169	Pull Station			4834930243
0170	Pull Station			4835014256
0171	Pull Station			4835014164
0172	Pull Station			4835021339

Address	Device Type	Location	Type	ScanID
0173	Pull Station			4835014515
0174	Pull Station			4835016267
0175	Pull Station			4835016038
0176	Pull Station			4835016205
0177	Waterflow Switch			4942278848
0178	Monitor Device		Tamper	4942278855
0179	Fan Shutdown			5279208164
0180	Fan Running		Fan On/Off	4834566336
0181	Damper		Damper Position	4942278824
0182	Damper		Damper Position	4942278831
0183	Damper Control			5279752728
0184	Damper Control			5281223148
0185	Damper		Damper Position	4942278169
0186	Damper		Damper Position	4942278176
0187	Damper Control			5279752537
0188	Damper Control			5281107738
0189	Damper		Damper Position	4942279364
0190	Damper		Damper Position	4942279371
0191	Damper Control			5279752148
0192	Damper Control			5281229416
0193	Damper		Damper Position	4942247981
0194	Damper		Damper Position	4942247998
0195	Damper Control			5279752926
0196	Damper Control			5279752865
0197	Damper Control			5281229379
0198	Damper Control			5279754067
0199	Programmable Relay		NS Alarm Output	5278783365
0200	Damper		Damper Position	4942279647
0201	Damper		Damper Position	4942279654
0202	Damper Control			5279752261
0203	Damper Control			5279158209
0204	Damper		Damper Position	4942279708
0205	Damper		Damper Position	4942279715

Address	Device Type	Location	Type	ScanID
0206	Damper Control		Supervisory	5279752407
0207	Damper Control			5279753718
0208	Monitor Device			4839032515
0210	Damper Control			5279752827
0211	Damper Control		Damper Position	5279749452
0212	Damper			4942299744
0213	Damper		Damper Position	4942299751
0214	Damper Control		Damper Position	5279752490
0215	Damper Control			5279753237
0216	Damper		Damper Position	4942278800
0217	Damper		Damper Position	4942278817
0218	Waterflow Switch		Tamper	4942235902
0219	Monitor Device			4942235919
0220	Waterflow Switch		Tamper	4942279104
0221	Monitor Device			4942279111
0222	Pull Station		Tamper	4835025542
0223	Pull Station			4835014621
0224	Pull Station		Tamper	4835014812
0225	Damper Control			5279752520
0226	Monitor Device		Tamper	4834929513
0227	Monitor Device		Tamper	4834933787
0228	Monitor Device		Tamper	4834933596
0229	Damper		Damper Position	4942278220
0230	Damper		Damper Position	4942278237
0231	Damper Control		Tamper	5279428296
0232	Damper Control			5279428319
0233	Damper Control		Tamper	5285542627
0234	Damper Control			5279429972
0235	Monitor Device		Tamper	4834933237
0236	Damper Control		Damper Position	5279430145
0237	Damper			4942279340
0238	Damper		Damper Position	4942279357
0239	Monitor Device		Tamper	4834933329
0240	Monitor Device		Tamper	4835014690
0241	Damper		Damper Position	4942278381

Address	Device Type	Location	Type	ScanID
0242	Damper		Damper Position	4942278398
0243	Damper Control			5279611667
0244	Damper		Damper Position	4941865124
0245	Damper		Damper Position	4941865131
0246	Monitor Device		Tamper	4834936092
0247	Monitor Device		Tamper	4942235322
0248	Monitor Device		Tamper	4942235339
0249	Fan Shutdown			5204743975
0251	Smoke Detector			3988955409
0253	Smoke Detector			3989823035
0254	Smoke Detector			3989806045
0256	Smoke Detector			3989822632
0257	Smoke Detector			3988961943
0258	Smoke Detector			3988955157
0259	Smoke Detector			3988429061
0260	Smoke Detector			3988955379
0261	Smoke Detector			3988955423
0262	Smoke Detector			3988961721
0263	Smoke Detector			3988955348
0265	Smoke Detector			3989823097
0266	Smoke Detector			3989823110
0267	Smoke Detector			3988433808
0268	Smoke Detector			3988955256
0269	Smoke Detector			3988962346
0270	Smoke Detector			3988955478
0271	Smoke Detector			3984630652
0272	Smoke Detector			3995907200
0276	Smoke Detector			3984630607
0277	Smoke Detector			3984630409
0283	Smoke Detector			3985041457
0284	Smoke Detector			3985035746
0285	Smoke Detector			3984630478
0286	Smoke Detector			3995938839
0287	Smoke Detector			3984630591
0288	Smoke Detector			3996331028
0289	Smoke Detector			3984630447
0290	Smoke Detector			3984630867
0291	Smoke Detector			3984630539
0292	Smoke Detector			3984631284
0293	Smoke Detector			3984630706
0294	Smoke Detector			3984631086
0295	Smoke Detector			3995938822

Address	Device Type	Location	Type	ScanID
0296	Smoke Detector			3984630614
0297	Smoke Detector			3908734909
0298	Smoke Detector			3988964289
0299	Smoke Detector			3988955355
0300	Smoke Detector			3988955188
0301	Smoke Detector			3988433402
0302	Smoke Detector			3988955454
0303	Smoke Detector			3989822953
0304	Smoke Detector			3989822847
0376	Programmable Relay		NS Output	5279420658
0377	Programmable Relay		NS Output	5279207273
0378	Monitor Device		Supervisory	4834933893
0379	Monitor Device		Supervisory	4834566329
0380	Fan Shutdown			5279207570
0381	Fan Shutdown			5278918910
0382	Fan Shutdown			5279158100
0383	Fan Running		Fan On/Off	4834565988
0384	Damper Control			5279754074
0385	Programmable Relay		NS Output	5279612244
0386	Waterflow Switch			4942235445
0387	Monitor Device		Tamper	4942235452
0388	Fan Shutdown			5279207655
0389	Fan Shutdown			5279207457
0390	Pull Station			4835020875
0391	Pull Station			4835014249
0392	Pull Station			4835014478
0393	Pull Station			4835021391
0394	Pull Station			4834933534
0395	Pull Station			4835014720
0396	Pull Station			4835015734
0397	Pull Station			4835016229
0398	Damper Control			5279754111
0399	Damper Control			5281397153
0400	Damper		Damper Position	4942236206
0401	Damper		Damper Position	4942236213
0402	Damper Control			5279207884
0403	Damper Control			5281302911
0404	Damper		Damper Position	4942236688

