

Endorsed Contractor Company
Address
Phone
Email

Date_____

Customer
Address
Phone
Email
Attn:

Reference: Fire Sprinkler Systems at:

We have completed the NFPA 25 inspection and test of your fire protection system at the above referenced location. A copy of the inspection is enclosed for your convenience.

While performing the inspection and testing, we found the following impairments and critical deficiencies that may hinder the system's capability of protecting your building and the following repair(s) should be considered to improve your system(s):

While performing the inspection and testing, we found the following items that we recommend being performed to maintain the system up to NFPA 25 code requirements:

During the inspection and testing, we performed the following corrections and repairs:

NOTE: All fire protection system contractors working inside the city limits of Vancouver are legally required to upload a copy of this report and any related repairs to the Vancouver Fire Department's Fire Marshal's Office within 30 days of inspection or service. Vancouver Municipal Code Title 16

If you have any questions or concerns, please feel free to contact us.

Sincerely,

Report of Inspection and Testing

Date of Inspection:	
Inspector:	
Report To:	
Address:	
Attention:	
Building & Location:	
Duplicated To:	

Type of System Being Inspected and Tested

<input type="checkbox"/> Wet Sprinkler	<input type="checkbox"/> Dry Standpipe	<input type="checkbox"/> Pre-Action
<input type="checkbox"/> Dry Sprinkler	<input type="checkbox"/> Fire Pump	<input type="checkbox"/> Hood & Duct System
<input type="checkbox"/> Wet Standpipe	<input type="checkbox"/> Tank	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Combination Standpipe	<input type="checkbox"/> Anti-Freeze	

Hazard Class of System

Light Ordinary Extra
0-.10 light hazard, .10-.15 Ordinary 1, .15-.20 Ordinary 2, .20-.30 Extra Group 1, .30-.40 Extra Group 2

Type of Inspection and Test

Annual Semi-annual Quarterly

GENERAL	YES	NO	N/A
1. How many stories in building?			
2. Is the building totally or partially protected with a sprinkler system(s)?	Totally		
3. Is the building occupied?			
4. Are all fire protection systems in service?			
5. Has the impairment coordinator for property been notified of system test? Name: _____			
6. Has the owner notified us of any occupancy classification or hazard change of contents since the last inspection?			
7. Has the owner notified us of any changes or repairs to the fire system since the last inspection?			
8. If a fire has occurred since the last inspection, have all damaged sprinkler components been replaced?			
9. Information sign in place at system control riser?			
10. Is the sprinkler riser(s) in good condition and easily accessible?			
11. Are the hydraulic calculation placards on the risers?			

TANKS, FIRE PUMPS & FIRE DEPARTMENT CONNECTION	YES	NO	N/A
1. Do fire pumps, gravity, surface or pressure tank(s) appear to be in good external condition?			
2. Are gravity, surface and pressure tanks at the proper pressure and/or water levels?			
3. Are fire department connections visible and accessible?			
4. Are fire department connections in satisfactory condition, swivels/couplings undamaged and rotate smoothly, caps or plugs in place and check valve not leaking?			

SCHEDULED 5 YEAR INSPECTIONS	DATE	YES	NO	N/A
1. System gauges calibrated to +/- 3% or replaced?				
2. Fire department connection check valve been inspected in the last 5 yrs per NFPA 25 13.4.2.1				
3. Fire department connection piping hydrostatically tested in the last 5yrs per NFPA 25 13.8.5				
4. Where is the fire department connection check valve located?				
5. Internal pipe assessment been performed in the last 5yrs per NFPA 25 14.2.1				
6. Fire backflow internally inspected in the last 5 years per NFPA 25 13.7.1.3				
7. Has the sprinkler system been tested for Microbiological Influenced Corrosion (MIC)?				
8. System pressure reducing valves flow tested and comparable to previous results?				
9. Has sprinkler system check & alarm valves, strainers and filters been internally inspected?				

