

# Contractor's Material and 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, of failure to comply with approving authority's requirements or local ordinances.

PROPERTY NAME

Residence Housing

DATE

September 23, 2015

PROPERTY ADDRESS

133 York Street, Portland Maine

PLANS

ACCEPTED BY APPROVING AUTHORITIES (NAMES)  
State of Maine Fire Marshal's Office

ADDRESS  
Augusta, Maine

INSTALLATION CONFORMS TO ACCEPTED PLANS ☒ YES ☐ NO  
EQUIPMENT USED IS APPROVED, IF NO EXPLAIN DEVIATIONS ☒ YES ☐ 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 ☒ YES ☐ NO

HAVE COPIES OF THE FOLLOWING BEEN LEFT ON THE PREMISES:

1. SYSTEM COMPONENTS INSTRUCTIONS
2. CARE AND MAINTENANCE INSTRUCTIONS
3. NFPA 25

☒ YES ☐ NO

☒ YES ☐ NO

☒ YES ☐ NO

☐ YES ☒ NO

LOCATION OF SYSTEM

SUPPLIES BUILDINGS  
1<sup>st</sup>, 2<sup>nd</sup>, 3<sup>rd</sup>, 4<sup>th</sup> Floors

SPRINKLERS

MAKE	MODEL	YEAR OF MANUFACTURE	ORIFICE SIZE	QUANTITY	TEMPERATURE RATING
Tyco	Pendant	2014	1/2"	56	155
Tyco	HSW	2014	1/2"	39	155
Tyco	Upright	2014	1/2"	28	155

TYPE OF PIPE

Mixture of BlazeMaster CPVC and Steel

TYPE OF FITTINGS

Mixture of BlazeMaster CPVC and Steel

ALARM VALVE OR FLOW INDICATOR

ALARM DEVICE				MAXIMUM TIME TO OPERATE THROUGH TEST CONNECTION	
TYPE	MAKE	MODEL		MIN.	SEC.
Flow Indicator	Potter	VSC			32

DRY PIPE OPERATING TEST

DRY VALVE				Q.O.D.					
MAKE		MODEL	SERIAL NO.	MAKE		MODEL	SERIAL NO.		
	TIME TO TRIP THROUGH TEST CONNECTION*		WATER PRESSURE	AIR PRESSURE	TRIP POINT AIR PRESSURE	TIME WATER REACHED TEST OUTLET*		ALARM OPERATED PROPERLY	
	MIN.	SEC.	PSI	PSI	PSI	MIN.	SEC.	YES	NO
Without Q.O.D.								<input type="checkbox"/>	<input type="checkbox"/>
With Q.O.D.								<input type="checkbox"/>	<input type="checkbox"/>

IF NO, EXPLAIN

DELUGE & PREACTION ACTION

OPERATION							
<input type="checkbox"/> PNEUMATIC <input type="checkbox"/> ELECTRIC <input type="checkbox"/> HYDRAULIC							
PIPING SUPERVISED				DETECTING MEDIA SUPERVISED			
<input type="checkbox"/> YES <input type="checkbox"/> NO				<input type="checkbox"/> YES <input type="checkbox"/> NO			
DOES VALVE OPERATE FROM THE MANUAL AND/OR REMOTE 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	YES	NO
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

\*MEASURED FROM TIME INPSECTOR'S TEST CONNECTIONS IS OPENED.

PRESSURE REDUCING VALVE TEST	LOCATION & FLOOR	MAKE & MODEL	SETTING	STATIC PRESSURE		RESIDUAL PRESSURE (FLOWING)		FLOW RATE
				INLET (PSI)	OUTLET (PSI)	INLET (PSI)	OUTLET (PSI)	FLOW (GPM)
TEST DESCRIPTION	<p><b>HYDROSTATIC:</b> 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.</p> <p><b>PNEUMATIC:</b> Establish 40 psi (2.7 bars) air pressure and measure drop, which shall not exceed 1 ½ (0.1 bars) in 24 hours. Test pressure tanks at normal water level and air pressure measure and air pressure drop, which shall not exceed 1 ½ (0.1 bars) in 24 hours.</p>							
TESTS	ALL PIPING HYDROSTATICALLY TESTED AT <u>200</u> PSI FOR <u>2</u> HRS. DRY PIPING PNEUMATICALLY TESTED <input type="checkbox"/> YES <input type="checkbox"/> NO EQUIPMENT OPERATES PROPERLY <input type="checkbox"/> YES <input type="checkbox"/> NO					IF NO, STATE REASON n/a		
	DO YOU CERTIFY AS THE SPRINKLER CONTRACTOR THAT ADDITIVES AND CORROSIVE CHEMICALS, SODIUM SILICATE OR DERIVATIVES OF SODIUM SILICATE, BRINE, OR OTHER CORROSIVE CHEMICALS WERE NOT USED FOR TESTING SYSTEMS OR STOPPING LEAKS? <input type="checkbox"/> YES <input type="checkbox"/> NO							
	DRAIN TEST	READING OF GAUGE LOCATED NEAR WATER SUPPLY TEST CONNECTION: <u>93</u> PSI				RESIDUAL PRESSURE WITH VALVE IN TEST CONNECTION OPEN WIDE <u>80</u> PSI		
	UNDERGROUND MAINS AND LEAD IN CONNECTIONS TO SYSTEM RISERS FLUSHED BEFORE CONNECTION MADE TO SPRINKLER PIPING <input type="checkbox"/> YES <input type="checkbox"/> NO VERIFIED BY COPY OF THE U FORM NO. 85B FLUSHED BY INSTALLER <input type="checkbox"/> YES <input type="checkbox"/> NO OF UNDERGROUND SPRINKLER PIPING					OTHER Installed and Flushed by Others		EXPLAIN
	IF POWDER DRIVEN FASTENERS ARE USED IN CONCRETE, HAS REPRESENTATIVE SAMPLE TESTING BEEN SATISFACTORILY COMPLETED? <input type="checkbox"/> YES <input type="checkbox"/> NO					IF NO, EXPLAIN		
BLANK TESTING GASKETS	NUMBER USED n/a	LOCATIONS						NUMBER REMOVED
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							
CUTOUTS (DISCS)	DO YOU CERTIFY THAT YOU HAVE A CONTROL FEATURE TO ENSURE THAT ALL CUTOUTS (DISCS) ARE RETRIEVED?					<input type="checkbox"/> YES <input type="checkbox"/> NO		
HYDRAULIC DATA NAMEPLATE	NAMEPLATE PROVIDED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			IF NO, EXPLAIN				
REMARKS	DATE LEFT IN SERVICE WITH ALL CONTROL VALVES OPEN: September 21, 2015							
	NAME OF SPRINKLER CONTRACTOR Freedom Fire Protection, Inc.							
	TESTS WITNESSED BY							
	FOR PROPERTY OWNER (SIGNED)				TITLE		DATE	
	Jarod Robie, Robie Builders				Owner		9/23/15	
	FOR SPRINKLER CONTRACTOR (SIGNED)				TITLE		DATE	
					Project Manager		9/23/15	
ADDITIONAL EXPLANATION AND NOTES								