



Contractor's Material and Test Certificate for Underground Piping

Installation of Private Service Mains and Their Appurtenances

PROCEDURE

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.

Permit Information	1	Address: _____ Building/Suite: _____
		Permit No.: _____

Building Owner / Owner's Agent	2	Name: _____
		Address: _____
		Email: _____ Phone: _____

Contractor Information	3	(a) Fire Suppression Systems (FSS) Contractor Information
		Contractor Name: _____ FSS Contractor License #: _____ Email: _____ Phone: _____

Plans and Instructions	4	Installation conforms to accepted plans: <input type="checkbox"/> Yes <input type="checkbox"/> No	Equipment used is approved: <input type="checkbox"/> Yes <input type="checkbox"/> No
		Has owner or owner's agent been instructed as to location of control valves and care and maintenance of this new equipment? <input type="checkbox"/> Yes <input type="checkbox"/> No	
		Have copies of appropriate instructions and care and maintenance charts been left on premises? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Underground pipes and joints	5	Pipe types and class: _____ Joint type: _____
		Pipe conforms to: _____ standard <input type="checkbox"/> Yes <input type="checkbox"/> No
		Fittings conform to: _____ standard <input type="checkbox"/> Yes <input type="checkbox"/> No
		Joints needing anchorage clamped, strapped, or blocked in accordance with _____ standard <input type="checkbox"/> Yes <input type="checkbox"/> No

Test description	6	<p>Flushing: Flow the required rate until clear as indicated by no collection of foreign material in burlap bags at outlet such as hydrants and blow-offs. Flush in accordance with requirements of NFPA 24 Table 10.10.2.1.3</p> <p>Hydrostatic: All piping and attached appurtenances subjected to system working pressure shall be hydrostatically tested at 200 psi (13.8 bar) or 50 psi (3.4 bar) in excess of the system working pressure, whichever is greater, and shall maintain that pressure +/- 5 psi (0.34 bar) for 2 hours.</p> <p>Hydrostatic Testing Allowance: Where additional water is added to the system to maintain the test pressures required by NFPA 24, 10.10.2.2.1 the amount of water shall be measured and shall not exceed the limits of Table 10.10.2.2.6, which are based upon the following equation</p> $L = \frac{SD\sqrt{P}}{148.000}$ <p> <i>L</i> = testing allowance (makeup water), in gallons per hour <i>S</i> = length of pipe tested, in feet <i>D</i> = nominal diameter of pipe, in inches <i>P</i> = average test pressure during the hydrostatic test, in pounds per square feet (gauge) </p>
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Tests:

- A) Flushing test
- B) Hydrostatic test
- C) Leakage test
- D) Forward flow test of backflow preventer

7

A) FLUSHING TEST:

New underground piping flushed according to _____ standard BY (company): _____

How flushing flow was obtained: Public water Tank / Reservoir Fire pump

Through what type of opening: Hydrant butt Open pipe

Lead-ins flushed according to _____ standard BY (company): _____

How flushing was obtained: Public water Tank / Reservoir Fire pump

Through what type of opening: Y connection to flange and spigot Open pipe

B) HYDROSTATIC TEST:

All new underground piping hydrostatically tested at: _____ psi for _____ hours

Joint covered: Yes No

C) LEAKAGE TEST:

Total amount of leakage measured: _____ gallons for _____ hours

Allowable leakage: _____ gallons for _____ hours

D) FORWARD FLOW TEST OF BACKFLOW PREVENTER:

Forward flow test performed in accordance with NFPA 24,10.10.2.5.2: Yes No

Hydrants & Control Valves

8

Number of hydrants installed: _____ Type and make _____

All operate satisfactorily: Yes No

Water control valves left wide open: Yes No

Hose threads of fire department connections and hydrants interchangeable with those of fire department answering alarm: Yes No

Date left in service

9

Additional explanation and notes

10

Declaration & Signatures

By accepting this statement, I, the certified technician shown on this form, certify that this fire protection system(s) has been properly inspected for functional operation in accordance with the current NFPA standards for this system. The certification must be presented by the Contractor to the building owner/owner's agent upon completion and shall be uploaded to the Fire Suppression Permit.

Signature of Contractor: _____ Date: _____

Signature of Property Owner / Owners Agent: _____ Date: _____