ALL INVOICES AND CORRESPONDENCE MUST BE SENT TO ABOVE ADDRESS REGARDLESS OF SHIPPING POINT

WOODBINE BOARD OF EDUCATION
BUSINESS OFFICE
1076 Almond Road
Pittsgrove, NJ 08318
856-358-3094 ext. 4023

PURCHASE ORDER NO. **200030**

PO# AND ORDERED BY NAME MUST APPEAR ON ALL LABELS, CARTONS & INVOICES

Page 1 of 1
Copy 3

Account Code	Amount
11-000-261-420-050-0	276.00

Ship to
WOODBINE BOARD OF EDUCATION
1076 ALMOND ROAD
PITTSGROVE, NJ 08318

To
FRANKLIN ALARM COMPANY INC 1264
P.O. BOX 84
FRANKLINVILLE, NJ 08322

Date: 07/01/21 Dept: acctpay

Notice: The purchaser is exempt by statute from paying all Federal, State and Municipal Excise Sales & other taxes

Qty	Unit	Description	Unit Price	Amount
1.		21-22 system monitering	276.000	276.00

V# 11926
7/21/21.

Total for Lines $276.00

NOTICE TO VENDOR OR CONTRACTOR

1. Order invalid unless signed by the Secretary of the Board of Education
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4. Please submit invoice as soon as order is completed
5. Must have NJ Reg. on file with us in order to receive payment

SCHOOL OFFICE USE ONLY

I certify that the goods or services itemized have been received

Signature

Title Date

NO ORDER VALID UNLESS SIGNED BY THE SECRETARY

SECRETARY, BOARD OF EDUCATION

21-22

11-000-261-420

FACI
FRANKLIN
ALARM COMPANY INC.
P.O. BOX 84, FRANKLINVILLE, NJ 08322

856-728-6424 Fax 728-3763
www.Franklinalarm.com
NJ State Burg/Fire Alarm

INVOICE

Date	Invoice #
6/14/2021	77728

Bill To

WOODBINE ELEMENTARY SCHOOL
C/O WOODBINE BOE
1076 ALMOND RD.
PITTSGROVE, NJ 08318

Reference

P.O. #	TERMS	REP
	NET 10	

Description	Quantity	Cost	Amount
Fire Alarm System Monitoring July 2021 through June 2022		276.00	276.00

Subtotal	$276.00
Sales Tax (0.0%)	$0.00
TOTAL	$276.00
Payments/Credits	$0.00
BALANCE DUE	$276.00

THANK YOU FOR YOUR BUSINESS!
Contact us with changes needed on your monitoring account. TESTING YOUR ALARM MONTHLY WILL LET YOU KNOW IF YOUR SYSTEM IS WORKING PROPERLY. For your convenience we accept all major credit cards. Please call our office for details. Finance cges of 1.5% per mo is added on accts 30 days or more past due.

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BUSINESS OFFICE
1076 Almond Road
Pittsgrove, NJ 08318
856-358-3094 ext. 4023

PURCHASE ORDER NO. **200030**

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11-000-261-420-050-0	276.00

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INVOICES MUST BE RENDERED ON THE VOUCHER

Claimant's Certification and Declaration

I do solemnly declare and certify under the penalties of the law that the within bill is correct in all its particulars; that the articles have been furnished or services rendered as stated therein; that no bonus has been given or received by any person or persons within the knowledge of the claimant in connection with the above claim; that the amount therein stated is justly due and owing; and that the amount charged is a reasonable one.

(X) Vendor Sign Here

Office Mgr. 7-6-21

Offical Position Date

NO ORDER VALID UNLESS SIGNED BY THE SECRETARY

SECRETARY, BOARD OF EDUCATION

VOUCHER COPY - RETURN FOR PAYMENT

ALL INVOICES AND CORRESPONDENCE MUST BE SENT TO ABOVE ADDRESS REGARDLESS OF SHIPPING POINT

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BUSINESS OFFICE
1076 Almond Road
Pittsgrove, NJ 08318
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PURCHASE ORDER NO. **200030**

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Page 1 of 1
Copy 2

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1076 ALMOND ROAD
PITTSGROVE, NJ 08318

To
FRANKLIN ALARM COMPANY INC 1264
P.O. BOX 84
FRANKLINVILLE, NJ 08322

Account Code	Amount
11-000-261-420-050-0	276.00

Date: 07/01/21 Dept: acctpay

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1076 ALMOND ROAD
PITTSGROVE, NJ 08318

To
FRANKLIN ALARM COMPANY INC 1264
P.O. BOX 84
FRANKLINVILLE, NJ 08322

Account Code	Amount
11-000-261-420-050-0	276.00

Date: 07/01/21 Dept: acctpay

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SCHOOL OFFICE USE ONLY

I certify that the goods or services itemized have been received

Signature

CSO

Title

7/6/21

Date

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SECRETARY, BOARD OF EDUCATION

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BUSINESS OFFICE
1076 Almond Road
Pittsgrove, NJ 08318
856-358-3094 ext. 4023

