

Fire & Life Safety America, Inc
1407 Mill Race Drive Salem, VA 24153
Tel: (540)378-6160 Fax: (540)378-6171

FIRE PROTECTION SYSTEM SUMMARY INSPECTION AND TESTING FORM

Date: 12-20-13

Work Order #: 224154

GENERAL INFORMATION

Site Name: Backcreek School

Owner: _____

Address: _____

Address: _____

Last Inspection Date: **2012** By: **FLSA**

This inspection is (check one): monthly bi-monthly quarterly semi-annual annual Report to: _____

PART A EQUIPMENT AND ALARMS

1. Central station notified / alarms silenced **12:15** AM / PM Alarms restored **1:15** AM / PM
2. Fire Protection System(s) to be inspected (No., Size, Make, Model) **750 sq. ft. 1.4" Fire Master w/ T. Simplex 4010**

PART B OWNER'S SECTION (to be answered by owner or occupant)

1. Is the property occupied?
2. Has the occupancy classification or hazard of contents remained the same since the last inspection?
3. Is the "fire protection system" in service?
4. Has the "fire protection system" remained in service without modification or activation since last inspection?
5. If "no" to 4, all changes to building or system(s) fully reviewed, documented and properly protected.
6. Has the system been examined internally for obstructions where conditions exist that could cause obstructed piping? Date: 2009
7. Has the system piping (dry, preaction, deluge) been checked for proper drainage and/or pitch?
8. Is the "fire protection system" adequately protected from freezing?
9. Have hazardous locations and materials been identified and safety instructions provided to the technician prior to performing the inspection?

PART C - TEST NOTIFICATIONS

PRIOR TO START			UPON COMPLETION		
Yes	No	Time	Yes	No	Time
/		12:15	/		1:00
/		12:10	/		
/		12:10	/		
/		1:00	/		
/		1:00	/		

PART D - INSPECTION PERFORMED (Copies Attached of Items Checked)

- Sprinkler System Form
- Dry Valve Trip Test Report
- Sprinkler Piping Condition Form
- Fire Pump Inspection Form

- Standpipe Inspection Form
- Hydrant Flow Test Form
- Fire Alarm Detection Form
- Deluge/Pre-Action Trip Test Report

- Water Storage Tanks Form
- Private Fire Service Mains Form
- Backflow Test Form
- Addendum to Report of Inspection

Fire Protection Systems Report of Inspections

Work Order #: _____

Date: 12-20-13

Site Name: Beth Creek School Owner: _____
 Address: _____
 City: ROANOK State: VA Address: _____
 Zip: _____ City: _____ State: _____
 Zip: _____ Phone: _____

PART I INSPECTOR'S SECTION (all responses reference current inspection)		Yes	N/A	No
A. General				
1. Is the hydraulic data plate in place, permanently marked and securely attached?	<input checked="" type="checkbox"/>			
2. Is the fire department connection(s) in satisfactory condition, couplings free, caps in place, check valves tight and accessible and visible?	<input checked="" type="checkbox"/>			
3. Has the system check valve(s) been internally inspected within the last 5 years? (Date <u>2009</u>)	<input checked="" type="checkbox"/>			
4. Is the visible exterior of the system piping in good condition and free from damage? (Date checked <u>2012</u>)	<input checked="" type="checkbox"/>			
5. Are visible hangers in place, securely attached and free of corrosion? (Date checked <u>2012</u>)	<input checked="" type="checkbox"/>			
6. Are system gauges (water/air) in good condition and showing normal pressures?	<input checked="" type="checkbox"/>			
7. Were system gauges (water/air) checked against a calibrated gauge or replaced in the last 5 years? (Date <u>2009</u>)	<input checked="" type="checkbox"/>			
B. Wet Systems				
1. Are areas protected by wet systems inside the property properly heated?	<input checked="" type="checkbox"/>			
2. There is no leakage from drain pipes indicating problems with retard chambers, alarm drains or main drain?	<input checked="" type="checkbox"/>			
3. Are inspection and flow test tags in place and filled out completely?	<input checked="" type="checkbox"/>			
4. Was a flow test performed from Inspector's test valve and did the alarms operate?	<input checked="" type="checkbox"/>			
5. Are cold weather valves in the appropriate (open) / (closed) position?	<input checked="" type="checkbox"/>			
6. Are antifreeze test results satisfactory?	<input checked="" type="checkbox"/>			
Test Results: Solution Type _____ Freeze Point _____	<input checked="" type="checkbox"/>			
C. Dry Systems (see trip test report dated _____)				
1. Are the air pressure and priming water level in accordance with the manufacturer's instructions?	<input checked="" type="checkbox"/>			
2. Is the air (compressor) or nitrogen supply in service and operating properly?	<input checked="" type="checkbox"/>			
3. Are quick-opening devices in service? (Semiannual test performed on _____)	<input checked="" type="checkbox"/>			
4. Are air maintenance device(s) installed and operating properly?	<input checked="" type="checkbox"/>			
5. Is the intermediate chamber free from leakage and the velocity check free & clear?	<input checked="" type="checkbox"/>			
6. Were low points drained during this inspection? (Quantity Drained _____) (see Part III.J)	<input checked="" type="checkbox"/>			
7. Did the heating equipment in the valve enclosure operate at the time of inspection?	<input checked="" type="checkbox"/>			
D. Special Systems (Deluge- Preaction) (see trip test report dated _____)				
1. Did detection devices test satisfactorily during this inspection?	<input checked="" type="checkbox"/>			
2. Did the release/activation devices operate properly during detection testing?	<input checked="" type="checkbox"/>			
3. Is the air pressure and priming water level for the preaction system in accordance with manufacturer's instructions?	<input checked="" type="checkbox"/>			
E. Alarms (Wet, Dry, Preaction & Deluge)				
1. Are the alarm trim valves in the proper position, sealed and/or locked?	<input checked="" type="checkbox"/>			
2. Did the water motor and gong/electrical alarms (pressure and water flow) operate properly during testing?	<input checked="" type="checkbox"/>			
3. Did the central station/monitoring system receive all alarms?	<input checked="" type="checkbox"/>			
4. Did the low/high air alarms for the system piping/detection operate properly?	<input checked="" type="checkbox"/>			
5. Did tamper devices operate properly?	<input checked="" type="checkbox"/>			
F. Sprinklers				
1. Is the proper clearance maintained between the top of the storage and sprinkler deflector?	<input checked="" type="checkbox"/>			
2. Are all sprinklers free from corrosion, scaling or obstruction to spray discharge?	<input checked="" type="checkbox"/>			
3. Are standard sprinklers in service for less than 50 years / dated after 1920?	<input checked="" type="checkbox"/>			
4. Are fast response sprinklers in service for less than 20 years?	<input checked="" type="checkbox"/>			
5. Is a spare head cabinet with spare sprinklers and proper wrenches installed at system riser?	<input checked="" type="checkbox"/>			
6. Are sprinklers near heating devices of proper temperature rating?	<input checked="" type="checkbox"/>			
G. Control Valves (see item G.7)				
1. Are sprinkler system control valves in the appropriate position?	<input checked="" type="checkbox"/>			
2. Were operating stems of all O.S.&Y. valves lubricated, completely closed and re-opened? (Date _____)	<input checked="" type="checkbox"/>			
3. Were all control valves operated through full range and returned to normal position? (Date _____)	<input checked="" type="checkbox"/>			
4. Are valves free from external leaks?	<input checked="" type="checkbox"/>			
5. Are valves properly identified with signs?	<input checked="" type="checkbox"/>			
6. Are pressure regulating control valves open, not leaking, maintaining downstream pressure and free from physical damage? (Date tested _____)	<input checked="" type="checkbox"/>			

