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Confidence Testing Company
LOGO and Info goes here
Address
Phone
Here

Seattle Fire Department

Confidence Test Report (use one form per sys.)

206-386-1448 Confidence Testing Officer
206-615-1068 (fax)
206-233-7219 Red Tag Hotline

FOAM SYSTEM

CONFIDENCE TEST ❒ | REACCEPTANCE TEST ❒ | Status Given: **RED** ❒ **YELLOW** ❒ **WHITE** ❒

Occupancy Address: _____ Occupancy Name:_____

Responsible Person First & Last Name: _____ Phone Number: _____

Responsible Person Address, City, State, Zip: _____ Responsible Party E–Mail Address _____

Technician's Name _____ SFD Certification No SCP-_____
(Please Print legibly)

NICET 3 Fire Protection Contractor License No.

Date of Test:_____ Test Frequency: **Annual**

System Make: _____ System Model: _____
System Identification No. _____ System Location: _____
SFD ID No. _____ (Call 386-1448 for this No.)

Central station monitoring? Yes ❒ No ❒ Monitoring Company
Monitoring Required? Yes ❒ No ❒ Name _____

DEFICIENCIES FOUND? Yes ❒ No ❒ List items that were not corrected at the time of the confidence test. Use the Deficiencies section or attach itemized sheet

REPAIRS: All deficiencies have been corrected ❒

Corrected By: _____ SFD Certification Number: **SCP –**_____

System Status changed to White (including the tag on the system) ❒

This certifies that this fire and life safety system has been properly inspected for functional operation in accordance with the current Seattle Fire Code (SFC), Administrative Rules, and NFPA Standards adopted by the SFC for this system. The discrepancies found are noted in the report and have been reported to the building Owner/Manager for corrective action.

Signature of Technician _____ Phone # _____
Name of Testing Company _____

Building Representative (signature) _____Date _____
Print Name and Title_____ Direct Phone # _____

Building Rep unavailable ❒ Building Rep declined to sign report ❒

THIS REPORT WILL BE SENT TO THE SEATTLE FIRE DEPARTMENT BY THE TESTING AGENCY IN ACCORDANCE WITH ADMINISTRATIVE RULE 9.02.09
ALL DEFICIENCIES RECORDED ON THIS REPORT SHALL BE CORRECTED WITHIN 30 DAYS OF THE TEST DATE

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The items on the checklists below shall be inspected and tested. This list may not constitute all of the required inspecting and testing of the fire and life safety system. **Refer to the Seattle Fire Department Fire Code and adopted NFPA standards for inspecting and testing requirements.**

GENERAL

1. The **Fire Alarm was put into test mode** and/or other precautions were taken to **avoid preventable alarms**.	N/A	❒	Yes ❒	No ❒
2. This is the only Foam System at this address. If "No" What is the unique ID number? (See SFC Ad Rule 9.02.09)_____			Yes ❒	No ❒
3. All signs, placards, and labels are provided on doors and system controls as required by NFPA 16.			Yes ❒	No ❒

RECALLS

4. Any recalled parts that have been identified during inspection including heads, valves, switches, etc, have been replaced.	No Recalls	❒	Yes ❒	No ❒

FOAM GENERATING EQUIPMENT

5. Control valves, including all automatic and manual actuating devices operate properly.			Yes ❒	No ❒
6. All control valves are secured or supervised.			Yes ❒	No ❒
7. Supervisory switches operate properly.	N/A	❒	Yes ❒	No ❒
8. The alarm indication device operates properly.	N/A	❒	Yes ❒	No ❒
9. Alarm bells operate properly.	N/A	❒	Yes ❒	No ❒
10. All of the proportioning devices, their accessory equipment, and foam makers have been inspected, tested, and are functioning properly.			Yes ❒	No ❒
11. A sample of the foam concentrate was sent to a testing laboratory. (Send test results to FMO			Yes ❒	No ❒
12. The above-ground piping is in good condition and drains properly.			Yes ❒	No ❒
13. The Underground piping has been spot-checked for deterioration within the last 5 years as required by **2005 NFPA 11 Sec.11.3.3** Next test Due Date: _____	N/A	❒	Yes ❒	No ❒
14. All the strainers have been inspected and cleaned quarterly (by maintenance) and as necessary during confidence testing.			Yes ❒	No ❒
15. Maintenance on the system gauges is up-to-date. Due date for the next comparison test: _____ **Note: The system gauges are to be compared with a calibrated gauge every five (5) years. If a gauge is not within +/- 3% of the calibrated gauge it must be replaced or recalibrated**. **<u>This check should be done for multiple floors at static pressure using one calibrated gauge and hydraulic calculations.</u>**			Yes ❒	No ❒

