

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.

400326

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

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

1264

Account Code	Amount
11-000-261-420-050-0	1,006.00

Date: 03/21/24 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 93311	1006.000	1,006.00

Total for Lines \$1,006.00

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

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

Official Position

Date

INVOICES MUST BE RENDERED ON THE VOUCHER

NO ORDER VALID UNLESS SIGNED BY THE SECRETARY

SECRETARY, BOARD OF EDUCATION

VOUCHER COPY - RETURN FOR PAYMENT

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SECRETARY, BOARD OF EDUCATION

VENDOR COPY



P.O. BOX 84, FRANKLINVILLE, NJ 08322

856-728-6424 Fax 728-3763

www.Franklinalarm.com

NJ State Burg/Fire Alarm

Lic#34BF00006500

INVOICE

Date
2/5/2024

Invoice #
93311

Bill To

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

Reference

P.O. #	TERMS	REP
	NET 10	

Description	Quantity	Cost	Amount
Service/Labor Hours 1/25/24	4	185.00	740.00
Replaced CT1 modules in library exit pull station and in hall by room 106.	2	89.00	178.00
Replaced batteries in the burglar alarm panel due to corrosion and age.	2	44.00	88.00
System was cleared of all troubles and restored to normal.			

TESTING YOUR ALARM MONTHLY WILL LET YOU KNOW IF YOUR SYSTEM IS WORKING PROPERLY. We accept all major credit cards. A 1.30% processing fee may apply. Call for information.

Subtotal	\$1,006.00
Sales Tax (6.625%)	\$0.00
TOTAL	\$1,006.00
Payments/Credits	\$0.00
BALANCE DUE	\$1,006.00

261-4620

Ticket Report

[Ref #fb5a1cbc]



NJ License # P00348

Customer

Woodbine Elementary

Signature

Address

801 Webster St. Woodbine, NJ

1 Building

Building

Woodbine Elementary

Address

801 Webster St.
Woodbine, NJ

Issues

- Fire Alarm

Description of problem

Per Jim service is needed for ground fault and HALL NEAR ROOM 106 MANUAL PULLSTATION 609-992-1370

Technicians

Technician Name

Mike Deflorio

44x2

Notes

2 technicians 2 hours each. 4 tech hours total

Created by Mike Deflorio at 01/23/2024 @ 15:35

Replaced 2. 7 ah batteries in burglar alarm system due to corrosion and age

Created by Mike Deflorio at 01/23/2024 @ 15:34

Replaced pullstation ct1 in library exit pullstation

Created by Mike Deflorio at 01/23/2024 @ 15:33

Replaced pullstation ct1 in hall by 106

Created by Mike Deflorio at 01/23/2024 @ 15:32

89-

89-

Ticket Report

[Ref #fb5a1cbc]



FRANKLIN
ALARM COMPANY INC.

NJ License # P00348

Materials

Description

Signature

Qty

Siga ct1 modules

84 hr.

2

7 ah batteries

44 hr.

[Signature]

2

Total hours by all technicians:

24

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Pittsgrove, NJ 08318
856-358-3094 ext. 4023

PURCHASE ORDER NO.

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Copy 4

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1264

Account Code

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Amount

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Qty	Unit	Description	Unit Price	Amount
1.		invoice 93311	1006.000	1,006.00

Total for Lines \$1,006.00

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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

Dan Harris

SECRETARY, BOARD OF EDUCATION

RECEIVING COPY

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

PURCHASE ORDER NO. 400285
Page 1 of 1
Copy 4
PO# AND ORDERED BY
NAME MUST APPEAR ON
ALL LABELS, CARTONS &
INVOICES

Ship to

WOODBINE ELEMENTARY
801 Webster Street
Woodbine, NJ 08270

To

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

1278

Account Code

11-000-261-420-050-0

Amount

168.00

Date: 02/09/24 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.		service 1/25/24 Inv 47602	168.000	168.00
✓ # 13249 2/9/24				

Total for Lines \$168.00

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I certify that the goods or services itemized have been received

