

Lake Grove Fire Marshals Office Post Office Box 708, 980 Hawkins Avenue Lake Grove, NY 11755



Y/N N/A

Y/N N/A

AUTOMATIC SPRINKLER SYSTEM ANNUAL INSPECTION AND TEST

NOTE: THIS FORM IS THE ONLY ACCEPTABLE PROOF OF INSPECTION BY THIS OFFICE

WARNING: YOU ARE REQUIRED TO NOTIFY THIS OFFICE, THE FIRE DEPARTMENT AND ALL OCCUPANTS THAT YOU ARE TESTING *BEFORE* COMMENCING WITH SAME. SHOULD ANY AGENCY BE DISPATCHED AS A RESULT OF YOUR FAILURE TO COMPLY, LEGAL ACTION WILL BE TAKEN AGAINST YOU.

ALL INFORMATION IS TO BE LEGIBLY TYPED OR PRINTED

| PROPERTY INSPECTED: | INSPECTING CONTRACTOR: |
|---------------------|------------------------|
| NAME: | NAME: |
| ADDRESS: | ADDRESS: |
| PROPERTY REP NAME: | CITY, STATE, ZIP: |
| DATE OF INSPECTION: | PHONE: |

NFPA 25 2008 Edition 5 Year Requirements

Y=Satisfactory N=Unsatisfactory N/A=Not Applicable

ENTIRE SYSTEM

Gauges have been checked for proper calibration or have been replaced within the past 5 years? 5.3.2

Check valves have been internally inspected within the past five years? 12.4.2.1

System piping has been internally inspected within the past five years? 13.2.1

Standpipe flow test has been performed within the past 5 years? 6.3.1.1

NFPA 25 2008 Edition Annual Requirements

Y=Satisfactory N=Unsatisfactory N/A=Not Applicable

BUILDING

Occupancy the same as it was during the previous inspection?

Adequate heat in areas with wet piping? 5.2.5

PIPING AND FITTINGS

Are piping and fittings in good condition and free of mechanical damage, leakage or corrosion? 5.2.2.1

Is piping free of external loads? 5.2.2.2

HANGERS AND SEISMIC BRACING

Are visible pipe hangers and seismic braces free of damage and secure? 5.2.3.1

SPRINKLERS

Are sprinklers free of signs of leakage, corrosion, foreign materials, paint, physical damage: 5.2.1.1.1

Are sprinklers all installed in their proper orientation? 5.2.1.1.1

Is the proper clearance being maintained between the sprinkler deflectors and obstructions? 5.2.1.2

Is the proper number and type of spare sprinkler heads and wrenches readily available on site? 5.2.1.3

Are sprinklers of proper age and not required to be sample tested or replaced? 5.3.1.1

CONTROL VALVES

Were all valves operated through their full range and then returned to the normal position? 13.3.3.1

ANTIFREEZE SYSTEMS

Have antifreeze solutions been tested and found to meet the required freezing protection? 5.3.4

| NFPA 25 2008 Edition Semi-Annual Requirements | Y/N |
|--|-----|
| Y=Satisfactory N=Unsatisfactory N/A=Not Applicable | N/A |
| ALARM DEVICES | |
| Do the vane type and pressure type flow switches initiate a signal? 5.3.3.2 | |
| What was the time from tripping of switch to alarm activation? | |
| SUPERVISORY SWITCHES | |
| Did all valve supervisory switches activate within the correct amount of turns when tested? 13.3.3.5.2 | |
| Did all valve supervisory switches clear once the valve was returned to the correct position? 13.3.3.5.3 | |
| NFPA 25 2008 Edition Quarterly Requirements | Y/N |
| Y=Satisfactory N=Unsatisfactory N/A=Not Applicable | N/A |
| ALARM DEVICES | |
| Are all of the alarm devices free of physical defects? 5.2.6 | |
| Do the vane type and pressure type flow switches initiate a signal? 5.3.3.2 (Required semi-annually) | |
| Do local alarm devices (water motor gong, electric bell) operate? 5.3.3.1 | |
| Do the water flow devices on the wet system (s) activate via the inspectors test connection? 5.3.3.3 | |
| NFPA 25 2008 Edition Quarterly Requirements | Y/N |
| Y=Satisfactory N=Unsatisfactory N/A=Not Applicable Readings=PSI | N/A |
| MAIN DRAIN TEST "WET SYSTEM" | |
| System starting supply static pressure reading is? 13.2.5.1 | |
| System residual pressure reading is? 13.2.5.1 | |
| System static pressure reading after drain test is? 13.2.5.1 | |
| Were the system main drain test results within 10% of previously performed test? 13.2.5.2 | |
| MAIN DRAIN TEST "DRY SYSTEM" | |
| System starting supply static pressure reading is? 13.2.5.1 | |
| System residual pressure reading is? 13.2.5.1 | |
| System static pressure reading after drain test is? 13.2.5.1 | |
| Were the system main drain test results within 10% of previously performed test? 13.2.5.2 | |
| DRY SYSTEMS | |
| Has the priming water been tested and found satisfactory? 13.4.4.2.1 | |
| Has quick opening devices been tested and found satisfactory? 13.4.4.2.4 | |
| Have low air pressure alarms been tested and found satisfactory? 13.4.4.2.7 | |
| FIRE DEPARTMENT CONNECTIONS | |
| Are FDC visible and readily accessible? 13.7.1 | |
| Are FDC couplings or swivels free of damage and rotate smoothly? 13.7.1 | |
| Are FDC plugs or caps in place and free of damage? 13.7.1 | |
| Are FDC gaskets in place and in good condition? 13.7.1 | |
| Are FDC identification signs in place and legible? 13.7.1 | |
| Are FDC checks free of leakage? 13.7.1 | |
| Are FDC automatic drain/ball drips in place and operating properly? 13.7.1 | |
| Are FDC clappers in place and operating properly? 13.7.1 | |