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7. Water Supply Data

1. Was a water flow test of main drain made at sprinkler riser?

YES N.A. NO
~~8~~

2 Water supply pressures:

a. City 50 psi c. Tank 100 psi

b. Fire pump 70 ps

3. Water flow test at sprinkler riser (in psi):

Test Pipe Location	Size Test Pipe	Static	Residual	Static
a) <u>DUCT</u>	2"	60	50	65
b)				
c)				

Test Pipe Location	Size Test Pipe	Static	Residual	Static
d				
e				
f				

Explain any 'no' answers and comment [see addendum(s) attached if checked]

① water meter going to working, Trim stopped up
② launders not working in pump room.

1. Adjustments or corrections made during this inspection: none

(This inspection was performed substantially in accordance with NFPA Standard 25(✓) or 13()□ ()□ ()□ ()□ ()□. Although these comments are not the result of an engineering review, the following desirable improvements are recommended [see addendum(s) attached if checked □])

* FLSA completed semi-annual sprinkler inspection

The information on this form is correct at the time and place of my inspection. The "fire protection system" was left in operational condition upon completion of this inspection except as noted above.

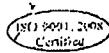
This report was reviewed with:

Virginia Sharp ✓

Virginia Sharp
Signature

Barry Horsley
Technician

12-20-13



Fire & Life Safety America, Inc

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FIRE PROTECTION SYSTEM SUMMARY INSPECTION AND TESTING FORM

Date: 12-23-13

Work Order #: 224134

GENERAL INFORMATION

Site Name: Clear Creek Elementary School

Owner: Rancho County Schools

Address: 5205 Franklin Rd

Address: _____

City: Paradise State: CA

City: State:

Last Inspection Date: 6-13 By: ELSA

This inspection is (check one): monthly bi-monthly quarterly semi-annual annual Report to: _____

PART A EQUIPMENT AND ALARMS

1. Central station notified / alarms silenced **8:00** **8/1 PM** Alarms restored

2. Fire Protection System(s) to be inspected (No., Size, Make, Model) **13" wet system**

PART B OWNER'S SECTION (to be answered by owner or occupant)

1. Is the property occupied?
2. Has the occupancy classification or hazard of contents remained the same since the last inspection?
3. Is the "fire protection system" in service?
4. Has the "fire protection system" remained in service without modification or activation since last inspection?
5. If "no" to 4, all changes to building or system(s) fully reviewed, documented and properly protected.
6. Has the system been examined internally for obstructions where conditions exist that could cause obstructed piping? Date: 2011
7. Has the system piping (dry, preaction, deluge) been checked for proper drainage and/or pitch?
8. Is the "fire protection system" adequately protected from freezing?
9. Have hazardous locations and materials been identified and safety instructions provided to the technician prior to performing the inspection?

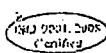
PART C- TEST NOTIFICATIONS

PART D - INSPECTION PERFORMED (Copies Attached of Items Checked)

- Sprinkler System Form
- Dry Valve Trip Test Report
- Sprinkler Piping Condition Form
- Fire Pump Inspection Form

- Standpipe Inspection Form
- Hydrant Flow Test Form
- Fire Alarm Detection Form
- Deluge/Pre-Action Trip Test Report

- Water Storage Tanks Form
- Private Fire Service Mains Form
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FIRE PROTECTION SYSTEM SUMMARY INSPECTION AND TESTING FORM

Date: 12-20-13

Work Order #: 224134

GENERAL INFORMATION

Site Name:	Buckcreek School		Owner:		
Address:			Address:	J	
City:	Renfro	State:	VA	City:	
				State:	

Last Inspection Date: 2012 By: FLSA

By: FLS, A

This inspection is (check one): monthly bi-monthly quarterly semi-annual annual Report to: _____

PART A EQUIPMENT AND ALARMS

1. Central station notified / alarms silenced **12:15** AM / PM Alarms restored **1:15** AM / PM
2. Fire Protection System(s) to be inspected (No., Size, Make, Model) **750 GPM, 4" FIRE MATIC ULT. Simplex 4010**

PART B OWNER'S SECTION (to be answered by owner or occupant)

1. Is the property occupied?
2. Has the occupancy classification or hazard of contents remained the same since the last inspection?
3. Is the "fire protection system" in service?
4. Has the "fire protection system" remained in service without modification or activation since last inspection?
5. If "no" to 4, all changes to building or system(s) fully reviewed, documented and properly protected.
6. Has the system been examined internally for obstructions where conditions exist that could cause obstructed piping? Date: 2009
7. Has the system piping (dry, preaction, deluge) been checked for proper drainage and/or pitch?
8. Is the "fire protection system" adequately protected from freezing?
9. Have hazardous locations and materials been identified and safety instructions provided to the technician prior to performing the inspection?

PART C - TEST NOTIFICATIONS

Monitoring Entity/Central Station

Building Management

Building Occupant

AHJ/FD

Other (specify)

Did alarm central station receive signal properly?

Did alarm panel reset properly?

