



Crosslake Community School
35808 County Road 66
P.O. Box 1020
Crosslake, Minnesota 56442
218-692-5437

October 30, 2023

Lease Aid Review Team
Division of School Finance
Minnesota Department of Education
1500 Highway 36 West
Roseville, MN 55113

Dear Lease Aid Review Team:

Please consider this letter a formal request for Lease Aid for Crosslake Community School for the 2023-2024 school year.

If there are any questions regarding this application or anything else you need from me, please do not hesitate to contact me.

Thank you for your assistance.

Sincerely,

Annette Klang
Director of Seat-Based Learning
Crosslake Community School
Aklang@crosslakekids.org
218-692-5437 ext 103

FY 2024 Charter School Lease Aid Certification Form – Part 1

This form is to certify that your school meets certain criteria and complies with statutes for charter school lease aid. Please complete both pages of this form and return with your lease aid request letter.

Charter School Name: Crosslake Community School		Charter School Number: 4059-07	
Address: 35808 County Rd 66	City: Crosslake	State: MN	ZIP Code: 56442
Contact Name: Kelly Bittner	Telephone Number: 218-537-6256	Email Address: kellybittner@crosslakekids.org	

Checking the items below indicates your compliance with the following regulations and statutes:

- Federal, State and Local Requirements:** The charter school building meets health and safety codes per [Minnesota Statutes 2022, section 124E.03, subdivision 2\(a\)](#), which states in part, “A charter school shall meet all federal, state, and local health and safety requirements applicable to school districts.” (See Attachment D).
- Building Lease Aid:** [Minnesota Statutes 2022, section 124E.22](#), states, in part, “A charter school must not use the building lease aid it receives for custodial, maintenance service, utility, or other operating costs.”
- Disabled Accessibility:** The charter school administration and school board are aware of the requirements of Title II of the Americans with Disabilities Act (ADA) and will comply with those requirements.
- Lease is not with a Related Party:** The charter school leases property from a non-profit corporation under chapter 317A or a cooperative under chapter 308A or leases property from a for-profit organization where there are no related party affiliations as defined in Minnesota Statutes 2022, section 124E.13, subdivision 2 (a).

(a) A charter school must not enter into a lease of real property with a related party unless the lessor is a nonprofit corporation under chapter 317A or a cooperative under chapter 308A, and the lease cost is reasonable under section 124E.22, paragraph (a), clause (1).

(b) For purposes of this section and section 124E.02:

- (1) “Affidavit” means a written statement the authorizer submits to the commissioner for approval to establish a charter school under section 124E.06, subdivision 4, attesting to its review and approval process before chartering a school.
- (2) "Affiliate" means a person that directly or indirectly, through one or more intermediaries, controls, is controlled by, or is under common control with another person;
- (3) “Control” means the ability to affect the management, operations, or policy actions or decisions of a person whether by owning voting securities, by contract or otherwise.
- (4) “Immediate family” means an individual whose relationship by blood, marriage, adoption, or partnership is more remote than first cousin.
- (5) “Person” means an individual or entity of any kind.
- (6) “Related party” means an affiliate or immediate relative of the other interested party, an affiliate of an immediate relative who is the other interested party, or an immediate relative of an affiliate who is the other interested party.
- (7) For purposes of this chapter, the terms defined in section 120A.05 have the same meanings.

FY 2024 Charter School Lease Aid Certification Form – Part 1 (continued)

Charter School Name: Crosslake Community School Charter School Number: 4059-07

- (c) A lease of real property to be used for a charter school, not excluded in paragraph (a), must contain the following statement: "This lease is subject to Minnesota Statutes 2022, section 124E.13, subdivision 2."
- (d) If a charter school leases space from a related party and the charter school subsequently closes, the commissioner has the right to recover from the related party any lease payments in excess of those that are reasonable under section 124E.22, paragraph (a), clause (1).

School districts are neither non-profits nor cooperatives, and therefore do not fall under this exception and are ineligible to rent to schools for which they authorize. This prohibition does not prevent school districts from renting to charter schools for which they are not the authorizer.

Fire Code Compliance: The charter school has been inspected by the Minnesota State Fire Marshal or its local designee within the last three years for compliance with the Minnesota State Fire Code for Educational Occupancy and has an inspection report showing that any outstanding violations discovered during the initial inspection have been remedied.