Address	Device Type	Location	Type	ScanID
0405	Damper		Damper Position	4942236695
0406	Damper Control			5279752438
0407	Damper Control			5279752483
0408	Damper		Damper Position	4942232246
0409	Damper		Damper Position	4942232253
0410	Damper Control			5279421006
0411	Damper Control			5279753527
0412	Damper Control			5279428067
0413	Damper Control			5279420917
0414	Damper Control			5279751974
0415	Damper Control			5279752070
0416	Damper Control			5279752650
0417	Damper Control			5281302621
0418	Damper		Damper Position	4942235643
0419	Damper		Damper Position	4942235650
0420	Damper Control			5279749612
0421	Damper Control			5280000115
0422	Damper		Damper Position	4942247769
0423	Damper		Damper Position	4942247776
0424	Damper Control			5279749322
0425	Damper Control			5286958281
0426	Damper		Damper Position	4942233908
0427	Damper		Damper Position	4942233915
0428	Damper Control			5279752414
0429	Damper		Damper Position	4942229208
0430	Damper		Damper Position	4942229215
0431	Damper Control			5281397672
0432	Damper Control			5281229799
0433	Damper		Damper Position	4942279326
0434	Damper		Damper Position	4942279333
0435	Waterflow Switch			4942299041
0436	Monitor Device		Tamper	4942299058



Address	Device Type	Location	Type	ScanID
0437	Waterflow Switch		Tamper	4942279388
0438	Monitor Device			4942279395
0439	Pull Station			4834933756
0440	Pull Station			4834933619
0441	Pull Station			4835014331
0442	Pull Station			4835021988
0443	Pull Station			4835015802
0444	Pull Station			4835026204
0445	Pull Station			4835014201
0446	Pull Station			4835014058
0447	Pull Station			4835016250
0448	Pull Station			4834565902
0449	Programmable Relay		NS Output	5279428470
0450	Programmable Relay		NS Output	5279421235
0451	Programmable Relay		NS Output	5279160981
0452	Waterflow Switch			4942278527
0453	Monitor Device		Tamper	4942278534
0454	Fan Shutdown			5279207280
0455	Fan Running		Fan On/Off	4834933152
0456	Fan Shutdown			5279207235
0457	Fan Running		Fan On/Off	4834571033
0458	Fan Shutdown			5279207389
0459	Fan Running		Fan On/Off	4834933107
0460	Fan Shutdown			5279208706
0461	Fan Running		Fan On/Off	4834566596
0462	Fan Shutdown			5279207297
0463	Fan Running		Fan On/Off	4834567852
0464	Fan Shutdown			5279207549
0465	Fan Running		Fan On/Off	4834566220
0466	Fan Shutdown			5279207624
0467	Fan Running		Fan On/Off	4834566305
0468	Fan Shutdown			5279208843
0469	Fan Running		Fan On/Off	4834567166
0470	Damper		Damper Position	4942299089
0471	Damper		Damper Position	4942299096
0472	Damper Control			5279429699
0473	Damper		Damper Position	4942278466

Address	Device Type	Location	Type	ScanID
0474	Damper		Damper Position	4942278473
0475	Fan Shutdown		5279207907	
0476	Fan Shutdown		5279208805	
0477	Fan Shutdown		5279208577	
0478	Fan Shutdown		5279207471	
0479	Fan Shutdown		5279207464	
0480	Fan Shutdown		5279208249	
0482	Fan Shutdown		5279207600	
0483	Fan Shutdown		5279208560	
0484	Fan Shutdown		5279207679	
0485	Fan Shutdown		5282841846	
0486	Fan Shutdown		5279208638	
0487	Programmable Relay		NS Output	5279460821
0488	Programmable Relay		NS Output	5279460555
0492	Damper Control			5279752995
0494	Damper		Damper Position	4942532926
0495	Damper		Damper Position	4942532933
0496	Damper Control			5279427527
0497	Programmable Relay		NS Alarm Output	5279626623
0498	Damper		Damper Position	4942534586
0499	Damper		Damper Position	4942534593
0500	Damper Control			5279428111
Zone/Circuit: 03				
0126	Indicating Device		Audible	5088565076
0127	Indicating Device		Visual	5088717253
0128	Indicating Device		Visual	5088996900
0129	Indicating Device		Visual	5088713583
0130	Indicating Device		Visual	5088717628
0131	Indicating Device		Visual	5088717857
0132	Waterflow Switch			4834933213
0133	Waterflow Switch			4941864127

Address	Device Type	Location	Type	ScanID
0134	Monitor Device		Tamper	4941864134
0135	Monitor Device		Supervisory	4834566572
0136	Monitor Device		Supervisory	4834565919
0137	Indicating Device		Audible	5088565427
0138	Indicating Device		Visual	5088565908
0139	Monitor Device		Supervisory	4942227082
0140	Monitor Device			4942227099
0141	Monitor Device		Supervisory	4834930076
0142	Indicating Device		Visual	5088151958
0143	Indicating Device		Visual	5088717048
0144	Monitor Device			4943423407
0145	Monitor Device		Supervisory	4943423414

## SPRINKLER - STANDPIPE ANNUAL INSPECTION

Customer _____	Bldg. Name _____	Inspector _____
Customer W.O. _____	Bldg. Street _____	Signature _____
Job _____	City/State/Zip _____	Insp. Date _____

## OWNER'S SECTION - SIGNATURES

- Is the building occupied?
- Has the occupancy and hazard of contents remained the same since the last inspection?
- Are all fire protection systems in services?
- Has the system remained in service without modification since the last inspection?
- Was the system free of actuation of devices or alarms since the last inspection?

