

TEXAS DEPARTMENT OF INSURANCE

State Fire Marshal's Office (112-FM)

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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 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 the 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 authorities requirements or local ordinances.

Property Name										Da	ate				
Property Address			City				State	Zip							
	Accepted by approv	ing authoritie	s(names))											
PLANS	Address														
-	Installation conforms to accepted plans														No
	Equipment used is a		plans												No
	If no, explain deviati	ons													
	Has person in charg control valves and c			Yes			No								
INSTRUCTIONS	If no, explain														
	Have copies of the f 1. System Co				es?							Yes			No
	2. Care and M											Yes			No
LOCATION	3. NFPA 25) Yes			No
OF SYSTEM	Supplies buildings														
	Make		Model			Year of Manufacture		Orifice Size		Quantity		Temperature Rating			
								+							
SPRINKLERS															
	Type of pipe														
PIPE AND FITTINGS															
	Type of fittings														
ALARM VALVE	Туре		ALA	ALARM DEVICES Make Model					Maxi	mum time t Minute:		bugh test connection Seconds			
OR FLOW	1900		-		lano						Wintered	5		0000	
INDICATOR															
		-	DRY VAL	VE							Q.C).D.			
	Make		Model			Serial No.			Make		Model		Serial No.		
DRY PIPE		Time to		water Dr.		essure Air Pres		sure Trip Point Air		Air	r Time water rea		reached Alarm operate		orated
OPERATING	Time to trip t test connec							Pressure						properly	
TEST		Minutes	Seco	nds	psi		psi		psi		Minutes	Seconds	Ye	es	No
	Without Q.O.D.		<u> </u>												
	With Q.O.D.														
	If no, explain														
	Operation Deneumatic Delectric Delydraulic														
	Piping supervised Image: Yes Image: No Detection media supervised Does valve operate from the manual trip, remote, or both control stations? Image: No Image: No											Yes No			
														No	
DELUGE &	Is there an accessible facility in each circuit If no, explain for testing?														
PREACTION VALVES	Does each circuit operate Does each circuit operate va								e valve	Maximum time to operate release?					
	Make	Model		supervision loss ala					release?						
				Ye	Yes		No		Yes N		No	Minutes		Se	conds

¹ Measured from time inspector's test connection is opened.

² NFPA 13 only requires the 60-second limitation in specific sections

PRESSURE	Location & Floor Make & Model		Setting	STATIC P	IRE	RESIDUAL PR	FLOW RATE							
REDUCING					Inlet (psi)		ıtlet (psi)	Inlet (psi)	Outlet (psi)		Flow (GPM)			
VALVE TEST														
TEST DESCRIPTION	HYDROSTATIC: Hydrostatic tests shall be made at not less than 200 psi (13.6 bars) for two hours or 50 psi (3.4 bars) above static pressure in excess of 150 psi (10.2 bars) for two hours. Differential Dry-Pipe Valve clappers shall be left open during test to prevent damage. All aboveground piping leakage shall be stopped. PNEUMATIC: Establish 40 psi (2.7 bars) air pressure and measure drop, which shall not exceed 1-1/2 psi (0.1 bars) in 24 hours. Test pressure tanks at normal water level and air pressure and measure drop, which shall not exceed 1-1/2 psi (0.1 bars) in 24 hours.													
					•	•			· · · · ·	Juio.				
	All pipe hydraulically tested at:											other corrosive		
	chemicals were not used for testing systems or stopping leaks?													
TESTS	DRAIN Reading of gage located near Residual pressure with valve TEST water supply test connection: psi (bar)								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 & Test Verified by copy of the Contractor's Material & Test Certificate for Underground Piping. Flushed by installer of underground sprinkler piping. If powder driven fasteners are used in concrete, has representative If no. explain													
				re used in con- ctorily complete		entative □ No	f no, ex	plain						
BLANK TESTING GASKETS	Number us	ed		Locations						٢	Number r	emoved		
	Welded pip	ping		□ Yes	D No	0					_			
WELDING	If yes Do you certify as the sprinkler contractor that welding procedures comply with the requirements of at least AWS B2.1? Image: Vesice and the sprinkler contractor that welding procedures comply with the requirements of at least AWS B2.1? Image: Vesice and the sprinkler contractor that welding was performed by welders qualified in compliance with the requirements of at least AWS B2.1? Image: Vesice and the sprinkler contractor that welding was carried out in compliance with a documented quality control procedure to ensure that all discs are retrieved, that openings in piping are smooth, that slag and other welding Image: Vesice and the structure of the intervented of the interv													
CUTOUTS (DISCS)	residue are removed, and that the internal diameters of piping are not penetrated? Image: Yes Image: No Do you certify that you have a control feature to ensure that all cutouts (disks) are retrieved? Image: Yes Image: No													
HYDRAULIC DATA NAMEPLATE	Nameplate provided? If no, explain Yes No													
REMARKS	DATE left i	in service	e with all o	control valves o	open:	·								
	Name of sprinkler contractor							C of R No.	SCR-					
	Contractor's Address						City			State	Zip			
Signature						Tests witnes	sed by	/						
	For property owner (signed)								le Date					
	For sprinkler contractor (signed)							T	itle		Date	3		
Additional explanation	on and notes													

RME	I certify that the information herein is true and that this sprinkler system was installed in accordance with Chapter 6003, Texas Insurance Code and the rules and standards adopted by the State Fire Marshal's Office. Responsible Managing Employee (signature)								
CERTIFICATION	Responsible Managing Employee (print or type name)								
	RME License Number	Date							
DISTRIBUTION:	Original COPY 1 Posted at site or give to owner Co	OPY 2 for the installing firm in file accessible to SFMO							

COPY 3 for local approving authority within 10 days after completion