Date of last final/closed fire inspection: 8/15/2023

I hereby verify the information provided in Part 1 of the FY 2024 Charter School Lease Aid Certification Form to be true and correct.

Kelly Bittner

Print Name of Person Preparing Form

Kelly Bittner



Signature of Person Preparing Form

11/01/2023

Date

Jared Griffin

Print Name of Board Chair

Jared Griffin



Signature of Board Chair

11/01/2023

Date

FY 2024 Charter School Lease Aid Certification Form – Part 2

Charter School Name and Address: Crosslake Community School	Charter School Number: 4059-07
Approved FY 2024 Authorizer: Osprey Wild	Building Owner/Lessor Name and Address: The Lake Foundation
Will this be the first time your charter serves students at this location? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

Lease Information

Square Footage: 36,160 sq/ft	Total July 1, 2023, through June 30, 2024, sum certain annual lease cost: \$710,144
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Is the lessor an affiliated nonprofit building corporation? Yes No

If yes, what date was the affiliated nonprofit building corporation formed? _____

If yes, what date was the lease agreement with the affiliated nonprofit building corporation last modified? _____

Does the affiliated nonprofit building corporation own the facility? Yes No

Does the affiliated nonprofit building corporation lease to a non-school tenant in the building? Yes No

If answered yes, please provide MDE a copy of the lease agreement with the non-school tenant.

Are there any expenses included in your sum certain annual lease cost that will be paid to the landlord in FY 2024 which include: custodial, maintenance services, utilities, Common Area Maintenance (CAM) costs, landscaping, snow removal, lawn care costs, property taxes, property insurance for the building that are paid to the landlord or property management fees? Yes No

Property Management fees that are eligible lease aid costs include accounting expenses, advertising, office expenses, and administrative duties related to managing the property. If any of these costs apply, provide a list of the purposes and amounts.

Property management fees that are not eligible for lease aid include any CAM costs, utilities, custodial and/or fees such as maintenance, landscaping, snow removal, lawn care costs, license, leasing, late, vacancy, eviction. Please provide a list of the purposes and amounts to be subtracted from the sum certain annual cost above.

Are there any allowable expenses not included, that are being paid to the Landlord in FY 2024, that the school wishes to submit and add to the sum certain annual cost listed above (e.g. allowable costs: property taxes, property insurance and/or property management fees)? Yes No

Allowable Property Management fees can include accounting expenses, advertising, office expenses, and administrative duties related to managing the property. If yes, please provide a list of the purposes and amounts below.

Allowable property taxes and property insurance paid to the landlord. If yes, please provide the amounts for each.

FY 2024 Charter School Lease Aid Certification Form – Part 2 (continued)

Charter School Name Crosslake Community School Charter School Number 4059-07

Is the charter school currently delinquent with any lease payments? If yes, attach a list of the due dates, amounts owed, and payee(s).	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
A sum certain annual cost and a closure clause as defined in Minnesota Statutes 2022, section 124E.22, paragraph (a) (3) (i) and (ii), has been written into the lease.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Does the charter school have programs which serve prekindergarten children?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
If yes, are the programs instructional?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Has the school received approval for “Early Learning Supplemental Affidavit?”	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Note: If no approval is on file, please clearly identify the space used, square footage, and time usage for these programs.	
Does the charter school rent out any portion of its facilities? If yes, include copies of subleases.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Note: Please clearly identify the space used, square footage, and time usage for these sublease agreements.	

I hereby verify the information provided in Part 2 of the FY 2024 Charter School Lease Aid Certification Form to be true and correct.

Kelly Bittner

Print Name of Person Preparing Form

Kelly Bittner

Signature of Person Preparing Form



11/01/2023

Date

Jared Griffin

Print Name of Board Chair

Jared Griffin

Signature of Board Chair



11/01/2023

Date

FY 2024 Charter School Lease Aid Certification Form – Part 3

Board Member Certification For Leases With a NON-PROFIT Lessor

List the ***name and address*** of the Building Owner/Lessor for each lease agreement covered by this certification.

Non-Profit Lessor 1: Lakes Area Kids Enrichment Foundation / PO Box 143 / Crosslake, MN 56442

Non-Profit Lessor 2: _____

Non-Profit Lessor 3: _____

Non-Profit Lessor 4: _____

Non-Profit Lessor 5: _____

Was the lease with your Building Owner/Lessor entered into or last modified ON or BEFORE August 1, 2009? If Yes, Complete Box A below. If No, Complete Box B.

