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Instructions for

Obtaining

Fire Protection System

Daily Permits

REVISION

Rev No.	DCN No.	Change Summary	Release Date	DCN Initiator	Document Owner
3	DCN0772	Changed name of procedure and associated form – Fire Protection System Daily Permit. Modified Purpose and Scope. Added to Definitions and Associated Documents Sections. Modified Procedure Section. Replaced Appendix A with a new sample permit.	4-4-12	P. O'Dea	P. O'Dea

Prior revision history, if applicable, is available from the Document Control Office.

1. PURPOSE

The purpose of this document is to ensure all College of Nanoscale Science and Engineering (CNSE) facility fire protection system(s):

1). are returned to proper working condition after being placed in 'Monitoring Service Bypass Mode' after testing, maintenance, modification, hot work, particulate (dust) generating activities, etc.

2). testing and modifications are communicated and coordinated with the Facilities, Environmental Health & Safety (EHS) and Security Departments.

3). testing is communicated with employees onsite to avoid confusion and false evacuations.

4). work is performed in accordance with appropriate protocol to maintain fire protection system integrity.

2. SCOPE

2.1 A Fire Protection System Daily Permit (CFM-00005-F1) must be completed:

2.1.1 Anytime work activities within the facility have the potential to affect the fire protection systems (fire alarm and fire sprinkler) and their components including testing, modification and maintenance of the fire protection systems.

2.1.2 Anytime hot work activities will be carried out indoors which could affect the fire protection systems (fire alarm and fire sprinkler). In addition, a Hot Work Permit (EHS-00029-F1) must be completed anytime an activity involves the use of an open flame or spark producing equipment.

2.1.3 Anytime particulate generating work activities will be carried out indoors which could affect the fire alarm system. This includes construction, maintenance or other activities which will generate dust, smoke, particulate, etc. which could accidently activate the fire alarm system. This includes work above ceilings where above ceiling space is a 'return air plenum' such as NFE, NFS and CESTM.

2.2 These work instructions apply to all CNSE employees, tenant employees, contractors and sub-contractors that are engaged in work activities within the CNSE facility.

3. DEFINITIONS

3.1 Testing Includes:

3.1.1 Fire alarm testing (semi-annual, annual or after system modification)

3.1.2 Fire sprinkler testing (quarterly, semi-annual, annual or after system modification)

3.2 Maintenance Includes:

3.2.1 Removing the system from normal operating status to repair, inspect or perform other functions.

3.3 Modification Includes:

3.3.1 Disconnection of any fire alarm or fire sprinkler system device – even if temporarily.

3.3.2 Addition of system components or devices.

3.3.3 Replacement of system components or devices.

3.3.4 Relocation of system components or devices.

3.4 Hot Work Activities:

3.4.1 Including, but not limited to, welding, cutting, brazing, burning, grinding and soldering operations.

3.5 Particulate Generating Activities:

3.5.1 Including but not limited to demolition, sanding, grinding, etc. Also, any activity above suspended ceilings generating dust which could be drawn into HVAC return air systems and activate detectors such as wire/cable pulling.

3.6 Fire Protection System Operator:

3.6.1 The person responsible for placing the fire alarm system in 'Monitoring Service Bypass Mode' and removing the fire alarm system from 'Monitoring System Bypass Mode'. [Security Officer operating fire panel].

3.7 'Requestor' From Fire Protection System Daily Permit Form:

3.7.1 The person on site performing the work listed on the permit. The phone number listed on the permit must be a cell phone number where the 'Requestor' can be reached, not an office number.

3.8 ‘Company’ From Fire Protection System Daily Permit Form:

3.8.1 The company or group performing the work. This should list the subcontractor and contractor, if necessary (i.e. ABC Contractors, Inc. for XYZ Construction Management, Inc.)

3.9 ‘Work Sponsor’ From Fire Protection System Daily Permit Form:

3.9.1 The person the work is being performed for – firm and name to be listed on the permit. This person must be a CNSE employee or tenant employee.

3.10 Impairment:

3.10.1 Rendering a fire protection system in-operable, either the whole or in part. Examples include isolating water flow to a fire sprinkler system, draining a portion of a fire sprinkler system, disconnecting smoke detectors, etc.

3.11 Fire Protection System

3.11.1 Including but not limited to fire alarm systems, smoke detection systems, fire sprinkler systems, fire suppression systems, etc.

4. RESPONSIBILITIES

4.1 Compliance with this procedure is the responsibility of the contractor, tenant, or CNSE employee responsible for the fire protection system work.