Authorized Representative Printed

Authorized Representative Signature

Date Completed

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

## RISERS

	TYPE	ID	SIZE	LOCATION	PSI
RISER 1					
RISER 2					
RISER 3					
RISER 4					
RISER 5					
RISER 6					
RISER 7					
RISER 8					
RISER 9					
RISER 10					

## WATER BASED SYSTEM INSPECTION

- Are there landlord/access issues that requires visual inspection only?
- Is this a shared Fire Sprinkler System?
- Upon arrival, was the fire alarm panel reading normal?
- Gauges on wet system in good condition and showing normal water supply pressure?
- Are gauges up to date?
- Alarm valve free from physical damage, trim in correct position and no leakage from retarding chamber or drains?
- Hydraulic plaque present?
- Alarm & supervisory free from physical damage?
- Water motor gong or electric bell operable and in good looking conditions?

## COMMENTS

## FIRE DEPARTMENT CONNECTION

- Visible and accessible?
- Plugs or Caps in place and undamaged?
- Caps painted as per AHJ code?
- Identification signs(s) in place?
- Ball Drip Valve in place and operating properly?
- Couplings and swivels are in good condition and rotate smoothly?
- Check valve free from leakage?
- Gaskets in place in good condition? (if caps are not in place)
- Interior free of obstructions (if caps are not in place)?

## ANTIFREEZE LOOP

- Antifreeze solution tested?
- Solution specification sign placed?
- Type of Solution
- Solution found acceptable?
- 1st Antifreeze solution freezing point F°
- 2nd Antifreeze solution freezing point F°

## SPRINKLERS

- Proper # & type of spare heads & wrench?
- Free of corrosion/foreign material/paint?
- Installed in proper orientation?
- Free from obstructions to spray patterns?
- Free from leaks and physical damaged?
- Liquid in all glass bulb sprinklers?

## PIPE

- In good visual condition?
- Free of external corrosion/loads?
- Free of mechanical damage and leaks?
- Properly aligned?
- Visible pipe hangers and seismic braces free of damaged or loose?
- NYC only-Pipes/valves painted per code?

STANDPIPE SYSTEM INSPECTION

City Fed ☒ Gravity Tank ☐

Non-Automatic (Dry) ☐ Sprinkler Fed ☐

O her \_\_\_\_\_

Are there multiple standpipe systems?

If so: How many \_\_\_\_\_

Does the standpipe have water flow devices?

If so: How many \_\_\_\_\_

Does the standpipe system have a fire pump?

If so: How many \_\_\_\_\_ Loca ion \_\_\_\_\_

Are there ITV's for the standpipe system?

If so: How many \_\_\_\_\_ Loca ion \_\_\_\_\_

Gauges on standpipe system in good condition and showing normal water supply pressure?

Are gauges on standpipe system up to date?

Top floor / Manifold Gauge \_\_\_\_\_ PSI

HOSE CONNECTION

Hand wheels in place and in good condition?

Valves not leaking?

Hose hreads in good condition?

Reducers and caps in place and in good condition?

HOSE

Couplings of compa ible threads and undamaged?

Hose connected?

Free from mildew, cuts and deterioration?

Gaskets in place and in good condi ion?

HOSE NOZZLES

No visible obstructions?

Nozzles operate smoothly?

HOSE STORAGE

Hose properly racked or rolled?

Devices not damaged, unobstructed and operable?

Hose re-racked or re-rolled so folds do not occur in the same position?

Nozzle clips in place and nozzles contained?

Will racks swing out of cabinet at least 90°?

Valves not leaking and handle present?

CABINETS

Have not corroded or damaged parts?

Easy to fully open?

Door glazings in good condi ions?

Locks functioning in brake-glass type cabinets?

Accessible and identified?

All parts, valves, hose and re-extinguishers accessible?

TANK INSPECTION

Ladder support structure ok?

Tank exterior free off physical damage?

Tank air pressure ok?

Water level ok?

Water level alarms ok?

Water temp. ok?

Water temp. maintains no less than 40°?

Condition of water in tank ok?

MAIN DRAIN VALVES

	TYPE	RISER ID	LOCATION	SIZE	PRESSURE (PSI)			RESULTS COMPARABLE TO PRIOR	DRAINS PROPERLY	SIGNAGE
					INITIAL	RESIDUAL	STATIC			
MD 1					130	125	130	YES	YES	YES
MD 2					110	105	110	YES	YES	YES
MD 3					110	100	110	YES	YES	YES
MD 4					100	95	100	YES	YES	YES
MD 5					115	105	115	YES	YES	YES
MD 6					105	95	105	YES	YES	YES
MD 7					105	95	105	YES	YES	YES
MD 8					110	95	110	YES	YES	YES
MD 9					135	115	135	YES	YES	YES
MD 10										

INSPECTOR'S TEST VALVES

	TYPE	RISER ID	LOCATION	SIZE	AUDIBLE ALARM REPORTED	TIME TO ALARM	SMOOTH ORIFICE	WATER FLOW DEVICE PASS TEST	SIGNAGE	EASILY ACCESSIBLE
ITV 1					YES	59	YES	YES	YES	YES
ITV 2					YES	47	YES	YES	YES	YES
ITV 3					YES	33	YES	YES	YES	YES
ITV 4					YES	4	YES	YES	YES	YES
ITV 5					YES	37	YES	YES	YES	YES
ITV 6					YES	47	YES	YES	YES	YES
ITV 7					YES	44	YES	YES	YES	YES
ITV 8					YES	39	YES	YES	YES	YES
ITV 9					YES	12	YES	YES	YES	YES
ITV 10										

