

Sprinkler Systems, Inc.

Contractor's Material & Test Certificate for Aboveground Pipe

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 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 89 Anderson St.	Date 9-12-2016
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Property Address
89 Anderson Street, Portland Maine 04101

Plans	Accepted by approving authorities (Names) Address Installation conforms to accepted plans Equipment used is approved, if no, explain deviations	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
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Instructions	Has person in charge of fire equipment been instructed as to location of control valve and care and maintenance of this new equipment? If no, explain:	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
	Have copies of the following been left on the premises? 1. System components instructions 2. Care and maintenance instructions 3. NFPA 25	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

Location of System Supplies Buildings: **Stand Pipe**

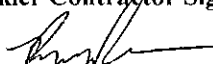
	Make	Model	Year of Mfg.	Orifice Size	Quantity	Temp Rating
Sprinklers						

Pipe and Fittings	Type of pipe As Per N.F.P.A.-13	Type of fittings As Per N.F.P.A.-13
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Alarm Valve or Flow Indicator	Alarm Device			Maximum time to operate through test connection	
	Type	Make	Model	Min	Sec
	Flow Switch	Potter	VSR-F		30

Dry Pipe Operating Test NA	Dry Valve			QOD		
	Make	Model	Serial #	Make	Model	Serial #
	Time to trip through test connection	Water Pressure	Air Pressure	Trip Point Air Pressure	Time Water Reached Test Outlet	Alarm Operated Properly
	With QOD	MIN SEC	PSI	PSI	MIN SEC	YES NO
	W/O QOD	MIN SEC	PSI	PSI	MIN SEC	YES NO

If no, explain:

Deluge & Preaction Valve NA	Operation: <i>Circle One:</i> Pneumatic Electric Hydraulic						
	Piping Supervised Yes No		Detecting Media Supervised Yes No				
	Does valve operate from the manual trip, remote, or both control stations?					Yes	No
	Is there an accessible facility in each circuit for testing? If no, explain.					Yes	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 ____	
Pressure Reducing Valve NA	Location & Floor	Make & Model	Setting	Static Pressure <small>Inlet (psi) Outlet (psi)</small>	Residual Pressure <small>Inlet (psi) Outlet (psi)</small>	Flow Rate <small>Flow (gpm)</small>	
Test Description	<p>HYDROSTATIC: Hydrostatic tests shall be made at not less than 200 psi (13.6 bars for 2 hours or 50 psi (3.4 bars) above static pressure in excess of 150 psi (10.2 bars) for 2 hours. Differential dry-pipe valve clappers shall be left open during the test to prevent damage. All aboveground piping leakage shall be stopped.</p> <p>PNEUMATIC: Establish 40 psi (2.7 bars) air pressure and drop, which will not exceed 1 1/2 psi (.01 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 (.01 bars) in 24 hours.</p>						
Tests	All piping hydrostatically tested at <u>200</u> psi (____ bars) for <u>2</u> hours Dry piping pneumatically tested (<i>check one</i>) NA <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Equipment operates properly (<i>check one</i>) Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>					If no, state reason:	
	Do you certify as the sprinkler contractor that additives and corrosive chemicals, sodium silicate or derivatives or sodium silicate, brine, or other corrosive chemicals were not used for testing systems or stopping leaks?					<i>Check one:</i> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
	Drain Test: Reading of gauge located near water supply test connection: <u>97</u> psi (____ bars)					Residual pressure with valve in test connection open wide: <u>90</u> psi (____ bars)	
Hydraulic Data Nameplate	Nameplate provided: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		If no, explain:				
Remarks	Date left in service with all control valves open: <u>9-22-16</u>						
Signatures	Sprinkler Contractor: Sprinkler Systems, Inc. P.O. Box 1285 Lewiston, Maine 04243-1285 Phone: 207-782-0104 Fax: 207-783-4865						
	Property Owner Signature			Title		Date	
	Sprinkler Contractor Signature 			Title Fitter		Date 9-22-16	

Additional Explanations and Notes:
