

# Contractor's Material and Test Certificate for Aboveground Piping



## PROCEDURE

Upon completion of work, inspection and tests shall be made by the contractor's representative and witnessed by the property owner or their authorized agent. 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.

Property name	Date
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Property address

<b>Plans</b>	Accepted by approving authorities (names)		
	Address		
	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
If no, explain deviations			

<b>Instructions</b>	Has person in charge of fire equipment been instructed as to location of control valves and care and maintenance of this new equipment? If no, explain			<input type="checkbox"/> Yes	<input type="checkbox"/> No
	Have copies of the following been left on the premises?			<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>Location of system</b>	1. System components instructions			<input type="checkbox"/> Yes	<input type="checkbox"/> No
	2. Care and maintenance instructions			<input type="checkbox"/> Yes	<input type="checkbox"/> No
	3. NFPA 25			<input type="checkbox"/> Yes	<input type="checkbox"/> No
	Supplies buildings				

<b>Sprinklers</b>	Make	Model	Year of manufacture	Orifice size	Quantity	Temperature rating

<b>Pipes and fittings</b>	Type of pipe _____
	Type of fittings _____

<b>Alarm valve or flow indicator</b>	Alarm device			Maximum time to operate through test connection	
	Type	Make	Model	Minutes	Seconds

<b>Dry pipe operating test</b>	Dry valve			Q.O.D.						
	Make	Model	Serial no.	Make	Model	Serial no.				
			Time to trip through test connection	Water pressure	Air pressure	Trip point air pressure	Time water reached test outlet		Alarm operated properly	
		Minutes	Seconds	psi	psi	psi	Minutes	Seconds	Yes	No
	Without Q.O.D.									
	With Q.O.D.									

If no, explain

<b>Deluge and preaction valves</b>	Operation <input type="checkbox"/> Pneumatic <input type="checkbox"/> Electric <input type="checkbox"/> Hydraulics							
	Piping supervised <input type="checkbox"/> Yes <input type="checkbox"/> No				Detecting media supervised <input type="checkbox"/> Yes <input type="checkbox"/> No			
	Does valve operate from the manual trip, remote, or both control stations? <input type="checkbox"/> Yes <input type="checkbox"/> No							
	Is there an accessible facility in for testing? <input type="checkbox"/> Yes <input type="checkbox"/> No				If no, explain			
	Make	Model	Does each circuit operate supervision loss alarm?		Does each circuit operate valve release?		Maximum time to operate release	
		Yes	No	Yes	No	Minutes	Seconds	
<b>Pressure-reducing valve test</b>	Location and floor	Make and model	Setting	Static pressure		Residual pressure (flowing)		Flow rate
				Inlet (psi)	Outlet (psi)	Inlet (psi)	Outlet (psi)	Flow (gpm)
<b>Backflow device forward flow test</b>	Indicate means used for forward flow test of backflow device: _____							
	When means to test device was opened, was system flow demand created? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A							
<b>Test description</b>	<p><u>Hydrostatic:</u> Hydrostatic tests shall be made at not less than 200 psi (13.6 bar) for 2 hours or 50 psi (3.4 bar) above static pressure in excess of 150 psi (10.2 bar) for 2 hours. Differential dry pipe valve clappers shall be left open during the test to prevent damage. All aboveground piping leakage shall be stopped.</p> <p><u>Pneumatic:</u> Establish 40 psi (2.7 bar) air pressure and measure drop, which shall not exceed 1 ½ psi (0.1 bar) in 24 hours. Test pressure tanks at normal water level and air pressure and measure air pressure drop, which shall not exceed 1 ½ psi (0.1 bar) in 24 hours.</p>							
<b>Tests</b>	All piping hydrostatically tested at ____ psi ( ____ bar) for ____ hours					If no, state reason		
	Dry piping pneumatically tested <input type="checkbox"/> Yes <input type="checkbox"/> No							
	Equipment operates properly <input type="checkbox"/> Yes <input type="checkbox"/> No							
	Do you certify as the sprinkler contractor that additives and corrosive chemicals, sodium silicate or derivatives of sodium silicate, brine, or other corrosive chemicals were not used for testing systems or stopping leaks? <input type="checkbox"/> Yes <input type="checkbox"/> No							
	Drain test	Reading of gauge located near water supply test connection: ____ psi ( ____ bar)			Residual pressure with valve in test connection open wide: ____ psi ( ____ bar)			
	Underground mains and lead-in connections to system risers flushed before connection made to Sprinkler piping							
	Verified by copy of the Contractor's Material and Test Certificate for Underground Piping. <input type="checkbox"/> Yes <input type="checkbox"/> No					Other Explain		
	Flushed by installer of underground sprinkler piping <input type="checkbox"/> Yes <input type="checkbox"/> No							
	If powder-driven fasteners are used in concrete, has representative sample testing been satisfactorily completed? <input type="checkbox"/> Yes <input type="checkbox"/> No					If no, explain		
<b>Blank testing gaskets</b>	Number used	Locations				Number removed		
<b>Welding</b>	Welding piping <input type="checkbox"/> Yes <input type="checkbox"/> No							
	If yes...							
	Do you certify as the sprinkler contractor that welding procedures used complied with the minimum requirements of AWS B2.1, ASME Section IX <i>Welding and Brazing Qualifications</i> , or other applicable qualification standard as required by the AHJ?					<input type="checkbox"/> Yes <input type="checkbox"/> No		
	Do you certify that all welding was performed by welders or welding operators qualified in accordance with the minimum requirements of AWS B2.1, ASME Section IX <i>Welding and Brazing Qualifications</i> , or other applicable qualification standard as required by the AHJ?					<input type="checkbox"/> Yes <input type="checkbox"/> No		
Do you certify that the welding was conducted in compliance with a documented quality control procedure to ensure that (1) all discs are retrieved; (2) that openings in piping are smooth, that slag and other welding residue are removed; (3) the internal diameters of piping are not penetrated; (4) completed welds are free from cracks, incomplete fusion, surface porosity greater than 1/16 in. diameter, undercut deeper than the lesser of 25% of the wall thickness or 3/32 in.; and (5) completed circumferential butt weld reinforcement does not exceed 3/32 in.?					<input type="checkbox"/> Yes <input type="checkbox"/> No			

<b>Cutouts (discs)</b>	Do you certify that you have a control feature to ensure that all cutouts (discs) are retrieved? <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span>	
<b>Hydraulic data nameplate</b>	Nameplate provided <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span>	If no, explain
Sprinkler contractor removed all caps and straps? <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span>		
<b>Remarks</b>	Date left in service with all control valves open	
	Name of sprinkler contractor	
<b>Signatures</b>	<b>Tests witnessed by</b>	
	The property owner or their authorized agent (signed)	Title <span style="margin-left: 50px;">Date</span>
	For sprinkler contractor (signed)	Title <span style="margin-left: 50px;">Date</span>
	For Fire Department (signed)	Title <span style="margin-left: 50px;">Date</span>
	Additional explanation and notes	