Box A

CHECK ONLY ONE OF THE FOLLOWING STATEMENTS:

- I hereby certify **I am not** an employee or agent of, or a contractor with, or a board member of, the charter school's non-profit lessor(s), listed above as number(s) _____.
- I hereby certify that **I am** an employee or agent of, or a contractor with, or a board member of, the charter school's non-profit lessor(s), listed above as number(s) _____, and that I hereby disclose such conflict(s) to the commissioner, as follows: _____

(Please note that disclosing these conflicts does not necessarily negate any conflicts of interest that may be present under Minnesota's non-profit law, Minnesota Statutes 2022, chapter 317A).

Box B

CHECK ONLY ONE OF THE FOLLOWING STATEMENTS:

- I hereby certify that neither, I, nor my immediate family member, nor my partner, is an owner, employee or agent of, or a contractor with, the above-named lessor(s) (Minn. Stat. 124E.14(a)).
- I hereby certify that I, or an immediate family member, or my partner, has a financial or other interest in the above-named lessor(s), I have not participated in selecting, awarding or administering the above-named lease agreement(s). (Minn. Stat. 124E.14(a) [2022]).

Jared Griffin

Print Name of Charter School Board Member

Jared Griffin



Charter School Board Member Signature

05/26/2023

Date

FY 2024 Charter School Lease Aid Certification Form – Part 3

Board Member Certification
For Leases With a NON-PROFIT Lessor

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Non-Profit Lessor 2:

Non-Profit Lessor 3:

Non-Profit Lessor 4:

Non-Profit Lessor 5:

Was the lease with your Building Owner/Lessor entered into or last modified ON or BEFORE August 1, 2009? If Yes, Complete Box A below. If No, Complete Box B.

Box A

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I hereby certify that I am an employee or agent of, or a contractor with, or a board member of, the charter school's non-profit lessor(s), listed above as number(s), and that I hereby disclose such conflict(s) to the commissioner, as follows:

(Please note that disclosing these conflicts does not necessarily negate any conflicts of interest that may be present under Minnesota's non-profit law, Minnesota Statutes 2022, chapter 317A).

Box B

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I hereby certify that I, or an immediate family member, or my partner, has a financial or other interest in the above-named lessor(s), I have not participated in selecting, awarding or administering the above-named lease agreement(s). (Minn. Stat. 124E.14(a) [2022]).

Chris Rhinehart

Print Name of Charter School Board Member

Handwritten signature of Chris Rhinehart



Charter School Board Member Signature

08/30/2023

Date

FY 2024 Charter School Lease Aid Certification Form – Part 3

Board Member Certification For Leases With a NON-PROFIT Lessor

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Box A

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(Please note that disclosing these conflicts does not necessarily negate any conflicts of interest that may be present under Minnesota's non-profit law, Minnesota Statutes 2022, chapter 317A).

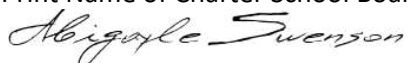

Box B

CHECK ONLY ONE OF THE FOLLOWING STATEMENTS:

- I hereby certify that neither, I, nor my immediate family member, nor my partner, is an owner, employee or agent of, or a contractor with, the above-named lessor(s) (Minn. Stat. 124E.14(a)).
- I hereby certify that I, or an immediate family member, or my partner, has a financial or other interest in the above-named lessor(s), I have not participated in selecting, awarding or administering the above-named lease agreement(s). (Minn. Stat. 124E.14(a) [2022]).

Abigayle Swenson

Print Name of Charter School Board Member

Charter School Board Member Signature

08/30/2023

Date

FY 2024 Charter School Lease Aid Certification Form – Part 3

Board Member Certification For Leases With a NON-PROFIT Lessor

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Box A

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(Please note that disclosing these conflicts does not necessarily negate any conflicts of interest that may be present under Minnesota's non-profit law, Minnesota Statutes 2022, chapter 317A).

Box B

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- I hereby certify that I, or an immediate family member, or my partner, has a financial or other interest in the above-named lessor(s), I have not participated in selecting, awarding or administering the above-named lease agreement(s). (Minn. Stat. 124E.14(a) [2022]).

