**NOTIFICATION AND SCHEDULING SYSTEM** (NSS)

Upgrade Project

 Acceptance Checklist

**Site Name:**

**Inspector Name:**

**Inspection Date:**

This form is to be used by AISD personnel to document observations, issues, and punch list items discovered during post-installation site inspection(s). The inspector should bring the pre-installation design documentation (if applicable), the post-installation “as-built” documentation, the most current punch list, and a camera to document any issues. **AISD will not accept a school as finished until ALL documentation is correct and delivered to AISD.**

**MDF/IDFs:**

|  |  |  |
| --- | --- | --- |
| **Accepted** | **Description** | **Comments** |
|  | 1. Notification and Scheduling System
 |  |
|  | * 1. Is equipment installed in as-built?
 |  |
|  | * 1. Does workmanship installation follow industry standards specifications and manufactures instructions?
 |  |
|  | * 1. Is the PA System grounded properly?
 |  |
|  | * 1. Is the PA System backed up by UPS power?
 |  |
|  | * 1. Are all cable terminations neatly dressed, placed in wire management and correctly labeled?
 |  |
|  | * 1. Is all existing shielded cable grounded at the punch blocks?
 |  |
|  | * 1. Are inside/outside speakers installed as specified by manufacturer?
 |  |
|  | H. Remove all old PA legacy equipment not being used consoles, cabinets, cards, speakers etc. |  |
|  | I. is the Amplifier sized accordingly? Including 25% growth? |  |
|  | 1. Programming
 |  |
|  | * 1. Has all software been installed for a fully functioning PA System with mass communication?
 |  |
|  | * 1. Are the School’s existing bell schedules programmed?
 |  |
|  | * 1. Has the correct Zones and Tones been added?
 |  |
|  | * 1. Does each classroom, office, library, gym etc. room numbers correspond to the PA call number?
 |  |
|  |  |  |

 **Campus:**

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| --- | --- | --- |
| **Accepted** | **Description** | **Comments** |
|  | III. Testing & Training |  |
|  | * 1. Verify access code from Campus Cisco phone to PA system repeat for a total of four times to test FXO/SIP connection.
 |  |
|  | * 1. Verify emergency All Call and Zone paging with PA console and Cisco campus phones.
 |  |
|  | * 1. Verify each speaker connection by making a main office intercom call to each classroom, office, library, gym, cafeteria etc.
 |  |
|  | * 1. Test remote speaker volume control and verify acceptable level of loudness and clarity for all speakers.
 |  |
|  | * 1. Manually test bell tones.
 |  |
|  | * 1. Provide training for Office staff.
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|  |  G. Provide room call list to office staff. |  |
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| **Accepted** | **Description** | **Comments** |
|  | IV. Documentaion |  |
|  | 1. Has documentation been provided visio, cd, etc. to Telecom or NSS Department?
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|  |  B. Did office staff receive complete PA operation documents? |  |
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Check Speaker location, switchport accuracy, labeling, etc.

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| --- | --- | --- | --- | --- | --- |
| AP# | RM# | Drop# | Switch | Switchport | Comments |
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