NFPA 25 2008 Edition Semi-Annual Requirements

| NFPA 25 2008 Edit | ion Weekly/Monthl | y Requirements | | | | | |
|--|-----------------------|--------------------|-------------------------|-------------------|-----------------------------|-------------|------------------|
| Y=Satisfactory | N=Unsatisfactory | N/A=Not Ap | olicable | | | | |
| CONTROL VALVES | 6 13.3.2.2 | | | | | | |
| Location | Area controlled | Size Type | s Sign | Secured via | Leak Free | Open / | Accessible |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| NFPA 25 2008 Edit | ion Weekly/Monthl | y Requirements | 3 | | | | Y/N |
| Y=Satisfactory | N=Unsatisfactory | v N/A=Not Ap | plicable Rea | dings=PSI | | | |
| SYSTEM RISERS | "WET SYSTEMS" | | | | | | |
| System water supply | gauge reading 13.4 | .1.1 | | | | | |
| System water gauge | reading 13.4.1.1 | | | | | | |
| System supply gauge | e indicating normal s | supply water pres | sure is being ma | aintained? 13.4 | 4.1.1 | | |
| Valves free of physic | al damage? 13.4.1.1 | | | | | | |
| All trim valves are in | the appropriate ope | n or closed positi | on? 13.4.1.1 | | | | |
| The retard chamber | or alarm drains are r | not leaking? 13.4 | .1.1 | | | | |
| DRY VALVES | | | | | | | |
| System water supply | gauge reading 13.4 | .4.1.2 | | | | | |
| System air gauge rea | ading 13.4.4.1.2 | | | | | | |
| System supply gauge | e indicating normal s | supply water pres | sure is being ma | aintained? 13.4 | 4.4.1.2.2 | | |
| Quick opening device | e gauge reading the | same as the sys | tem side gauge | reads? 13.4.4 | .1.2.3 | | |
| Valves free of physic | al damage? 13.4.1.1 | | | | | | |
| All trim valves are in the appropriate open or closed position? 13.4.4.1.4 | | | | | | | |
| The intermediate cha | amber is not leaking | ? 13.4.4.1.4 | | | | | |
| NFPA 25 2008 Editi | on Annual Require | ements | | | | | |
| Y=Satisfactory | N=Unsatisfactory | N/A=Not App | olicable Read | dings=PSI | Times=Se | conds | |
| DRY SYSTEM TRI | P TABLE | | | | | | |
| Partial or Full Trip | Valve size | Valve Make | Valve Model | | Q.O.D.Make | e Q. Me | .O.D. odel |
| | | | | | | | |
| With or Without Q.O.D? | Starting Water PSI | Starting Air PSI | Trip Time Valve Sec: | Valve Trip PSI | Water to tes outlet Sec: | st Al Or | arms perated? |

CERTIFICATION: I am an employee of the inspecting firm listed above and have been properly trained to inspect, maintain and repair fire sprinkler systems. By signing my name to this document, I hereby certify and attest that the above information is factual and true and that the inspection and repairs were done in accordance with the manufacturers specifications, the New York State Fire Code, Lake Grove Village Code and the current editions of NFPA 25 and 13.

This certification does NOT imply that any items requiring daily, weekly, monthly or quarterly inspection or testing were performed at specified intervals, but DOES imply that all such items were tested/inspected and functioned as noted in this certification at the time of my inspection. I hereby certify that this inspection has been properly conducted and that all of the above statements and information is/are true and correct to the best of my knowledge.

I am fully aware that any false statements made herein are punishable as a misdemeanor pursuant to Section §210.45 of the New York State Penal Law.

| PRINT INSPECTORS NAME | SIGNATURE | DATE OF INSPECTION |
|-----------------------|-----------|--------------------|
| | | |

ORIGINAL COPY WITH SIGNATURE IN BLUE OR BLACK INK IS TO BE SUBMITTED TO THIS OFFICE AND A COPY LEFT AT THE SPRINKLER VALVE

| DATE RECEIVED | DATE REVIEWED | ACCEPTED: YES NO | ENTERED |
|---------------|---------------|------------------|---------|
| | | | |

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