PURCHASE ORDER NO. **200322**

PO# AND ORDERED BY NAME MUST APPEAR ON ALL LABELS, CARTONS & INVOICES

Page 1 of 1
Copy 3

Account Code	Amount
11-000-261-420-050-0	725.00

Ship to
WOODBINE ELEMENTARY
801 Webster Street
Woodbine, NJ 08270

To
FRANKLIN ALARM COMPANY INC 1264
P.O. BOX 84
FRANKLINVILLE, NJ 08322

Date: 04/05/22 Dept: acctpay

Notice: The purchaser is exempt by statute from paying all Federal, State and Municipal Excise Sales & other taxes

Qty	Unit	Description	Unit Price	Amount
1.		invoice 79377	725.000	725.00

12290
4/5/22

Total for Lines $725.00

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SECRETARY, BOARD OF EDUCATION

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BUSINESS OFFICE
1076 Almond Road
Pittsgrove, NJ 08318
856-358-3094 ext. 4023

PURCHASE ORDER NO. **200322**

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Page 1 of 1
Copy 1

Ship to
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801 Webster Street
Woodbine, NJ 08270

To
FRANKLIN ALARM COMPANY INC 1264
P.O. BOX 84
FRANKLINVILLE, NJ 08322

Account Code	Amount
11-000-261-420-050-0	725.00

Date: 04/05/22 Dept: acctpay

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1.		invoice 79377	725.000	725.00

Total for Lines $725.00

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(X)
Vendor Sign Here

Offical Position Date

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VOUCHER COPY - RETURN FOR PAYMENT

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SECRETARY, BOARD OF EDUCATION

VENDOR COPY

11-000-261-420

FACI

FRANKLIN

ALARM COMPANY INC.

P.O. BOX 84, FRANKLINVILLE, NJ 08322

856-728-6424 Fax 728-3763
www.Franklinalarm.com
NJ State Burg/Fire Alarm

INVOICE

Date	Invoice #
3/18/2022	79377

Bill To

WOODBINE ELEMENTARY SCHOOL
C/O WOODBINE BOE
1076 ALMOND RD.
PITTSGROVE, NJ 08318

Reference

P.O. #	TERMS	REP
	NET 10	

Description	Quantity	Cost	Amount
Fire Alarm Inspection 3/11/22		725.00	725.00
**Our inspection prices have increased slightly. We appreciate your business!			

Subtotal	$725.00
Sales Tax (6.625%)	$0.00
TOTAL	$725.00
Payments/Credits	$0.00
BALANCE DUE	$725.00

THANK YOU FOR YOUR BUSINESS!
Contact us with changes needed on your monitoring account. TESTING YOUR ALARM MONTHLY WILL LET YOU KNOW IF YOUR SYSTEM IS WORKING PROPERLY. For your convenience we accept all major credit cards. Please call our office for details. Finance cges of 1.5% per mo is added on accts 30 days or more past due.

Inspection Report

Cycle: Annually ,·
[Ref #201717]

FACI FRANKLIN ALARM COMPANY INC.
NJ License # P00348

Building	**Customer**	**Contact Us**
Woodbine Elementary 801 Webster St. Woodbine, NJ	Woodbine Elementary 801 Webster St. Woodbine, NJ	P.O. Box 84 Franklinville, NJ 08322 Call: (856) 728-6424 Fax: (856) 728-3763 JPetsch@FranklinAlarm.com

Signature

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

Inspected by	Approved by	Signature	Date
Tom Macneir	Joseph C. Petsch SET		03/11/2022

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

Equipment Summary

Name	Total	N/A	Failed
Alarm Panel			
Addressable: N/A	1	0	0
Battery			
Sealed Lead Acid: AH Meter 2 Batteries	1	0	0
Initiating Device			
Duct Detector	3	0	0
Heat Detector	47	0	0
Manual Pull Station	18	0	0
Smoke Detector - PE: No Sensitivity	60	0	0
Remote Power Supply #1			
	1	0	0
Remote Power Supply #2			
	1	0	0

Equipment Tests

Alarm Panel Information		
Panel Manufacturer EST / GE	Model EST - 3	Serial #
Location Main Office	Over-current Protect Type Breaker	Over-current Size (Amps) 20
Battery Tests		

Inspection Report

Cycle: Annually
[Ref #201717]

FACI FRANKLIN ALARM COMPANY INC.
NJ License # P00348

Battery Tests

Location	Quantity	Type	Manufacture Model	Replacement Date	Condition	Connections	Leaks or Corrosion	Voltage with Charger	#1 Voltage - No Load	#1 Measured Capacity (A/hr)	#2 Voltage - No Load	#2 Measured Capacity (A/hr)	Rated Capacity
	2				Ok	Ok	Ok						Ok

System Function Summary

Description	Test Result
Alarm Functions	
Evacuation Alarm functions including Bells/Horns/Strobes actuate properly	Pass