Signature

Title

Date

NO ORDER VALID UNLESS SIGNED BY THE SECRETARY

Douglas C. McHenry

SECRETARY, BOARD OF EDUCATION

RECEIVING COPY



GENRON Fire
South Seaville, NJ 08246
609-624-3000

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

Invoice

DATE	INVOICE
2/2/2024	47602

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...	2/2/2024	FC	609-861-5174	1-25-2024	S/A		
ITEM	QTY	DESCRIPTION					RATE	AMOUNT
FIRESYS	1	Inspection, Certification and Service Fire Suppression System Pursuant to NFPA 17A Para 7.3.2					140.00	140.00
360FS REPORT	2	360 Degree Heat Link for Fire System					14.00	28.00
	1	System report provided with invoice.					0.00	0.00

Total**\$168.00**

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

E-mailggburnell@genronfire.net

PLEASE NOTE
OUR NEW
REMITTANCE
ADDRESS

Nova Kane

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WOODBINE BOARD OF EDUCATION
BUSINESS OFFICE
1076 Almond Road
Pittsgrove, NJ 08318
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PURCHASE ORDER NO. **400285**

PO# AND ORDERED BY
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Page 1 of 1

Copy 1

Ship to

WOODBINE ELEMENTARY
801 Webster Street
Woodbine, NJ 08270

To

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

1278

Account Code	Amount
11-000-261-420-050-0	168.00

Date: 02/09/24 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.		service 1/25/24 Inv 47602	168.000	168.00

Total for Lines \$168.00

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(X)

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Official Position

Date

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Douglas C. McHenry

SECRETARY, BOARD OF EDUCATION

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

PURCHASE ORDER NO.

400074

PO# AND ORDERED BY
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Page 1 of 1

Copy 3

Ship to

WOODBINE ELEMENTARY
801 Webster Street
Woodbine, NJ 08270

To

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

1278

Account Code

11-000-261-420-050-0

Amount

803.48

Date: 08/17/23 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 46898	803.480	803.48
JH 12990 9/1/23				

Total for Lines \$803.48

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SCHOOL OFFICE USE ONLY

I certify that the goods or services itemized have been received

Signature

Title

Date

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SECRETARY, BOARD OF EDUCATION

**GENRON Fire**

South Seaville, NJ 08246
609-624-3000

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

Invoice

DATE	INVOICE
7/31/2023	46898

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...	7/31/2023	FC	609-861-5174	6-29-2023	S/A		
ITEM	QTY	DESCRIPTION				RATE	AMOUNT	
CS20ABC	1	Check and Service 20lb ABC Fire Extinguisher per NFPA 10.6.1				6.30	6.30	
CS10ABC	4	Certification of 10lb ABC Fire Extinguishers per NFPA 10.6.1				6.30	25.20	
CS5ABC	15	Certification of 5lb ABC fire extinguishers per NFPA 10.6.1				6.30	94.50	
CS6LITER	1	Certification of 6 Liter Wet Chemical per NFPA 10.6.1				6.30	6.30	
CSFE5	1	Check and Service 5 lb. FE-36 ANSUL Clean Guard Hand Portable Fire Extinguisher				6.30	6.30	
FEBADV550	2	5-1/2 lb Badger Model ADV-550 ABC Extinguisher				72.04	144.08	
FEBADADV10	1	10 lb Badger Model ADV-10 ABC Extinguisher				117.80	117.80	
ABC10	3	10lb ABC Recharge and Certification				30.00	90.00	
ABC5	2	5lb ABC Recharge and Certification				30.00	60.00	
FIELD	1	Field Service				89.00	89.00	
FIRESYS	1	Inspection, Certification and Service Fire Suppression System Pursuant to NFPA 17A Para 7.3.2				140.00	140.00	
360FS	2	360 Degree Heat Link for Fire System				12.00	24.00	

**Total****\$803.48**

WOULD YOU LIKE TO PAY YOUR
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PROCESS YOUR PAYMENT.