Colin Williams

Print Name of Charter School Board Member

Colin Williams



Charter School Board Member Signature

08/30/2023

Date

FY 2024 Charter School Lease Aid Certification Form – Part 3

Board Member Certification For Leases With a NON-PROFIT Lessor

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Non-Profit Lessor 5: _____

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Box A

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(Please note that disclosing these conflicts does not necessarily negate any conflicts of interest that may be present under Minnesota's non-profit law, Minnesota Statutes 2022, chapter 317A).

Box B

CHECK ONLY ONE OF THE FOLLOWING STATEMENTS:

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- I hereby certify that I, or an immediate family member, or my partner, has a financial or other interest in the above-named lessor(s), I have not participated in selecting, awarding or administering the above-named lease agreement(s). (Minn. Stat. 124E.14(a) [2022]).

Josef Garcia

Print Name of Charter School Board Member



Charter School Board Member Signature

10/04/2023

Date

FY 2024 Charter School Lease Aid Certification Form – Part 3

Board Member Certification For Leases With a NON-PROFIT Lessor

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Non-Profit Lessor 3: _____

Non-Profit Lessor 4: _____

Non-Profit Lessor 5: _____

Was the lease with your Building Owner/Lessor entered into or last modified ON or BEFORE August 1, 2009? If Yes, Complete Box A below. If No, Complete Box B.

Box A

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- I hereby certify that **I am** an employee or agent of, or a contractor with, or a board member of, the charter school's non-profit lessor(s), listed above as number(s) _____, and that I hereby disclose such conflict(s) to the commissioner, as follows: _____.

(Please note that disclosing these conflicts does not necessarily negate any conflicts of interest that may be present under Minnesota's non-profit law, Minnesota Statutes 2022, chapter 317A).

Box B

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- I hereby certify that I, or an immediate family member, or my partner, has a financial or other interest in the above-named lessor(s), I have not participated in selecting, awarding or administering the above-named lease agreement(s). (Minn. Stat. 124E.14(a) [2022]).

kren c teff

Print Name of Charter School Board Member

Karen C. Teff



Charter School Board Member Signature

05/26/2023

Date

FY 2024 Charter School Lease Aid Certification Form – Part 3

Board Member Certification For Leases With a NON-PROFIT Lessor

List the ***name and address*** of the Building Owner/Lessor for each lease agreement covered by this certification.

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Non-Profit Lessor 2: _____

Non-Profit Lessor 3: _____

Non-Profit Lessor 4: _____

Non-Profit Lessor 5: _____

Was the lease with your Building Owner/Lessor entered into or last modified ON or BEFORE August 1, 2009? If Yes, Complete Box A below. If No, Complete Box B.

Box A

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- I hereby certify that **I am** an employee or agent of, or a contractor with, or a board member of, the charter school's non-profit lessor(s), listed above as number(s) _____, and that I hereby disclose such conflict(s) to the commissioner, as follows: _____.

(Please note that disclosing these conflicts does not necessarily negate any conflicts of interest that may be present under Minnesota's non-profit law, Minnesota Statutes 2022, chapter 317A).

Box B

CHECK ONLY ONE OF THE FOLLOWING STATEMENTS:

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- I hereby certify that I, or an immediate family member, or my partner, has a financial or other interest in the above-named lessor(s), I have not participated in selecting, awarding or administering the above-named lease agreement(s). (Minn. Stat. 124E.14(a) [2022]).

Clare Thompson

Print Name of Charter School Board Member

Clare Thompson



Charter School Board Member Signature

05/26/2023

Date

FY 2024 Charter School Lease Aid Certification Form – Part 3

Board Member Certification For Leases With a NON-PROFIT Lessor

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Non-Profit Lessor 5: _____

Was the lease with your Building Owner/Lessor entered into or last modified ON or BEFORE August 1, 2009? If Yes, Complete Box A below. If No, Complete Box B.

Box A

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(Please note that disclosing these conflicts does not necessarily negate any conflicts of interest that may be present under Minnesota's non-profit law, Minnesota Statutes 2022, chapter 317A).

Box B

CHECK ONLY ONE OF THE FOLLOWING STATEMENTS:

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- I hereby certify that I, or an immediate family member, or my partner, has a financial or other interest in the above-named lessor(s), I have not participated in selecting, awarding or administering the above-named lease agreement(s). (Minn. Stat. 124E.14(a) [2022]).

