



**CITY OF BOSTON  
FIRE DEPARTMENT**



**Fire Fighter Communication System Compliance Certification**

<b>Installation Address</b>	Address: _____ Name of Bldg (if applicable): _____ Zip Code: _____ Permit # _____	<b>Floors</b>	<b>Certification Type</b>
		Above Grade _____	<input type="checkbox"/> New Installation
		Below Grade _____	<input type="checkbox"/> Contract Update
			<input type="checkbox"/> 5-Year Renewal (survey required)
<b>Radio Technician Certification</b>	I hereby certify that the Fire Fighter Communication System at the above address was installed and tested in accordance with the requirements of the current BFD In-Building Radio Specification and is in compliance with same.		
	Name: _____	FCC License #: _____	
	Employer: _____	Expiration Date: _____	
	Signature: _____	Date: _____	
<b>Maintenance Contract Certification</b>	I hereby certify that a maintenance contract is in place for the Fire Fighter Communication System at the above address. This agreement provides 24 hour by 7 day emergency response within two (2) hours after notification. The BFD Radio Supervisor will be notified within 24 hours if this contract is cancelled. Such notice shall contain the date and time such cancellation is to take effect.		
	Service Provider: _____	Contract Expiration Date: _____	
	Name: _____ Title: _____	Emergency Contact #: _____	
	Signature: _____	Date _____	

*For office use only*

	Acceptable	Comments
Radio Survey		
Monitoring System		
Cabinet Label		
Equipment specifications		
Radio system drawings		
Sample test		
Uplink Gain:		
Downlink Gain:		

*The Sample Testing indicates an acceptable level of radio signal to provide effective firefighter communications.*

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Title: \_\_\_\_\_