Contractor's Material and Test Certificate for $oldsymbol{\Delta}$ boveground 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 ag	ainst contracto	r for faulty mater	ial, poor workman	ship, of f	ailure to cor	mply with ap	proving au	thority's re	quirements or loca	al ordinance	S.						
PROPERTY NAME 191	91 Pine Street Carriage House.								DATE March 8, 2013								
PROPERTY ADDRESS	Pine Stree	<u></u>															
17.	ACCEPTED I	BY APPROVING	AUTHORITIES (I	NAMES)													
PLANS	State of Maine Fire Marshal's Office ADDRESS																
		ON CONFORMS	TO ACCEPTED I									✓ YES		10			
	EQUIPMENT	USED IS APPR	OVED, IF NO EXI	PLAIN D	EVIATIONS	S						▼YES					
			OF FIRE EQUIPMI ALVES AND CARI					QUIPMENT	? IF NO, EXPLAI	N		▼YES		10			
INSTRUCTIONS																	
	HAVE COPIES OF THE FOLLOWING BEEN LEFT ON THE PREMISES:											⊠ ves	☑YES □NO				
	SYSTEM COMPONENTS INSTRUCTIONS CARE AND MAINTENANCE INSTRUCTIONS											⊠ YES □ NO					
		FPA 25			.0							⊠ YES □ NO ⊠ YES □ NO					
LOCATION OF SYSTEM	SUPPLIES B	UILDINGS										<u></u>					
STSTEIN	MAKE			MODEL			YEAR OF MANUFACTURE		ORIFICE SIZE		QUANTITY						
	Тусо			Pendant			2013		1/2"		6	6					
SPRINKLERS	Тусо			HSW			2013		1/2"		4	4					
	TYPE OF PIP	PE															
	Mixture of B	lazeMaster CF	PVC and Steel														
	Mixture of B	lazeMaster CF	PVC and Steel								I M	AVINILINA TIN	E TO O	DEDAT	-		
ALARM VALVE OR FLOW INDICATOR			,	ALARM DEVICE					Mansi			THROUGH TEST CO			CONNECTION		
	FI	TYPE ow Indicato	r	MAKE Potter					VSC		M	IN.					
		- Indicate															
			DD	/ \/AL\/F					1		0.0).D.					
	MAKE			DRY VALVE MODEL			SERIAL NO.		MAKI	E	MODEL		SERIAL NO.				
DRY PIPE	TIME TO TRIP THROUGH TEST			WATER PRESSURE		AIR PRESSURE		TRIP POINT AIR PRESSURE		TIME WATER RE				ALARM OPERATED PROPERLY			
OPERATING TEST	CONNECTION* MIN. SEC.			PSI		PSI		71111	PSI	MIN.				YES NO			
	Without Q.O.D.]			
	With]			
	Q.O.D. IF NO, EXPL	AIN															
	OPERATION																
DELUGE &	□ PNEUMATIC □ ELECTRIC □ HYDRAULIC PIPING SUPERVISED □ DETECTING MEDIA SUPERVISED																
	□ YES □NO □								YES NO								
	DOES VALVE OPERATE FROM THE MANUAL AND/OR REMOTE STATIONS YES NO IS THERE AN ACCESSIBLE FACILITY IN EACH CIRCUIT FOR TESTING IF NO, EXPLAIN																
PREACTION ACTION	13 ITIENE AI	NOOLOOIDLE	YES					RATE	DOES EACH CIRCUIT OPERATE MAXIMUM TIME TO OPERATE						PERATE		
ACTION	MAKE MO				SUP	ERVISION I	RVISION LOSS ALARM		VAL\	/E RELEAS	E			SEC 40 SERIAL NO. ALARM OPERATED PROPERLY YES NO			
						YES]	YES		NO 🗆	YES					

DDECCUDE	LOCATION & FLOOR				RESIDUAL PRESSURE (FLOWING)			FLOW RATE				
PRESSURE REDUCING					INLET (PSI)	OUTLET ((PSI) INLE	INLET (PSI)		T (PSI)	FLOW (GPM)	
VALVE TEST												
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. PNEUMATIC: 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. ALL PIPING HYDROSTATICALLY TESTED AT 200 PSI FOR 2 HRS. IF NO, STATE REASON											
TESTS	DRY PIPING PNEUMATICALLY TESTED YES NO N/a EQUIPMENT OPERATES PROPERLY YES NO											
	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? YES NO DRAIN READING OF GAUGE LOCATED NEAR WATER SUPPLY TEST RESIDUAL PRESSURE WITH VALVE IN TEST											
		ADING OF GAUGE I ONNECTION:	LOCATED NEAF	R WATER SUPPLY	_ <u>48_</u> psi		RESIDUAL PR CONNECTION				8 <u>6</u> PSI	
	FLUSHED BEFORE VERIFIED BY COPY OF UNDERGROUN	CONNECTION MAD OF THE U FORM N O SPRINKLER PIPIN	DE TO SPRINKL IO. 85B FLUSHE IG	ED BY INSTALLER	☐ YES	□NO		Flush Othe	lled and ned by rs	EXPL	AIN	
	IF POWDER DRIVEN FASTENERS ARE USED IN CONCRETE, HAS REPRESENTATIVE SAMPLE TESTING BEEN SATISFACTORILY COMPLETED? TYES NO											
BLANK TESTING GASKETS	NUMBER USED n/a	LOCATIONS			<u> </u>	<u> </u>		1	1	NUMBER	REMOVED	
	WELDED PIPING	☐ YES	10									
	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?)	
WELDING		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?										
	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?											
CUTOUTS (DISCS)		THAT YOU HAVE A (CONTROL FEAT	TURE TO ENSURE T	HAT ALL				☐ YES			
HYDRAULIC	C010013 (DI3C3)	ARE RETRIEVED!		IF NO, EXPLAIN							<u>, </u>	
DATA NAMEPLATE	NAMEPLATE PROV		□NO									
REMARKS	DATE LEFT IN SER	VICE WITH ALL CON	NTROL VALVES March 5, 2	S OPEN: 2013								
	NAME OF SPRINKL	ER CONTRACTOR	Freedom F	Fire Protection,	Inc.							
				Ţ	ESTS WITNESSE	D BY						
	FOR PROPERTY OWNER (SIGNED) TITLE										DATE	
	FOR SPRINKLER C			Shimberg	Ge	enera	1 Cont	ract	or	3/8	/2013 DATE	
	FUR SPRINKLER U	UNIKACIUK (SIGI	NED)		Pı	coied	t Mana	ager		3/8	/2013	
ADDITIONAL EXPLAN	IATION AND NOTES										, = 0 = 0	
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