COMMENTS

Need to adjust water flow for ITV 4th floor stair C

## CONTROL VALVES

	TYPE	RISER ID	LOCATION	SIZE	INSPECTION				
					SECURED	LEAKAGE	OPEN	ACCESSIBLE	SIGNS
CV 1					Supervised	Passes	Passes	Passes	Passes
CV 2					Supervised	Passes	Passes	Passes	Passes
CV 3					Supervised	Passes	Passes	Passes	Passes
CV 4					Supervised	Passes	Passes	Passes	Passes
CV 5					Supervised	Passes	Passes	Passes	Passes
CV 6					Supervised	Passes	Passes	Passes	Passes
CV 7					Supervised	Passes	Passes	Passes	Passes
CV 8					Supervised	Passes	Passes	Passes	Passes
CV 9					Supervised	Passes	Passes	Passes	Passes
CV 10					Supervised	Passes	Passes	Passes	Passes
CV 11					Supervised	Passes	Passes	Passes	Passes
CV 12					Supervised	Passes	Passes	Passes	Passes
CV 13					Supervised	Passes	Passes	Passes	Passes
CV 14					Supervised	Passes	Passes	Passes	Passes
CV 15					Supervised	Passes	Passes	Passes	Passes
CV 16					Supervised	Passes	Passes	Passes	Passes
CV 17					Unsecured	Passes	Passes	Passes	Passes
CV 18					Supervised	Passes	Passes	Passes	Passes
CV 19					Supervised	Passes	Passes	Passes	Passes
CV 20					Supervised	Passes	Passes	Passes	Passes
CV 21					Supervised	Passes	Passes	Passes	Passes
CV 22					Supervised	Passes	Passes	Passes	Passes
CV 23					Supervised	Passes	Passes	Passes	Passes
CV 24					Supervised	Passes	Passes	Passes	Passes
CV 25					Supervised	Passes	Passes	Passes	Passes
CV 26					Supervised	Passes	Passes	Passes	Passes
CV 27					Supervised	Passes	Passes	Passes	Passes
CV 28					Supervised	Passes	Passes	Passes	Passes
CV 29									
CV 30									

## COMMENTS

CONTROL VALVES - ANNUAL SECTION ONLY

	MAINTENANCE			TEST		
	EXERCISED	# OF TURNS	LUBRICATED	TAMPER	SIGNAL	TIME TO ALARM
CV 1	OK: Passes	9	OK: Passes	OK: Passes	OK: Passes	2
CV 2	OK: Passes	18	X: Needs Service	OK: Passes	OK: Passes	2
CV 3	OK: Passes	18	X: Needs Service	OK: Passes	OK: Passes	2
CV 4	OK: Passes	18	X: Needs Service	OK: Passes	OK: Passes	2
CV 5	OK: Passes	18	OK: Passes	OK: Passes	OK: Passes	2
CV 6	OK: Passes	18	OK: Passes	OK: Passes	OK: Passes	2
CV 7	OK: Passes	18	OK: Passes	OK: Passes	OK: Passes	2
CV 8	OK: Passes	18	OK: Passes	OK: Passes	OK: Passes	2
CV 9	OK: Passes	18	OK: Passes	OK: Passes	OK: Passes	2
CV 10	OK: Passes	9	OK: Passes	OK: Passes	OK: Passes	2
CV 11	OK: Passes	16	OK: Passes	OK: Passes	OK: Passes	2
CV 12	OK: Passes	16	OK: Passes	OK: Passes	OK: Passes	2
CV 13	OK: Passes	18	OK: Passes	OK: Passes	OK: Passes	2
CV 14	OK: Passes	16	OK: Passes	OK: Passes	OK: Passes	2
CV 15	OK: Passes	16	OK: Passes	OK: Passes	OK: Passes	2
CV 16	OK: Passes	10	X: Needs Service	OK: Passes	OK: Passes	2
CV 17	OK: Passes	10	OK: Passes	X: Needs Service	X: Needs Service	Not reporting
CV 18	OK: Passes	18	OK: Passes	OK: Passes	OK: Passes	2
CV 19	OK: Passes	8	OK: Passes	OK: Passes	OK: Passes	2
CV 20	OK: Passes	9	OK: Passes	OK: Passes	OK: Passes	2
CV 21	OK: Passes	9	OK: Passes	OK: Passes	OK: Passes	2
CV 22	OK: Passes	9	OK: Passes	OK: Passes	OK: Passes	2
CV 23	OK: Passes	9	OK: Passes	OK: Passes	OK: Passes	2
CV 24	OK: Passes	9	OK: Passes	OK: Passes	OK: Passes	2
CV 25	OK: Passes	16	OK: Passes	OK: Passes	OK: Passes	2
CV 26	OK: Passes	16	OK: Passes	OK: Passes	OK: Passes	2
CV 27	OK: Passes	14	OK: Passes	OK: Passes	OK: Passes	2
CV 28	OK: Passes	18	OK: Passes	OK: Passes	OK: Passes	2
CV 29						
CV 30						

COMMENTS

## DRY ANNUAL INSPECTION

Customer _____	Bldg. Name _____	Inspector _____
Customer W.O. _____	Bldg. Street _____	Signature _____
Job _____	City/State/Zip _____	Insp. Date _____

## DRY RISERS

	ID	SIZE	LOCATION	AIR PSI	WATER PSI	TRIP AIR PSI	ALARMS ACTIVATE	TRIP TIME (3-YEAR)
DRY RISER 1								
DRY RISER 2								
DRY RISER 3								
DRY RISER 4								
DRY RISER 5								
DRY RISER 6								
DRY RISER 7								
DRY RISER 8								
DRY RISER 9								
DRY RISER 10								

## DRY SYSTEM INSPECTION

YES

NO

N/A

- Gauges on Dry-Pipe, Pre-Action and Deluge system in good condition and showing normal water supply pressure? Are gauges up to date?
- For Freezer systems, gauge near the compressor reading the same as gauge near the Dry-Pipe valve?
- Dry valve free from physical damage?
- Trim in correct position?
- No leakage from intermediate chamber?
- Low Air pressure signal passed test?
- Quick opening devices passed test?
- Priming Water level correct?
- Relief port on RPZ not discharging?
- Enclosures around Dry-Pipe, Pre-Action or Deluge valves maintaining a minimum of 40 °F?

## COLD WEATHER CHECK

- Adequate heat in areas with wet piping?
- Interior of pipe in pre-action and dry pipe systems which passes through freezers free of ice blockage?
- Low temperature alarms in dry pipe, pre-action and deluge valve enclosures functioning?
- Low points drained in Dry pipe, pre-action and deluge systems prior to the onset of freezing weather?