Description	Test Result
Alarm Panel Supervisory Functions	
Ground faults in alarm circuits are detected	Pass
Integrity of single or multiple circuits providing interface between two or more control panels verified.	Pass
Electrical opens in initiating and indicating circuits are detected.	Pass
Electrical shorts in initiating and indicating circuits are detected.	Pass
Loss of AC power to the alarm panel is detected by the alarm system.	Pass
Loss of Secondary power to the alarm panel is detected by the alarm system.	Pass

Central Station Test

Operator spoke to		Type Transmission	Digital
Alarm, Trouble and Supervisory indication tested and verified with the central station?	Yes		

Panel Inspection

Are zones labeled and identified?	Yes	Are drawings and wiring diagrams available at the panel?	Yes
Have all fuses been checked for rating and supervision ?	Yes	System was in operation upon arrival?	Yes
Are operating instructions posted or available at the panel?	Yes	Panel and surrounding equipment, conduit and wiring well secured and in good condition	Yes
Surge/Transient suppressors visually inspected?	Yes	Are all lamps and displays operating correctly?	Yes
Primary power supply operates properly under full load ?	Yes		

Inspection Report
Cycle: Annually
[Ref #201717]

FACI FRANKLIN ALARM COMPANY INC.
NJ License # P00348

Alarm Device Summary

Device Type	Location	Status
	1st Floor	
	Above Ceiling by Gym Doors	Passed
	Above Ceiling by Gym Doors	Passed
Duct Detector	Library A105	Passed
Duct Detector	Computer Room	Passed
Duct Detector	Gym Entryway	Passed
Heat Detector	Nurse	Passed
Heat Detector	Gym	Passed
Heat Detector	Mechanical in Gym	Passed
Heat Detector	Gym	Passed
Heat Detector	Library Storage	Passed
Heat Detector	Gym	Passed
Heat Detector	Library by A101 Entry	Passed
Heat Detector	Boys Locker Room	Passed
Heat Detector	Kitchen	Passed
Heat Detector	Gym by Girls Locker Room	Passed
Heat Detector	Disiplinary Room	Passed
Heat Detector	Library Office	Passed
Heat Detector	Gym Office	Passed
Heat Detector	Boys Locker Room	Passed
Heat Detector	Library A105	Passed
Heat Detector	Stage	Passed
Heat Detector	A111	Passed
Heat Detector	Boiler Room	Passed
Heat Detector	Speech Room	Passed
Heat Detector	Computer Room	Passed
Heat Detector	Gym	Passed
Heat Detector	Gym	Passed
Heat Detector	Teachers Room	Passed
Heat Detector	Gym	Passed
Heat Detector	Girls Locker Room	Passed
Heat Detector	Kitchen Prep	Passed
Heat Detector	Library A101	Passed

Inspection Report

Cycle: Annually
[Ref #201717]

FACI FRANKLIN ALARM COMPANY INC.
NJ License # P00348

Device Type	Location	Status
	1st Floor	
Heat Detector	A101 Bath-Handicap	Passed
Heat Detector	Gym	Passed
Heat Detector	A110	Passed
Heat Detector	Girls Lav by Room 111	Passed
Heat Detector	Main Office Womens Bath	Passed
Heat Detector	Gym	Passed
Heat Detector	Gym	Passed
Heat Detector	Library A105	Passed
Heat Detector	Gym	Passed
Heat Detector	Janitor by Room 111	Passed
Heat Detector	Computer Room	Passed
Heat Detector	Disiplinary Room	Passed
Heat Detector	Gym	Passed
Heat Detector	A101 Unisex Bath	Passed
Heat Detector	Gym	Passed
Heat Detector	Library A101	Passed
Heat Detector	Boys Lav by Room 112	Passed
Heat Detector	Library A101	Passed
Heat Detector	Nurse	Passed
Heat Detector	Girls Locker Room	Passed
Manual Pull Station	Gym Side Exit #1	Passed
Manual Pull Station	Exit by Room 105	Passed
Manual Pull Station	Gym Side Exit #2	Passed
Manual Pull Station	Gym\Cafeteria	Passed
Manual Pull Station	Hall by Room 122	Passed
Manual Pull Station	Main Lobby	Passed
Manual Pull Station	Library A105	Passed
Manual Pull Station	Exit by Room 102	Passed
Manual Pull Station	Hall by Room 105	Passed
Manual Pull Station	Gym Rear Exit	Passed
Manual Pull Station	Boiler Room	Passed
Manual Pull Station	Foyer by A111	Passed
Manual Pull Station	Computer Room	Passed
Manual Pull Station	A101 Library Exit	Passed

Inspection Report

Cycle: Annually

[Ref #201717]

FACI FRANKLIN ALARM COMPANY INC.