VISIBLE PIPING	(ANNUAL INSPECTION)			YES	NO	N/A
1. There are no signs of external corrosion?						
2. There are no external loads present?						
3. Piping is free of mechanical damage and not leaking?						
4. Piping appears to be properly aligned?						
5. Visible pipe hangers and seismic braces appear to be in good condition and secure?						

SPRINKLERS	(ANNUAL INSPECTION)			YES	NO	N/A
1. Are all sprinklers free of leakage, corrosion, foreign material, physical damage or paint?						
2. Sprinkler spray patterns appear free of unacceptable obstructions?						
3. Does there appear to be proper clearance from top of all storage and sprinkler deflector? (18" minimum)						
4. Do sprinklers appear to be properly oriented?						
5. Is stock of spare sprinklers available of proper type and temperature? (minimum 6 heads)						
6. Wrench available for each type of sprinkler?						
7. Any Fast Response sprinkler heads 20 years or older? If yes, testing and/or replacement are required per NFPA 25 Mfr. date: <input type="text"/> Estimated qty: <input type="text"/>						
8. Any Standard sprinkler heads 50 years or older? If yes, testing and/or replacement are required per NFPA 25 Mfr date: <input type="text"/> Estimated qty: <input type="text"/>						
9. Any Dry sprinkler heads 10 years or older? If yes, testing and/or replacement are required per NFPA 25 Mfr date: <input type="text"/> Estimated qty: <input type="text"/>						
10. Any Extra High solder-type sprinkler heads exposed to semi or continuous maximum allowable ambient temps? If yes, testing required every 5yrs per NFPA 25 Mfr. date: <input type="text"/> Estimated qty: <input type="text"/>						
11. Any sprinkler heads subject to harsh environments including corrosive atmospheres and corrosive water? If yes, testing required every 5yrs per NFPA 25 Mfr. date: <input type="text"/> Estimated qty: <input type="text"/>						

SPRINKLER SYSTEM ALARMS	YES	NO	N/A
1. Did water motor(s) and gong(s) test satisfactory?			
2. Did electric alarm(s) test satisfactory?			
3. Signals test satisfactory (Tamper Switches)?			
4. Did the central station receive all signals?			
5. Are all signals restored and system back in service at job site?			
6. Are all signals restored and system out of test status at monitoring station?			

WATERFLOW TEST RESULTS MADE DURING THIS INSPECTION				YES	NO	N/A
1. Do results of main drain test differ by more than 10% from the previous test? NFPA 25 13.2.5 2017 Edition						
2. Forward flow test of installed fire system backflow at designed flow rate performed? NFPA 25 13.2.5 2017 Edition						
Test Pipe Located	Size of Test Pipe	Static Pressure Before	Residual Flow Pressure	Static Pressure After		

WATER SUPPLY			
City:			Pressure Fire Pump & City
Gravity Tank -or- Pressure Tank			Pressure Fire Pump & Pond

CONTROL VALVES			YES	NO	N/A
1. Are all control valves easily accessible?					
2. Do all main control valves have indicating signs?					
3. Are all sprinkler system main control valves and other valves in the appropriate open or closed position?					
4. Are all sprinkler system control valves electronically supervised?					

Control Valve	# Of Valves	Type	Secured?		If Yes, how? (Sealed)(Locked) (Supervised)	Supervision Operational?			Control Valve Seal Number
			Yes	No		Yes	No	N/A	
CITY CONNECTION									
SYSTEM									
SECTIONAL									
ALARM LINE									
FIRE PUMP									
JOCKEY PUMP									
TANK									

WET SYSTEMS					
No. of systems: _____		Make and Model _____			
			YES	NO	N/A
1. In areas protected by wet system(s), does the building appear to be properly heated in all areas, including blind attics and perimeter areas where accessible?					
2. Do all exterior openings appear to be protected against freezing?					

