WATER BASED FIRE PROTECTION SYSTEM TEST REPORT



Name:
Address:
Representative:
License #:
Telephone:

SERVICE ORGANIZATION

SERVICE

Weekly

**Only this document will be accepted by the Mount Laurel Fire Prevention Division for fire alarm testing purposes as required by the New Jersey Uniform Fire Safety Code and applicable N.F.P.A. Standards

Quarterly
 Annually

NOTE: ANY deficencies MUST be reported to the Bureau of Fire Prevention at 856-234-6053.

Monthly

y Code and applicable N.F.P.A. Standards	
DATE:	
TIME:	
PROPERTY NAME (USER)	
Name:	
Address:	
Owner Contact:	
Telephone:	
·	
em Inspection	
	Y N/A N
Modifications to system documented?	
Weekly logs of inspections on file?	

Wet Sprinkler Syste Prior inspection reports, logs and test data on site? Plans of systems on site? Sprinkler supply gauge: Sprinkler supply gauge with main Sprinkler system gauge: _____psi Sprinkler system gauge with mair Y N/A N System in service on inspection Sprinkler control valve locked/tamper open Standpipe control valve locked/tamper open Backflow valve locked open/tamper Anti-freeze system valve locked/tamper open Tamper switches appear operational Valve area accessible Control valves accessible Pressure regulating valve is open Pressure regulating valve in good condition Pressure regulating valve leak tight Pressure regulating valve maintaining downstream pressure per design criteria Pressure relieve valve in closed position except when operational Pressure relieve false in good condition Pressure relief valve leak tight Pressure relieve valve maintaining up-stream pressure per design criteria Main check valve holding pressure Alarm check valve exterior free of damage Water flow switch operational Trim piping leak tight Retard chamber leak tight Alarm drain drip tight when not operational Trim valves in appropriate position Alarm test line valve closed FDC plainly visible FDC easily accessible FDC swivels non-binding rotation FDC caps/plugs in place FDC gaskets/signs in place FDC check valve drip free FDC ball drip drain drip free Exterior alarms appear operational Interior alarms appear operational Extra heads in spare head cabinet Heads appear of proper temperature Head wrench for each type of head Head in cooler appears free of ice, corrosion Head appears free of leakage or damage

	<u> </u>	-	
drain flow psi.			
n drain flow psi.			
 ·			
	Υ	N/A	Ν
Head appears free of paint			
Heads appear free of non approved coverings			
Standard head less than 50 year			
Residential head less than 20 year			
Watt hydrant plainly visible			
Watt hydrant easily accessible			
Watt hydrant identification plate in place			
Hose/hydrant house free of damage			
Hose/hydrant house fully equipped			
Hose/hydrant house is accessible			
Wet pipe areas appear properly heated			
Hydraulic nameplate attached			
Strainers and filters cleaned			
Exterior alarms properly identified			
Main drain flow test with inch valve			
full open			
Water flow alarm devices activated			
Interior building alarms operating			
Exterior alarms operating			
Inspectors test flow psi	-	-	
Time to ring alarm from alarm check valve	min _	;	sec
Time to ring alarm from alarm pressure switch _	_ min		sec
Gauges appear operating properly			
Did alarm supervisory company receive signal			
Did alarm panel reset properly			
Prior to freezing season, owner is resp. for bldg			
to be in secure condition and properly heated			
Visual: bracing and piping are secure, attached			
and in good condition	_		
Piping appears free of leakage		-	
Piping appears free of leakage Piping appears free of corrosion			
Piping appears free of leakage Piping appears free of corrosion Piping appears properly aligned			
Piping appears free of leakage Piping appears free of corrosion Piping appears properly aligned Piping appears free of external loads			
Piping appears free of leakage Piping appears free of corrosion Piping appears properly aligned Piping appears free of external loads Sprinklers appear free of corrosion			
Piping appears free of leakage Piping appears free of corrosion Piping appears properly aligned Piping appears free of external loads Sprinklers appear free of corrosion Sprinklers appear properly positioned			
Piping appears free of leakage Piping appears free of corrosion Piping appears properly aligned Piping appears free of external loads Sprinklers appear free of corrosion			

Control valve lubricated				Υ	N/A	Ν
Control valve operated to closed position and returned to open position						
Backflow assembly control valves lubricated						
Backflow assembly valve operated and returned to open position						
Post indicator valve operated with number of turns recorded						
Post indicator valve returned to open position (valves left 1/4 turn from	wide open)					
Antifreeze solution checked to provide adequate freeze protection (prot	ection temp	∘F)				
TEST FREQUENCY ITEMES OF 5 YEARS OR GREATER		-				
Internal inspection last date (5 years)	Y N/A	N]			
Alarm check valve			1			
Flow tested pressure regulating control valves*****			***** Provide additional pages if	nece	ssar	v to
Make			record the:	1000	Jour	y io
Model			Volume of flow gpn	า		
Size			Supply side pressure			
Date			System side pressure	psi psi		
Check valve			Cystem side pressure	poi		
Strainers			Comments:			
Filters			Johnnents.			
Trim orifices		\vdash	l 			
Other		+	l			-
		1	l 			
Gauge maintenance: date last tested (5 year)		_				
Replaced date Calibrated date		+	l			
Sprinkler maintenance test	<u> </u>					
(5 year)						
High temp. date						
(20 year, then 10 year thereafter)						
Fast response date						
Residential head 20 year						
(50 year, then 10 year thereafter)						
Standard sprinkler date						
ALL "NO" ANSWERS T	TO DE EIII I V E	VDI	AINED			1
ALL NO ANOWERS	O DE TOLET L	<u> </u>	LAINLD			l
NOTIFICATION THAT TESTING IS COMPLETE			Who		Time	
					1 11111	5
Building Management						
Monitoring Agency						
Building Occupants						
Other (Specify)						
The fellowing did not expents connective						
The following did not operate correctly:						
System restored to normal operation: Date:	Tim	ne:				
THIS TESTING WAS PERFORMED IN ACCORDANCE WITH APPLIC	CABLE NFPA STAN	IDAR	RDS			
Name of Inspector:	Date:		Time:			
Signature:						
Name of Owner or Representative:	Date:		Time:			
Signature:						

Phone: 856-234-6053, FAX: 856-234-3756