FORM 2-J

Automatic Sprinkler Systems

Contractor's Material and Test Certificate for Aboveground Piping

Date: _____ **Property Name:** _____

Property Address: _____

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 the 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 contractors. It is understood that 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.

Plans

Accepted by [approving authority's name(s)] _____

Address _____

Installation conforms to accepted plans? ☐ Yes ☐ No

Equipment used is approved? ☐ Yes ☐ No

If no, explain deviations.

Instructions

Has person in charge of fire equipment been instructed as to location of control valves and care and maintenance of this new equipment? ☐ Yes ☐ No
If no, explain.

Have copies of appropriate instructions and care and maintenance charts and NFPA 13 been left on premises? ☐ Yes ☐ No
If no, explain.

Location of System

Supplies building(s) _____

Sprinklers

Make	Model	Year of Manufacture	Orifice Size	Quantity	Temperature Rating

Pipe and Fittings

Pipe conforms to _____ standard. ☐ Yes ☐ No

Fittings conform to _____ standard. ☐ Yes ☐ No

If no, explain.

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Alarm Valve or Flow Indicator

Alarm Device			Maximum Time to Operate Through Test Pipe	
Type	Make	Model	Min.	Sec.

Dry Pipe Operating Test

Dry Valve	Q.O.D.				
Make	Model	Serial No.	Make	Model	Serial No.

	Time to Trip Through Test Pipe*		Water Pressure	Air Pressure	Trip Point Air Pressure	Time Water Reached Test Outlet*		Alarm Operated Properly	
	Min.	Sec.	Psi (Bar)	Psi (Bar)	Psi (Bar)	Min.	Sec.	Yes	No
Without Q.O.D.									
With Q.O.D.									

If no, explain.

Deluge and Preaction Valves

Operation ☐ Pneumatic ☐ Electric ☐ Hydraulic

Piping supervised? ☐ Yes ☐ No Detecting media supervised? ☐ Yes ☐ No

Is there an accessible facility in each circuit for testing? ☐ Yes ☐ 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	Min.	Sec.

Test Description

HYDROSTATIC: Hydrostatic tests shall be made at not less than 200 psi (13.6 bar) for two hours or 50 psi (3.4 bar) above static pressure in excess of 150 psi (10.2 bar) for two hours. Differential dry pipe valve clappers shall be left open during test to prevent damage. All aboveground piping leakage shall be stopped.

FLUSHING: 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 400 gpm (1514 L/min) for 4-in. (102-mm) pipe, 600 gpm (2271 L/min) for 5-in. (127-mm) pipe, 750 gpm (2839 L/min) for 6-in. (152-mm) pipe, 1000 gpm (3785 L/min) for 8-in. (203-mm) pipe, 1500 gpm (5678 L/min) for 10-in. (254-mm) pipe and 2000 gpm (7570 L/min) for 12-in. (305-mm) pipe. When supply cannot produce stipulated flow rates, obtain maximum available.

*Measured from time inspector's test pipe is opened.

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Test Description ***(cont.)***

PNEUMATIC: Establish 40 psi (2.7 bar) air pressure and measure drop, which shall not exceed $1\frac{1}{2}$ 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 $1\frac{1}{2}$ psi (0.1 bar) in 24 hours.

Tests

All piping hydrostatically tested at _____ psi (bar) for _____ hrs.

Dry piping pneumatically tested? ☐ Yes ☐ No

Equipment operates properly? ☐ Yes ☐ No

If no, state reason.

Drain test—Reading of gauge located near water supply test pipe: Static pressure: _____ psi (bar)

Drain test—Residual pressure with valve in test pipe open wide: _____ psi (bar)

Underground mains and lead-in connections to system risers flushed before connections made to sprinkler piping

Verified by copy of the U Form No. 85B ☐ Yes ☐ No ☐ Other

Flushed by installer of underground sprinkler piping ☐ Yes ☐ No ☐ Other

If other, explain.

Blank Testing Gaskets

Number used _____ Locations _____ Number removed _____

Welding

Welded piping? ☐ Yes ☐ No

If yes,

Do you certify as the sprinkler contractor that welding procedures comply with the requirements of at least AWS D10.9, Level AR-3? ☐ Yes ☐ No

Do you certify that the welding was performed by welders qualified in compliance with the requirements of at least AWS D10.9, Level AR-3? ☐ Yes ☐ No

Do you certify that welding was carried out in compliance with a documented quality control procedure to insure that all discs are retrieved, that openings in piping are smooth, that slag and other welding residue are removed, and that the internal diameters of piping are not penetrated? ☐ Yes ☐ No

Hydraulic Data Nameplate

Nameplate provided? ☐ Yes ☐ No

If no, explain.

Remarks Date left in service with all control valves open: _____

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_____

Sprinkler Contractor: _____

Signatures of Test Witnesses

For property owner (signed) _____ Title _____ Date _____

For sprinkler contractor (signed) _____ Title _____ Date _____