ANTIFREEZE SYSTEMS							
No. of systems: _____		Type of antifreeze solution in system(s): _____					
					YES	NO	N/A
1. Antifreeze solution tested at its most remote portion and where it interfaces with wet pipe system?							
2. Information sign posted at antifreeze system with solution information and remote test location?							
Location of antifreeze system		Freezing pt temp.	Concentration %	Sprinkler Pipe Type	Diameter of pipe	Number of heads on	

DRY SYSTEMS					
No. of systems: _____		Make and Model _____			
			YES	NO	N/A
1. Did the dry valve(s) operate properly during the trip test?					
2. Record of initial air pressure, water pressure, trip air pressure and trip time maintained on premise?					
3. Operation of the air maintenance device tested?					
4. Low air pressure alarm tested? (if provided)		Low air at : PSI			
5. Quick opening device(s) tested and operated properly?					
6. Air driers maintained in accordance with the manufacturer's instructions?					
7. Air compressor maintained in accordance with the manufacturer's instructions?					
8. Did the heating equipment in the dry-pipe valve room(s) operate at the time of inspection?					
9. Has the piping for dry systems been checked for proper pitch within the past 5 years? Date:					
10. Are dry valve(s) in service?					
11. Are the air pressure and priming water levels in accordance with the manufacturer's instructions?					
12. Were low points drained during the inspection?					
13. Number of low point drains					
14. Date dry-pipe valve trip tested (<i>control valve partially open</i>) per NFPA 25 13.4.4.2.2.3					
15. Date dry-pipe valve trip tested (<i>control valve fully open</i>) per NFPA 25 13.4.4.2.2.2					
16. Date dry pipe system tested for air leakage per NFPA 25 13.4.4.2.9 (once every 3 yrs)					

SYSTEM #1 Bar code	
Valve Make/Model	
Q.O.D. Make/Model	
Air Pressure (psi)	
Water Pressure (lbs)	
Trip Air Pressure(psi)	
Trip Time at Valve	
Water Time to EOS	
Low Point Drains	
SYSTEM #4 Bar code	
Valve Make/Model	
Q.O.D. Make/Model	
Air Pressure (psi)	
Water Pressure (lbs)	
Trip Air Pressure(psi)	
Trip Time at Valve	
Water Time to EOS	
Low Point Drains	

SYSTEM #2 Bar code	
Valve Make/Model	
Q.O.D. Make/Model	
Air Pressure (psi)	
Water Pressure (lbs)	
Trip Air Pressure(psi)	
Trip Time at Valve	
Water Time to EOS	
Low Point Drains	
SYSTEM #5 Bar code	
Valve Make/Model	
Q.O.D. Make/Model	
Air Pressure (psi)	
Water Pressure (lbs)	
Trip Air Pressure(psi)	
Trip Time at Valve	
Water Time to EOS	
Low Point Drains	

SYSTEM #3 Bar code	
Valve Make/Model	
Q.O.D. Make/Model	
Air Pressure (psi)	
Water Pressure (lbs)	
Trip Air Pressure(psi)	
Trip Time at Valve	
Water Time to EOS	
Low Point Drains	
SYSTEM #6 Bar code	
Valve Make/Model	
Q.O.D. Make/Model	
Air Pressure (psi)	
Water Pressure (lbs)	
Trip Air Pressure(psi)	
Trip Time at Valve	
Water Time to EOS	
Low Point Drains	

INSPECTOR'S SIGNATURE: _____

DATE: _____

INSPECTOR'S PRINTED NAME: _____

Additional Information Regarding the Fire Sprinkler System

(CIRCLE ONE)

Wet/dry/antifreeze/pre-action System bar code _____ Location description: _____

Wet/dry/antifreeze/pre-action System bar code _____ Location description: _____

Wet/dry/antifreeze/pre-action System bar code _____ Location description: _____

Wet/dry/antifreeze/pre-action System bar code _____ Location description: _____

Wet/dry/antifreeze/pre-action System bar code _____ Location description: _____

Wet/dry/antifreeze/pre-action System bar code _____ Location description: _____