PRIOR TO START			UPON COMPLETION		
Yes	No	Time	Yes	No	Time
/		12:15	/		1:00
/		12:10	/		
/		12:10	/		
/		1:00	/		
/		1:00	/		

PART D - INSPECTION PERFORMED (Copies Attached of Items Checked)

- Sprinkler System Form
- Dry Valve Trip Test Report
- Sprinkler Piping Condition Form
- Fire Pump Inspection Form

- Standpipe Inspection Form
- Hydrant Flow Test Form
- Fire Alarm Detection Form
- Deluge/Pre-Action Trip Test Report
-

- Water Storage Tanks Form
- Private Fire Service Mains Form
- Backflow Test Form
- Addendum to Report of Inspection

Fire Protection Systems Report of Inspections

Work Order #: _____

Date: 12-20-13

Site Name Beth Creek School Owner _____
 Address _____
 City ROANOKE State VA Address _____
 Zip _____ Phone _____ Zip _____ Phone _____

PART I INSPECTOR'S SECTION (all responses reference current inspection)		Yes	N/A	No
A. General				
1. Is the hydraulic data plate in place, permanently marked and securely attached?		/		
2. Is the fire department connection(s) in satisfactory condition, couplings free, caps in place, check valves tight and accessible and visible?		/		
3. Has the system check valve(s) been internally inspected within in the last 5 years? (Date <u>2009</u>)		/		
4. Is the visible exterior of the system piping in good condition and free from damage? (Date checked <u>2012</u>)		/		
5. Are visible hangers in place, securely attached and free of corrosion? (Date checked <u>2012</u>)		/		
6. Are system gauges (water/air) in good condition and showing normal pressures?		/		
7. Were system gauges (water/air) checked against a calibrated gauge or replaced in the last 5 years? (Date <u>2009</u>)		/		
B. Wet Systems				
1. Are areas protected by wet systems inside the property properly heated?		/		
2. There is no leakage from drain pipes indicating problems with retard chambers, alarm drains or main drain?		/		
3. Are inspection and flow test tags in place and filled out completely?		/		
4. Was a flow test performed from Inspector's test valve and did the alarms operate?		/		
5. Are cold weather valves in the appropriate (open) / (closed) position?		/		
6. Are antifreeze test results satisfactory?		/		
Test Results: Solution Type _____ Freeze Point _____				
C. Dry Systems (see trip test report dated _____)				
1. Are the air pressure and priming water level in accordance with the manufacturer's instructions?		/		
2. Is the air (compressor) or nitrogen supply in service and operating properly?		/		
3. Are quick-opening devices in service? (Semiannual test performed on _____)		/		
4. Are air maintenance device(s) installed and operating properly?		/		
5. Is the intermediate chamber free from leakage and the velocity check free & clear?		/		
6. Were low points drained during this inspection? (Quantity Drained _____) (see Part III.J)		/		
7. Did the heating equipment in the valve enclosure operate at the time of inspection?		/		
D. Special Systems (Deluge—Preaction) (see trip test report dated _____)				
1. Did detection devices test satisfactorily during this inspection?		/		
2. Did the release/activation devices operate properly during detection testing?		/		
3. Is the air pressure and priming water level for the preaction system in accordance with manufacturer's instructions?		/		
E. Alarms (Wet, Dry, Preaction & Deluge)				
1. Are the alarm trim valves in the proper position, sealed and/or locked?		/		
2. Did the water motor and gong/electrical alarms (pressure and water flow) operate properly during testing?		/		
3. Did the central station/monitoring system receive all alarms?		/		
4. Did the low/high air alarms for the system piping/detection operate properly?		/		
5. Did tamper devices operate properly?		/		
F. Sprinklers				
1. Is the proper clearance maintained between the top of the storage and sprinkler deflector?				
2. Are all sprinklers free from corrosion, scaling or obstruction to spray discharge?				
3. Are standard sprinklers in service for less than 50 years / dated after 1920?				
4. Are fast response sprinklers in service for less than 20 years?				
5. Is a spare head cabinet with spare sprinklers and proper wrenches installed at system riser?				
6. Are sprinklers near heating devices of proper temperature rating?				
<i>See Addendum</i>				
G. Control Valves (see item G.7)				
1. Are sprinkler system control valves in the appropriate position?				
2. Were operating stems of all O.S.&Y. valves lubricated, completely closed and reopened? (Date _____)				
3. Were all control valves operated through full range and returned to normal position? (Date _____)				
4. Are valves free from external leaks?				
5. Are valves properly identified with signs?				
6. Are pressure regulating control valves open, not leaking, maintaining downstream pressure and free from physical damage? (Date tested _____)				

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4. Water Supply Data

1. Was a water flow test of main drain made at sprinkler riser?

YES N/A NO
~~✓~~

2 Water supply pressures:

C Tank _____ psi

psi

3. Water flow test at sprinkler riser (in psi):

Test Pipe Location	Size Test Pipe	Static	Residual	Static
2 uct	2"	60	50	65
b				
c				

Test Pipe Location	Size Test Pipe	Static	Residual	Static
d				
e				
f				

Explain any no's/answers and comment [see addendum(s) attached if checked]

(1) water motor going no working, Tim stopped up
(2) lasers not working in pump room.

1. Adjustments or corrections made during this inspection: none

* FLSA completed semi-annual sprinkler inspection

The information on this form is correct at the time and place of my inspection. The "fire protection system" was left in operational condition upon completion of this inspection except as noted above.

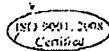
This report was reviewed with:

Virginia Sharp
First Name

Virginia May
Signature

Barry Korbly
Technician

12-20-13



Fire & Life Safety America, Inc

1407 Mill Race Drive Salem, VA 24153

Tel: (540)378-6160 Fax: (540)378-6171

FIRE PROTECTION SYSTEM SUMMARY INSPECTION AND TESTING FORM

Date: 12-23-13

Work Order #: 0004880 224134

GENERAL INFORMATION

Site Name:	Clear Creek Elementary School	Owner:	Racine County Schools
Address:	5205 Franklin Rd	Address:	
City:	Racine	City:	
	State: WI		State:

Last Inspection Date: 6-13 By: ELSA

This inspection is (check one): monthly bi-monthly quarterly semi-annual annual Report to: _____

PART A EQUIPMENT AND ALARMS

1. Central station notified / alarms silenced **8:00 AM** / PM Alarms restored AM / PM

2. Fire Protection System(s) to be inspected (No., Size, Make, Model) **(3") Wet System**

PART B OWNER'S SECTION (to be answered by owner or occupant)

1. Is the property occupied?
2. Has the occupancy classification or hazard of contents remained the same since the last inspection?
3. Is the "fire protection system" in service?
4. Has the "fire protection system" remained in service without modification or activation since last inspection?
5. If "no" to 4, all changes to building or system(s) fully reviewed, documented and properly protected.
6. Has the system been examined internally for obstructions where conditions exist that could cause obstructed piping? Date: 2011
7. Has the system piping (dry, preaction, deluge) been checked for proper drainage and/or pitch?
8. Is the "fire protection system" adequately protected from freezing?
9. Have hazardous locations and materials been identified and safety instructions provided to the technician prior to performing the inspection?

