

Contractor's Material and Test Certificate for Aboveground Piping

A. Procedure (Conforms to NFPA 13-1994)

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. All "No" answers shall be explained in the Comments portion of this form.

Property Name: OCEAN LODGE

Property Address: _____ Date: 2/1/05

B. Plans

- 1. Accepted by Approving Authorities (Names): E. AC MARSHALL
- 2. Address: _____
- 3. Installation conforms to accepted plans Yes No
- 4. Equipment used is approved Yes No

C. Instructions

- 1. Has person in charge of fire equipment been instructed as to location of control valves and care and maintenance of this new equipment Yes No
- 2. Have copies of the following been left on the premises:
 - a. System components instructions Yes No
 - b. Care and maintenance instructions Yes No
 - c. NFPA 25 Yes No

D. Location of system - Supplies building: ENTIRE

E. Sprinklers

Make	Model	Year Made	Orifice	Quantity	Temperature
Tyco	LF II	04	1/2	92	155
Tyco	SSP	04	1/2	4	286
Tyco	SSU	04	1/2	8	200

F. Pipe and Fittings

- 1. Type of Pipe: STEEL
- 2. Type of Fittings: RCT

G. Alarm Valve or Flow Indicator

Type	Make	Model	Max. Time to Operate Through Insp. Test
400LE	NOTER	411-F	0-5 sec

H. Dry-Pipe Valve

- 1. Make and Model: _____
- 2. Serial Number: _____

I. Quick Opening Device (Q.O.D.)

- 1. Make and Model: _____
- 2. Serial Number: _____

J. Dry-Pipe System Operating Test Without Q.O.D.

- 1. Time to trip through test connection*: _____
- 2. Water pressure _____ psi. Air pressure _____ psi.
- 3. Trip point air pressure _____ psi.
- 4. Time water reached test outlet*: _____
- 5. Alarm operated properly Yes No

K. Dry-Pipe System Operating Test With Q.O.D.

- 1. Time to trip through test connection*: _____
- 2. Water pressure _____ psi. Air pressure _____ psi.
- 3. Trip point air pressure _____ psi.
- 4. Time water reached test outlet*: _____
- 5. Alarm operated properly Yes No

L. Deluge and Preaction Valves

- 1. Make and Model: _____
- 2. Operation: Pneumatic Electric Hydraulic

N. 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 1.5 psi (0.1 bars) in 24 hrs. Test pressure tanks at normal water level and air pressure and measure air pressure drop, which shall not exceed 1.5 psi (0.1 bars) in 24 hrs.

O. Tests

- 1. All piping hydrostatically tested at 200 psi for 2 hours Yes No
- 2. Dry piping pneumatically tested Yes No
- 3. Equipment operates properly Yes No
- 4. 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
- 5. Drain Test:
 - a. Static pressure reading of gage located near water supply connection 50 psi.
 - b. Residual pressure with valve in test connection open wide 35 psi.
- 6. Underground mains and lead in connections to risers flushed before connection made to sprinkler piping and verified by copy of form No. 13-U Yes No
- 7. Flushed by installer of underground piping Yes No
- 8. If powder driven fasteners are used in concrete, has representative sample testing been satisfactorily completed? N/A Yes No

P. Blank Testing Gaskets

- 1. Number used: _____
- 2. Locations: _____
- 3. Number removed: _____

Q. Welded Piping - If welded piping was used in the system, complete the following:

- 1. Do you certify as the sprinkler contractor that welding procedures comply with the requirements of at least AWS D10.9, Level AR-3 Yes No
- 2. 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 Yes No
- 3. Do you certify that welding was carried out in compliance with a documented quality control procedure to insure that all discs are retrieved, openings in the pipe are smooth, slag and other welding residue are removed, and the internal diameters of piping are not penetrated Yes No

R. Cutouts (Disks)

Do you certify that you have a control feature to ensure that all cutouts (disks) are retrieved? Yes No

S. Hydraulic Data Nameplate Provided

Yes No

T. Date left in service (with all control valves open): _____

U. Signatures

- 1. Name of sprinkler contractor: DEAN & ALLYN
- 2. Tests witnessed by: [Signature]
For property owner (Signed): [Signature]
Title: SURVEYOR Date: 2/1/05
For sprinkler contractor (Signed): [Signature]
Title: FITTER Date: 2/1/05

V. Comments (This section is for additional evaluation and notes)

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Property Name: Ocean Ridge
Property Address: UMTS 44THRU46 Date: 12/20/05

B. Plans

1. Accepted by Approving Authorities (Names): FIRE MARSHAL
2. Address: _____
3. Installation conforms to accepted plans Yes No
4. Equipment used is approved Yes No

C. Instructions

1. Has person in charge of fire equipment been instructed as to location of control valves and care and maintenance of this new equipment Yes No
2. Have copies of the following been left on the premises:
 - a. System components instructions Yes No
 - b. Care and maintenance instructions Yes No
 - c. NFPA 25 Yes No

D. Location of system - Supplies building: ENTIRE

E. Sprinklers

Make	Model	Year Made	Orifice	Quantity	Temperature
Tyco	LF11	04	1/2	92	155
Tyco	SSP	04	1/2	4	286°
Tyco	SSU	04	1/2	8	200°

F. Pipe and Fittings

1. Type of Pipe: STEEL
2. Type of Fittings: RCT

G. Alarm Valve or Flow Indicator

Type	Make	Model	Max. Time to Operate Through Insp. Test
RODLE	POTTER	11K-F	0-SEC

H. Dry-Pipe Valve

1. Make and Model: _____
2. Serial Number: _____

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1. Make and Model: _____
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R. Cutouts (Disks)

Do you certify that you have a control feature to ensure that all cutouts (disks) are retrieved? Yes No

S. Hydraulic Data Nameplate Provided

Yes No

T. Date left in service (with all control valves open): 12-20-05

U. Signatures

1. Name of sprinkler contractor: DEAN & ALLYN
2. Tests witnessed by:
 - For property owner (Signed): [Signature]
Title: SUPCR Date: 12/20/05
 - For sprinkler contractor (Signed): [Signature]
Title: FITTER Date: 12/20/05

DEAN & ALLYN, INC.

FIRE PROTECTION * SPECIAL HAZARD

TO: GREG CASS FROM: STAN CAMIC
 COMPANY: Portland FD DATE: 12-21-05
 FAX NUMBER: 874-8716 TOTAL NO. OF PAGES INCLUDING COVER: 2
 PHONE NUMBER: SENDER'S REFERENCE NUMBER:

RE: Ocean Ridge units 44 to 46 YOUR REFERENCE NUMBER:

- URGENT FOR REVIEW PLEASE COMMENT PLEASE REPLY PLEASE RECYCLE

NOTES/COMMENTS:

IF YOU HAVE ANY QUESTIONS PLEASE
GIVE US A CALL

THANK YOU



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