## COMMENTS





909 Marconi Avenue  
(631) 689-6869  
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## SPRINKLER - STANDPIPE MONTHLY INSPECTION

**Customer** Ashtin Group **Bldg. Name** Crown Heights Charter School-1st Ac **Inspector** Dennis Ramos, Jaleel Whyte  
**Customer W.O.** **Bldg. Street** 1485 Pacific Avenue **Signature**   
**Job**  **City/State/Zip** Crown Heights NY **Insp. Date** 07/07/2020 08:30am EDT

## OWNER'S SECTION - SIGNATURES

Is the building occupied? ☐ YES  
Has the occupancy and hazard of contents remained the same since the last inspection? ☐ YES  
Are all fire protection systems in services? ☐ YES  
Has the system remained in service without modification since the last inspection? ☐ YES  
Was the system free of actuation of devices or alarms since the last inspection? ☐ YES

**Authorized Representative Printed**  
Jamie  
**Authorized Representative Signature**  
  
**Date Completed**  
07/07/2020 08:30am EDT

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

## RISERS

RISER 1				
RISER 2				
RISER 3				
RISER 4				
RISER 5				
RISER 6				
RISER 7				
RISER 8				
RISER 9				
RISER 10				

## WATER BASED SYSTEM INSPECTION

Is this a shared Fire Sprinkler System? ☐ NO  
Upon arrival, was the fire alarm panel reading normal? ☐ YES  
Gauges on wet system in good condition and showing normal water supply pressure? ☐ YES  
Are gauges up to date? ☐ YES  
Alarm valve free from physical damage, trim in correct position and no leakage from retarding chamber or drains? ☐ YES  
Proper wrench & spare heads? ☐ N/A

## STANDPIPE SYSTEM INSPECTION

City Fed ☒ Non-Automatic (Dry) ☐ Gravity Tank ☐ Sprinkler Fed ☐ Other \_\_\_\_\_  
Are there multiple standpipe systems? ☐ YES  
If so: How many \_\_\_\_\_  
Does the standpipe have water flow devices? ☐ N/A  
If so: How many \_\_\_\_\_  
Does the standpipe system have a fire pump? ☐ YES  
If so: How many \_\_\_\_\_ Location \_\_\_\_\_  
Are there ITV's for the standpipe system? ☐ N/A  
If so: How many \_\_\_\_\_ Location \_\_\_\_\_  
Gauges on standpipe system in good condition and showing normal water supply pressure? ☐ N/A  
Are gauges on standpipe system up to date? ☐ N/A  
Top floor / Manifold Gauge PSI

## COMMENTS

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					INSPECTION				
					SECURED	LEADAGE	OPEN	ACCESSIBLE	SIGNS
CV 1					Supervised	Passes	Passes	Passes	Passes
CV 2					Supervised	Passes	Passes	Passes	Passes
CV 3					Supervised	Passes	Passes	Passes	Passes
CV 4					Supervised	Passes	Passes	Passes	Passes
CV 5					Supervised	Passes	Passes	Passes	Passes
CV 6					Supervised	Passes	Passes	Passes	Passes
CV 7					Supervised	Passes	Passes	Passes	Passes
CV 8					Supervised	Passes	Passes	Passes	Passes
CV 9					Supervised	Passes	Passes	Passes	Passes
CV 10					Supervised	Passes	Passes	Passes	Passes
CV 11					Supervised	Passes	Passes	Passes	Passes
CV 12					Supervised	Passes	Passes	Passes	Passes
CV 13					Supervised	Passes	Passes	Passes	Passes
CV 14					Supervised	Passes	Passes	Passes	Passes
CV 15					Supervised	Passes	Passes	Passes	Passes
CV 16					Supervised	Passes	Passes	Passes	Passes
CV 17					Supervised	Passes	Passes	Passes	Passes
CV 18					Supervised	Passes	Passes	Passes	Passes
CV 19					Supervised	Passes	Passes	Passes	Passes
CV 20					Supervised	Passes	Passes	Passes	Passes
CV 21					Supervised	Passes	Passes	Passes	Passes
CV 22					Supervised	Passes	Passes	Passes	Passes
CV 23					Supervised	Passes	Passes	Passes	Passes
CV 24					Supervised	Passes	Passes	Passes	Passes
CV 25					Supervised	Passes	Passes	Passes	Passes
CV 26					Supervised	Passes	Passes	Passes	Passes
CV 27					Supervised	Passes	Passes	Passes	Passes
CV 28					Supervised	Passes	Passes	Passes	Passes
CV 29									
CV 30									

**COMMENTS** u



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Facebook

## DRY ANNUAL INSPECTION

**Customer** Ashtin Group **Bldg. Name** Crown Heights Charter School-1st Ac **Inspector** Dennis Ramos, Jaleel Whyte  
**Customer W.O.** **Bldg. Street** 1485 Pacific Avenue **Signature**   
**Job** 19083017 **City/State/Zip** Crown Heights NY **Insp. Date** 07/07/2020 08:30am EDT

## DRY RISERS

	ID	SIZE	LOCATION	AIR PSI	WATER PSI	TRIP AIR PSI	ALARMS ACTIVATE	TRIP TIME (3-YEAR)
DRY RISER 1	DRY LOADING DOCK	2"	PUMP ROOM	30	140	Monthly	NO	Monthly
DRY RISER 2								
DRY RISER 3								
DRY RISER 4								
DRY RISER 5								
DRY RISER 6								
DRY RISER 7								
DRY RISER 8								
DRY RISER 9								
DRY RISER 10								

## DRY SYSTEM INSPECTION

	YES	NO	N/A
Gauges on Dry-Pipe, Pre-Action and Deluge system in good condition and showing normal water supply pressure? Are gauges up to date?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
For Freezer systems, gauge near the compressor reading the same as gauge near the Dry-Pipe valve?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dry valve free from physical damage?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Trim in correct position?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No leakage from intermediate chamber?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Low Air pressure signal passed test?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Quick opening devices passed test?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Priming Water level correct?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Relief port on RPZ not discharging?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Enclosures around Dry-Pipe, Pre-Action or Deluge valves maintaining a minimum of 40 °F?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## COLD WEATHER CHECK

Adequate heat in areas with wet piping?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Interior of pipe in pre-action and dry pipe systems which passes through freezers free of ice blockage?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Low temperature alarms in dry pipe, pre-action and deluge valve enclosures functioning?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Low points drained in Dry pipe, pre-action and deluge systems prior to the onset of freezing weather?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

## COMMENTS

## ELECTRIC FIRE PUMP ANNUAL INSPECTION TEST

Customer   
 Customer w.o#  Job   
 Technician  Insp Date

Building Name   
 Building Street   
 Building City/State/Zip

## SIGNATURES

Inspector Printed

Inspector - Signature

Date Completed

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

Authorized Representative Printed

Authorized Representative Signature

Date Completed

Expect as noted, the building is occupied with the same occupancy classification and hazed of contents as last inspection. Also, the system has remained in service without modification and been free of actuation of devices or alarms.

