

CONTRACTOR'S MATERIAL & TEST CERTIFICATE FOR ABOVEGROUND PIPING

PROCEDURE

Upon completion of work, inspection and tests shall be made by the contractor's representative and witnessed by an owner's representative. All defects shall be corrected and system left in service before contractor's personnel finally leave the job.

A certificate shall be filled out and signed by both representatives. Copies shall be prepared for approving authorities, owners and contractor. It is understood the owner's representative's signature in no way prejudices any claim against contractor for faulty material, poor workmanship, or failure to comply with approving authority's requirements or local ordinances.

PROPERTY NAME 22 EASTERN PROM	DATE 3/22/18
PROPERTY ADDRESS	

PLANS	ACCEPTED BY APPROVING AUTHORITY(’S) NAMES PORTLAND MAINE FIRE DEPT.	
	ADDRESS 380 CONGRESS ST PORTLAND, ME 04101	
	INSTALLATION CONFORMS TO ACCEPTED PLANS	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
	EQUIPMENT USED IS APPROVED IF NO, EXPLAIN DEVIATIONS	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO

INSTRUCTIONS	HAS PERSON IN CHARGE OF FIRE EQUIPMENT BEEN INSTRUCTED AS TO LOCATION OF CONTROL VALVES AND CARE AND MAINTENANCE OF THIS NEW EQUIPMENT IF NO, EXPLAIN	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
	HAVE COPIES OF APPROPRIATE INSTRUCTIONS AND CARE AND MAINTENANCE CHARTS AND NFPA 13A BEEN LEFT ON PREMISES IF NO, EXPLAIN	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO

LOCATION OF SYSTEM	SUPPLIES BLDGS. ENTIRE
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	MAKE	MODEL	YEAR OF MANUFACTURE	ORIFICE SIZE	QUANTITY	TEMPERATURE RATING
SPRINKLERS	RELIABLE	FIRES42	2018	4.2K	43	165
	RELIABLE	RFCAR	2018	4.9K	29	165
	RELIABLE	FIRES6	2018	5.6K		

PIPE AND FITTINGS	PIPE CONFORMS TO NFPA 13 STANDARD		<input type="checkbox"/> YES <input type="checkbox"/> NO
	FITTINGS CONFORM TO NFPA 13 STANDARD IF NO, EXPLAIN		<input type="checkbox"/> YES <input type="checkbox"/> NO

ALARM VALVE OR FLOW INDICATOR	ALARM DEVICE			MAXIMUM TIME TO OPERATE THROUGH TEST PIPE	
	TYPE	MAKE	MODEL	MIN.	SEC.
	FLOW	System Sensor	WFO		30

	DRY VALVE			Q.O.D.		
	MAKE	MODEL	SERIAL NO.	MAKE	MODEL	SERIAL NO.
	DRY PIPE OPERATING TEST	TIME TO TRIP THRU TEST PIPE	WATER PRESSURE	AIR PRESSURE	TRIP POINT AIR PRESSURE	TIME WATER REACHED TEST OUTLET
	MIN. SEC.	PSI	PSI	PSI	MIN. SEC.	YES NO
Without Q.O.D.						
With Q.O.D.						
IF NO, EXPLAIN						

DELUGE & PREACTION VALVES	OPERATION <input type="checkbox"/> PNEUMATIC <input type="checkbox"/> ELECTRIC <input type="checkbox"/> HYDRAULIC								
	PIPING SUPERVISED <input type="checkbox"/> YES <input type="checkbox"/> NO				DETECTING MEDIA SUPERVISED <input type="checkbox"/> YES <input type="checkbox"/> NO				
	DOES VALVE OPERATE FROM THE MANUAL TRIP AND/OR REMOTE CONTROL STATIONS. <input type="checkbox"/> YES <input type="checkbox"/> NO								
	IS THERE AN ACCESSIBLE FACILITY IN EACH CIRCUIT FOR TESTING IF NO, EXPLAIN <input type="checkbox"/> YES <input type="checkbox"/> NO								
MAKE		MODEL		DOES EACH CIRCUIT OPERATE SUPERVISION LOSS ALARM		DOES EACH CIRCUIT OPERATE VALVE RELEASE		MAXIMUM TIME TO OPERATE RELEASE	
				YES NO		YES NO		MIN. SEC.	