Mike Neumann

Print Name of Charter School Board Member

Mike Neumann



Charter School Board Member Signature

09/04/2023

Date

FY 2024 Charter School Lease Aid Certification Form – Part 4

Charter School Assurances

[1] I assure that Crosslake Community School charter school has looked for facilities that comply with Minnesota Statutes 2022, section 124E.03, subdivision 2(a), and section 124E.13, subdivision 1 (2022).

Name of Landlord The Lake Foundation

Is this landlord a sectarian (religious) organization? (Please check one) Yes No

If Yes, please complete parts a, b and c below:

a. Identify any involvement of any of the charter school's directors, administrators, or teachers in the sectarian organization. (*Please check one*) Yes No

b. Identify any telephone or fax numbers, email addresses, employer identification numbers, and employees that the charter school shares with the sectarian organization. (*Please check one*) Yes No

c. Identify and describe any activities by the sectarian organization in support of your school, including, but not limited to, fundraising, student recruitment, promotion, any claimed affiliation with your school and sponsorship of school programs or events. (*Please check one*) Yes No

[2] Crosslake Community School charter school has taken steps to maintain nonsectarian school facilities in compliance with Minnesota Statutes 2022, section 124E.06, subdivision 3(b), such that there are no religious texts, symbols, quotations, or objects displayed in school facilities on school days.

Yes No

if No, please complete Parts a and b below.

a. If religious texts or multiple substantive quotations from religious texts are used in any classes or teaching materials other than those appearing as part of survey classes that teach about multiple religions), describe the texts or materials and quotations:

b. Describe all prayers, calls to prayers, invocations, readings of religious texts, and religious greetings that have been delivered in connection with school activities:

FY 2024 Charter School Lease Aid Certification Form – Part 4 (continued)

[3] I assure that if Crosslake Community School charter school allows religious or other activities on school property during non-instructional time, there is a board-adopted policy allowing equal access to all groups and that such access otherwise complies with Minnesota Statutes 2022, section 124E.06, subdivision 3(b).

Annette Klang

Print Name of Charter School Director

Annette Klang  Verified by signNow
11/01/2023 12:58:59 UTC
6c08ab15d4d345349a2f

Charter School Director's Signature

11/01/2023

Date

Jared Griffin

Print Name of Board Chair

Jared Griffin  Verified by signNow
11/01/2023 13:23:36 UTC
746b313febd84356bdf9

Board Chair's Signature

11/01/2023

Date

Total Revenues and Expenditures – Funds -01, 02, 04– FY 2024

Charter School Name Crosslake Community School Charter School Number 4059-07Average Daily Membership (ADM) 455.00 Pupil Units 512.00

General Fund 01 - Revenues	Amount	
General Education Aid	4,737,862	
Title Programs	112,305	
Lease Aid	639,130	
Special Education	918,675	
Other (List) Local Revenue	32,689	
Federal ESSER Grants	105,816	
Total General Fund 01 Revenues	6,546,477	
Food Service Fund 02 Revenues	Amount	
Federal Revenues	64,278	
State Revenues	53,069	
Ala Carte/Other	35,000	
Fund Transfer	0	
Total Food Service Fund 02 Revenues	152,347	
Community Service Fund 04 - Revenues	Amount	
Pre-K Fees	84511	
Summer Camp Fees	0	
Other Programs	34,400	
Total Community Service Fund 04 - Revenues	118,911	

General Fund 01 - Expenditures	Amount	Full-Time Equivalent (FTE)	
Administrative Salary and Benefits	584,235	12	
Instructional Salary and Benefits	3,625,703	71	
Non-Instructional Salary and Benefits	193,447	5	
Custodial/Maintenance Salary and Benefits	55,709	2	
Other Salary and Benefits	0		
Utilities	50,000		
Property Taxes	0		
Building Maintenance and Repair	4,500		
Building Lease	710,144		
Transportation	256,172		
All Other Purchased Services	460,591		
Supplies and Materials	436,073		
Capital Expenditures	0		
All Other Expenditures	40,000		
Total General Fund 01 Expenditures	6,398,324		
Food Service Fund 02 Expenditures			
Salaries	68,822		
Benefits	20,025		
Contracted Services/Other	63,500		
Total Food Service Fund 02 Expenditures	152,347		
Community Service Fund 04 Expenditures			
Salaries	88,010		
Benefits	23,551		
Contracted Services/Other Expenses	7,350		
Total Community Service Fund 04 Expenditures	118,911		
	Fund 01	Fund 02	Fund 04
Total Revenues less Expenses	120,903	0	0
Beginning Fund Balance	1,717,388	0	0
Ending Fund Balance	1,838,291	0	0