## ELECTRIC PUMP INSPECTION

YES	NO	N/A	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pump house/room at least 40°F?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Piping free from leaks?
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Suction reservoir, if provided, full?
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Transfer switch indicating normal situation?
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Reverse phase alarm indicator "OFF" or normal phase rotation indicator "ON"?

YES	NO	N/A	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pressure relief valves operating with proper pressure downstream while pump is operational?
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Suction discharge and bypass valves open?
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Suction and system pressure gauges normal?
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Controller indicating power "ON"
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Isolation switch closed?
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Circulation relief valve flowing water while pump churns?

## ELECTRIC PUMP TEST

YES	NO	N/A	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pump started automatically?
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pump run for at least 10 minutes?
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Free from unusual noises or vibrations?
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pump packing gland showing slight discharge? (adjust if necessary)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Packing boxes, bearings and pump casing free from overheating?
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All times and pressures acceptable?

<input type="text" value="130"/>	Record discharge pressure while running
<input type="text" value="1sec"/>	Record time for motor to accelerate to full speed
<input type="text" value="1 sec"/>	For automatic stop controllers, record time pump runs after starting
<input type="text" value="100"/>	Record starting pressure
<input type="text" value="45"/>	Record suction pressure while running
<input type="text" value="N/A"/>	For reduced voltage or reduced current starting, record time controller on first step

## COMMENTS



## ELECTRIC PUMP ANNUAL MAINTENANCE

YES	NO	N/A	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Changed pump bearing lubrication?
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pump coupling alignment acceptable?
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Circuit breakers passed trip test?
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Electrical connections secured?
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Motor bearings greased?
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Isolation switch and circuit breaker exercised?
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Electrical system free of wire chafing?
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Boxes, panels and cabinets or electrical systems cleaned?
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Circuit breakers appear clean?

YES	NO	N/A	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Shaft end play acceptable?
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Transmission coupling, right angle gear drive and mechanical moving parts lubricated?
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Emergency manual starting means operated without power?
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Pressure switch settings calibrated?
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Control and power wirings tight?
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Circuit breakers appear clean?
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Manual starting means on electrical systems operated?
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Isolation switch and circuit breaker exercised?

## ELECTRIC PUMP FLOW TEST

YES	NO	N/A	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pump test run by discharge of flow through hose streams. Flow readings were taken at each hose stream.
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Pump test run by discharge through by-pass flow meter directly returned to pump suction. Flow readings taken by flow meter.
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	No-flow (churn) test run for 30 min?
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No alarm indicators or other visible abnormalities observed during no-flow test?
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Low suction throttling device test: free from abnormalities in throttling action?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Automatic transfer switch test: after termination of stimulated power failure, did motor reconnect to the normal power source?
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	All alarms operated?

YES	NO	N/A	
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Pump test run by discharge through by-pass flow meter to drain or suction reservoir. Flow readings taken by flow meter.
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Are the pressure readings acceptable?
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Circulation relief valve and pressure relief valve operated properly during all flow tests?
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Low suction throttling device test: low suction pressure stimulated?
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Low suction throttling device test: free from abnormalities in return to full flow?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Automatic transfer switch test: Connection made to alternate power source?
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	All alarm conditions simulated?

## COMMENTS

--

## PUMP EQUIPMENT /COMPONE

ITEM	MANUFACTURER			
FIRE PUMP	Peerless pump		GPM	750
			PSI	85
			MAX PSI	97
			RATED	150%
				56
MOTOR	Marathon		HP	50
			RPM	3550
FIRE PUMP CONTROLLER	Firetrol			
JOCKEY PUMP	Grundfos			
JOCKEY PUMP CONTROLLER	Firetrol			
TRANSFER SWITCH	Firetrol			

## FIRE PUMP PERFORMANCE

FLOW (MEASURED)		PRESSURE(MEASURED)			SPEED (RPM)	ELECTRIC MOTOR			
% Rated	GPM	Net	Suction	Discharge			L1	L2	L3
CHURN		100	50	150	356	Volts			
						Amps			
50	378	100	50	150	356	Volts			
						Amps			
100	756	85	45	130	356	Volts			
						Amps			
150	1125	70	40	110	355	Volts			
						Amps			

## PUMP FLOW TEST MEASURED FLOW DETAIL

FLOW	STREAM 1		STREAM 2		STREAM 3		STREAM 4		STREAM 5		STREAM 6	
% RATED	Pilot	FLOW	Pilot	FLOW	Pilot	FLOW	Pilot	FLOW	Pilot	FLOW	Pilot	FLOW
GPM	Orifice		Orifice		Orifice		Orifice		Orifice		Orifice	
	C		C		C		C		C		C	
50		13										
378	1-3/4	PSI		PSI		PSI		PSI		PSI		PSI
100			1-3/4	13								
756		PSI		PSI		PSI		PSI		PSI		PSI
150				517		13						
1125		PSI		PSI		1-1/4		PSI		PSI		PSI