E-mail

ggburnell@genronfire.net

PLEASE NOTE
OUR NEW
REMITTANCE
ADDRESS

11-000 -261-420

Customer Print: JAMES STEBBINS

☒ 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 Requalifier Facility RIN G821				WORK ORDER NO		DATE <u>7/3/23</u>		HAZARD AREA PROTECTED	
				SYSTEM MFG <u>AN501</u>		SYS CAPACITY <u>3gal</u>		SYS TYPE <u>wet</u>	
CUSTOMER <u>Woodbine Fire Sys</u>				CONTACT		PHONE <u>609</u>		FAX	
ADDRESS <u>801 Webster St.</u>				CITY <u>Woodbine</u>		STATE AND ZIP CODE <u>NJ 08270</u>			
AHJ/PROTECTION DISTRICT				INSPECTION TYPE		☐ INITIAL		☐ ANNUAL	
								☒ SEMI-ANNUAL	

INITIAL ACTIONS/OBSERVATIONS				Y	N	N/A	HAZARD INSPECTION				Y	N	N/A			
1	Last serviced by: <u>Genron</u>						18	Hazard configuration appeared to remain unchanged?			☐	☐	☐			
2	Were building personnel notified of the inspection?			☒	☐	☐	19	Are all observable penetrations to the hood and duct sealed?			☐	☐	☐			
3	Was the monitoring company notified?			☐	☒	☐	20	No readily observable obstructions or interference that could impact effectiveness of the suppression system?			☐	☐	☐			
4	System found charged and functioning at the time of tech's arrival?			☐	☐	☐	SYSTEM FUNCTIONAL TEST				Y	N	N/A			
5	System un-tampered since last visit?			☐	☐	☐	21	System disarmed per manufacturer's recommendations?			☒	☐	☐			
6	System found to be at proper pressure upon arrival?			☐	☐	☒	22	Mechanical detection line tested and found to operate properly?			☒	☐	☐			
VISUALLY CHECK SYSTEM							Y	N	N/A	23	Proper number and placement of detectors/links?			☒	☐	☐
7	Baffle-type filters installed in hood?			☒	☐	☐	24	Did the system operate properly from activation of a manual pull station?			☒	☐	☐			
8	System [and appliance] appear unchanged since last service?			☒	☐	☐	25	Gas shut-off valve installed and working properly? (Note location)			☒	☐	☐			
9	Were the nozzle caps in place at time of arrival?			☒	☐	☐	<u>above sink</u>									
10	Visible piping and nozzles properly connected, braced and free of damage?			☒	☐	☐										
11	Piping/conduit/cabling free from observable obstructions?			☒	☐	☐	Replaced links with proper temperature rating? (List the number of links and degrees below)									
							Links	Deg	Links	Deg						
							Links	Deg	Links	Deg						
12	Nozzle(s) inspected and found to be clear of obstructions?			☒	☐	☐	27	Is the manual reset for electric gas valves operational?			☒	☐	☐			
13	Correct Nozzle type(s) for protected equipment, plenum and ducts?			☒	☐	☐	28	Did all electrical appliances shut off upon system operation?			☒	☐	☐			
14	Nozzle(s) properly positioned over appliances?			☒	☐	☐	29	Did all gas appliances shut off upon system operation?			☐	☐	☐			
15	Nozzles properly positioned in duct(s) and plenum(s)?			☒	☐	☐	30	Did the make-up air shut down?			☐	☒	☒			
16	Is there a fan warning sign on hood?			☐	☒	☐	31	Did the alarm system activate when the system tripped?			☒	☐	☐			
17	Flow points/extinguishing agent with mfg's allowed maximums?			☐	☒	☐	32	Did control head(s)/cylinder releasing device(s) operate properly?			☒	☐	☐			

NOTIFICATION OF DEFICIENCIES

☐ 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 INITIALS _____

CUSTOMER <i>Woodbine Firesys</i>		CONTACT		PHONE <i>609</i> <i>861 5774</i>	FAX
ADDRESS <i>801 western st</i>		CITY <i>WOODBINE</i>		STATE AND ZIP CODE <i>NJ 01270</i>	

