

# FIRE SPRINKLER ACCEPTANCE TEST

This form **shall** be submitted prior to scheduling Final Inspection



Date Documents Submitted: \_\_\_\_\_  
Log No.: \_\_\_\_\_  
File No.: \_\_\_\_\_  
Plan Examiner: \_\_\_\_\_  
Date of Approval: \_\_\_\_\_  
Permit No.: \_\_\_\_\_

## Property Information

Building Name: \_\_\_\_\_  
Building Address: \_\_\_\_\_  
Owner's Name: \_\_\_\_\_  
Owner's Address: \_\_\_\_\_  
Owner's Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

## System Designer/Contractor

Company Name: \_\_\_\_\_  
Company Address: \_\_\_\_\_  
Contact Person (Designer): \_\_\_\_\_  
Designer Qualifications: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

## General

- Yes  No Was NFPA 13, 13R, or 13D used in the system design and installation?  
 Yes  No Is a copy of the AHJ-accepted plans on-site?  
 Yes  No Actual occupancy type matches the occupancy specified on the approved plans ?  
 Yes  No Actual fire sprinkler occupancy hazard classification matches fire sprinkler occupancy hazard specified on the accepted plans?  
 Yes  No Actual construction type matches construction type specified on the accepted plans?  
 Yes  No Actual scope of work matches scope of work on the accepted plans

## Sprinkler Type and Coverage

Type of sprinkler system:

- Wet  Dry  Preaction  Deluge

- Yes  No Sprinklers omitted in some areas (combustible concealed spaces, etc.)  
 Yes  No If yes, omissions allowed per NFPA 13 Omitted area(s) \_\_\_\_\_  
 Yes  No Spare sprinklers provided  
 Yes  No Sprinkler wrench provided for each type of sprinkler  
 Yes  No Area of coverage matches approved plans

## Fire Pump

- Yes  No  N/A Fire pump provided  
 Yes  No Gallon per minute and pressure rating of pump match the approved plans

**Type of fire pump:**

- Electric       Diesel       Gasoline       LPG/LNG       Steam
- Yes       No      Fire pump acceptance test conducted in accordance with NFPA 20

**Documentation**

- Yes       No      Contractor’s material and test certificate for aboveground piping form received, filled out, and signed
- Yes       No      Contractor’s material and test certificate for underground piping form received, filled out, and signed

**Hydraulic Design Information Sign**

- Yes       No      Hydraulic design information sign provided at valve

*Sign provides the following:*

- Yes       No      Permanently marked weatherproof metal or rigid plastic sign secured with corrosion-resistant wire, chain, or other approved means
- Yes       No      Location of the design area or areas
- Yes       No      Discharge densities over the design area or areas
- Yes       No      Required flow and residual pressure demand at the base of the riser
- Yes       No      Occupancy classification or commodity classification and maximum permitted storage height and configuration
- Yes       No      Hose stream demand and sprinkler demand

**Underground Flush and System Hydrostatic Test**

- Yes       No      System underground flushed at the required rate of flow prior to connection of sprinkler piping
- Yes       No      Hydrostatic test of the system performed

System working pressure: \_\_\_\_\_ psi

Hydrostatic test pressure: \_\_\_\_\_ psi

Hydrostatic test duration:     2 hours                       Other \_\_\_\_\_

If “Other,” why? \_\_\_\_\_

- Yes       No      System passed hydrostatic test

If no, why? \_\_\_\_\_

**Dry Pipe and Double Interlock System Air Test**

- Yes       No       N/A      24-hour 40 psi air test conducted
- Yes       No       N/A      System passed the air test
- Yes       No       N/A      Water or air leaks noted on the system

If yes, where: \_\_\_\_\_

**Sprinkler Component Information**

- Yes       No      All pipe sizes match the approved plans and calculations
- Yes       No      All pipe lengths match the approved plans and calculations
- Yes       No      All other component information provided during plan review matches what was found during acceptance test

If no, why: \_\_\_\_\_

- Yes       No      Sprinkler heads in place per the approved plan

- Yes     No                      Sprinkler heads oriented properly relative to obstructions
- Yes     No                      All hangers, sleeves, braces, and methods of securing sprinklers in proper position and connected
- Yes     No                      All control valves, check valves, drain pipes, and test connections tested for proper operation
- Yes     No     N/A                      Standpipe risers, hose outlets, hand hose, monitor nozzles, and related equipment in proper location and operational
- Yes     No     N/A                      Pressure-reducing valves in place and tested
- Yes     No     N/A                      Backflow preventer valves in place and tested
- Yes     No     N/A                      Manual activation means tested
- Yes     No                      Main drain test performed
- Yes     No     N/A                      Dry pipe valve room heated
- Yes     No                      All test blanks and disks removed and accounted for

**Fire Department Connection(s)**

- Yes     No                      Fire department connection(s) identified
- Yes     No                      Caps in place for each inlet
- Yes     No                      Connections accessible

**Alarms**

- Yes     No                      Water flow notification device is working properly
- Yes     No     N/A                      Fire alarm system connection (if required) completed
- Yes     No                      Waterflow detecting devices tested and operational
- Yes     No                      Waterflow detected within 45-90 seconds
- Yes     No                      Supervisory switches and alarms tested and operational

**Approval**

Inspector: \_\_\_\_\_ Date: \_\_\_\_\_

Approved     Yes     No

If no, reason(s):

**Notes:**