5. ASSOCIATED DOCUMENTS

5.1 CFM-00005-F1 Fire Protection System Daily Permit

5.2 CFM-00004 Obtaining Work Authorization Permits

5.3 CFM-00004-F1 Work Authorization Permit Form

5.4 EHS-00029-F1 Hot Work Permit

5.5 CFM-00009 Fire Protection System Modification Procedure (TBD)

5.6 CFM-00009-F1 Fire Protection System Modification Permit Form

5.7 SSM-01003 CNSE Fire Protection Impairment Procedure

6. PROCEDURE

6.1 Fire Protection System Daily Permits:

6.1.1 The Fire Protection System Daily Permit form shall be completed and attached to a Work Authorization Permit form when submitting the work permit for approval. Provide two (2) copies of the permit form for each shift (10 hour period maximum) of the work. One copy of the permit will be retained by the Fire Protection System Operator. The other copy will be returned with the Work Authorization Permit.

6.1.2 Fire Protection System Daily Permits generally shall be submitted three (3) days prior to the start of the work – similar to Work Authorization Permits. However, Fire Protection System Daily Permits which include a "System Impairment" shall be submitted seven (7) calendar days prior to the start of work. This is to allow adequate time to review the affected work area, potential impacts to operations, coordination of fire watches, etc.

6.2 Prior to the start of the work activities, the Requestor shall contact the Security Control Center (SCC) at 518-956-7082. Verbal confirmation shall be received from the Fire Protection System Operator the fire alarm system has been placed in 'monitoring service bypass mode' and the work covered in the work authorization permit can commence.

6.3 Upon completion of the work activities, the Requestor shall contact the SCC and notified them of completion of work activities. The Fire Protection System Operator shall them remove the fire alarm system from 'Monitoring Service Bypass Mode', returning it to normal operation.

6.4 If at the end of the ten (10) hour time limit on the Fire Protection System Daily Permit, the SCC and /or the Fire Protection System Operator has not been contacted by the Requestor, the fire alarm system shall be removed from 'Monitoring Service Bypass Mode', returning it to normal operating condition.

6.5 The Fire Protection System Operator shall confirm completion of the testing, system maintenance, modification or hot work activity and then confirm Part 2 of the permit has been accurately completed.

6.6 The Fire Protection System Operator shall provide a copy of the completed permit for record in the Facility archive.

6.7 A 'Fire Protection System Daily Permit' is provided for reference and example in Appendix A.

7. RECORDS

Completed Fire Protection System Daily Permits shall be kept on file by the Fire Protection System Operator for at least ten (10) years.

8. APPENDIX

Appendix A – 'Fire Protection System Daily Permit' Sample

Appendix A
'Fire Protection System Daily Permit' Sample (see CFM-00005-F1)

COLLEGE OF NANOSCALE SCIENCE & ENGINEERING UNIVERSITY AT ALBANY State University of New York	FIRE PROTECTION SYSTEM DAILY PERMIT	Form Number/Rev # CFM-00005-F1 R4 X2

PART 1: *(Two (2) copies to be completed by 'Requestor' and submitted as sub-permit to a Work Authorization Permit)*

Requestor Information

Requestor: _____ **Cell Phone #:** _____ **Date of Work:** _____

Company: _____ **Work Sponsor:** _____ **Start Time:** _____ **End Time:** _____ (10-hour maximum)

CNSE Contact Information

Emergency Phone # 437-8600 Fire System Operator: Facilities: Pat O'Dea 437-8817 (Office) 281-7487 (Cell) EHS: Bob Segura – EHS 437-8627 (Office) 470-6882 (Cell)

Work Information

Bldg: ☐ CESTM ☐ CUB ☐ HPM ☐ NFC / NFN ☐ NFE ☐ NFS / NFSX ☐ NFX ☐ Substation
Other: _____

Location: Floor: _____ Room / Area: _____

Work Type: ☐ Dust Generation ☐ Hot Work ☐ System Testing ☐ Impairment ☐ Other: _____

System Affected: ☐ Fire Alarm System ☐ Fire Sprinkler System

Work Description: *List relevant tasks from 'description of work' on Work Authorization Permit.*

Approval: _____ *Fire Protection System Operator / Impairment Coordinator* _____ *Date*

PART 2: ***Do Not Write Below This Line – FOR CNSE USE ONLY – Do Not Write Below This Line***

Prior Testing Notification: ☐ *Check if not applicable*

12 hr. Signs Posted	12 hr. Global Email Sent	5 Minute ERT Page/Facilities Call	5 Minute PA Announcement
By_____	By_____	By_____	By_____
Date:_____ Time: _____	Date:_____ Time:_____	Date:_____ Time:_____	Date: _____ Time:_____

Fire Alarm System placed in 'Monitoring Service Bypass Mode' by:		Date:	Time:
Monitoring Service Operator Name:	*Name:*		ID#:
Is Fire Panel in alarm? If no, then enable Fire Panel.	By:	Date:	Time:
Fire Alarm System removed from 'Monitoring Service Bypass Mode' by:		Date:	Time:
Monitoring Service Operator Name:	*Name:*		ID#:

After Testing Notification: ☐ *Check if not applicable*

ERT Page/ Facilities Call	PA Announcement	Global Email Sent	Sign Removal
By_____	By_____	By_____	By_____
Date:_____ Time: _____	Date:_____ Time:_____	Date:_____ Time:_____	Date: _____Time:____