



# Uponor

## FIRE SAFETY SYSTEMS AQUASAFE™ FLOW TEST VERIFICATION

**FORM**

### AquaSAFE™ Flow Test Verification Form

Alliance  
Member ID: 1933  
Company Name: MARK NIGRO SERVICES  
Contact: MARK NIGRO  
Phone: (207) 749-1826  
Fax: \_\_\_\_\_  
Job Name: Nelson Residence  
Project Number: 20729 F  
Job Address: 4 Alice St.  
City: Portland  
State, ZIP: Me. 04103

**Important: Installing contractor must submit this completed form. Failure to do so nullifies the system warranty. E-mail or fax completed form to the Uponor Fire Safety Design Department at [technical.services@uponor.com](mailto:technical.services@uponor.com) or 952.997.1731. For questions, contact Uponor Technical Services at 888.594.7726 or [technical.services@uponor.com](mailto:technical.services@uponor.com).**

Color of test orifice used: Red

Static pressure (not flowing) reading at incoming water supply into home or at main shutoff: 62 psi

Residual pressure (flowing) reading at incoming water supply into home or at main shutoff: 62 psi

What time of day was the flow test taken? Morning

Flow test method used?  Bucket  Flow Meter

Flow test gpm: 17 GPM

How many gallons of water did the design predict as required? 17 GPM

Did the test meet or exceed design flow?  Yes  No

Which sprinkler did you flow? Number: H 12

Location of head: 2nd Floor Bedroom

Date left in service with all valves open: 7/20/2017

For designs not provided by Uponor, complete the following information.

Designer's Name: \_\_\_\_\_  
Company: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Fax: \_\_\_\_\_

*N/A*

Is the warning sign permanently attached close to the main shutoff valve?  Yes  No

Was this system required by code?  Yes  No

#### Test Witnessed and Verified by:

Name	Signature	Occupation	Date
<u>MARK NIGRO</u>	<u>[Signature]</u>	<u>Plumber</u>	<u>7/20/17</u>
<u>Dylan Nigro</u>	<u>[Signature]</u>	<u>Plumber</u>	<u>7/20/17</u>

Additional Explanations and Notes Meets All Requirements  
Looks Good

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