

Name

Confidence Test Report

Address

206-386-1448 Confidence Testing Officer

Phone

206-615-1068 (fax)

Here

206-233-7219 Red Tag Hotline

STANDPIPE SYSTEM

(One System per Report)

Certification Given

RED YELLOW WHITE

CONFIDENCE TEST REPAIRS

Occupancy Address:

Occupancy Name:

Responsible Person

First & Last Name: _____

Phone Number: _____

Responsible Person
Address, City, State, Zip: _____

Responsible Party
E-Mail Address: _____

Date of Inspection: _____

Inspection
Frequency/Type: **5 Year**

Identification
Number: _____

System Location: _____

Testers Name
(Please Print): _____

SFD SCP Certification
Number: _____

Central station monitoring? Yes No

Monitoring

Monitoring Required? Yes No

Company Name: _____

System Make: _____

System Model: _____

SEATTLE FIRE CODE VIOLATIONS FOUND: (If additional room is needed, please add a separate sheet)

CORRECTIONS MADE: Date Corrected: _____ Corrected By: _____

(If additional room is needed, please add a separate sheet) SFD Certification Number: SCP - _____

This certifies that this fire and life safety system has been properly inspected for reliability to cover the items listed in this report and is consistent with Seattle Fire Department Fire Code standards, and that discrepancies are noted and have been reported to the building Owner/Manager for corrective action.

Signature of Tester: _____ Phone # _____

Building Representative (signature) _____

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

General

1. Is there 300 GPM flow at roof through each riser?	N/A <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
2. All fire department inlets and outlets equipped with approved plugs or caps (1/8 inch pressure relief hole in caps)?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
3. Piping between fire department connection and check valve is currently hydro-tested?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
4. All control valves left in open position (except normally closed valves)?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
5. Pumper connections are not obstructed?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
6. Water flow switches operate properly?	N/A <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
7. Fire pump(s) start from roof flow?	N/A <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
8. Was the Fire Department Connection (FDC) back flushed?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
9. Are there hose cabinets in the building?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
10. Is the building sprinklered?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
11. Standpipe Classification			
12. Class I Standpipe?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
13. Class II Standpipe?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
14. Class III Standpipe?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
15. Hose cabinet and/or sprinkler PRV testing form for each system?	N/A <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
16. Was debris found in the Fire Department Connection (FDC)?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
17. System gauges replaced every 5 years or calibrated?		Yes <input type="checkbox"/>	No <input type="checkbox"/>

Class I

18. Hydro-tested 150 psi or 50 psi greater than head pressure for 2 hours (Dry Standpipe Only)	N/A <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
19. All outlet valves and hose threads checked and have 2 1/2" Cap w/1/8" hole?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
20. Was 25 psi air test conducted?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
21. Standpipes have 12" wrench clearance?		Yes <input type="checkbox"/>	No <input type="checkbox"/>

Class II

22. Hydro-tested 150 psi or 50 psi greater than head pressure for 2 hours:	N/A <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
23. Are all hoses, valves and controlling nozzles in good condition?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
24. Have flow tests been conducted at highest level for at least 30 seconds to make sure nozzle will work at pressure available (50 gpm at 35 psi minimum)?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
25. Standpipe has 12" wrench clearance?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
26. Have controlling valves been tested to verify that pressure regulating valves operate properly (not to exceed 100 psi Tip pressure)?		Yes <input type="checkbox"/>	No <input type="checkbox"/>

Class III

27. Hydro-tested at 150 psi or 50 psi greater than highest Operating pressure?	N/A <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
28. Was 25 psi air test conducted?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
29. All outlet valves and hose threads checked and have 2 1/2" Cap w/1/8" hole?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
30. Flow tests conducted to verify operating pressure of press Regulating valves (not to exceed 175-psi flowing)?		Yes <input type="checkbox"/>	No <input type="checkbox"/>

CLASS II STANDPIPE FIRE HOSE TEST

Length –	Record the actual length of each piece of hose. Give the lineal measure to the closest five feet.
Size –	The inside diameter in inches.
Evaluation –	At the time of testing, fire hose will be evaluated by the tester and placed in one of the following three categories according to NFPA 1962:
Good –	The jacket is intact with no signs of wear and no leaks.
Fair –	The outer jacket is beginning to show signs of wear and no leaks
Poor –	The outer jacket is showing advanced signs of wear and small holes appear in the jacket and/or leaks.