NJ License # P00348

Device Type	Location	Status
1st Floor		
Manual Pull Station	Gym\Cafeteria	Passed
Manual Pull Station	A101 Library Exit	Passed
Manual Pull Station	Hall by Room 103	Passed
Manual Pull Station	A101 Library Exit	Passed
Smoke Detector - PE: No Sensitivity	Room 106	Passed
Smoke Detector - PE: No Sensitivity	Superintendent	Passed
Smoke Detector - PE: No Sensitivity	Library A101	Passed
Smoke Detector - PE: No Sensitivity	Room 109	Passed
Smoke Detector - PE: No Sensitivity	Room 104	Passed
Smoke Detector - PE: No Sensitivity	Exit by Room 105	Passed
Smoke Detector - PE: No Sensitivity	Room 117	Passed
Smoke Detector - PE: No Sensitivity	Foyer by A111	Passed
Smoke Detector - PE: No Sensitivity	Hall by Gym\Main Office	Passed
Smoke Detector - PE: No Sensitivity	Room 115	Passed
Smoke Detector - PE: No Sensitivity	Hall by Speech Room	Passed
Smoke Detector - PE: No Sensitivity	Room 114	Passed
Smoke Detector - PE: No Sensitivity	Gym\Cafeteria	Passed
Smoke Detector - PE: No Sensitivity	Tech Room	Passed
Smoke Detector - PE: No Sensitivity	School Business Admin	Passed
Smoke Detector - PE: No Sensitivity	Room 107	Passed
Smoke Detector - PE: No Sensitivity	Library A105	Passed
Smoke Detector - PE: No Sensitivity	Room 103 Bath	Passed
Smoke Detector - PE: No Sensitivity	Disiplinary Room	Passed
Smoke Detector - PE: No Sensitivity	Room 105	Passed
Smoke Detector - PE: No Sensitivity	Teachers Room	Passed
Smoke Detector - PE: No Sensitivity	Room 116	Passed
Smoke Detector - PE: No Sensitivity	Room 102 Bath	Passed
Smoke Detector - PE: No Sensitivity	Room 118	Passed
Smoke Detector - PE: No Sensitivity	Main Lobby	Passed
Smoke Detector - PE: No Sensitivity	Hall by Room 102	Passed
Smoke Detector - PE: No Sensitivity	Teachers Room	Passed
Smoke Detector - PE: No Sensitivity	Room 108	Passed
Smoke Detector - PE: No Sensitivity	Library A101	Passed
Smoke Detector - PE: No Sensitivity	Room 101	Passed

Inspection Report

Cycle: Annually. .

[Ref #201717]

FACI FRANKLIN ALARM COMPANY INC.

NJ License # P00348

Device Type	Location	Status
	1st Floor	
Smoke Detector - PE: No Sensitivity	Room 121	Passed
Smoke Detector - PE: No Sensitivity	Hall by Boiler Room	Passed
Smoke Detector - PE: No Sensitivity	Nurse	Passed
Smoke Detector - PE: No Sensitivity	Gym\Cafeteria	Passed
Smoke Detector - PE: No Sensitivity	Hall by Room 110	Passed
Smoke Detector - PE: No Sensitivity	Library A105	Passed
Smoke Detector - PE: No Sensitivity	Room 101 Bath	Passed
Smoke Detector - PE: No Sensitivity	Room 120	Passed
Smoke Detector - PE: No Sensitivity	Library\Nurse Hallway	Passed
Smoke Detector - PE: No Sensitivity	Gym\Cafeteria	Passed
Smoke Detector - PE: No Sensitivity	Room 102	Passed
Smoke Detector - PE: No Sensitivity	Room 122	Passed
Smoke Detector - PE: No Sensitivity	Room 113	Passed
Smoke Detector - PE: No Sensitivity	Room 103	Passed
Smoke Detector - PE: No Sensitivity	Room 106 Bath	Passed
Smoke Detector - PE: No Sensitivity	Gym\Cafeteria	Passed
Smoke Detector - PE: No Sensitivity	Room 121	Passed
Smoke Detector - PE: No Sensitivity	Hall by Room 105	Passed
Smoke Detector - PE: No Sensitivity	Hall by Room 114	Passed
Smoke Detector - PE: No Sensitivity	Room 112	Passed
Smoke Detector - PE: No Sensitivity	Hall by Room 119	Passed
Smoke Detector - PE: No Sensitivity	Hall by Room 103	Passed
Smoke Detector - PE: No Sensitivity	Hall by A110	Passed
Smoke Detector - PE: No Sensitivity	Room 108 Bath	Passed
Smoke Detector - PE: No Sensitivity	Hall by Gym\Library	Passed
Smoke Detector - PE: No Sensitivity	Library A105	Passed
Smoke Detector - PE: No Sensitivity	Room 111	Passed
Smoke Detector - PE: No Sensitivity	Main Office	Passed
Smoke Detector - PE: No Sensitivity	Room 119	Passed
Smoke Detector - PE: No Sensitivity	Room 110	Passed

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WOODBINE BOARD OF EDUCATION
BUSINESS OFFICE
1076 Almond Road
Pittsgrove, NJ 08318
856-358-3094 ext. 4023

PURCHASE ORDER NO. **200322**

PO# AND ORDERED BY NAME MUST APPEAR ON ALL LABELS, CARTONS & INVOICES

Page 1 of 1
Copy 4

Account Code	Amount
11-000-261-420-050-0	725.00

Ship to
WOODBINE ELEMENTARY
801 Webster Street
Woodbine, NJ 08270

To
FRANKLIN ALARM COMPANY INC 1264
P.O. BOX 84
FRANKLINVILLE, NJ 08322

Date: 04/05/22 Dept: acctpay

Notice: The purchaser is exempt by statute from paying all Federal, State and Municipal Excise Sales & other taxes