CYLINDERS AND AGENTS			Y	N	N/A	SYSTEM ACTIVATION			Y	N	N/A
33	Cylinder Pressure	psi	☐	☐	☒	45	Were all filters reinstalled?	☒	☐	☐	
34	Hydrostatic test dates(s) of cylinder checked: Due: <i>2023</i>		☒	☐	☐	46	Were all cartridges reinstalled? (if applicable)	☒	☐	☐	
35	Were all cylinders free of signs of external corrosion and/or damage?		☒	☐	☐	47	Tandem/slave releasing device(s) reset properly?	☐	☐	☒	
36	Are all cylinders securely mounted?		☒	☐	☐			☐	☐	☐	
37	Cartridge inspected or replaced within mfg's recommended interval? Weight <i>WIS CK</i>		☒	☐	☐	FINAL			Y	N	N/A

SYSTEM REACTIVATION			Y	N	N/A		Y	N	N/A	
						48	Operator's manual on site?	☐	☐	☒
38	Test adapters, keeper pins, etc. removed from system?		☒	☐	☐	49	Class K portable extinguisher available and properly serviced?	☒	☐	☐
39	Detection [link] line has proper tension?		☒	☐	☐	50	Remote manual release free from obstruction & operable?	☒	☐	☐
40	Was the control head reset?		☒	☐	☐	51	Has the system been placed back in service?	☒	☐	☐
41	Were all fuel sources supplied by the gas valve relit?		☒	☐	☐	52	Monitoring company notified that the system is back in full service?	☐	☒	☐
42	Were all pilot lights supplied by the gas valve relit?		☒	☐	☐	53	Were building personnel notified of the system condition?	☒	☐	☐
43	Microswitch/relay(s)-electric appliances "on"?		☒	☐	☐	54	Have you received a signature from the building personnel?	☒	☐	☐
44	Are all nozzle caps in place?		☒	☐	☐	55	Inspection tag affixed to system?	☒	☐	☐

COMMENTS AND RECOMMENDATIONS
System due for Hydro test

NOTIFICATION OF EXHAUST SYSTEM GREASE BUILD UP

CUSTOMER INITIALS _____

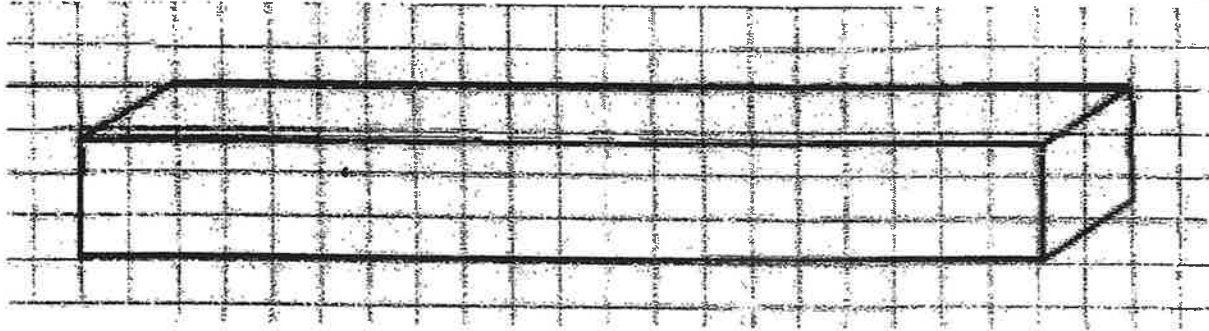
☐ A mark made in the adjacent box indicates that we recommend that the entire exhaust and ventilation control system as well all appliances be inspected by a properly trained, qualified, and certified company or person(s) acceptable to the authority having jurisdiction to determine if cleaning is required. 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 Signature <i>James Stebbins</i> Print Name <i>JAMES STEBBINS</i>	AUTHORIZED COMPANY REPRESENTATIVE Signature <i>F. Carl</i> Print Name & Certification Number <i>F CARLIN P00254</i>
--	--

