

# OKIE SAFETY CONSULTING

## Sprinkler “Pre-Acceptance” Test Checklist

This **Sprinkler Pre-Acceptance Test Checklist** must be completed **prior to scheduling the field inspection**. Please send a copy of this completed form (with appropriate signatures)  
*This must be completed and filled out before final inspection is scheduled.*

### PROPERTY INFORMATION

Building Name:

Building Address:

### SYSTEM CONTRACTOR/INSTALLER

Company Name:

Company Address:

Responsible Person (*Contractor and/or Installer*):

Phone #:

Fax #:

Email:

### REQUIRED ACCEPTANCE TEST

#### HYDROSTATIC TESTS

Yes  No  N/A

1. All piping hydrostatically tested at not less than 200 psi for 2 hours, **or** 50 psi above static test in excess of 150 psi for 2 hours?

Yes  No  N/A

2. Piping shall be “air tested” @ 40 psi for 24 hours with a drop not to exceed 1.5 psi (*Dry Systems*)

Yes  No  N/A

3. Piping between the exterior fire department connection and the check valve (backflow prevention device) shall be tested in the same manner as Item #1 or #2.

#### SYSTEM OPERATIONAL TESTS

Yes  No  N/A

4. **Waterflow Detecting Devices (and alarm circuits)** flow tested through inspector’s test connection and shall result in audible alarm on the premises within 5 minutes after flow begins. (*Wet Systems*)

Yes  No  N/A

5. **Working test of the dry pipe valve & quick-opening device (if applicable)** shall be made by opening inspector’s test connection and measure the time to trip the valve from the time the inspector’s test valve is completely opened. (*Dry Systems*)

*Maximum Volume is 750 gallons; unless a 60 second water delivery is achieved from time valve opened to water flow. NFPA 13:4-2.3*

Yes  No  N/A

6. **Pre-Action Systems** shall be tested in accordance with manufacturer’s instructions (*where applicable*)

Yes  No

7. **Main Drain Valves** shall be opened and remain opened under system pressure until the system pressure stabilizes, and static and residual pressures shall be recorded.

Yes  No

8. **Main Sprinkler Water Drain Discharge** to the exterior of building?

Yes  No

9. **Operating Test for Control Valves** shall be fully closed and opened under system water pressure.

Yes  No  N/A

10. **Pressure Reducing Valves** shall be tested upon completion of installation to ensure proper operation under flow and no flow conditions, and verify that

	device properly regulates outlet pressure at both maximum and normal inlet pressure conditions. <i>(If applicable)</i> .
<input type="checkbox"/> Yes <input type="checkbox"/> No	11. <b>Backflow Prevention Assemblies</b> shall be <b>forward flow tested</b> to ensure proper operation, and the minimum flow rate shall be the system demand and include hose stream allowance.
<input type="checkbox"/> Yes <input type="checkbox"/> No	12. <b>Prior to conducting Final Acceptance Test</b> , the following items shall be inspected: <ul style="list-style-type: none"> <li>- Size, placement, and position of nozzles or discharge orifices</li> <li>- Location of Audible and Visual alarm devices (Horns and Strobes) <b>(IBC 907)</b></li> </ul>
<input type="checkbox"/> Yes <input type="checkbox"/> No	13. A <b>special sprinkler wrench</b> and a <b>stock of spare sprinklers</b> kept in a cabinet and consisting of: <ul style="list-style-type: none"> <li>- All types and ratings of sprinkler nozzles located throughout the facility;</li> <li>- With at least six (6) spare sprinklers.</li> </ul>

**HYDRAULIC DESIGN INFORMATION SIGN**

<input type="checkbox"/> Yes <input type="checkbox"/> No	14. A permanently marked weatherproof metal or rigid plastic sign secured with corrosion resistant wire, chain, or other approved provided?
<input type="checkbox"/> Yes <input type="checkbox"/> No	15. The sign shall include the following information: <ul style="list-style-type: none"> <li>- Location of Design Area(s)</li> <li>- Discharge Densities over the Design Area(s)</li> <li>- Required Flow and Residual Pressure Demand at the Base of Riser</li> <li>- Occupancy Classification <b>or</b> <i>(Commodity Classification &amp; Maximum permitted storage height and configuration)</i></li> <li>- Hose Stream Allowance</li> <li>- The Name of the Installing Contractor</li> </ul>

**GENERAL INFORMATION SIGN**

<input type="checkbox"/> Yes <input type="checkbox"/> No	16. A permanently marked weatherproof metal or rigid plastic sign secured with corrosion resistant wire, chain, or other approved provided?
<input type="checkbox"/> Yes <input type="checkbox"/> No	17. The sign shall be placed at each system control riser and shall include the following: <ul style="list-style-type: none"> <li>- Name and location of the facility protected</li> <li>- Presence of high-piled and/or rack storage</li> <li>- Maximum height of storage planned</li> <li>- Aisle width planned</li> <li>- Commodity Classification</li> <li>- Encapsulation of pallet loads</li> <li>- Presence of solid shelving</li> <li>- Flow Test Data</li> <li>- Presence of flammable/combustible liquids</li> <li>- Presence of hazardous materials</li> <li>- Presence of other special storage</li> <li>- Location of auxiliary drains and low point drains</li> <li>- Original results of main drain flow test</li> <li>- Name of installing contractor or designer</li> <li>- Indication of presence and location of antifreeze or other auxiliary systems.</li> </ul>

**ALARM SYSTEM SUPERVISION**

Name of Monitoring Station:	Contact:
Address:	Phone #:
Fax#:	Email :

**DOCUMENTATION REQUIRED AT FINAL**

Yes  No

18. Contractor's Material and Test Certificate for Aboveground Piping

**Owner or General Contractor**

I certify that the information provided in this document is true and accurate.

\_\_\_\_\_  
(Printed Name)

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Company Name)

\_\_\_\_\_  
(Email and Phone Contact)

**DISCLAIMER:** This list is not all-encompassing due to the extensive list of adopted codes. The inspector shall document ALL fire and Life Safety violations and require corrections when any are discovered during an inspection.