PART C- TEST NOTIFICATIONS

Monitoring Entity/Central Station

Building Management

Building Occupant

AHJ/FD

Other (specify)

Did alarm central station receive signal properly?

Did alarm panel reset properly?

<input checked="" type="checkbox"/> Sprinkler System Form	<input type="checkbox"/> Standpipe Inspection Form
<input type="checkbox"/> Dry Valve Trip Test Report	<input type="checkbox"/> Hydrant Flow Test Form
<input type="checkbox"/> Sprinkler Piping Condition Form	<input type="checkbox"/> Fire Alarm Detection Form
<input type="checkbox"/> Fire Pump Inspection Form	<input type="checkbox"/> Deluge/Pre-Action Trip Test Report

- Water Storage Tanks Form
- Private Fire Service Mains Form
- Backflow Test Form
- Addendum to Report of Inspection

Fire Protection Systems Report of Inspections

Work Order #: _____

Date: 12-23-13

Site Name Clearbrook Elcom School Owner Roanoke County Schools
 Address Franklin Rd Address _____
 City Roanoke State VA City _____ State _____
 Zip 24014 Phone _____ Zip _____ Phone _____

PART I INSPECTOR'S SECTION (all responses reference current inspection)		Yes	N/A	No
A. General				
1. Is the hydraulic data plate in place, permanently marked and securely attached?		✓		
2. Is the fire department connection(s) in satisfactory condition, couplings free, caps in place, check valves tight and accessible and visible?		✓		
3. Has the system check valve(s) been internally inspected within in the last 5 years? (Date <u>2011</u>)		✓		
4. Is the visible exterior of the system piping in good condition and free from damage? (Date checked <u>6-13</u>)		✓		
5. Are visible hangers in place, securely attached and free of corrosion? (Date checked <u>6-13</u>)		✓		
6. Are system gauges (water/air) in good condition and showing normal pressures?		✓		
7. Were system gauges (water/air) checked against a calibrated gauge or replaced in the last 5 years? (Date <u>2011</u>)		✓		
B. Wet Systems				
1. Are areas protected by wet systems inside the property properly heated?		✓		
2. There is no leakage from drain pipes indicating problems with retard chambers, alarm drains or main drain?		✓		
3. Are inspection and flow test tags in place and filled out completely?		✓		
4. Was a flow test performed from Inspector's test valve and did the alarms operate?		✓		
5. Are cold weather valves in the appropriate (open) / (closed) position?		✓		
6. Are antifreeze test results satisfactory?		✓		
Test Results: Solution Type _____ Freeze Point _____				
C. Dry Systems (see trip test report dated <u>N/A</u>)				
1. Are the air pressure and priming water level in accordance with the manufacturer's instructions?		✓		
2. Is the air (compressor) or nitrogen supply in service and operating properly?		✓		
3. Are quick-opening devices in service? (Semiannual test performed on _____)		✓		
4. Are air maintenance device(s) installed and operating properly?		✓		
5. Is the intermediate chamber free from leakage and the velocity check free & clear?		✓		
6. Were low points drained during this inspection? (Quantity Drained _____) (see Part III.J)		✓		
7. Did the heating equipment in the valve enclosure operate at the time of inspection?		✓		
D. Special Systems (Deluge—Preaction) (see trip test report dated <u>N/A</u>)				
1. Did detection devices test satisfactorily during this inspection?		✓		
2. Did the release/activation devices operate properly during detection testing?		✓		
3. Is the air pressure and priming water level for the preaction system in accordance with manufacturer's instructions?		✓		
E. Alarms (Wet, Dry, Preaction & Deluge)				
1. Are the alarm trim valves in the proper position, sealed and/or locked?		✓		
2. Did the water motor and gong/electrical alarms (pressure and water flow) operate properly during testing?		✓		
3. Did the central station/monitoring system receive all alarms?		✓		
4. Did the low/high air alarms for the system piping/detection operate properly?		✓		
5. Did tamper devices operate properly?		✓		
F. Sprinklers				
1. Is the proper clearance maintained between the top of the storage and sprinkler deflector?		✓		
2. Are all sprinklers free from corrosion, scaling or obstruction to spray discharge?		✓		
3. Are standard sprinklers in service for less than 50 years / dated after 1920?		✓		
4. Are fast response sprinklers in service for less than 20 years?		✓		
5. Is a spare head cabinet with spare sprinklers and proper wrenches installed at system riser?		✓		
6. Are sprinklers near heating devices of proper temperature rating?		✓		
G. Control Valves (see item G.7)				
1. Are sprinkler system control valves in the appropriate position?		✓		
2. Were operating stems of all O.S.&Y. valves lubricated, completely closed and reopened? (Date <u>12-13</u>)		✓		
3. Were all control valves operated through full range and returned to normal position? (Date <u>12-13</u>)		✓		
4. Are valves free from external leaks?		✓		
5. Are valves properly identified with signs?		✓		
6. Are pressure regulating control valves open, not leaking, maintaining downstream pressure and free from physical damage? (Date tested _____)				✓

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4. Water Supply Data

1. Was a water flow test of main drain made at sprinkler riser? 11/14
2. Water supply pressures: 11/14

YES	N.A.	NO
<input checked="" type="checkbox"/>		

2. Water supply system
a. City ~~100~~ PS
b. Fire pump ~~100~~ PS
c. Tank ~~N/A~~ PS
d. ~~N/A~~ PS

3. Water flow rate at sprinkler riser (in ps):

Test Pipe Location	Size Test Pipe	Static	Residual	Static
Rises	2"	120	105	120
1				
2				
3				

Explain any no's/answers and comment (see addendum(s) attached if checked)

1. Assessments or predictions made during this inspection:

None

The information on this form is correct at the time and place of my inspection. The "fire protection system" was left in operational condition upon completion of this inspection except as noted above.

இந்தப்போது வெளியே

By: East Coast Fire Protection, Inc.