Qty	Unit	Description	Unit Price	Amount
1.		invoice 79377	725.000	725.00

Total for Lines $725.00

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Title Date

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SECRETARY, BOARD OF EDUCATION

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WOODBINE BOARD OF EDUCATION
BUSINESS OFFICE

1076 Almond Road
Pittsgrove, NJ 08318
856-358-3094 ext. 4023

PURCHASE ORDER NO. **200097**

PO# AND ORDERED BY NAME MUST APPEAR ON ALL LABELS, CARTONS & INVOICES

Page 1 of 1
Copy 3

Account Code	Amount
11-000-262-420-050-0	511.80

Ship to
WOODBINE ELEMENTARY
801 Webster Street
Woodbine, NJ 08270

To
GENRON FIRE PROTECTION 1278
P.O. BOX 556
SOUTH SEAVILLE, NJ 08246

Date: 08/24/21 Dept: acctpay

Notice: The purchaser is exempt by statute from paying all Federal, State and Municipal Excise Sales & other taxes

Qty	Unit	Description	Unit Price	Amount
1.		fire extingusher inspection and cert	511.800	511.80

V# 12000
9/16/21

Total for Lines $511.80

NOTICE TO VENDOR OR CONTRACTOR

1. Order invalid unless signed by the Secretary of the Board of Education
2. Shipping statement must accompany delivery of materials
3. Voucher provided by the Board of Education must be forwarded to the secretary to process payment
4. Please submit invoice as soon as order is completed
5. Must have NJ Reg. on file with us in order to receive payment

SCHOOL OFFICE USE ONLY

I certify that the goods or services itemized have been received

Signature

Title Date

NO ORDER VALID UNLESS SIGNED BY THE SECRETARY

SECRETARY, BOARD OF EDUCATION

Pittsgrove •net

Valerie Mazzei <vmazzei@pittsgrove.net>

Fwd: Attached Image

1 message

Joe Giambri <jgiambri@pittsgrove.net> Mon, Aug 23, 2021 at 12:56 PM
To: Valerie Mazzei <vmazzei@pittsgrove.net>

This needs to go in, account number 11-000-262-420.

---------- Forwarded message ---------
From: <woodbscans@gmail.com>
Date: Mon, Aug 23, 2021 at 12:52 PM
Subject: Attached Image
To: joe giambri <jgiambri@pittsgrove.net>

--
Joe Giambri Jr.
Pittsgrove Township BOE Asst. BA
Woodbine BOE School Business Administrator
Commercial Twp BOE School Business Official

FIRE EXT CERTIFICATION_001.pdf
658K

GENRON Fire
PO Box 556
South Seaville, NJ 08246
609-624-3000

PLEASE REMIT TO:
GENRON INC.
P.O. Box 556
South Seaville NJ 08246

Invoice

DATE	INVOICE
8/16/2021	43778

BILL TO:
Woodbine Board of Education
801 Webster Street
Woodbine, NJ 08270

WORK LOCATION:
Woodbine Board of Education
801 Webster Street
Woodbine, NJ 08270

P.O.	TERMS	DUE	TECH	PHONE	SER DATE	TYPE	SYSTEM	H/T DATE
	Due o...	8/16/2021	5	609-861-5174	7-28-2021	S/A		

ITEM	QTY	DESCRIPTION	RATE	AMOUNT
CS10ABC	7	Certification of 10lb ABC Fire Extinguishers per NFPA 10.6.1	6.25	43.75
CS20ABC	1	Check and Service 20lb ABC Fire Extinguisher per NFPA 10.6.1	6.25	6.25
CS5ABC	18	Certification of 5lb ABC fire extinguishers per NFPA 10.6.1	6.25	112.50
CS5FE36	1	Certification of 5lb. FE-36 fire extinguisher per NFPA 10.6.1	6.25	6.25
CS6LITER	1	Certification of 6 Liter Wet Chemical per NFPA 10.6.1	6.25	6.25
ABC5	2	5lb ABC Recharge and Certification	27.00	54.00
ABC10	2	10lb ABC Recharge and Certification	29.90	59.80
FIELD	1	Field Extinguisher Service	78.00	78.00
FIRESYS	1	Inspection, Certification and Service Fire Suppression System Pursuant to NFPA 17A Para 7.3.2	125.00	125.00
360FS	2	360 Degree Heat Link for Fire System	10.00	20.00
REPORT	1	System report provided with invoice. (NO CHARGE)	0.00	0.00

Total $511.80

WOULD YOU LIKE TO PAY YOUR INVOICE BY CREDIT CARD? PLEASE CALL THE OFFICE AND WE WILL PROCESS YOUR PAYMENT.

