



# INDEPENDENCE FIRE DEPARTMENT



## Contractor 's Material and Test for Private Service Lines

**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 contractor. It is understood the owner's representative 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

Property address

Plans	Accepted by approving authorities (names)			
	Address			
	Installation conforms to accepted plans	yes	<input type="checkbox"/>	no <input type="checkbox"/>
	Equipment used is approved	yes	<input type="checkbox"/>	no <input type="checkbox"/>
Instructions	Has person in charge of fire equipment been instructed as to the location of control valves and care and maintenance of this new equipment.    yes <input type="checkbox"/> no <input type="checkbox"/>			
	Have copies of appropriate instructions and care and Maintenance charts been left on premises?    Yes <input type="checkbox"/> no <input type="checkbox"/> If no, explain			
Location	Supplies building			
Underground Pipes & joints	Pipe types and class	Type joint		
	Pipe conforms to _____ standard	yes	<input type="checkbox"/>	no <input type="checkbox"/>
	Fitting conforms to _____ standard if no, explain	yes	<input type="checkbox"/>	no <input type="checkbox"/>
	Joints needed anchorage clamped, strapped, or blocked In accordance with _____ standard. If no, explain	yes	<input type="checkbox"/>	no <input type="checkbox"/>
Tests Description	<p><b>Hydrostatic:</b> Hydrostatic tests shall be made at not less than 200 psi (13.8 bar) for 2 hours or 50 psi (3.4 bar) above static pressure in excess of 150 psi (10.3) for 2 hours.</p> <p><b>Flushing:</b> Flow the required rate until water is clear as indicated by no collection of foreign material in burlap bags at outlets such as hydrants and blow-offs. Flush at flows not less than 390 gpm (1476 L/min) for 4-in. pipe, 850 gpm (3331 L/min) for 6-in. pipe, 1560 gpm (5905 L/min) for 8-in. pipe, 2440 gpm (9235 L/min) for 10-in. pipe, and 3520 gpm (13,323 L/min) for 12-in. pipe. When supply cannot produce stipulated flow rates, obtain maximum available.</p> <p><b>Leakage:</b> New pipe laid with rubber gasketed joints shall, if the workmanship is satisfactory, have little or no leakage at the joints. The amount of leakage at the joints shall not exceed 2 quarts per hour (1.89 L/min) per 100 joints irrespective of pipe diameter. The leakage shall be distributed over all joints. If such leakage occurs at a few joints, the installation shall be considered unsatisfactory and necessary repairs made. The amount of allowable leakage specified above can be increased by 1 fluid ounce per inch valve diameter per hour. (30 mL/25mm/hr) for each metal seated valve isolating the test section. If dry barrel hydrants are tested with the main valve open so the hydrants are under pressure, an additional 5 ounces per minute (150 mL/min) leakage is permitted for each hydrant.</p>			

Flushing test	New underground piping flushed according to _____ standard by _____ (company)      yes <input type="checkbox"/> no <input type="checkbox"/>	
	If no, explain	
	How flushing was obtained <input type="checkbox"/> Public water <input type="checkbox"/> Tank or reservoir <input type="checkbox"/> Fire pump	Through what type opening <input type="checkbox"/> Hydrant butt <input type="checkbox"/> Open pipe
	Lead-ins flushed according to _____ standard by (company)      yes <input type="checkbox"/> no <input type="checkbox"/>	
Hydrostatic Test	All new underground piping hydrostatic tested at _____ psi      for _____ hours	
	joints covered <input type="checkbox"/> Yes <input type="checkbox"/> No	
Leakage Tests	Total amount of leakage measured _____ gallons      _____ hours	
	Allowable leakage _____ gallons      _____ hours	
Hydrants	Number installed _____      Type and make _____	All operate satisfactory _____
Control Valves	Water control valves left wide open      yes <input type="checkbox"/> no <input type="checkbox"/>	
	If no, state reason	
Remarks	Hose treads of the Fire Department connections and hydrants      yes <input type="checkbox"/> no <input type="checkbox"/>	
	interchangeable with those of the fire department answering alarm.	
Signatures	Date left in service _____	
	Name of installing contractor _____ _____	
	<b>TESTS WITNESSED BY</b>	
	For Property owner	Title _____      Date _____
	For installing contractor	Title _____      Date _____
Additional explanation and notes: _____ _____		