Karen L. Pindleton

Signatur

ટેક્નોલોજી

12-23-13
Date



Service Authorization Agreement No: 106977

Order Date: <u>12/23/13</u> Phone:	Customer PO #
FLSA Job No.	Ordered By:
Job Name: <u>Clearbrook Elem School 15</u>	Bill To:
Job Address: <u>5205 Franklin Rd</u> <u>Roanoke, VA 24014</u>	Billing Address:
Contact Name: <u>Dennis Epperly</u>	Pmt Method: <input type="checkbox"/> Cash/Chk <input type="checkbox"/> Visa <input type="checkbox"/> MC <input type="checkbox"/> Amex <input type="checkbox"/> Discover <input type="checkbox"/> Bill To
Phone:	CC No: <input type="text"/> Exp Date: <input type="text"/>
Valve Seal #	CC Signature: <input type="text"/>

Description of Work: FLSA completed Semi-annual Spinnaker inspection per contract. System was returned to normal operation upon departure.

Limitation of Liability: FLSA's liability to Customer shall extend only to personal injury, death, or property damage arising from performance under this Agreement and shall be limited to the payments made to FLSA under this Agreement. Customer shall hold FLSA harmless from any and all third party claims for personal injury, death or property damage arising from Customer's failure to maintain its premises, including but not limited to damages to the fire protection system or Customer's property caused by water leakage, freezing pipes, loss of power, acts of God or other similar causes beyond the control of FLSA. In no event shall FLSA be liable for any special, indirect, incidental, consequential or any other damages of any character, including but not limited to the loss of use of the Customer's property, lost profits or lost production, whether claimed by Customer or by any third party, irrespective of whether claims or actions for such damages are based upon contract, warranty, negligence, tort, strict liability or otherwise.

DISCLAIMER OF WARRANTIES: FLSA HEREBY DISCLAIMS ANY AND ALL WARRANTIES NOT EXPRESSLY STATED HEREIN, INCLUDING WARRANTIES OF MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE. UNDER NO CIRCUMSTANCES AND IN NO EVENT SHALL FLSA BE LIABLE FOR ANY SPECIAL, INDIRECT OR CONSEQUENTIAL DAMAGES OR LOST PROFITS INCURRED BY CUSTOMER, WHETHER OR NOT FLSA RECEIVES NOTICE OF THE POTENTIAL FOR SUCH DAMAGES. NOTWITHSTANDING THE FOREGOING, ANY LIABILITY INCURRED BY FLSA SHALL BE LIMITED TO THE AMOUNT OF GOODS AND SERVICES PURCHASED BY CUSTOMER AND CONTAINED WITHIN THIS AGREEMENT.

TERMS AND CONDITIONS ON THE REVERSE SIDE ARE AN INTEGRAL PART OF THIS WORK ORDER. CLIENT ACKNOWLEDGES RECEIPT OF A COPY OF THIS WORK ORDER AND HAS READ THE FRONT AND REVERSE SIDE OF THIS WORK ORDER.

By signing below, the Customer hereby authorizes FLSA to perform the Work described above and certifies that: (i) the information provided above and/or attached to this Agreement is true, accurate, and complete to the best of Customer's knowledge; (ii) the signer has the authority to authorize the Work requested pursuant to this Agreement; and (iii) the Customer has read this entire Agreement and agrees to comply with and be bound by the terms and conditions contained herein.

Customer: Jeffrey, IL Entertainment
Signature: Jeffrey Pennington
Print Name: Jeffrey W Pennington
Title: President
Date: 12/23/13

FIRE PROTECTION SYSTEM SUMMARY INSPECTION AND TESTING FORM

Date: 12-23-13Work Order #: 224134

GENERAL INFORMATION

Site Name: Oak Grove Elem School Owner: Ranoke County Schools
 Address: 5005 Grandin Rd Ext Address:
 City: Roanoke State: VA City: _____ State: _____

Last Inspection Date: 6-13 By: FLSAThis inspection is (check one): monthly bi-monthly quarterly semi-annual annual Report to: Dennis Epperry

PART A EQUIPMENT AND ALARMS

1. Central station notified / alarms silenced N/A AM / PM Alarms restored N/A AM / PM2. Fire Protection System(s) to be inspected (No., Size, Make, Model) (1) 2" Domestic Wet System (1) 1" DomesticWet System (1) 1 1/2" Domestic Wet System.

PART B OWNER'S SECTION (to be answered by owner or occupant)

- Is the property occupied?
- Has the occupancy classification or hazard of contents remained the same since the last inspection?
- Is the "fire protection system" in service?
- Has the "fire protection system" remained in service without modification or activation since last inspection?
- If "no" to 4, all changes to building or system(s) fully reviewed, documented and properly protected.
- Has the system been examined internally for obstructions where conditions exist that could cause obstructed piping? Date: N/A
- Has the system piping (dry, preaction, deluge) been checked for proper drainage and/or pitch?
- Is the "fire protection system" adequately protected from freezing?
- Have hazardous locations and materials been identified and safety instructions provided to the technician prior to performing the inspection?

Yes	N/A**	No*
✓		
✓		
✓		
✓		
		✓
✓		
✓		
✓		

PART C - TEST NOTIFICATIONS

PRIOR TO START			UPON COMPLETION		
Yes	No	Time	Yes	No	Time
✓	✓	1:15	✓		

Monitoring Entity/Central Station

Building Management

Building Occupant

AHJ/FD

Other (specify)

Did alarm central station receive signal properly?

Did alarm panel reset properly?