E-mail
ggburnell@genronfire.net

PLEASE NOTE OUR NEW REMITTANCE ADDRESS

Genron

NJ State Permit # P00254
US D.O.T. RIN 0821

GENRON FIRE PROTECTION

1080 Route 83 Clermont, New Jersey 08210
Phone: 609-624-3000 Fax: 609-624-2699
Mailing Address: P.O. Box 556 S. Seaville NJ 08246

Customer: WOODBINE BOE

Service Date: 7-28-21

Qty Removed	Description	Type	Qty Returned
	UN1013, CARBON DIOXIDE, 2.2	EXTINGUISHER	
	UN1044, FIRE EXTINGUISHER, 2.2	CYLINDER OR EXTINGUISHER	
	UN1066, NITROGEN COMPRESSED, 2.2	CARTRIDGE	
	UN1013, CARBON DIOXIDE, 2.2	CARTRIDGE	

Qty	Type	Description	Per.	Amount
	Cartridge			
	Carbon Dioxide			
	BC Dry Chemical			
	ABC Dry Chemical	7 10LB 7 20 LB 18 5LB		
	PK Dry Chemical			
	Water / Foam			
1	Clean Agent	5LB		
	Class K	6 LITER		
	Removed	2 10LB 2 5LB		
	Loaners			

SERVICE PERFORMED

Qty.	Type	Description	Amount
2	5LB ABC	CG-760279 RC	
		SV-839162 RC	
2	10LB ABC	SX-192110 RC	
		SX-192092 RC	

Customer Signature: Monica Morales

Date: ___________

Customer Print: Monica Morales

✓ System is Compliant with NJAC-5:70-3	System is Non-Compliant

Genron Fire Protection
1066 Route 83, Clermont, NJ 08210 Phone: 609-624-3000
Fax: 609-624-2999
NJ Contractor Permit # P00254
US DOT Requalifer Facility RIN G821

WORK ORDER NO	DATE	HAZARD AREA PROTECTED	
1782	7-28-21	DPA	
SYSTEM MFG	SYS CAPACITY	SYS TYPE	# OF CYLS
ANSUL	3	W	1

CUSTOMER	CONTACT	PHONE	FAX
WOODBINE BOE	office	609 861-5174	

ADDRESS	CITY	STATE AND ZIP CODE
801 WEBSTER St	WOODBINE	NJ

AHJ/PROTECTION DISTRICT

INSPECTION TYPE: ☐ INITIAL ☐ ANNUAL ☑ SEMI-ANNUAL

#	INITIAL ACTIONS/OBSERVATIONS	Y	N	N/A
1	Last serviced by: GENRON			
2	Were building personnel notified of the inspection?	✓		
3	Was the monitoring company notified?			✓
4	System found charged and functioning at the time of tech's arrival?	✓		
5	System un-tampered since last visit?	✓		
6	System found to be at proper pressure upon arrival?	✓		
	VISUALLY CHECK SYSTEM			
7	Baffle-type filters installed in hood?	✓		
8	System [and appliance] appear unchanged since last service?	✓		
9	Were the nozzle caps in place at time of arrival?	✓		
10	Visible piping and nozzles properly connected, braced and free of damage?	✓		
11	Piping/conduit/cabling free from observable obstructions?	✓		
12	Nozzle(s) inspected and found to be clear of obstructions?	✓		
13	Correct Nozzle type(s) for protected equipment, plenum and ducts?	✓		
14	Nozzle(s) properly positioned over appliances?	✓		
15	Nozzles properly postioned in duct(s) and plenum(s)?	✓		
16	Is there a fan warning sign on hood?	✓		
17	Flow points/extinguishing agent with mfg's allowed maximums?	✓		

#	HAZARD INSPECTION	Y	N	N/A
18	Hazard configuration appeared to remain unchanged?	✓		
19	Are all observable penetrations to the hood and duct sealed?	✓		
20	No readily observable obstructions or interference that could impact effectiveness of the suppression system?	✓		
	SYSTEM FUNCTIONAL TEST			
21	System disarmed per manufacturer's recommendations?	✓		
22	Mechanical detection line tested and found to operate properly?	✓		
23	Proper number and placement of detectors/links?	✓		
24	Did the system operate properly from activation of a manual pull station	✓		
25	Gas shut-off valve installed and working properly? (Note location) KITCHEN	✓		
26	Replaced links with proper temperature rating? *(List the number of links and degrees below)*			
27	Is the manual reset for electric gas valves operational?	✓		
28	Did all electrical appliances shut off upon system operation?	✓		
29	Did all gas appliances shut off upon system operation?	✓		
30	Did the make-up air shut down?			✓
31	Did the alarm system activate when the system tripped?			✓
32	Did control head(s)/cylinder releasing device(s) operate properly?	✓		

Links	Deg	Links	Deg
2	360		

NOTIFICATION OF DEFICIENCES CUSTOMER INITIALS ______

☐ A mark made in the adjacent box indicates that deficiencies exist with the current condition of the Fire Suppression System. If this is the case, the customer's authorized representative, by his or her signature and initials acknowledges these deficiencies represent an IMMEDIATE AND SERIOUS SAFETY CONCERN that the customer must correct. Service Company shall not be responsible if the Fire Suppression malfunctions or fails to function. It is the owner's responsibility to ensure that all deficiencies are removed or repaired.