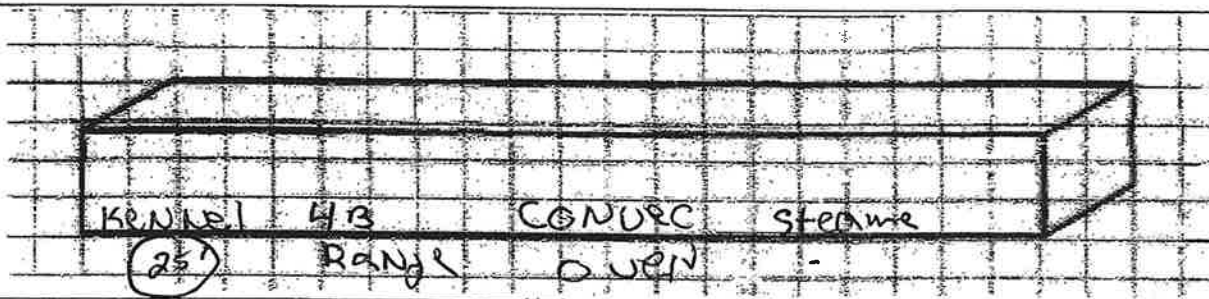
CUSTOMER <i>woodbine firesys</i>			CONTACT			PHONE <i>609</i> <i>861 5174</i>			FAX		
ADDRESS <i>801 western st</i>			CITY <i>woodbine</i>			STATE AND ZIP CODE <i>NJ 01270</i>					

CYLINDERS AND AGENTS				SYSTEM ACTIVATION							
	Y	N	N/A		Y	N	N/A				
33	Cylinder Pressure	psi	☐	☐	☒	☐	☐				
34	Hydrostatic test dates(s) of cylinder checked: Due: <i>2023</i>		☒	☐	☐	☐	☐				
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 <i>WIS CK</i>		☒	☐	☐	☐	☐				
				FINAL							
SYSTEM REACTIVATION											
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?		☒	☐	☐	☐	☐				
45								Were all filters reinstalled?	☒	☐	☐
46								Were all cartridges reinstalled? (if applicable)	☒	☐	☐
47								Tandem/slave releasing device(s) reset properly?	☐	☐	☒
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											
<i>system due for Hydro test</i>											
NOTIFICATION OF EXHAUST SYSTEM GREASE BUILD UP ☐ A mark made in the adjacent box indicates that we recommend that the entire exhaust and ventilation control system as well all appliances 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. CUSTOMER INITIALS _____											
AUTHORIZED CUSTOMER REPRESENTATIVE Signature <i>James Stebbins</i> Print Name <i>JAMES STEBBINS</i>						AUTHORIZED COMPANY REPRESENTATIVE Signature <i>F. Carlin</i> Print Name & Certification Number <i>F CARLIN P00254</i>					

CUSTOMER woodbine Firesys	CONTACT	PHONE 609 861 5174	FAX
ADDRESS 801 Webster st	CITY woodbine	STATE AND ZIP CODE NJ 08270	
HOOD SIZE		DUCT QUANTITY & SIZE 5'X30'	



LABEL ALL APPLIANCES



SIZE

36x 35 (25) 40x 31 24x 32

NOTES/COMMENTS

INCLUDE ALL APPLIANCES, LABEL SIZE AND TYPE

SYSTEM CONNECTED TO ALARM? ☒ YES ☐ NO

NOZZLE QUANTITY

DUCT | PLENUM | APPLIANCE 3

REMOTE PULL LOCATION ☒ YES ☐ NO

OTHER:

Egress

GAS VALVE: ☐ YES ☐ NO SIZE

GAS VALVE STYLE:

☒ ELECTRICAL

☐ MECHANICAL

TYPE: ☐ RELEASE

☐ PULL

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

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.

400074

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

Page 1 of 1

Copy 4

Ship to

WOODBINE ELEMENTARY
801 Webster Street
Woodbine, NJ 08270

To

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

1278

Account Code

11-000-261-420-050-0

Amount

803.48

Date: 08/17/23 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 46898	803.480	803.48

Total for Lines \$803.48

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

BA

Title

Signature



8/23/23

Date

NO ORDER VALID UNLESS SIGNED BY THE SECRETARY



SECRETARY, BOARD OF EDUCATION

RECEIVING COPY