

## INSTALLATION COMPLETION ACKNOWLEDGEMENT

Client Name	Mrs. Chaushalya De Silva
Address	35/K, 1st Lane, Lake Road, Boralesgamuwa
Installation Location (If different)	
Installation Completed Date	

The following equipment has been installed.

No#	Name	Unit Type	Quantity
1	Control Panel 488 ICP-CC488-APR	Nos	1
2	LCD Key Pad CP 508 LW (8 Zone) ICP-CP508LW	Nos	1
3	Blue Line Gen2 PIR Motion Detectors (Indoor) ISC-BPR2-WP12	Nos	3
4	DSRF Receiver ST Wireless Streamline BUS Interface RF3212E	Nos	1
5	Magneic Contact - Surface Brown (Wired MC) LK-152N	Nos	25
6	Mini Horn Speaker 8Ohm 10W	Nos	1
7	Strobe Light	Nos	1
8	Battery - 12V, 8.2Ah	Nos	1
9	WIRELESS KEYFOB FOUR BUTTON RFKF-FB	Nos	2

Were you trained on :

<b>Intruder Detection System</b> : How to Arm & Disarm the IDS, How to Add User Codes, How to Activate Fire, Medical , Panic & Duress, How to Use of Remote Controller , Fault Diagnosis, Isolating Zone ,What action to take during heavy lightening to protect the panel.	Yes	No
<b>CCTV System</b> : Live Viewing, Play Bäck Viewing (including Time & Date 'search) , PTZ Control, Remote Viewing, Taking Backups ,What action to take during heavy lightening to protect the System.	Yes	No
<b>Fire Alarm System</b> : Activating Alarms through MCP , Identifying Zones, Deactivating after Alarm.	Yes	No
<b>Guard Tour System</b> : Test Tour, Downloading Data to PC, Taking Reports.	Yes	No
<b>Access Control System</b> : Adding / Deleting Cards, Software Training, Emergency Door release.	Yes	No
<b>Vehicle Tracking System</b> : Software Training.	Yes	No

Comments :

On behalf of **M3Force (Pvt) Ltd**


clka  
Signature

Chintana Deshpriya  
Name

Technical Manager  
Designation

11/01/2019  
Date

On behalf of **Customer**

  
Signature & Company Seal

R.L.C.P. W. De Silva Wijerathne.  
Name

Company Directress.  
Designation

11/01/2019  
Date