FY 2024 Charter School Lease Aid Application Checklist

Charter School Name Crosslake Community School Charter School Number 4059-07

Building and General Lease Information

- Cover letter addressed to MDE formally requesting lease aid for FY 2024.
- FY 2024 Charter School Lease Aid Application Form – Part 1 (Pages 6-7 attached).
- FY 2024 Charter School Lease Aid Application Form – Part 2 for each address where students are served (Pages 8-9 attached).
- Lease – A copy of the lease agreement including all attachments and/or addenda and signed by both the lessor and the lessee. **Any new lease or any amendment to an existing lease, executed on or after May 18, 2014, must contain a sum certain annual cost and a closure clause as defined in Minnesota Statutes 2022, section 124E.22.**
- A Fire Inspection Report from the Minnesota State Fire Marshal or its local designee within the last three years. The report must show that any outstanding violations discovered during the initial inspection have been remedied.
- Prekindergarten programs clearly identified by the space used, square footage, and time usage.
- Sublease agreement(s) – A copy of the sublease agreement(s) including all attachments and/or addenda and signed by both the lessor and lessee. Subleased space is clearly identified by the space used, square footage, and time usage.

New Charter Schools or Charter Schools with New or Expanded Facilities Only

- Construction – Type of construction (brick, wood frame, etc.) and age of the building.
- Photos – Interior and exterior photos of the leased facility. **Please do not include photos that contain people, as their identity has to be redacted in case of a public data request.**
- Schematic and Space Configuration – Include a schematic of the building and identify the leased space and the programmatic use of each space. Indicate the square footage of each space.
- Certificate of Occupancy (Group E) – A copy of the certificate as issued by the local building official. The certificate **must** show the building is a Group E classification. There can be instances where the Certificate of Occupancy will have a Group E classification for the educational space and a Group A classification for the auditorium or gym space.
- Emergency Action Plan – A plan meeting the Department of Public Safety’s criteria for evacuation of the facility in an emergency.

Board Information

- Listing of current board members, including their term start and end dates and their relationship to the school (i.e., parent, staff, non-parent community member, or ex-officio).
- FY 2024 Charter School Lease Aid Certification Form – Part 3 for each board member (Pages 10-11 attached).
- Schools with an Affiliated Nonprofit Building Corporation (ABC) must submit a list of ABC board members.
- FY 2024 Charter School Lease Aid Certification – Part 4 (Pages 12-13 attached).

Financial Information

- General Fund/Food Service Fund/Community Service Fund Budgets – FY 2024 Attachment A (Page 14 and 15 attached) – An operating budget with detailed revenue and expense items such that the lease cost and revenue are readily identifiable. The budget submission must also include staff Full-Time Equivalent (FTE) as well as student Average Daily Membership (ADM) and pupil units. Schools may submit budgets in a different format, but must also complete and submit Attachment A.

Kelly Bittner, HR/Business Manager

Kelly Bittner



11/01/2023

Name and Position of Person Preparing Form

Signature of Person Preparing Form

Date

Fire Alarm Inspection Report

OFFICE (218) 692-3473 FAX (866) 378-4681
 EMAIL info@birchdalefireandsecurity.com
 P.O. Box 927, Crosslake, MN 56442



INVOICE# _____ OCCUPANCY CODE# _____ MONITORING ACCT# 7105-7829 STATE LICENSE # TS00556 DATE 8/15/23

LOCATION CROSSLAKE COMM. ADDRESS 35808 CITY RD. 66

CITY CROSSLAKE STATE MN ZIP 56442 PHONE _____

BI-MONTHLY SEMI-ANNUAL
 MONTHLY ANNUAL
 QUARTERLY FINAL

CONTROL PANEL

MANUFACTURER SK MODEL # IFP-100 EVS LOCATION MAIN OFFICE

BATTERIES VOLT W/ CHARGER OK NOTE 10 AMP POWER SOURCE 120VAC LPI-71 CIRC. BRKR. LOCATION NO. _____ LOCKED CIR. BRKR. YES NO DEDICATED CIR. YES NO