TEST DESCRIPTION
 HYDROSTATIC: Hydrostatic tests shall be made at not less than 200 psi (13.6 bars) for two hours or 50 psi (3.4 bars) above static pressure in excess of 150 psi (10.2 bars) for two hours. Differential dry-pipe valve clappers shall be left open during test to prevent damage. All aboveground piping leakage shall be stopped.
 FLUSHING: Flow the required rate until water is clear as indicated by no collection of foreign material in burlap bags at outlets such as hydrants and blow-offs. Flush at flows not less than 400 GPM (1514 L/min) for 4-inch pipe, 600 GPM (2271 L/min) for 5-inch pipe, 750 GPM (2839 L/min) for 6-inch pipe, 1000 GPM (3785 L/min) for 8-inch pipe, 1500 GPM (5678 L/min) for 10-inch pipe and 2000 GPM (7570 L/min) for 12-inch pipe. When supply cannot produce stipulated flow rates, obtain maximum available.
 PNEUMATIC: Establish 40 psi (2.7 bars) air pressure and measure drop which shall not exceed 1-1/2 psi (0.1 bars) in 24 hours. Test pressure tanks at normal water level and air pressure and measure air pressure drop which shall not exceed 1-1/2 psi (0.1 bars) in 24 hours.

TESTS	ALL PIPING HYDROSTATICALLY TESTED AT <u>200</u> PSI FOR <u>2</u> HRS. IF NO, STATE REASON	
	DRY PIPING PNEUMATICALLY TESTED	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
	EQUIPMENT OPERATES PROPERLY	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
DRAIN TEST	READING OF GAGE LOCATED NEAR WATER SUPPLY TEST PIPE: STATIC PRESSURE: <u>70</u> PSI	RESIDUAL PRESSURE WITH VALVE IN TEST PIPE OPEN WIDE <u>65</u> PSI
Underground mains and lead in connections to system risers flushed before connection made to sprinkler piping.		
VERIFIED BY COPY OF THE U FORM NO. 85B		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO OTHER EXPLAIN
FLUSHED BY INSTALLER OF UNDERGROUND SPRINKLER PIPING		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO

BLANK TESTING GASKETS	NUMBER USED	LOCATIONS	NUMBER REMOVED
	<u>None</u>		

WELDING	WELDED PIPING	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
	IF YES ...	
	DO YOU CERTIFY AS THE SPRINKLER CONTRACTOR THAT WELDING PROCEDURES COMPLY WITH THE REQUIREMENTS OF AT LEAST AWS D10.9, LEVEL AR-3	<input type="checkbox"/> YES <input type="checkbox"/> NO
	DO YOU CERTIFY THAT THE WELDING WAS PERFORMED BY WELDERS QUALIFIED IN COMPLIANCE WITH THE REQUIREMENTS OF AT LEAST AWS D10.9, LEVEL AR-3	<input type="checkbox"/> YES <input type="checkbox"/> NO
DO YOU CERTIFY THAT WELDING WAS CARRIED OUT IN COMPLIANCE WITH A DOCUMENTED QUALITY CONTROL PROCEDURE TO INSURE THAT ALL DISCS ARE RETRIEVED, THAT OPENINGS IN PIPING ARE SMOOTH, THAT SLAG AND OTHER WELDING RESIDUE ARE REMOVED, AND THAT THE INTERNAL DIAMETERS OF PIPING ARE NOT PENETRATED	<input type="checkbox"/> YES <input type="checkbox"/> NO	

HYDRAULIC DATA NAMEPLATE	NAMEPLATE PROVIDED	IF NO, EXPLAIN
	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	

REMARKS
 DATE LEFT IN SERVICE WITH ALL CONTROL VALVES OPEN:
9-5-18

SIGNATURES	NAME OF SPRINKLER CONTRACTOR <u>EASTERN FLOOR</u>		
	TESTS WITNESSED BY		
	FOR PROPERTY OWNER (SIGNED)	TITLE	DATE
	<u>[Signature]</u>	<u>FL. UP</u>	
FOR SPRINKLER CONTRACTOR (SIGNED)	TITLE	DATE	
<u>[Signature]</u>	<u>foreman</u>	<u>9-5-18</u>	

ADDITIONAL EXPLANATION AND NOTES