



CERTIFICATION-PUBLIC SAFETY RADIO SYSTEM COVERAGE

BUILDING PERMIT NO. \_\_\_\_\_

BUILDING ADDRESS: \_\_\_\_\_

CERTIFICATION TESTING DATE: \_\_\_\_\_

FCC-Certified Technician to provide checkmark for one of the following:

\_\_\_ (Amplification System Provided) I certify that installation of the necessary amplification system, its associated components, and the 2 inch conduit, from the lowest floor to the roof, have been installed per plans, specifications and Irvine Municipal Code Section 5-9-605. (Note: amplification system requires OCCOMM clearance, see bottom of page)

\_\_\_ (Amplification System Not Required) I certify that the installation of the 2 inch conduit, from the lowest floor to the roof, has been installed per plans, specifications and Irvine Municipal Code Section 5-9-605.

I further certify that radio coverage testing has been conducted and radio coverage has been found to be meet the minimum requirements of Irvine Municipal Code Section 5-9-604 for (check one) Both DAQ and Signal Strength \_\_\_ DAQ only \_\_\_.

\_\_\_\_\_  
(FCC-Certified Technician name)

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(FCC License No.)

\_\_\_\_\_  
(Phone Number)

\_\_\_\_\_  
(Technician Company Name)

\_\_\_\_\_  
(Date)

\_\_\_ OCCOMM Clearance Non-interference check and alarm programming verification. (Only required when amplification system provided)

\_\_\_ Received: One copy of As-built plans per City of Irvine Public Radio System Coverage Testing and Acceptance Procedure (or copy of original approved plans if design was not deferred)

\_\_\_\_\_  
(OCCOMM Representative)

\_\_\_\_\_  
(Signature)

**(INTERNAL USE: Inspector** to check the appropriate lines and collect testing report and as-builts as needed; **permit specialist** to update permit record, file form, testing report, and as-builts for records retention)

Testing Report Rec'd \_\_\_

Deferred decision: \_\_\_ Amplification System provided, set of as-builts collected. (800.1)

\_\_\_ Amplification System not required. (800.2)