PART D - INSPECTION PERFORMED (Copies Attached of Items Checked)

Sprinkler System Form
 Dry Valve Trip Test Report
 Sprinkler Piping Condition Form
 Fire Pump Inspection Form

Standpipe Inspection Form
 Hydrant Flow Test Form
 Fire Alarm Detection Form
 Deluge/Pre-Action Trip Test Report

Water Storage Tanks Form
 Private Fire Service Mains Form
 Backflow Test Form
 Addendum to Report of Inspection

Fire Protection Systems Report of Inspections

Work Order #: _____

Date: 12-23-13

Site Name Oak Grove Elm School
 Address 5005 Franklin Rd Ext
 City Roanoke State VA
 Zip Phone

Owner Roanoke County Schools
 Address
 City State
 Zip Phone

PART I INSPECTOR'S SECTION (all responses reference current inspection)

	Yes	N/A	No
A. General			
1. Is the hydraulic data plate in place, permanently marked and securely attached?	✓		
2. Is the fire department connection(s) in satisfactory condition, couplings free, caps in place, check valves tight and accessible and visible?	✓		
3. Has the system check valve(s) been internally inspected within in the last 5 years? (Date <u>6-13</u>)	✓		
4. Is the visible exterior of the system piping in good condition and free from damage? (Date checked <u>6-13</u>)	✓		
5. Are visible hangers in place, securely attached and free of corrosion? (Date checked <u>6-13</u>)	✓		
6. Are system gauges (water/air) in good condition and showing normal pressures?	✓	✓	
7. Were system gauges (water/air) checked against a calibrated gauge or replaced in the last 5 years? (Date _____)	✓		
B. Wet Systems			
1. Are areas protected by wet systems inside the property properly heated?	✓		
2. There is no leakage from drain pipes indicating problems with retard chambers, alarm drains or main drain?	✓		
3. Are inspection and flow test tags in place and filled out completely?	✓		
4. Was a flow test performed from Inspector's test valve and did the alarms operate?	✓		
5. Are cold weather valves in the appropriate (open) / (closed) position?	✓		
6. Are antifreeze test results satisfactory?	✓		
Test Results: Solution Type _____ Freeze Point _____			
C. Dry Systems (see trip test report dated <u>11/18</u>)			
1. Are the air pressure and priming water level in accordance with the manufacturer's instructions?	✓		
2. Is the air (compressor) or nitrogen supply in service and operating properly?	✓		
3. Are quick-opening devices in service? (Semiannual test performed on _____)	✓		
4. Are air maintenance device(s) installed and operating properly?	✓		
5. Is the intermediate chamber free from leakage and the velocity check free & clear?	✓		
6. Were low points drained during this inspection? (Quantity Drained _____) (see Part III.D)	✓		
7. Did the heating equipment in the valve enclosure operate at the time of inspection?	✓		
D. Special Systems (Deluge—Preaction) (see trip test report dated <u>11/18</u>)			
1. Did detection devices test satisfactorily during this inspection?	✓		
2. Did the release/activation devices operate properly during detection testing?	✓		
3. Is the air pressure and priming water level for the preaction system in accordance with manufacturer's instructions?	✓		
E. Alarms (Wet, Dry, Preaction & Deluge)			
1. Are the alarm trim valves in the proper position, sealed and/or locked?	✓		
2. Did the water motor and gong/electrical alarms (pressure and water flow) operate properly during testing?	✓		
3. Did the central station/monitoring system receive all alarms?	✓		
4. Did the low/high air alarms for the system piping/detection operate properly?	✓		
5. Did tamper devices operate properly?	✓		
F. Sprinklers			
1. Is the proper clearance maintained between the top of the storage and sprinkler deflector?	✓		
2. Are all sprinklers free from corrosion, scaling or obstruction to spray discharge?	✓		
3. Are standard sprinklers in service for less than 50 years / dated after 1920?	✓		
4. Are fast response sprinklers in service for less than 20 years?	✓		
5. Is a spare head cabinet with spare sprinklers and proper wrenches installed at system riser?	✓		
6. Are sprinklers near heating devices of proper temperature rating?	✓		
G. Control Valves (see item G.7)			
1. Are sprinkler system control valves in the appropriate position?	✓		
2. Were operating stems of all O.S.&Y. valves lubricated, completely closed and reopened? (Date <u>11/18</u>)	✓		
3. Were all control valves operated through full range and returned to normal position? (Date <u>12-23-13</u>)	✓		
4. Are valves free from external leaks?	✓		
5. Are valves properly identified with signs?	✓		
6. Are pressure regulating control valves open, not leaking, maintaining downstream pressure and free from physical damage? (Date tested _____)	✓		

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7. Control Valve Maintenance Table	Number	Type	Open	Secured	Closed	Signs	Timers	Seal No.	Abnormal Condition
City Connection Control Valve									
Tank Control Valves									
Pump Control Valves									
Seepage Control Valves									
System Control Valves	6	Ball	Y/5	Y/5	NO	Y/5	Y/5		
Other Control Valves									
Test Header Control Valve									
Pressure Reducing Control Valve									

4. Water Supply Data

1. Was a water flow test of main drain made at sprinkler riser?

YES	NA	NO
<input checked="" type="checkbox"/>		

2. Water supply pressures:

a. City N/A psc. Tank N/A psb. Fire pump N/A psd. N/A ps

3. Water flow test at sprinkler riser (in ps):

Test Pipe Location	Size Test Pipe	Static	Residual	Static
a	<u>N</u>	<u>/</u>	<u>A</u>	
b				
c				

Test Pipe Location	Size Test Pipe	Static	Residual	Static
d				
e				
f				

Explain any no's answers and comment [see addendum(s) attached if checked]

5. Adjustments or corrections made during this inspection:

NONE

(This inspection was performed substantially in accordance with NFPA Standard 25/4 Although these comments are not the result of an engineering review, the following desirable improvements are recommended [see addendum(s) attached if checked])

The information on this form is correct at the time and place of my inspection. The "fire protection system" was left in operational condition upon completion of this inspection except as noted above.

This report was reviewed with:

Kimberly M. Bradshaw



Signature

Claron Jern

Technician

12-23-13

Date

Fire Protection Systems Report of Inspections

Work Order #: _____

Date: 12-23-13

Site Name Clearbrook Elem School Owner Roanoke County Schools
 Address Franklin Rd Address _____
 City Roanoke State VA City _____ State _____
 Zip 24014 Phone _____ Zip _____ Phone _____