VOLT. W/O CHARGER OK NEW 2021/AVG

TROUBLE CONDITIONS RESPONSE TO ZONE TROUBLE NORMAL NOTE# _____ SIGNAL TROUBLE NORMAL NOTE# _____ AC/OP POWER LOSS NORMAL NOTE# _____ EARTH GROUND NORMAL NOTE# _____

COMMUNICATOR

MANUFACTURER DMP MODEL # COLCOM LOCATION ABOVE PANEL

BATTERIES VOLT W/ CHARGER _____ NOTE N/A POWER SOURCE _____ CIRC. BRKR. LOCATION NO. _____ LOCKED CIR. BRKR. YES NO DEDICATED CIR. YES NO

VOLT. W/O CHARGER _____ NEW _____

CENTRAL MONITORING STATION RESPONSE TO ZONE ALARM NORMAL NOTE# _____ TROUBLE CONDITIONS RESPONSE TO ZONE TROUBLE NORMAL NOTE# _____ SIGNAL TROUBLE NORMAL NOTE# _____ AC/OP POWER LOSS NORMAL NOTE# _____ EARTH GROUND NORMAL NOTE# _____

COMMUNICATOR PRIMARY # _____ COMMUNICATOR SECONDARY # _____

AUXILIARY EQUIPMENT & FUNCTIONS (Annunciator, Elevator Recall, HVAC Shutdown, etc.)

Annunciators: _____
 NAC Panels: RPS-1000/EVM-50 IN ELECTRICAL RM 4 10 AMP HR BATTERIES 8/2021
 Elev Recall: OK
 HVAC Shutdown: OK

Last Sprinkler Inspection Date: 8/8/23 Sprinkler Contractor: B/Z

DEVICE					MFG. & MODEL#
Manual Stations	2				
Heat Detectors					<u>IDP</u>
Smoke Detectors	8				Heal Detectors Install Date: _____
Smoke Det with LF					Smoke Detector Sensitivity Result: _____ Date: _____
C.O. Detectors					Smoke Detector Sensitivity Result: _____ Date: _____
Duct Detectors	3				C.O. Detector End of Life Date: _____
Waterflow	1				<u>SYSTEM SENSOR</u>
Low air					
Tampers	7				
Kitchen Hood System					<u>NARDINI NOV.22</u>
Horn/Strobes					
Strobes					
Door Holders					
Fire Extinguishers	2.5lb	5lb	10lb	20lb	

Notifications - Recommendations:

DOCT SWITCH 1 IN JANITOR RM BY ELEV. EQUIP
2ND LEVEL 2/3 IN 2ND FUR MACH ROOM RM
SMK FOR ELEV. 20' HIGH. W/F / 2 TS IN 2ND FUR. MACH RM

CUSTOMER SIGNATURE _____ SERVICE REP SIGNATURE [Signature]



BRETH-ZENZEN FIRE PROTECTION, LLC
 C126
 8053 Sterling Drive
 St. Joseph, MN 56374
 Phone: 320-363-0900
 Fax: 320-363-0901

**COVERS THE MINIMUM REQUIREMENTS OF NFPA 25
 ANNUAL INSPECTION REPORT**

Bill To: Crosslake School
35808 CTY RD 66
Crosslake MN 56422

Location: _____

General Information	Yes	No	N/A
Is the building fully sprinkled?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Spare head box with heads and wrench securely mounted?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Stock/storage a minimum of 18"/36" below sprinkler heads and ceiling tiles in place?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are all gauges in good condition & showing normal pressure?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wet system areas appear to be heated adequately?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
System left in service?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are All sprinkler system control valves & all other valves in the appropriate position?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are system control valves LOCKED / SEALED / TAMPERED?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Exterior alarms operational?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alarm panel clear?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inspectors test connection(s) ok?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Has the building been altered since last inspected?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