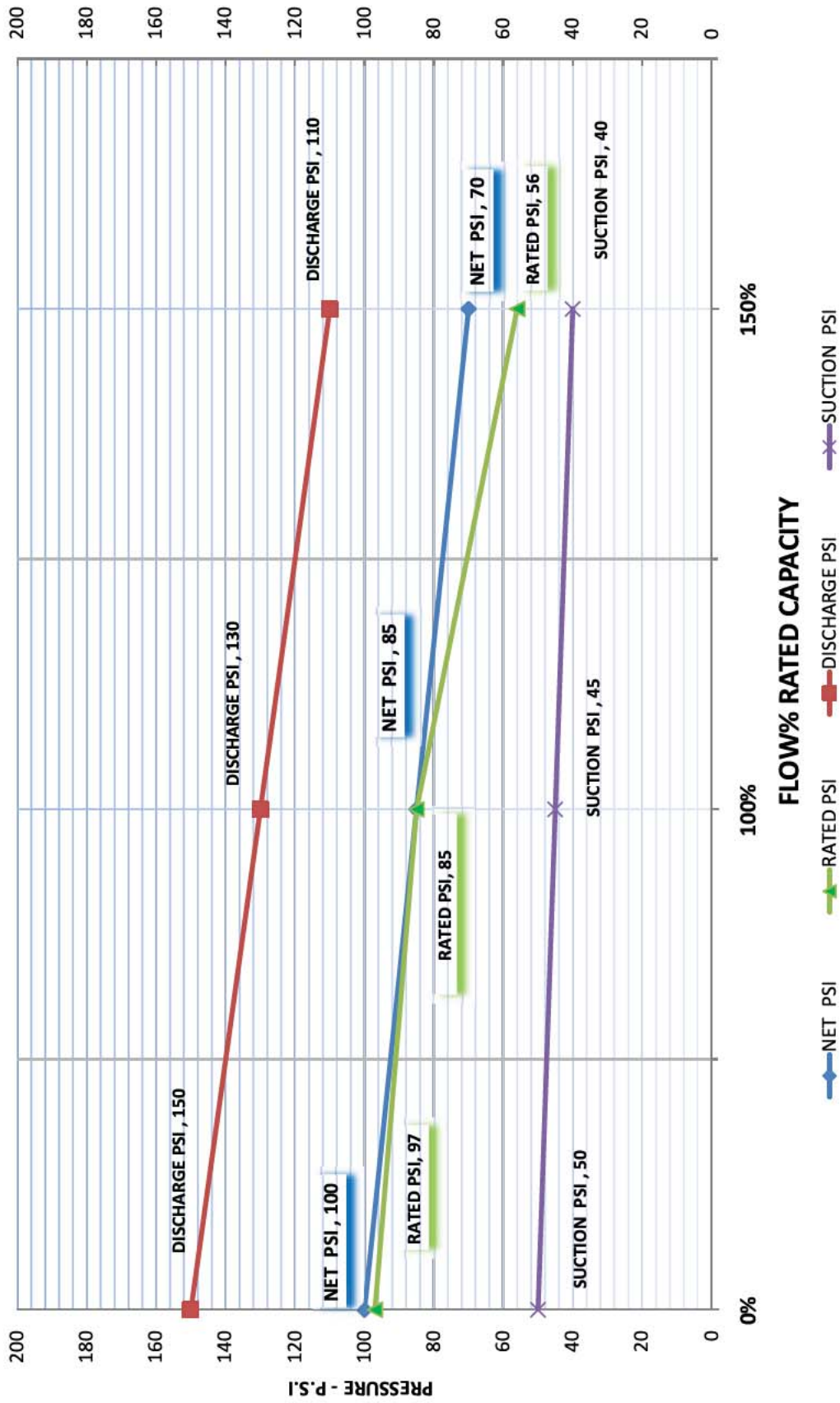
## COMMENTS

3rd stream hit 13 = 1134

**REPORT OF INSPECTION TEST**  
**LOCATION:** Crown Heights Charter School  
1485 Pacific Avenue  
Crown Heights, NY 11216



## FIRE PUMP FLOW TEST CURVE





909 Marconi Avenue  
(631) 689-6869  
info@foosfire.com

Ronkonkoma NY  
(631) 689-6866  
Facebook

## SPRINKLER - STANDPIPE QUARTERLY INSPECTION

**Customer** Ashtin Group **Bldg. Name** Crown Heights Charter School-1st Ac **Inspector** Jaleel Whyte, Adem Yildirim  
**Customer W.O.** **Bldg. Street** 1485 Pacific Avenue **Signature** *Adem Yildirim*  
**Job** **City/State/Zip** Crown Heights **NY Insp. Date** 06/23/2020 07:30am EDT

## OWNER'S SECTION - SIGNATURES

Is the building occupied? **YES**  
Has the occupancy and hazard of contents remained the same since the last inspection? **UNKNOWN**  
Are all fire protection systems in services? **UNKNOWN**  
Has the system remained in service without modification since the last inspection? **UNKNOWN**  
Was the system free of actuation of devices or alarms since the last inspection? **UNKNOWN**

**Authorized Representative Printed**  
Joe

**Authorized Representative Signature**

**Date Completed**  
06/23/2020 07:30am EDT

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

## RISERS

RISER 1				
RISER 2				
RISER 3				
RISER 4				
RISER 5				
RISER 6				
RISER 7				
RISER 8				
RISER 9				
RISER 10				

## WATER BASED SYSTEM INSPECTION

Are there landlord/access issues that requires visual inspection only? **NO**  
Is this a shared Fire Sprinkler System? **NO**  
Upon arrival, was the fire alarm panel reading normal? **YES**  
Gauges on wet system in good condition and showing normal water supply pressure? **YES**  
Are gauges up to date? **YES**  
Alarm valve free from physical damage, trim in correct position and no leakage from retarding chamber or drains? **YES**  
Alarm & supervisory free from physical damage? **YES**  
Water motor gong or electric bell operable and in good looking conditions? **YES**  
Proper sprinkler wrench & spare heads? **YES**

## STANDPIPE SYSTEM INSPECTION

City Fed ☒ Gravity Tank ☐  
Non-Automatic (Dry) ☐ Sprinkler Fed ☐  
Other \_\_\_\_\_  
Are there multiple standpipe systems? **YES**  
If so: How many \_\_\_\_\_  
Does the standpipe have water flow devices? **N/A**  
If so: How many \_\_\_\_\_  
Does the standpipe system have a fire pump? **YES**  
If so: How many \_\_\_\_\_ Location \_\_\_\_\_  
Are there ITV's for the standpipe system? **N/A**  
If so: How many \_\_\_\_\_ Location \_\_\_\_\_  
Gauges on standpipe system in good condition and showing normal water supply pressure? **N/A**  
Are gauges on standpipe system up to date? **N/A**  
Top floor / Manifold Gauge PSI \_\_\_\_\_

## HOSE CONNECTION

Hand wheels in place and in good condition? **YES**  
Valves not leaking? **YES**  
Hose threads in good condition? **YES**  
Reducers and caps in place and in good condition? **YES**