PART I INSPECTOR'S SECTION (all responses reference current inspection)		Yes	N/A	No
A. General				
1. Is the hydraulic data plate in place, permanently marked and securely attached?		✓		
2. Is the fire department connection(s) in satisfactory condition, couplings free, caps in place, check valves tight and accessible and visible?		✓		
3. Has the system check valve(s) been internally inspected within in the last 5 years? (Date <u>2011</u>)		✓		
4. Is the visible exterior of the system piping in good condition and free from damage? (Date checked <u>6-13</u>)		✓		
5. Are visible hangers in place, securely attached and free of corrosion? (Date checked <u>6-13</u>)		✓		
6. Are system gauges (water/air) in good condition and showing normal pressures?		✓		
7. Were system gauges (water/air) checked against a calibrated gauge or replaced in the last 5 years? (Date <u>2011</u>)		✓		
B. Wet Systems				
1. Are areas protected by wet systems inside the property properly heated?		✓		
2. There is no leakage from drain pipes indicating problems with retard chambers, alarm drains or main drain?		✓		
3. Are inspection and flow test tags in place and filled out completely?		✓		
4. Was a flow test performed from Inspector's test valve and did the alarms operate?		✓		
5. Are cold weather valves in the appropriate (open) / (closed) position?		✓		
6. Are antifreeze test results satisfactory?		✓		
Test Results: Solution Type _____ Freeze Point _____				
C. Dry Systems (see trip test report dated <u>N/A</u>)				
1. Are the air pressure and priming water level in accordance with the manufacturer's instructions?		✓		
2. Is the air (compressor) or nitrogen supply in service and operating properly?		✓		
3. Are quick-opening devices in service? (Semiannual test performed on _____)		✓		
4. Are air maintenance device(s) installed and operating properly?		✓		
5. Is the intermediate chamber free from leakage and the velocity check free & clear?		✓		
6. Were low points drained during this inspection? (Quantity Drained _____) (see Part III.J)		✓		
7. Did the heating equipment in the valve enclosure operate at the time of inspection?		✓		
D. Special Systems (Deluge- Preactivation) (see trip test report dated <u>N/A</u>)				
1. Did detection devices test satisfactorily during this inspection?		✓		
2. Did the release/activation devices operate properly during detection testing?		✓		
3. Is the air pressure and priming water level for the preactivation system in accordance with manufacturer's instructions?		✓		
E. Alarms (Wet, Dry, Preactivation & Deluge)				
1. Are the alarm trim valves in the proper position, sealed and/or locked?		✓		
2. Did the water motor and gong/electrical alarms (pressure and water flow) operate properly during testing?		✓		
3. Did the central station/monitoring system receive all alarms?		✓		
4. Did the low/high air alarms for the system piping/detection operate properly?		✓		
5. Did tamper devices operate properly?		✓		
F. Sprinklers				
1. Is the proper clearance maintained between the top of the storage and sprinkler deflector?		✓		
2. Are all sprinklers free from corrosion, scaling or obstruction to spray discharge?		✓		
3. Are standard sprinklers in service for less than 50 years / dated after 1920?		✓		
4. Are fast response sprinklers in service for less than 20 years?		✓		
5. Is a spare head cabinet with spare sprinklers and proper wrenches installed at system riser?		✓		
6. Are sprinklers near heating devices of proper temperature rating?		✓		
G. Control Valves (see item G.7)				
1. Are sprinkler system control valves in the appropriate position?		✓		
2. Were operating stems of all O.S.&Y. valves lubricated, completely closed and reopened? (Date <u>12-13</u>)		✓		
3. Were all control valves operated through full range and returned to normal position? (Date <u>12-13</u>)		✓		
4. Are valves free from external leaks?		✓		
5. Are valves properly identified with signs?		✓		
6. Are pressure regulating control valves open, not leaking, maintaining downstream pressure and free from physical damage? (Date tested _____)		✓		

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4. Water Supply Data

1. Was a water flow test of main drain made at sprinkler riser? _____

YES	N.A.	NO
<input checked="" type="checkbox"/>		

2 Water supply pressures:

C Tank N/A [REDACTED]

2 City 120 mi.

11/11

3. Water flow test at sprinkler riser (in ps):

Test Pipe Location	Size Test Pipe	Static	Residual	Static	Test Pipe Location	Size Test Pipe	Static	Residual	Static
Rises	2"	120	105	120	d				
b					e				
c					f				

Explain any right answers and comment if see addendum(s) attached if checked

1. Add comments or observations made during this inspection:

NOTE

The information on this form is correct at the time and place of my inspection. The "fire protection system" was left in operational condition upon completion of this inspection except as noted above.

This paper was reviewed with:

By: East Coast Fire Protection, Inc.

Karen L. Pendleton

Signature

John H.

Tibetan

1-2-23-13



Service Authorization Agreement No: 106977

Order Date: <u>12/23/13</u> Phone:	Customer PO #
FLSA Job No.	Ordered By:
Job Name: <u>Clear break Elem School 5</u>	Bill To:
Job Address: <u>5205 Franklin Rd</u> <u>Roanoke, VA 24014</u>	Billing Address:
Contact Name: <u>Dennis Eppert</u>	Pmt Method: Cash/Chk Visa MC Amex Discover Bill To
Phone:	CC No: Exp Date:
Valve Seal #	CC Signature:

Description of Work: FLSA completed Semi-annual Spaceliner inspection per contract. System was returned to normal operation upon departure.

Limitation of Liability: FLSA's liability to Customer shall extend only to personal injury, death, or property damage arising from performance under this Agreement and shall be limited to the payments made to FLSA under this Agreement. Customer shall hold FLSA harmless from any and all third party claims for personal injury, death or property damage arising from Customer's failure to maintain its premises, including but not limited to damages to the fire protection system or Customer's property caused by water leakage, freezing pipes, loss of power, acts of God or other similar causes beyond the control of FLSA. In no event shall FLSA be liable for any special, indirect, incidental, consequential or any other damages of any character, including but not limited to the loss of use of the Customer's property, lost profits or lost production, whether claimed by Customer or by any third party, irrespective of whether claims or actions for such damages are based upon contract, warranty, negligence, strict liability or otherwise.

DISCLAIMER OF WARRANTIES: FLSA HEREBY DISCLAIMS ANY AND ALL WARRANTIES NOT EXPRESSLY STATED HEREIN, INCLUDING WARRANTIES OF MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE. UNDER NO CIRCUMSTANCES AND IN NO EVENT SHALL FLSA BE LIABLE FOR ANY SPECIAL, INDIRECT OR CONSEQUENTIAL DAMAGES OR LOST PROFITS INCURRED BY CUSTOMER, WHETHER OR NOT FLSA RECEIVES NOTICE OF THE POTENTIAL FOR SUCH DAMAGES. NOTWITHSTANDING THE FOREGOING, ANY LIABILITY INCURRED BY FLSA SHALL BE LIMITED TO THE AMOUNT OF GOODS AND SERVICES PURCHASED BY CUSTOMER AND CONTAINED WITHIN THIS AGREEMENT.

TERMS AND CONDITIONS ON THE REVERSE SIDE ARE AN INTEGRAL PART OF THIS WORK ORDER. CLIENT ACKNOWLEDGES RECEIPT OF A COPY OF THIS WORK ORDER AND HAS READ THE FRONT AND REVERSE SIDE OF THIS WORK ORDER.