General Information	Yes	No	N/A
Sprinklers appear to be free of corrosion, tape, paint & physical damage?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are all sprinklers less than 50 years old?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sprinklers appear to be of proper temperature rating?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Riser appears to be in good condition & unobstructed?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hydraulic nameplate ok?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pipe appears to be in good conditions?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Antifreeze tested & ok?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
FDC & caps ok?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sprinkler system main drain test completed & ok?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dry pipe valves in service & in good condition?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Were low points drained?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Are accelerators in good condition?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
All dry valves trip tested & ok?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Dry pipe valves in heated areas?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Main Drain & Alarm Test					
System Location					
Static Pressure Before (PSI)	95				
Residual Pressure (PSI)	90				
Static Pressure After (PSI)	100				
Local Alarm ok (Y/N)	Yes				
Flow Time	35				

Standpipe						
Top Floor Gauge				PSI		
Class of Service	1	2	3	Yes	No	N/A
System equipped with flow switch?				<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Hose valve free of physical damage?				<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Hose Valve outlets with cap?				<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Antifreeze Systems						
Location						
Tested at						

Dry Valves		Q.O.D	Q.O.D	Q.O.D
Make	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Model				
Water Pressure				
Air Pressure				
Trip Pressure				
Trip Time				
Time to Test Connection				

Was full trip test performed? N/A
 Date of last full trip _____
 5 Year Inspection completed on: 2020

Comments and Inspection Observations: System operation is satisfactory.

Inspected by [Signature] Date 8/3/2023 Customer Signature _____



BRETH-ZENZEN FIRE PROTECTION, LLC

8053 Sterling Drive, Suite 101
 St. Joseph, MN 56374
 Phone: 320-363-0900
 Fax: 320-363-0901

BACKFLOW PREVENTER TEST

JOB NAME: **Crosslake School**

ADDRESS: 35808 CTY RD 66 Cross Lake MN

LOCATION OF DEVICE: 2nd floor mechanical room

TYPE OF ASSMBLY: RPZ DCV WATER PRESSURE: 100 PSI TEST KIT #: 01171025 SIZE: 2.5"

MANUFACTURER: Deringer MODEL: DC SERIAL #: 0457

RELIEF VALVE	CHECK VALVE #2 TEST #1 BACKPRESSURE	CHECK VALVE #1	CHECK VALVE #2 TEST #2 CONFIRMATION
Opened at _____ psi <input type="checkbox"/> Did Not Open	<input type="checkbox"/> Leaked <input type="checkbox"/> Closed Tight	<input type="checkbox"/> Leaked <input checked="" type="checkbox"/> Closed Tight Differential Pressure Across Check Valve 2.2 psi	<input type="checkbox"/> Leaked <input checked="" type="checkbox"/> Closed Tight Differential Pressure Across Check Valve 2.8 psi
<input type="checkbox"/> Cleaned Only Replaced: <input type="checkbox"/> Rubber Kit <input type="checkbox"/> RV Assembly <input type="checkbox"/> Disc <input type="checkbox"/> Diaphragm <input type="checkbox"/> Seat <input type="checkbox"/> Spring <input type="checkbox"/> Guide <input type="checkbox"/> O-Rings <input type="checkbox"/> Other		<input type="checkbox"/> Cleaned Only Replaced: <input type="checkbox"/> Rubber Kit <input type="checkbox"/> RV Assembly <input type="checkbox"/> Disc <input type="checkbox"/> Diaphragm <input type="checkbox"/> Seat <input type="checkbox"/> Spring <input type="checkbox"/> Guide <input type="checkbox"/> O-Rings <input type="checkbox"/> Other	<input type="checkbox"/> Cleaned Only Replaced: <input type="checkbox"/> Rubber Kit <input type="checkbox"/> RV Assembly <input type="checkbox"/> Disc <input type="checkbox"/> Diaphragm <input type="checkbox"/> Seat <input type="checkbox"/> Spring <input type="checkbox"/> Guide <input type="checkbox"/> O-Rings <input type="checkbox"/> Other
Opened at _____ psi	<input type="checkbox"/> Closed Tight	Differential Pressure Across Check Valve _____ psi	Differential Pressure Across Check Valve _____ psi

REMARKS:

I HEREBY CERTIFY THAT THIS DATE IS ACCURATE AND REFLECTS THE PROPER OPERATION AND MAINTENANCE OF THE ASSEMBLY.

TESTER'S NAME: RYAN JOHANNES

CERT #: 32001

DATE:

8/3/2023