CUSTOMER	CONTACT	PHONE	FAX
ADDRESS	CITY	STATE AND ZIP CODE	

CYLINDERS AND AGENTS		Y	N	N/A
33	Cylinder Pressure psi			✓
34	Hydrostatic test date of cylinder checked: Date:	✓		
35	Were all cylinders free of signs of external corrosion and/or damage?	✓		
36	Are all cylinders securely mounted?	✓		
37	Cartridge inspected or replaced within mfg's recommended interval? Weight ______	✓		
SYSTEM REACTIVATION		**Y**	**N**	**N/A**
38	Test adapters, keeper pins, etc. removed from system?	✓		
39	Detection [link] line has proper tension?	✓		
40	Was the control head reset?	✓		
41	Were all fuel sources supplied by the gas valve relit?	✓		
42	Were all pilot lights supplied by the gas valve relit?			✓
43	Microswitch/relay(s)-electric appliances "on"?	✓		
44	Are all nozzle caps in place?	✓		

SYSTEM ACTIVATION		Y	N	N/A
45	Were all filters reinstalled?	✓		
46	Were all cartridges reinstalled? (if applicable)	✓		
47	Tandem/slave releasing device(s) reset properly?			✓
FINAL		**Y**	**N**	**N/A**
48	Operator's manual on site?	✓		
49	Class K portable extinguisher available and properly serviced?	✓		
50	Remote manual release free from obstruction & operable?	✓		
51	Has the system been placed back in service?	✓		
52	Monitoring company notified that the system is back in full service?			✓
53	Were building personnel notified of the system condition?	✓		
54	Have you received a signature from the building personnel?	✓		
55	Inspection tag affixed to system?	✓		

DESCRIPTION OF DEFICIENCIES

COMMENTS AND RECOMMENDATIONS

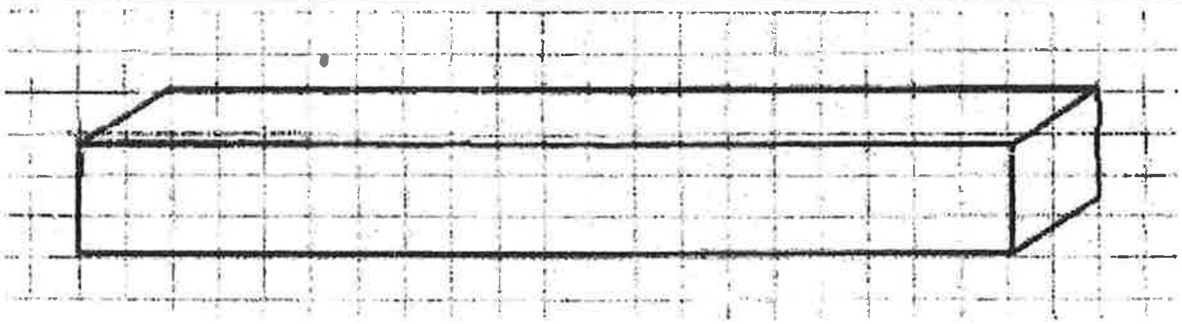
NOTIFICATION OF EXHAUST SYSTEM GREASE BUILD UP **CUSTOMER INITIALS** ______________

☐ A mark made in the adjacent box indicates that we recommend that the entire exhaust and ventilation control system as well all applicances be inspected by a properly trained, qualified, and certified company or person(s) acceptable to the authority having jurisdiction to determine if cleaning is required. Any visual observations or comments noted by our Service Technician regarding grease build up are for informational purposes only and are based readily observable conditions at the time of service

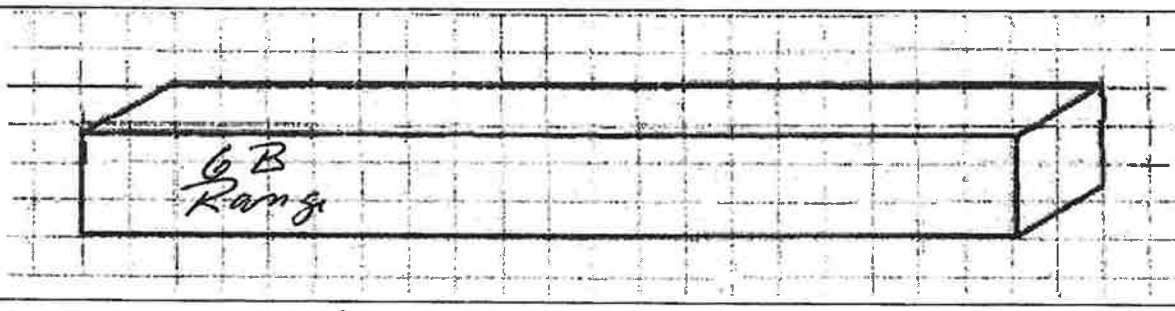
AUTHORIZED CUSTOMER REPRESENTATIVE	AUTHORIZED COMPANY REPRESENTATIVE
Signature ______________	Signature Ron Burnell
Print Name Monica Morales	Print Name & Certification Number P 00254

CUSTOMER	CONTACT	PHONE	FAX
ADDRESS	**CITY**	**STATE AND ZIP CODE**	

HOOD SIZE	DUCT QUANTITY & SIZE
8'	14x14 1



LABEL ALL APPLICANCES



SIZE

NOTES/COMMENTS

INCLUDE ALL APPLICANCES, LABEL SIZE AND TYPE

SYSTEM CONNECTED TO ALARM? ☐ YES ☑ NO

NOZZLE QUANTITY

DUCT / **PLENUM** / **APPLIANCE** 3

REMOTE PULL LOCATION ☑ YES ◯ NO

EGRESS

GAS VALVE: ☑ YES ☐ NO **SIZE**

GAS VALVE STYLE:

☑ **ELECTRICAL** ☐ **MECHANICAL**

TYPE: ☐ **RELEASE** ☐ **PULL**

ALL CONDTIONS ARE LIMITED TO ONLY THOSE THAT COULD BE OBSERVED AT THE TIME OF INSPECTION

Genron Fire Protection				CUSTOMER	Woodbine BOE	
				DATE	July 28-2021	
No.	**Manufacturer**	**S/N**	**Size and Type**	**HT Date**	**6 YR. Date**	**Location**
			20lb ABC		2020	Science Rm
			5lb ABC		2019	Nurse
			5lb ABC		2019	Hall
			5lb ABC		2019	Music
			5lb ABC		2019	Hall
			5lb ABC		2019	Science Rm
			5lb ABC		2000	Hall
			5lb ABC		2018	Stage
			5lb ABC		2019	Supply Closet
			5lb ABC		2019	Hall
			5lb ABC		2019	
			5lb ABC		2019	Hall
			5lb ABC		2017	Hall
			5lb ABC		2019	Hall
			5lb ABC		2017	Boiler Rm
			5lb ABC		2018	Spare
			5lb ABC		2018	Spare
			5lb ABC		2018	Office
			ABC		2019	Spare
			10lb ABC		2017	Boiler Rm
			10lb ABC		2020	Stage
			10lb ABC		2019	Hall
Sheet ( )						

Genron Fire Protection				CUSTOMER	Woodbine BOE	
				DATE	July 28-2021	
No.	Manufacturer	S/N	Size and Type	HT Date	6 YR. Date	Location
			10lb ABC		2019	Gym
			10lb ABC		2016	Gym
			10lb ABC		2019	Gym
			Clean Guard		2021	Library
			6 Liter		2016	Kitchen
			10lb ABC		2015	

Sheet (   )

GENRON Fire
PO Box 556
South Seaville, NJ 08246
609-624-3000

PLEASE REMIT TO:
GENRON INC.
P.O. Box 556
South Seaville NJ 08246

Invoice

DATE	INVOICE
8/16/2021	43778

BILL TO:

Woodbine Board of Education
801 Webster Street
Woodbine, NJ 08270

WORK LOCATION:

Woodbine Board of Education
801 Webster Street
Woodbine, NJ 08270

P.O.	TERMS	DUE	TECH	PHONE	SER DATE	TYPE	SYSTEM	H/T DATE
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RECEIVED SEP 02 REC'D

Total $511.80

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E-mail
ggburnell@genronfire.net

PLEASE NOTE OUR NEW REMITTANCE ADDRESS

ALL INVOICES AND CORRESPONDENCE MUST BE SENT TO ABOVE ADDRESS REGARDLESS OF SHIPPING POINT.

WOODBINE BOARD OF EDUCATION
BUSINESS OFFICE
1076 Almond Road
Pittsgrove, NJ 08318
856-358-3094 ext. 4023

PURCHASE ORDER NO. **200097**

PO# AND ORDERED BY NAME MUST APPEAR ON ALL LABELS, CARTONS & INVOICES

Page 1 of 1
Copy 1

Ship to
WOODBINE ELEMENTARY
801 Webster Street
Woodbine, NJ 08270

To
GENRON FIRE PROTECTION 1278
P.O. BOX 556
SOUTH SEAVILLE, NJ 08246

Account Code	Amount
11-000-262-420-050-0	511.80

Date: 08/24/21 Dept: acctpay

Notice: The purchaser is exempt by statute from paying all Federal, State and Municipal Excise Sales & other taxes

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INVOICES MUST BE RENDERED ON THE VOUCHER

Claimant's Certification and Declaration

I do solemnly declare and certify under the penalties of the law that the within bill is correct in all its particulars; that the articles have been furnished or services rendered as stated therein; that no bonus has been given or received by any person or persons within the knowledge of the claimant in connection with the above claim; that the amount therein stated is justly due and owing; and that the amount charged is a reasonable one.

(X) Gene G Burnell
Vendor Sign Here

President 223701436 8/30/21
Offical Position Date

NO ORDER VALID UNLESS SIGNED BY THE SECRETARY

SECRETARY, BOARD OF EDUCATION

VOUCHER COPY - RETURN FOR PAYMENT