By signing below, the Customer hereby authorizes FLSA to perform the Work described above and certifies that: (i) the information provided above and/or attached to this Agreement is true, accurate, and complete to the best of Customer's knowledge; (ii) the signor has the authority to authorize the Work requested pursuant to this Agreement; and (iii) the Customer has read this entire Agreement and agrees to comply with and be bound by the terms and conditions contained herein.

Customer: Jeffrey, IL Elementary
Signature: Jeffrey Pennington
Print Name: Jeffrey N Pennington
Title: Principal
Date: 12/23/13

Fire Protection Systems Report of Inspections

Work Order #: _____

Date: 12-23-13

Site Name Oak Grove Elm School
 Address 5005 Franklin Rd Ext
 City Roanoke State VA
 Zip Phone

Owner Roanoke County Schools
 Address
 City State
 Zip Phone

PART I INSPECTOR'S SECTION (all responses reference current inspection)

A. General

1. Is the hydraulic data plate in place, permanently marked and securely attached?
2. Is the fire department connection(s) in satisfactory condition, couplings free, caps in place, check valves tight and accessible and visible?
3. Has the system check valve(s) been internally inspected within in the last 5 years? (Date 6-13)
4. Is the visible exterior of the system piping in good condition and free from damage? (Date checked 6-13)
5. Are visible hangers in place, securely attached and free of corrosion? (Date checked 6-13)
6. Are system gauges (water/air) in good condition and showing normal pressures?
7. Were system gauges (water/air) checked against a calibrated gauge or replaced in the last 5 years? (Date _____)

B. Wet Systems

1. Are areas protected by wet systems inside the property properly heated?
2. There is no leakage from drain pipes indicating problems with retard chambers, alarm drains or main drain?
3. Are inspection and flow test tags in place and filled out completely?
4. Was a flow test performed from Inspector's test valve and did the alarms operate?
5. Are cold weather valves in the appropriate (open) / (closed) position?
6. Are antifreeze test results satisfactory?

Test Results: Solution Type _____ Freeze Point _____

C. Dry Systems (see trip test report dated NA)

1. Are the air pressure and priming water level in accordance with the manufacturer's instructions?
2. Is the air (compressor) or nitrogen supply in service and operating properly?
3. Are quick-opening devices in service? (Semiannual test performed on _____)
4. Are air maintenance device(s) installed and operating properly?
5. Is the intermediate chamber free from leakage and the velocity check free & clear?
6. Were low points drained during this inspection? (Quantity Drained _____) (see Part III.J)
7. Did the heating equipment in the valve enclosure operate at the time of inspection?

D. Special Systems (Deluge—Preactivation) (see trip test report dated NA)

1. Did detection devices test satisfactorily during this inspection?
2. Did the release/activation devices operate properly during detection testing?
3. Is the air pressure and priming water level for the preactivation system in accordance with manufacturer's instructions?

E. Alarms (Wet, Dry, Preactivation & Deluge)

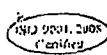
1. Are the alarm trim valves in the proper position, sealed and/or locked?
2. Did the water motor and gong/electrical alarms (pressure and water flow) operate properly during testing?
3. Did the central station/monitoring system receive all alarms?
4. Did the low/high air alarms for the system piping/detection operate properly?
5. Did tamper devices operate properly?

F. Sprinklers

1. Is the proper clearance maintained between the top of the storage and sprinkler deflector?
2. Are all sprinklers free from corrosion, scaling or obstruction to spray discharge?
3. Are standard sprinklers in service for less than 50 years / dated after 1920?
4. Are fast response sprinklers in service for less than 20 years?
5. Is a spare head cabinet with spare sprinklers and proper wrenches installed at system riser?
6. Are sprinklers near heating devices of proper temperature rating?

G. Control Valves (see item G.7)

1. Are sprinkler system control valves in the appropriate position?
2. Were operating stems of all O.S.&Y. valves lubricated, completely closed and reopened? (Date NA)
3. Were all control valves operated through full range and returned to normal position? (Date 12-23-13)
4. Are valves free from external leaks?
5. Are valves properly identified with signs?
6. Are pressure regulating control valves open, not leaking, maintaining downstream pressure and free from physical damage? (Date tested _____)



FIRE PROTECTION SYSTEM SUMMARY INSPECTION AND TESTING FORM

Date: 12-20-13

Work Order #: 224134

GENERAL INFORMATION

Site Name: Backcreek School

Owner: _____

Address: _____

Address: _____

Last Inspection Date: 2017

By: FLS

This inspection is (check one): monthly bi-monthly quarterly semi-annual annual Report to: _____

PART A EQUIPMENT AND ALARMS

1. Central station notified / alarms silenced **12:15** AM / PM Alarms restored **1:15** AM / PM
2. Fire Protection System(s) to be inspected (No., Size, Make, Model) **750 GPM 4" FIRE MATIC ULT. SIMPLEX 4010**

PART B OWNER'S SECTION (to be answered by owner or occupant)

1. Is the property occupied?
2. Has the occupancy classification or hazard of contents remained the same since the last inspection?
3. Is the "fire protection system" in service?
4. Has the "fire protection system" remained in service without modification or activation since last inspection?
5. If "no" to 4, all changes to building or system(s) fully reviewed, documented and properly protected.
6. Has the system been examined internally for obstructions where conditions exist that could cause obstructed piping? Date: 2009
7. Has the system piping (dry, preaction, deluge) been checked for proper drainage and/or pitch?
8. Is the "fire protection system" adequately protected from freezing?
9. Have hazardous locations and materials been identified and safety instructions provided to the technician prior to performing the inspection?

PART C - TEST. NOTIFICATIONS

PRIOR TO START			UPON COMPLETION		
Yes	No	Time	Yes	No	Time
/		12:15	/		1:00
/		12:10	/		
/		12:10	/		
/		1:00	/		
/		1:00	/		

PART D - INSPECTION PERFORMED (Copies Attached of Items Checked)

- Sprinkler System Form
- Dry Valve Trip Test Report
- Sprinkler Piping Condition Form
- Fire Pump Inspection Form

- Standpipe Inspection Form
- Hydrant Flow Test Form
- Fire Alarm Detection Form
- Deluge/Pre-Action Trip Test Report

- Water Storage Tanks Form
- Private Fire Service Mains Form
- Backflow Test Form
- Addendum to Report of Inspection