## HOSE

Couplings of compatible threads and undamaged? **YES**  
Hose connected? **YES**  
Free from mildew, cuts and deterioration? **YES**  
Gaskets in place and in good condition? **YES**

## FIRE DEPARTMENT CONNECTION

Visible and accessible? **YES**  
Plugs or Caps in place and undamaged? **YES**  
Caps painted as per AHJ code? **YES**  
Identification signs(s) in place? **YES**  
Ball Drip Valve in place and operating properly? **YES**  
Couplings and swivels are in good condition and rotate smoothly? **YES**  
Check valve free from leakage? **N/A**  
Gaskets in place in good condition (if caps are not in place)? **N/A**  
Interior free of obstructions (if caps are not in place)? **N/A**

## COMMENTS

--



MAIN DRAIN VALVES

	TYPE	RISER ID			PRESSURE (PSI)			RESULTS COMPARABLE TO PRIOR	DRAINS PROPERLY	SIGNAGE
					INITIAL	RESIDUAL	STATIC			
MD 1					150	135	140	YES	YES	YES
MD 2					140	120	130	YES	YES	YES
MD 3					125	90	105	YES	YES	YES
MD 4					125	100	110	YES	YES	YES
MD 5					120	90	100	YES	YES	YES
MD 6					110	85	90	YES	YES	YES
MD 7					130	100	110	YES	YES	YES
MD 8					125	95	105	YES	YES	YES
MD 9					150	140	150	YES	YES	YES
MD 10										

INSPE

				AUDIBLE ALARM REPORTED	TIME TO ALARM	SMOOTH ORIFICE	WATER FLOW DEVICE PASS TEST	SIGNAGE	EASILY ACCESSIBLE
ITV 1				YES	58	YES	YES	YES	YES
ITV 2				YES	50	YES	YES	YES	YES
ITV 3				YES	38	YES	YES	YES	YES
ITV 4				YES	10	YES	YES	YES	YES
ITV 5				YES	52	YES	YES	YES	YES
ITV 6				YES	53	YES	YES	YES	YES
ITV 7				YES	51	YES	YES	YES	YES
ITV 8				YES	48	YES	YES	YES	YES
ITV 9				YES	10	YES	YES	YES	YES
ITV 10									

COMMENTS

				INSPECTION				
				SECURED	LEAKAGE	OPEN	ACCESSIBLE	SIGNS
CV 1				Supervised	Passes	Passes	Passes	Passes
CV 2				Supervised	Passes	Passes	Passes	Passes
CV 3				Supervised	Passes	Passes	Passes	Passes
CV 4				Supervised	Passes	Passes	Passes	Passes
CV 5				Supervised	Passes	Passes	Passes	Passes
CV 6				Supervised	Passes	Passes	Passes	Passes
CV 7				Supervised	Passes	Passes	Passes	Passes
CV 8				Supervised	Passes	Passes	Passes	Passes
CV 9				Supervised	Passes	Passes	Passes	Passes
CV 1				Supervised	Passes	Passes	Passes	Passes
CV 1				Supervised	Passes	Passes	Passes	Passes
CV 1				Supervised	Passes	Passes	Passes	Passes
CV 1				Supervised	Passes	Passes	Passes	Passes
CV 1				Supervised	Passes	Passes	Passes	Passes
CV 1				Supervised	Passes	Passes	Passes	Passes
CV 1				Supervised	Passes	Passes	Passes	Passes
CV 1				Supervised	Passes	Passes	Passes	Passes
CV 1				Supervised	Passes	Passes	Passes	Passes
CV 1				Supervised	Passes	Passes	Passes	Passes
CV 2				Supervised	Passes	Passes	Passes	Passes
CV 2				Supervised	Passes	Passes	Passes	Passes
CV 2				Supervised	Passes	Passes	Passes	Passes
CV 2				Supervised	Passes	Passes	Passes	Passes
CV 2				Supervised	Passes	Passes	Passes	Passes
CV 2				Supervised	Passes	Passes	Passes	Passes
CV 26				Supervised	Passes	Passes	Passes	Passes
CV 27				Supervised	Passes	Passes	Passes	Passes
CV 28				Supervised	Passes	Passes	Passes	Passes
CV 29								
CV 30								

COMMENTS



909 Marconi Avenue  
(631) 689-6869  
info@foosfire.com

Ronkonkoma NY  
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Facebook

## DRY QUARTERLY INSPECTION

**Customer** Ashtin Group **Bldg. Name** Crown Heights Charter School-1st Ac **Inspector** Jaleel Whyte, Adem Yildirim  
**Customer W.O.**  **Bldg. Street** 1485 Pacific Avenue **Signature** Adem Yildirim  
**Job**  **City/State/Zip** Crown Heights NY **Insp. Date** 06/23/2020 07:30am EDT

## DRY RISERS

	ID	SIZE	LOCATION	AIR PSI	WATER PSI
DRY RISER 1					
DRY RISER 2					
DRY RISER 3					
DRY RISER 4					
DRY RISER 5					
DRY RISER 6					
DRY RISER 7					
DRY RISER 8					
DRY RISER 9					
DRY RISER 10					

## DRY SYSTEM INSPECTION

	YES	NO	N/A
Gauges on Dry-Pipe, Pre-Action and Deluge system in good condition and showing normal water supply pressure? Are gauges up to date?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
For Freezer systems, gauge near the compressor reading the same as gauge near the Dry-Pipe valve?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Dry valve free from physical damage?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Trim in correct position?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No leakage from intermediate chamber?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Low Air pressure signal passed test?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Quick opening devices passed test?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Priming Water level correct?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Relief port on RPZ not discharging?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Enclosures around Dry-Pipe, Pre-Action or Deluge valves maintaining a minimum of 40 °F?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## COLD WEATHER CHECK

Adequate heat in areas with wet piping?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Interior of pipe in pre-action and dry pipe systems which passes through freezers free of ice blockage?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Low temperature alarms in dry pipe, pre-action and deluge valve enclosures functioning?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Low points drained in Dry pipe, pre-action and deluge systems prior to the onset of freezing weather?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

## COMMENTS