SPRINKLER HEADS AND PIPING

16. Number of Sprinkler Heads: <20 ❒ >20 ❒ <100 ❒				
17. All accessible sprinkler heads are free of corrosion, paint, obstructions and/or physical damage. (List the location of defective heads in "Problems Found" section.)			Yes ❒	No ❒
18. The standard sprinkler heads are less than 50 years old. If "No" have the heads sample tested or replaced per 2008 NFPA 25 and at the prescribed intervals thereafter. (not required for deluge heads) Due date for sample testing: _____	N/A	❒	Yes ❒	No ❒

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19. The dry type sprinkler heads are less than 10 years old. If "No" have the heads sample tested or replaced per 2008 NFPA 25 and at the prescribed intervals thereafter. Due date for sample testing: _____	N/A	❒	Yes ❒	No ❒
20. The proper number of spare sprinkler heads is available, with the proper wrenches for each, at the riser or another designated location.			Yes ❒	No ❒
21. The **flow from the foam generating device** produces the amount of foam required by the design, at the minimum pressure, from the water supply. (5-year test only – full dump is not required) (Destructive testing is not required)			Yes ❒	No ❒
22. The Main Drain flow test did not reveal problems that require further investigation. Static pressure ____ psi Flow pressure ____ psi Return to static pressure ____min/sec			Yes ❒	No ❒
23. Flow from the inspector's test valve activates the system alarms.			Yes ❒	No ❒
24. The 5-year Obstruction Examination of the sprinkler piping is up-to-date in accordance with **2008 NFPA 25 Chap. 14. (eff. 10/21/2012)** Date for next Piping Obstruction Examination_____			Yes ❒	No ❒

FIRE DEPARTMENT CONNECTIONS (FDC)				
25. The FDCs are visible from the street, and are unobstructed by bushes, walls, barriers, etc.			Yes ❒	No ❒
26. All caps and plugs on the FDC are in place.			Yes ❒	No ❒
27. If a plug or cover was missing from a FDC the piping was inspected for debris in accordance with **2011 NFPA 25 Sec. 13.7.2, 13.7.4, and Table 13.8.1**			Yes ❒	No ❒
28. All caps and plugs have at least 12" clearance for operating wrenches.			Yes ❒	No ❒
29. All swivels turn freely.			Yes ❒	No ❒
30. The 5-year obstruction investigation of Fire Department Connection (FDC) piping is up-to-date in accordance with **2008 NFPA 25 Chap. 14. (eff. 10/21/2012)** Date for next FDC obstruction investigation _____			Yes ❒	No ❒
31. The 5-year obstruction investigation of the FDC piping included testing and operation of the check valve.				
RECALLS				
32. The inspector did not find recalled devices during the visual inspection. **Note: the inspector's inspection is a visual cursory inspection from the floor level in accessible areas**	Unk	❒	Yes ❒	No ❒

FIRE ALARM MONITORING				
33. A signal was received at the Central Station monitoring company?	N/A	❒	Yes ❒	No ❒
34. The foam activation detection system worked properly (Include report of alarm system if applicable.)	N/A	❒	Yes ❒	No ❒

FINAL CHECKS				
35. The **Fire Alarm was removed from test mode** and/or other precautionary measures were removed to **restore fire alarm system to normal operation** (includes removal of protective coverings).	N/A	❒	Yes ❒	No ❒
36. The system was left in service. If "No", why? _____			Yes ❒	No ❒
37. The confidence test report was given to the owner and a current status tag was posted.			Yes ❒	No ❒

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DEFICIENCIES:

Resolved ❒

Location: _____

Deficiency: _____

Recommended Resolution: _____

SFC and/or 2008 NFPA 25 reference:

Resolved ❒

Location: _____

Deficiency: _____

Recommended Resolution: _____

SFC and/or 2008 NFPA 25 reference:

Resolved ❒

Location: _____

Deficiency: _____

Recommended Resolution: _____

SFC and/or 2008 NFPA 25 reference:

Resolved ❒

Location: _____

Deficiency: _____

Recommended Resolution: _____

SFC and/or 2008 NFPA 25 reference:

Resolved ❒

Location: _____

Deficiency: _____

Recommended Resolution: _____

SFC and/or 2008 NFPA 25 reference: