

_	NCH PHONE NUMBER: 614-291	-7001			O NATI	ONAL A	ACCOUNT NU	UMBER	: 1-800	0-776-7	181
DATE	05/13/2021				7800		SIF THE ST				
SITE	CML - WHETSTONE			TELEVISION.	CONTAC	_			-11"		
ADDRES					PHONE	1	246-1220				100
CITY	COLUMBUS				STATE	ОН		ZIF	432	14	
This inspe	ction is: Annual Semi-Annu	ıal 🔲 C	uarterly	Monthly _	Weekly [	Other	turner i di prin	remigi	no live	gedi	
1 – OWNE	RS SECTION This section is	to be ans	wered and sig	gned by the	Owner or Ow	ners Rep	oresentative	2 1111	YES	N/A	NO
A. Is the b	uilding occupied?	Alberg							X		JAN.
B. Has the	occupancy classification and hazar	rd content	s remained th	he same sin	ce the last in	rspectio	n (If no, survey req	uired)	X	VA SOIL	THE .
C. Are all 1	fire protection systems in service?								X		
D. Are all \	Wet Sprinkler System piping and W	et portion	s of Dry Syste	ems protecte	ed from temp	perature	s below 40°?		X		
E. Owner I	has been instructed on maintaining	the Dry S	ystem Auxilia	ry Drains?					X		
Inspection	n of Sprinklers, Hangers, Pipe and I	Fittings w	ill be conduc	ted from Flo	or Level, C	onceale	d Spaces are	not req	uired t	o be Ins	pected
Name of C	Owner or Representative: No sign	nature/co	vid19 conce	<sub>rns</sub> Signatu	re:	N	- way				
	RAL (Questions A, B, C, D, E, F, H,					are test	ed items)		YES	N/A	NO
A. Have th	e sprinkler systems been extended	to all visil	ble areas of the	he building?	(If NO, an Engir	eering Surv	ey is required)		X		
	ere appear to be proper clearance				1.011			X IOT	X	10/4/1017	the second
	hydraulic nameplate(s) securely att			-				Elliz (fil	X	T- 11	111000
	a spare head box with the proper n						THE MINISTER	rate 1	X	10 10	31071111
	pt. Connection in good condition, vis						Str. A. Contril		X		
	Fire Dept. Connection piping been						Year Due: 2023	3	$\overrightarrow{\times}$		
	Il gauges 5 or more years old been				r Replaced: 20	18	Year Due: 2023		$\Diamond$		
	inspection of the Pipe, Valves and								$\Diamond$		
	hoses and hose valves in good con-						Teal Due. 2020		/\	V	
	>5 yrs) connected to the system has						Year Due: NA		-		
	ckflow prevention device tested per				Month Due: JA		Year Due: 2022	2			
	d flow test has been conducted on f				-		Year Due: NA				-
	THE STATE OF THE STREET, STATE OF THE STATE	0.45	LUI BY IN THE				Harris Harris	d), FCLIP	1000		10.00
	ROL VALVES (Questions A, B & E ar								YES	N/A	NO
A. Are all	sprinkler system main control valves	and all c	ther control v	alves in the	appropriate	open or	r closed positi	ion?	X		
	control valves supervised in the app								X		
C. Were a	Il control valves operated through fu	ıll range c	of motion, lubr	ricated and	returned to r	ormal p	osition?	1.77.3	X		11177
D. Did all	electrical supervisory switches actua	ate super	visory alarms	?	Approximated a		EMINAL BE	M TOT	X	STILL	
	control valves easily accessible and			-					X	4417	(allel
4 - WATE	R SUPPLY (Question A is a inspec	tion item)	(Questions B	& C for info	rmation) (Mai	n Drain i	is a test item)	T mha	YES	N/A	NO
A. Did flov	v results have the same or greater F	SI readin	gs than previ	ious tests?	(A reduction	of 10% sho	ould be noted as No,	)	X		
B. System	water supplied from: X City Wate	r Elev	ated Tank	Pressure <sup>1</sup>	Tank Su	ction Ta	nk Pond	Othe	er	techi al	approx.
C. Main dr	rain is piped outside	NA, if	no how man	y 25' hoses	required to	get outs	ide for a Forw	vard Flo	w Test	?	6
Riser	Location (Riser)	Size	Static	Residual	PSI	Alarm		draulic Ir		on 169	GPM
Number	E. I. Million - particulation is million	d materia	Pressure	Pressure		Time	Design Density	Design Area			Demand
1	MECH ROOM	2"	105	85	95	20SEC	.15	1500	7	7	367
1000	more Characters			0.000	III/G	aume	nhati l	P	19/32	arga m	ועבול פו
- 1	energy and to model out of the	a nutres	STREET, T	The section of	punta = 20	d to a	1000		h co	ATLIN IO	101/17/01
	The State and the same of the same of the state of the st	(sq. radio un	TT octobally in 1	early also				P political	13 (0.0)	101	
									100		
			THE OF ITS	3473	MATERIAL PROPERTY.	erde lar	thingly at		95	9 17	niav s
							<del>                                     </del>		+		

SITE CML - WHETSTONE								DATE	05/13/2	2021	
5 - FLOW ALARMS (Question:	s A & B a	re inspection & tes	st items, b	pased on	type of insp	ection pe	erformed)		YES	N/A	NO
A. Did waterflow through the ins	spectors	test actuate all me	echanical	l alarms'	?	ta 30	Man with		X		
B. Did waterflow through the ins	spectors	test actuate all ele	ectrical al	larms?			nine kale u li		<u>X</u>		
6 - WET SYSTEMS (Questions	A & B are	inspection items) (	Questions	C, D & E	are tested it	ems) (Que	stion F is for i	information)	YES	N/A	NO
Number of systems 1 Size	es 4"	NA NA	NA N	/lake &   /lodels	VIKING		F1				
A. Alarm valves, riser check val	ves, gau	ges and associate	ed trim ar	e free fro	om physical	l damage	?		X		
B. Trim valves, alarm and supe	rvisory lii	nes are in the app	ropriate c	open or o	closed posit	tion? (Are	Appropriate Signs	provided)	X		
C. Is the antifreeze system prot							e Designator: N		A.F. 2	X	
D. The antifreeze system protect									al M	X	here will a
E. Was the antifreeze system to	ested at t	the point of conne	ction to th	ne syster	n and at the					X	
F. Area Protected? NA						Type N	A	Connection	- 1		te NA°
7 - DRY / PREACTION / DELU	GE SYS	TEMS It is the	owner's re	esponsib	oility to main	ntain auxil	iary drains be	etween inspec		Owner lotified	NA
Number of Dry Systems	0	Make and Model	NA	9	NA		Trip test repo	ort attached	Trip tes	st not re	quired
Number of Pre-Action Systems	0	Make and Model	NA	1111111	NA	000 pm	Trip test repo	ort attached	Trip te	st not re	quired
Number of Deluge Systems		Make and Model	NA		NA			ort attached	-		
(Questions A, B, C, G & H are ins				re tested		estion F is			YES	N/A	NO
A. Valves, gauges and associa	ted trim a	are free from phys	ical dama	ageand i	n the appro	priate op	en or closed	position?	1000	X	all an
B. Is the air pressure and primit	ng water	level normal?			N. P. D. P. L. S.	WHEELER P				X	
C. Did the nitrogen generators			enerator l	hour me	ter	Name of the last		1 - 1		X	
D. Did the air compressor opera			onorator i			7 11				$\Rightarrow$	
					in bittonan						119 711
E. Did the low air pressure alar				4		-0	21-1 4510	77777.30		$\Rightarrow$	
F. Auxiliary drains that were ide						n'?	1 1 1 1 1 1	Mary Carolina		$\Rightarrow$	
G. Valves and trim appear to be	· ·			w 40°F?	Turisalen	CSJUIN	Mr. Provide	d rapper		X	-
H. Pipe that passes through fre										IX.	
I. Has the Air Leakage Test bee	en condu	icted on the Dry S	ystem wit	thin the	ast 3 years	? Year Per	rformed: NA			X	110 100-00
8 - SPRINKLERS, PIPE, AND	HANGE	RS (Questions A,	B & C are	e inspect	ion items) (	Questions	D, E & F are	tested items)	YES	N/A	NO
A. Is all visible pipe in good cor	ndition w	ith no external cor	rrosion, pl	hysical o	damage and	d no leaks	5?	24-1-2	X		
B. Are visible pipe hangers and	l seismic	braces free of ph	ysical da	mage?					X		
C. Are all sprinklers free from o	lamage,	obstructions to sp	ray patte	rns, fore	ign materia	ls & corre	ect orientatio	n?	X		
D. Have standard sprinklers 50	or more	years old been re	eplaced o	r succes	sfully teste	d?				X	
E. Have fast response sprinkle	rs 20 or	more years old be	en replac	ced or su	ccessfully t	tested? D	ate of Sprinkle	ers NA		X	1
F. Have dry type sprinklers 10		•					ate of Sprinkle			X	
9 - FIRE PUMPS AND STORA							ACT III CANING				
	5						Da	ned Attaches		N	
		re Pump Test Per					1 1	port Attached			/AIXI
Water Storage Tank Supplies	/vater:	Y N X	I ank Insp	pection F	erformed:	YN_	N/A[X]   I	Report Attach	ea: YL_	N	] N/A
Explanation of "NO" answer which is attached to this for No SERVICE FOLLOW UP R	m.		100		mmendation	ns are liste	ed on SERVIC	CE FOLLOW U	P#		EUR
I state that the information on the with applicable NFPA 25 test are inspection except as noted on a	d inspec	tion sections. All	equipmen	t tested	at this time v	n. All test was left in	and inspectional	ons were perfo condition upo	rmed in n compl	accord letion o	dance f this
Name of Inspector	Jordan	Messmer	Signa	ture	M	1-		Certification	n#	54-25	-5260
I acknowledge that the inspecti understood that all information requested, will be forwarded to	containe	ed herein is provide	ed to the b								
Name of Owner or Representative	No sig	nature/covid19	concer	rns	Signa	ture	NA	5			
					+		Water Ba	sed Test and I	nspectio	n Page	2 of 2



	Terthoop realize that was realized to	eri Banda eur	To Mathematic	a-1(2 a rund	JULY THE	L yarbes	glistell system		(d. 100) (d. 100) (d. 100)	Light of the
	Total one restant for an with resta	ere Mantila ver	Town factory of	=167 s tand	A LITTLE SALE	L Valley		Helenan min		Aug Francis Lagran
	and Contain Hill or all Many and the	P py Allina A	Supplied to the		ery hudant b	on order of	Victorial Control States			
12.0	E. pe E. refress nell	-	1.0	-011454	1012		16.0008	111	15.200/11	
	MECH ROOM MEP	2"	45	40		77 sec.	CONTRACTOR OF THE PARTY OF THE		9.15	186.7
Riser Number	Location (Riser)	Size	Static Pressure	Residual Pressure	PSI Return	Alarm Time				GPM Demand
	nin is piped outside XYes No					<del>-</del>	de for a Forward	I Flow Tes		NA
		$\overline{-}$		Pressure		ction Tar		Other		***
	water supplied from: X City Water		ated Tank					Othor		10
	results have the same or greater				The state of the s		uld be noted as No)	123	IN/A	T 140
	SUPPLY (Question A is a inspec							YES	N/A	NO
	ontrol valves easily accessible and		-		n) Mechani	cal Roon		T X		1000
	lectrical supervisory switches actu				from tright		ENITE L'EDILY	X	Pinh	313.13
	control valves operated through f		•	•				X	Sun y	
	ontrol valves supervised in the app					-		X	1124	
A. Are all s	prinkler system main control valve	s and all o	ther control v	alves in the	appropriate	open or	closed position			
3 - CONTR	OL VALVES (Questions A, B & E al	re inspectio	n items) (Ques	stion D is a te	st item) (Que	stion C is	a maintenance ite	m) YES	N/A	NO
M. Forward	flow test has been conducted on	fire backflo	ow device - N	A for system	ns w/ fire pu	mps?	Year Due: 2022	X		
L. Fire back	flow prevention device tested per	the author	rity having jur	isdiction?	Month Due: JU	L	Year Due: 2021	X		
	5 yrs) connected to the system has		•		Year of Hose: N	A	Year Due: NA		X	
J. Are all h	oses and hose valves in good con	dition, free	e from physic	al damage a	and no leaks	?	POR MALLO	ce tors	IX	
H. Internal i	inspection of the Pipe, Valves and	Backflow	has been per	rformed with	in the last 5	years?	Year Due: 2021	in Tuos		X
	gauges 5 or more years old been				r Replaced: NA		Year Due: 2021	JID FORTH	and the	X
	Fire Dept. Connection piping been	•			years?		Year Due: 2021	ura negotia	i in pen	X
·	t. Connection in good condition, vi					A MINES			O HILLY	X
	a spare head box with the proper i		-			hes?		X	10075.3	
	nydraulic nameplate(s) securely at						eduled)	$+$ $\stackrel{\times}{\circ}$		
	ere appear to be proper clearance		***************************************		· · · · · · · · · · · · · · · · · · ·			13		
	sprinkler systems been extended									
								YES	N/A	NO
	AL (Questions A, B, C, D, E, F, H,	Chris .		A STREET STREET		are tonto		VEC		NO
A STATE OF THE PARTY OF THE PAR	wner or Representative:			Signatu	(7)		PALLERI			
	of Sprinklers, Hangers, Pipe and				or Level. C	oncealed	Spaces are not	required	to be Inc	specte
	as been instructed on maintaining							- / /	X	NA ST
	Vet Sprinkler System piping and W	et portions	s of Dry Syste	ems protecte	ed from tem	peratures	s below 40°?	1	W	
	re protection systems in service?	. a contont			-5 10011			X		
	occupancy classification and haza	rd content	s remained th	ne same sin	ce the last i	nspection	) (If no super consider			A Real
	ilding occupied?	s to be ans	wered and sig	gried by the t	Juner or On	ners rep	resemanve	TX	11//	I
	RS SECTION This section is				J ' L		resentative	YES	N/A	NO
This inspec	tion is: Annual Semi-Ann	ual 🗀 o	uarterly	Monthly [	Weekly [	Other				
CITY	COLUMBUS	Tarib.			STATE	ОН		ZIP 432	224	
ADDRESS					PHONE		57-0245			
		-		- 1 II W - 1 I						
SILE	CML - NORTHERN LIGHTS				C.C.INIT V.C.	CHR	STIMM FIELDS			
SITE	CML - NORTHERN LIGHTS				CONTAC	T CHRI	STIAN FIELDS			
DATE	O7/27/2021  CML - NORTHERN LIGHTS		- NATS				STIAN FIEL DS			

SITE CML - NORTHERN LIG	HTS	<u> </u>			DATE	07/27/2	021	
5 - FLOW ALARMS (Questions	A & B are inspection & tes	st items, based o	n type of inspection	n performed)		YES	N/A	NO
A. Did waterflow through the ins	pectors test actuate all m	echanical alarms	?				X	
B. Did waterflow through the ins	pectors test actuate all el	ectrical alarms?		App. Nat	per communication	X	100,12	
6 - WET SYSTEMS (Questions	A & B are inspection items) (		E are tested items) (	Question F is	for information)	YES	N/A	NO
Number of systems 1 Size	s 4" NA NA	NA Make & Models	VICTAULIC	717R	LIPS I WHILETS	(194 - 1	100	la W
A. Alarm valves, riser check val	ves, gauges and associate	ed trim are free f	rom physical dama	age?	T SHIP CHAPTER	X	inc c	TEMALS.
B. Trim valves, alarm and super			· · · · · · · · · · · · · · · · · · ·			200	X	
C. Is the antifreeze system prote				Zone Designato			X	
D. The antifreeze system protect						WX	$\Diamond$	
E. Was the antifreeze system te	sted at the point of conne	Clion to the syste			Connection	on MA <sup>0</sup>	Pomo	to NAO
F. Area Protected? NA		Standard Standard		NA			wner	
7 - DRY / PREACTION / DELU			bility to maintain a	uxiliary drair	s between inspec		otified	NA
Number of Dry Systems	0 Make and Model	NA	NA	Trip test	report attached	Trip tes	st not re	quired
Number of Pre-Action Systems	0 Make and Model	NA	NA	Trip test	report attached	Trip tes	st not re	quired
Number of Deluge Systems	0 Make and Model	NA	NA	Trip test	report attached	Trip tes	st not re	quired
(Questions A, B, C, G & H are ins	pection items) (Questions	D, E & I are teste	d items) (Question	F is a maint	enance item)	YES	N/A	NO
A. Valves, gauges and associat	ed trim are free from phys	ical damageand	in the appropriate	open or clo	sed position?		X	
B. Is the air pressure and primir	ng water level normal?						X	
C. Did the nitrogen generators of	operate satisfactorily? G	enerator hour me	eter				X	
D. Did the air compressor opera	ate satisfactorily?	Selection of Victor	del maketta artis			lang ii	X	all des
E. Did the low air pressure alarr	m operate during the test?	ac and general		Live View J	hear with epigraced	ESPECT IN	X	7 21
F. Auxiliary drains that were ide	ntified by the owner were	drained during tl	nis inspection?		ku thus 1 ne n'	Line and	X	(Classes)
G. Valves and trim appear to be	protected from temperat	ures below 40°F	? Operation Property	no ball out	a kan milinin	field at	X	i tul
H. Pipe that passes through fre	ezers is free of ice blocka	ge?	Thirds -		right and the		X	1,3-3-1
I. Has the Air Leakage Test bee			last 3 years? Yea	r Performed: N	A	tog gr	X	Piles IA
8 - SPRINKLERS, PIPE, AND	HANGERS (Questions A	, B & C are inspec	ction items) (Quest	ions D, E & F	are tested items)	YES	N/A	NO
A. Is all visible pipe in good cor	ndition with no external co	rrosion, physical	damage and no le	aks?	Herman Harvas	X	ALV.	P LOUGH
B. Are visible pipe hangers and	seismic braces free of ph	nysical damage?				X		
C. Are all sprinklers free from d	<u> </u>		eign materials & c	orrect orient	ation?	X		
D. Have standard sprinklers 50							X	
E. Have fast response sprinkler		·		2 Date of Sp	rinklers 2016		V	
F. Have dry type sprinklers 10					rinklers NA			
7 31 7	The second distribution of			Date of Opt	TIME 14A			
9 - FIRE PUMPS AND STORA					Later to the second			
-	Fire Pump Test Per			N/A X	Report Attached			I/A X
Water Storage Tank Supplies V	Water: Y N N	Tank Inspection	Performed: Y	N N/A	Report Attach	ed: Y	N	N/A X
Explanation of "NO" answer     which is attached to this form     No SERVICE FOLLOW UP RI	n.		ommendations are	listed on SE	RVICE FOLLOW L	IP#SFL	J28194	
I state that the information on the with applicable NFPA 25 test an inspection except as noted on a	d inspection sections. All	equipment tested	at this time was le					
Name of Inspector	Scott Jones	Signature	Scott In	les	Certification	n#	54-25	-3647
l acknowledge that the inspection understood that all information requested, will be forwarded to	contained herein is provide	ed to the best of t	nts were discussed	with me upo e person pro	oviding the inform			
Name of Owner or Representative	Chris Aller	1	Signature	VEHE	BULLEY APPT	Aco	7	
or representative			+		er Based Test and I	ethi 10		2 of 2



	An En	NUUK	Company		ISPE	CIIC	IN OC 1	LOI	KL		IX I
BRAI	NCH PHONE NUMBER: 614-291-7	001			O NAT	IONAL A	ACCOUNT N	UMBER	: 1-800	)-776-7	181
DATE	08/09/2021		Amil Spenis		The state of						
SITE	CML - NEW DRIVING PARK				CONTAC	T JOE	GREENE				
ADDRESS	S 1422 EAST LIVINGSTON AVE				PHONE	614-	374-2887	The same			i Julion
CITY	COLUMBUS				STATE	ОН	responsible	ZIF	432	05	177
This is a		. 🗆 \right		la a	]						
	ction is: Annual Semi-Annua					Other			\/E0	2144	
	RS SECTION This section is a	o pe ans	swerea ana sig	gnea by the C	or Ov	wners Re	presentative		YES	N/A	NO
	uilding occupied?				on the last	laana adia			$\rightarrow$		
	occupancy classification and hazard	content	is remained tr	ie same sim	ce the last	inspectio	III (If no, survey re	quired)	$\Diamond$	10,120	
	ire protection systems in service?	nortion	o of Dry Cycle	ma protocto	d from tom	n o roturo	a balaw 4000	,	$\Diamond$		
	Net Sprinkler System piping and Wes				ea from ten	iperature	es below 40°			V	
	nas been instructed on maintaining th			Property and the same of the s			10				
	of Sprinklers, Hangers, Pipe and Fi										
	owner or Representative: verbal a							رستر کے۔		-	
	RAL (Questions A, B, C, D, E, F, H, J								YES	N/A	NO
	e sprinkler systems been extended t								X		
	ere appear to be proper clearance be								X		
	hydraulic nameplate(s) securely atta						heduled)		X		HILL TOP .
	a spare head box with the proper nu					ches?	of the state	matter m	X	DII TADV	Miles III
E. Fire Dep	ot. Connection in good condition, visi	ble, ace	ssible and ma	arked with IC	signs?	NA THEFT AND	45 12 20	ulla ep	X	men y	wija
F. Has the	Fire Dept. Connection piping been h	ydrostat	ically tested i	n the last 5	years?	invest =	Year Due: 202	3	X	27 = 10	Limit
G. Have al	I gauges 5 or more years old been re	placed	or calibrated?	? Yea	r Replaced: 2(	018	Year Due: 202	3	X	day re	g de la
H. Internal	inspection of the Pipe, Valves and B	ackflow	has been per	rformed with	in the last	5 years?	Year Due: 202	3	X		MIL DO
J. Are all h	noses and hose valves in good cond	tion, free	e from physic	al damage a	and no leak	s?	C STREET, SA	Fried S.		X	1800
K. Hose (>	5 yrs) connected to the system has I	een ser	viced per NF	PA 1962?	Year of Hose: N	A	Year Due: NA	1:1		X	
L. Fire bac	kflow prevention device tested per th	e autho	rity having jur	isdiction?	Month Due: J	AN	Year Due: 202	0		X	
M. Forward	d flow test has been conducted on fir	e backfle	ow device - N	A for systen	ns w/ fire p	umps?	Year Due: NA		to the co	X	
3 - CONTE	ROL VALVES (Questions A, B & E are	inspectio	on items) (Ques	stion D is a te	st item) (Que	estion C is	s a maintenanc	e item)	YES	N/A	NO
	sprinkler system main control valves								X	I I	
· · · · · · · · · · · · · · · · · · ·	control valves supervised in the appre								X		77
	I control valves operated through full							EUT T	X	DUVIN	1000
	electrical supervisory switches actual				otarriou to	mormar p	Jooition.	SARCIT	X	11 11 11	200
	control valves easily accessible and i				Mechan	ical Roo	m		$\overrightarrow{\times}$		
	R SUPPLY (Question A is a inspecti								YES	N/A	NO
	results have the same or greater PS						ould be noted as N		X	INIA	1
	water supplied from: X City Water		ated Tank	Pressure		uction Ta			- T		
			no how man							2	NIA
Riser			Static	Residual	PSI	Alarm		ydraulic Ir			NA
Number	Location (Riser)	Size	Pressure	Pressure	Return	Time	Design Density	Design Area	PS Ba	@ ise	GPM Demand
1	MECH ROOM MEP	2"	65	55	60	40	.15	1245	4	6	494
0 1502	BEAT STREET				time	TORTE	e celli meta m	L.	100	30.74 1	19/0/11
	- 10 H   1 M   10 H   1	a artis a					4 3 1-14-7-15				
	And the second section of the second	2342 36	on estimated			old I B			od u E	r=1: 50	representation of the property
					164	Helipping	7	Style Land	M.		1 30
			engaw(Lite	vi al-	a sinte	ly hyd	Sign limited			10.1.	1063.11
									-	THE RESERVE	

SITE CML - NEW DRIVING P	ARK			DATE	08/09/2	:021	
5 - FLOW ALARMS (Questions	s A & B are inspection & te	st items, based on	type of inspection p	erformed)	YES	N/A	NO
A. Did waterflow through the ins	spectors test actuate all m	echanical alarms	?			X	
B. Did waterflow through the ins	spectors test actuate all el	ectrical alarms?		ANTENNA		X	
6 - WET SYSTEMS (Questions	A & B are inspection items) (	Questions C, D & E	are tested items) (Qu	estion F is for information)	YES	N/A	NO
Number of systems 1 Size	es 4" NA NA	NA Make & Models	VICTAULIC	717		u-	
A. Alarm valves, riser check val	ves, gauges and associate	ed trim are free fr	om physical damage	e?	X		N=01100
B. Trim valves, alarm and super	visory lines are in the app	ropriate open or	closed position? (Ar	re Appropriate Signs provided)		X	1
C. Is the antifreeze system prote	ected correctly based on t	he listed cold zor	ne? Cold Zo	ne Designator: NA		X	
D. The antifreeze system protect					4177	X	
E. Was the antifreeze system te	sted at the point of conne	ction to the syste	m and at the remote		-C614	X	
F. Area Protected? NA			Type N	IA Connecti	on NA°	Remo	te NA°
7 - DRY / PREACTION / DELU	GE SYSTEMS It is the	owner's responsi	bility to maintain aux	iliary drains between inspe		Owner lotified	NA
Number of Dry Systems	0 Make and Model	NA	NA	Trip test report attached	<u> </u>		quired
Number of Pre-Action Systems		The second secon	NA	Trip test report attached			The second
			NA		4		
Number of Deluge Systems (Questions A, B, C, G & H are ins	III III III III III III III III III II			Trip test report attached	YES	N/A	
A. Valves, gauges and associat					TES	X	NO
		ical damageand	in the appropriate of	peri or closed position:			
B. Is the air pressure and primir							
C. Did the nitrogen generators of		enerator hour me	eter		ni figuria	X	
D. Did the air compressor opera		the man factor		alah 16 Skom zasari Mana	Maria I	X	1211111
E. Did the low air pressure alar	n operate during the test?	Panel Shirt Con	madre de la	THE PARTY OF STREET	Gur	X	
F. Auxiliary drains that were ide	ntified by the owner were	drained during th	is inspection?		HIII STOP	X	TO WITE
G. Valves and trim appear to be	protected from temperate	ures below 40°F?			inger	X	ib anni
H. Pipe that passes through fre	ezers is free of ice blocka	ge?	in period trail	This total tight to be the	10 0 01	X	
I. Has the Air Leakage Test bee	n conducted on the Dry S	ystem within the	last 3 years? Year Po	erformed: NA	1000 H	X	111111
8 - SPRINKLERS, PIPE, AND	HANGERS (Questions A,	B & C are inspec	tion items) (Question	s D, E & F are tested items,	) YES	N/A	NO
A. Is all visible pipe in good cor	idition with no external co	rrosion, physical	damage and no leak	s?	X		
B. Are visible pipe hangers and	seismic braces free of ph	ysical damage?			X		
C. Are all sprinklers free from d	amage, obstructions to sp	ray patterns, fore	eign materials & corr	ect orientation?	X		
D. Have standard sprinklers 50	or more years old been re	eplaced or succes	ssfully tested?			X	
E. Have fast response sprinkler				Date of Sprinklers 2013		X	
F. Have dry type sprinklers 10 c				Date of Sprinklers NA		V	
9 - FIRE PUMPS AND STORA	The state of the s			The or optimization IVA			
	Fire Pump Test Per			N/A Report Attached		N N/	
Water Storage Tank Supplies V	Water: Y N N	Tank Inspection F	Performed: YN_	N/A Report Attach	ned: Y	N	N/A[X
Explanation of "NO" answer which is attached to this for	n. Pan La Amor methods	The Later of	mmendations are lis	ted on SERVICE FOLLOW (	JP #		
No SERVICE FOLLOW UP RI I state that the information on the with applicable NFPA 25 test an inspection except as noted on a	nis form is correct at the tin d inspection sections. All	ne and place of thi equipment tested	at this time was left i				
100	Jordan Messmer	Signature	me	Certification	on#	54-25-	-5260
l acknowledge that the inspection understood that all information requested, will be forwarded to	contained herein is provide	ed to the best of th					
Name of Owner or Representative	verbal approval via C	hris Allen	Signature	verbal ap;	Pro	NA.	>
or itehresemanive			<del>-</del>	Water Based Test and		n Page :	2 of 2



### DRY PIPE VALVE TRIP TEST REPORT

_	H PHONE NUMBER: 614-291	-7001	6	era.			yultq	C	)NA	TIONAL	ACC	UN	IT NUMB	ER: 1	-800	-776-71	81	
_	5/21/2021							001	NIT A	- FOO	DVAN							
	CML - HICKORY CHASE	Trimi		10717					NTAC	-1	RYAN	-				2163		
	500 HICKORY CHASE							- STA	ONE		614-64 OH	15-2	22/5	ZIP	42	215		_
This inspection i			uart	o els		Month	, D	_	\   E	Other	ОП			_ ZIP	43.	215		
1071000	The second of the second	NEG		111				Veekly		Other					4 D	2022		_
This inspection i					•		al trip test	(no wai			rs test)		ear Full Flo	ow res	7.3			
DRY PIPE VALV		SYS	-		1	SY	STEM#	1	SYS	STEM#		SY	STEM#		SYS	STEM#		
Valve Serial Nur		W00												MAN I				
Manufacturer Na		VIKI	NG	-			10.77							110				
Valve Model Nu	mber?	F-2						<b>+</b> 33										_
Valve Size?		6"			1				-									
Area Covered?		ATT	-			-							<u> </u>				191	
Date Last Full To		M: 05	_	Y: 20		M:	Y:		M:	Y:		M:	Y:		M:	Y:	1 = 2.	
Date last operate		M: 05		Y: 20		M:	Y:		M:	Y:		M:	Y:		M:	Y:		
Pressure Before	Test: Air?		36 psi 70 psi				psi		psi			p:			-	osi		
0:	Water?	4.00	_	U ps		-	р	si ———		p	si	_	p:	SI			osi	
Size of outlet at		1/2"	_	-0 5	ZINO	-	VEC	LINO		VEC	Tuo		lyE0	- NO		VEC		NO
If not, how many	below dry valve open wide at test?	THR	_	-	×Νο		YES	NO	L	YES	NO	Ш	YES	NO		YES	Ш	NO
ii iiot, iiow iiiaiiy	Air Pressure?	31	_	ps			n	si			osi	_	p:	ni ni			osi	
Valve Tripped A		70		ps		+-		si		·	si	_	p:				osi	
valve Impleati	Time?	0	_	n <b>20</b>	sec		min	sec		min	sec		min P	sec		min	-	sec
If full trin test lis	t time water reached test opening?	NA		n NA			min	sec	$\vdash$	min	sec		min	sec		min	_	sec
	to ITC less than 60 seconds?	TY	_		X NA		YN	N/A		Y N	∏N/A		YN	N/A		Y   N	-	N/A
	TION / PERFORMANCE	SYS	_		1		STEM#		-	STEM#		SY	STEM#		-	STEM#	_	
	Interior of Valve?	XY	_	N	NA		YES	NO	-	YES	NO	_	YES	NC	-	YES	-	NO
Acceptable	Moving Parts?	XY	_=	N	NA		YES	NO	-	YES	NO	-	YES	NC	+===	YES	_	NO
Condition	Rubber Facing?	XY	_	N	NA		YES	NO		YES	NO	-	YES	NC	+==	YES		NO
	Seats?	XY	'L	N	NA		YES	NO		YES	NO		YES	NC		YES	П	NO
	Valve Operated as Designed?	XY		N	NA		YES	NO		YES	NO		YES	NO		YES		NO
	Valve Reset?	XY		N	NA		YES	NO		YES	NO		YES	NC	, I	YES		NO
Performance	Water Flow Alarm Operate?	XY		] N [	NA		YES	NC		YES	NO		YES	NC		YES		NO
	Low Air Trouble Alarm Operate?	XY	1	N	NA	Г	YN	N/A		Y N	N/A		Y N	N/A		Y N		N/A
QUICK OPENIN	IG DEVICES	SY	STE	M #	1	S	STEM#		S	STEM#		S	YSTEM#		SY	/STEM#		
Device Serial N	umber?	3308	B9															
Manufacturer N	ame?	VIKI	NG	i														
Model Number?		D-2																
	Device In Service / Operated?	1		Α		_												
	Upper Chamber?	N.		<u>·</u>	si		F	)\$i			psi		p	si			psi	- 02
	Device Tripped At?			1161	psi	4	sec	psi	H	sec	psi	L	sec	psi		sec		psi
which is a No SERV I state that the NFPA 25 test at SERVICE FOLL Name of Ins I acknowledge information corauthority having	hat the inspection, deficiencies, and s stained herein is provided to the best o g jurisdiction.	the tine tested	durin ne a l at t	ng this nd pla his tin Si mprov	s inspendence of the was gnaturement	ection. this in left in ure s were	spection. operation	All test al condi	and ition (	inspection upon com	ns were pletion of	perfo f thi C	ormed in ac s inspection certifications	cordan n exce on #	pt as	noted on 54-25-52 od that all	any 260	
Name of Ow or Represen	verbal acc	epta	nc	e by	Chri	s		Signa	ture		/ V	/	A					



JOB NA

An EMCOR Company

INITIA	TING	and	SUP	ERV	<b>ISOF</b>	Υ
	DEV	ICE	REP	ORT		

(Functional & Sensitivity Testing)

DATE: 05/21/2021

BRANCH PHONE NUMBER: 614-291-7001	NATIONAL ACCOUNT NUMBER: 1-800-776-7181
ME:	INSPECTION FREQUENCY: Annual SemiAnnual
DNAL BUILDING DATA:	Quarterly Monthly Weekly Other

LOCATION	DEVICE TYPE	ZONE / ADDRESS	TYPE OF INSPECTION	FACTORY SETTING	MEASURED SETTING	STATUS
EXISTING MEP RM 228	PSD	1D038	FUNCTIONAL	punduc fa	The Grant B	PASS
RM 231 - HPU 8	PDD	1D039	FUNCTIONAL			PASS
EXISTING MEP 231B - HPL 13	PDD	1D040	FUNCTIONAL			PASS
EXISTING MEP RM 231	PSD	1D041	FUNCTIONAL			PASS
EXISTING MEP RM 237	PSD	1D042	FUNCTIONAL			PASS
EXISTING MEP RM 237A - HPU 9	PDD	1D043	FUNCTIONAL			PASS
EXISTING MEP 237B - HPU 11	PDD	1D044	FUNCTIONAL			PASS
STAFF ELEV LOBBY	PSD	1D045	FUNCTIONAL			PASS
EXISTING MEP RM 239 - HPU 12	PSD	1D048	FUNCTIONAL			PASS
EXISTING MEP 2ND FL	PSD	1D049	FUNCTIONAL			PASS
FECHNOLOGY RM 110	PSD	1D051	FUNCTIONAL			PASS
MEETING RM STORAGE	PSD	1D053	FUNCTIONAL			PASS
KITCHENETTE	RRD	1D054	FUNCTIONAL	4		PASS
FECHNOLOGY RM 137	PSD	1D055	FUNCTIONAL			PASS
BOOK DROP	PSD	1D056	FUNCTIONAL		TENTS	PASS
TECHNOLOGY RM 211	PSD	1D057	FUNCTIONAL	Ulie to accuse		PASS
STORAGE RM 230	PSD	1D058	FUNCTIONAL			PASS
TECHNOLOGY RM 234	PSD	1D059	FUNCTIONAL			PASS
RM 223 POOL ATTN	PDD	1D061	FUNCTIONAL			PASS
ELEV SHAFT PUBLIC	PSD	1D063	FUNCTIONAL			PASS
ELEV SHAFT PUBLIC	RRD	1D064	FUNCTIONAL			PASS
ELEV SHAFT FUBLIC	PSD	1D065	FUNCTIONAL			PASS
ELEV SHAFT SERVICE	RRD	1D065	FUNCTIONAL			PASS
ELEV SHAFT SERVICE	KKD	10000	FUNCTIONAL			PASS
Property of the second				(87)		
				_		
		Sec. 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			- 100	
				-		- 17
	614   1828					
	100	A. R. H. L. R. L.		Clare tell		
	sell 10 of					
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s_ skerd2 skerms.	make with 11	the bank of	To all thought to		8106.3	REPORT OF
			- 321			
			The Company			
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						LUAUAU
			50	July 199	TO THE RESERVE	THE CHIMAN
		3	mic No. 17		THE HAT	e oquirlighta
Fig. 28 41 199 199	Design The Control					1 11 11 11
1 TURNET	House to the plant of			0 3.44.25.49.9		
				7	9	
	The results	A STATE OF THE PARTY.		But the same	Partition (special	

BD=BEAM DETECTOR, DH=DOOR HOLDER, FD=FLAME DETECTOR, FHD=FIXED TEMP HEAT DETECTOR, RRD=RATE OF RISE HEAT DETECTOR, C=CHIME FSS=FIRE SUPPRESSION SYSTEM, IDD=ION DUCT DETECTOR, ISD=ION SMOKE DETECTOR, PDD=PHOTO DUCT DETECTOR, PSD=PHOTO SMOKE DETECTOR, MPS=MANUAL PULL STATION, SSD=SINGLE STATION DETECTOR, ST=STROBE, B=BELL, H=HORN, HS=HORN/STROBE, S=SPEAKER, FPR=FIRE PUMP RUN, TS=TAMPER SWITCH, WPS=WATER PRESSURE SWITCH, LAS=LOW AIR SUPERVISORY SWITCH, WFS=WATER FLOW SWITCH, LSD=LASER SMOKE DETECTOR, ACD=ACCUMULATION SMOKE DETECTOR, IRD=INFRARED SMOKE DETECTOR, CDD=CARBON MONOXIDE DETECTOR, FPP=FIRE PUMP POWER, O=OTHER, AS=ABORT SWITCH, SS=SPEAKER/STROBE, KH=KITCHEN HOOD, EML=ELECTROMAGNETIC LOCK, NC=NURSE CALL

YES

NO How many devices this page require Service:

Are services required on Fire Alarm Components:



BRAI	NCH PHONE NUMBER:				O NA	TIONAL A	CCOUNT	NUMBER	t: 1-800	0-776-	7181
DATE	Total Control of the Alexander of the Al										
SITE			0.1920	1969	CONTA	CT			- 300	The live	10.00
ADDRESS	S and the same of	- 000000		KY NEW	PHONE		Per III			100	CV THERE
CITY			THE REAL PROPERTY.		STATE	LUS TOTAL	e - allegy E	ZII	-		
This inspec	ction is: Annual Semi-Annua	al Q	uarterly	Monthly	Weekly	Other	in and a	distrigu	NUMBER.	E.M	The art
1 – OWNE	RS SECTION This section is a	to be ans	wered and sig	ned by the (	Owner or O	wners Rep	resentative	mel mars	YES	N/A	NO
A. Is the bu	uilding occupied?	Ald-my							X	in to	
B. Has the	occupancy classification and hazard	content	s remained th	ne same sin	ce the last	inspection	l (If no, survey r	equired)	X	46.65	S LYSIG
C. Are all fi	ire protection systems in service?					and the same			X	A SAME	
D. Are all V	Wet Sprinkler System piping and Wet	portion	s of Dry Syste	ms protecte	ed from ter	nperatures	s below 40°	?	X		
E. Owner h	nas been instructed on maintaining th	e Dry S	ystem Auxilia	ry Drains?					X		
Inspection	of Sprinklers, Hangers, Pipe and Fi	ttings w	ill be conduct	ted from Flo	or Level,	Concealed	Spaces ar	e not req	uired t	o be li	spected
Name of C	owner or Representative: verbal	accepta	nce by Chris	Signatu	re:	1	10				
	RAL (Questions A, B, C, D, E, F, H, J		-			VI are teste	d items)		YES	N/A	NO
	e sprinkler systems been extended to							Old Inch	X	1	
	ere appear to be proper clearance be								$\overrightarrow{\times}$	-gom-	
	hydraulic nameplate(s) securely atta		· · · · · · · · · · · · · · · · · · ·					firmed.	$\overrightarrow{\nabla}$	130 11	n ney bit.
	a spare head box with the proper nu						edaled)	. (4.1.9)	$\Rightarrow$		
	ot. Connection in good condition, visi					CHC3:			$\Rightarrow$	75	C I I I I I I I
	Fire Dept. Connection piping been h						Year Due: 20	25	$\rightarrow$		
	gauges 5 or more years old been re				r Replaced: 2		Year Due: 20		$\Diamond$	11.008	2833 UK. 9
									$\rightarrow$	12 141	
	inspection of the Pipe, Valves and B						Year Due: 20	22			
	noses and hose valves in good condi						Vaca Duce N. A	LI TIME	Samuel I	$\vdash \Diamond$	in in in in in
	5 yrs) connected to the system has t						Year Due: NA		V	^	
	kflow prevention device tested per the				Month Due: N		Year Due: 20		$\rightarrow$		-
	d flow test has been conducted on fir	Too III	CONTRACTOR IN THE	•	Desired to the same	DAMARITHIA	Year Due: 20			<u> </u>	
3 - CONTR	ROL VALVES (Questions A, B & E are	inspectio	n items) (Ques	tion D is a te	st item) (Qu	estion C is	a maintenan	ce item)	YES	N/A	NO
A. Are all s	sprinkler system main control valves	and all o	ther control v	alves in the	appropria	e open or	closed pos	ition?	X		
B. Are all c	control valves supervised in the appro	opriate o	pen or closed	d position? (	Supervision Ty	<sub>pe)</sub> Chain,	Lock & Ta	mper	X		11 (15/4 (11)
C. Were al	ll control valves operated through full	range o	f motion, lubr	icated and i	returned to	normal po	osition?	to bil at	X	Delea.	TEMP I
D. Did all e	electrical supervisory switches actuat	e super	visory alarms'	?	HOUSE IN	Menus	allimine	\$25 MON	X	SWI	H Fiye t-
E. Are all o	control valves easily accessible and r	narked v	with ID signs?	(Valve Location	n) Sprinkle	er Riser R	oom		X	654	- 1 5000
4 - WATER	R SUPPLY (Question A is a inspecti	on item)	(Questions B	& C for infor	mation) (M	ain Drain is	s a test item	)	YES	N/A	NO
A. Did flow	results have the same or greater PS	SI readin	gs than previ	ous tests?	(A reduct	on of 10% sho	uld be noted as i	Vo)	X		
B. System	water supplied from: X City Water	Elev	ated Tank	Pressure 7	Tank S	uction Tar	nk Pond	Oth	er		- Harrison
C. Main dr	ain is piped outside Yes X No	NA, if	no how many	v 25' hoses	required to	get outsi	de for a Fo	rward Flo	w Test	?	NA
Riser	Location (Riser)	Size	Static	Residual	PSI	Alarm		lydraulic Ir	formation	on	100
Number	Location (Niser)	Size	Pressure	Pressure	Return	Time	Design Density	Design Area	B	150	GPM Demand
1 WET	WATER SERVICE ROOM	2"	80	60	75	20SEC	NA	1080	55	.02	300.58
2 WET	WATER SERVICE ROOM	2"	70	60	70	22SEC	NA	902	70	0.4	281.44
3 DRY	WATER SERVICE ROOM	2"	70	55	70	20SEC	NA	2535	6	3.5	713.8
					JIOT JA	T NO	Name of the s	17 of the 5	NV 145	ed file	la eful
			time the		1					SEXT	E USE
7 611	and the stage of the property and									-	- 100

SITE						DATI			
5 - FLOW ALARMS (Questions	A & B	are inspection & tes	— st items, based o	on type of inspec	ction perfor	med)	YES	N/A	NO
A. Did waterflow through the ins						5.10%		X	
B. Did waterflow through the ins	pector	s test actuate all el	ectrical alarms?				X		100
6 - WET SYSTEMS (Questions	A & B a	re inspection items) (	Questions C, D &	E are tested item	s) (Question	n F is for information)	YES	N/A	NO
Number of systems 2 Size	s 4"	NA NA	NA Make 8	VIKING	F-1				5.5
A. Alarm valves, riser check val	ves, ga	uges and associate		_	amage?		X		
B. Trim valves, alarm and super						opriate Signs provided)		X	
C. Is the antifreeze system prote	ected c	orrectly based on t	he listed cold z	one?	Cold Zone Des	signator: NA		X	
D. The antifreeze system protect	tion is	normal and is not o	vercharged? (	protection above the	cold zone is	considered overcharged)		X	
E. Was the antifreeze system to	sted at	the point of conne	ction to the syst	tem and at the r	emote poir		VICE TOE	X	rivo.
F. Area Protected? NA				T	ype NA	Connec	tion NA°	Remo	te NA°
7 - DRY / PREACTION / DELU	GE SY	STEMS It is the	owner's respons	sibility to mainta	in auxiliary	drains between inspe		Owner lotified	NA
Number of Dry Systems	1	Make and Model	VIKING	6IN F-2	Trir	test report attached	4		quired
Number of Pre-Action Systems		Make and Model	description of the same	NA		test report attached ,		The Maria	
· ·	0	Make and Model		NA		5		100	
Number of Deluge Systems (Questions A, B, C, G & H are ins						test report attached	YES	N/A	NO
A. Valves, gauges and associat	_						X	IN/A	NO
			icai damagean	a in the appropri	iate open o	i ciosea position:		-	ingali
B. Is the air pressure and primir							X	-	
C. Did the nitrogen generators			enerator hour n	neter			X	-	2000
D. Did the air compressor opera	ate sati	sfactorily?		Sicol by a cost of	nigitata	bristo del ristric	X	Corr	
E. Did the low air pressure alar	n oper	ate during the test?	ejume amiderio	a Bullion Is, Says		THE MORELLEY	X		
F. Auxiliary drains that were ide	ntified	by the owner were	drained during	this inspection?	PROPERTY.	er ammera estas	X		
G. Valves and trim appear to be	prote	cted from temperate	ures below 40°F	-?	alla Egitive	untipolium yranibes	X		
H. Pipe that passes through fre	ezers is	free of ice blocka	ge?					X	
I. Has the Air Leakage Test bee	n cond	ucted on the Dry S	ystem within th	e last 3 years?	Year Perform	ed: 2020	X		
8 - SPRINKLERS, PIPE, AND	HANG	ERS (Questions A,	B & C are inspe	ection items) (Qu	estions D,	E & F are tested items	s) YES	N/A	NO
A. Is all visible pipe in good cor	dition v	with no external co	rosion, physica	I damage and n	o leaks?	S ON LUCKBAN HIM OF IS	X	T-M-S	
B. Are visible pipe hangers and	seism	c braces free of ph	ysical damage	?			X		
C. Are all sprinklers free from d			1000000		& correct o	rientation?	X		
D. Have standard sprinklers 50							+ / \	X	170
E. Have fast response sprinkle	-	-		100 100 100		of Sprinklers 2017	1-1		
							- 10	1	
F. Have dry type sprinklers 10		***************************************			1 D. Fest - C. 1 1	of Sprinklers 2017	Property of		
9 - FIRE PUMPS AND STORA	E all			5 4	V)				
System has Fire Pump: Y N	X F	ire Pump Test Per	formed This Ins	pection: Y X	N/A	Report Attache	2d: Y	N	I/A
Water Storage Tank Supplies \	Vater:	Y N X	Tank Inspection	n Performed: Y	N N	N/AX Report Attac	:hed: Y	N	N/A
Explanation of "NO" answer which is attached to this for No SERVICE FOLLOW UP RI	n. EPORT nis form	was required during to	his inspection.	his inspection.	All test and	inspections were per	formed in		
with applicable NFPA 25 test an inspection except as noted on a					s left in ope	erational condition up	on compl	etion o	r this
Name of Inspector			Signature			Certificat	ion#		
I acknowledge that the inspecti- understood that all information requested, will be forwarded to Name of Owner	contair	ed herein is provide	ed to the best of		of the perso				
or Representative				—— Sigilatu					
						Water Based Test and	Inspection	n Page	2 of 2



BRAI	NCH PHONE NUMBER: 614-291-7	7001			O NATI	ONAL	ACCOUNT NUM	BER: 1-80	0-776-	7181
DATE	06/30/2021									
SITE	CML - NEW ALBANY				CONTACT	614-	374-5708 ERV	CARSON		
ADDRESS	S 200 MARKET ST	Timber	the sould in	111	PHONE	614-	374-5466		L. Carrie	P. PHIII C
CITY	NEW ALBANY				STATE	ОН		ZiP 430	54	1911
This inspec	ction is: Annual Semi-Annua		Quarterly	Monthly	- ]Weekly [	Other	geren u day e	old writing	4.0	HE -
	CONTACT 814-374-5708 ERV CARSO \$200 MARKET ST NEW ALBANY STATE OH ZIP  Annual Semi-Annual Quarterly Monthly Weekly Other  RS SECTION This section is to be answered and signed by the Owner or Owners Representative Yaliding occupied?  Ver Sprinkler System piping and Wet portions of Dry Systems protected from temperatures below 40°?  Ver Sprinkler System piping and Wet portions of Dry Systems protected from temperatures below 40°?  Ver Sprinkler System piping and Wet portions of Dry Systems protected from temperatures below 40°?  Ver Sprinkler System piping and Wet portions of Dry Systems protected from temperatures below 40°?  Ver Sprinkler System piping and Wet portions of Dry Systems protected from temperatures below 40°?  Ver Sprinkler System piping and Wet portions of Dry Systems protected from temperatures below 40°?  Ver Sprinkler System piping and Wet portions of Dry Systems protected from temperatures below 40°?  Ver Sprinkler System piping and Wet portions of Dry Systems protected from temperatures below 40°?  Ver Sprinkler System piping and Wet portions of Dry Systems protected from temperatures below 40°?  Ver Sprinkler System piping and Wet portions of Dry Systems protected from temperatures below 40°?  Ver Sprinkler Systems pean and Fittings will be conducted from Floor Level, Concealed Spaces are not required where or Representative:  CHAD - TECH  Signature:  Ver Chap - TECH  Ver Deventions piping been extended to all visible areas of the building? (Ver No. on Engineering Survey is required)  ver as paren head box with the proper number and type of spare sprinklers and werenches?  Ver Connection in good condition, visible, acessible and marked with 1D signs?  Ver Due: NOW  Ver Due: CO22  Ver Due: Now  Ver		YES	N/A	NO					
		Jan 10				iii ii		X	Jane	5,688
		content	ts remained th	ne same sin	ce the last in	spectio	n (If no. survey required		1858	
	<del></del>							X		
		t portion	s of Dry Syste	ems protecte	ed from temr	erature	s below 40°?	1		
		•				- Cratare				
					or Level Co	nceale	d Spaces are no	t required t	o he in	enacted
		-		2.72		liceale			o be iii	specieu
				1. LOD 3.10 - C.	100000	/ -			100	- delete
								YES	N/A	NO
								X		1000
B. Does the	ere appear to be proper clearance b	etween t	the top of all s	storage and	the sprinkler	deflect	or?	X		
C. Are the	hydraulic nameplate(s) securely atta	ched to	the riser and	legible? (An	swer N/A if system	is Pipe Sc	heduled)	X	100.10	
D. Is there	a spare head box with the proper nu	ımber ar	nd type of spa	re sprinkler	s and wrencl	nes?	THE REAL PROPERTY.	X	41.574	And here
E. Fire Dep	ot. Connection in good condition, visi	ble, ace	ssible and ma	arked with ID	signs?		William Co.	I X	17. 1	2 17 mg II
F. Has the	Fire Dept. Connection piping been h	ydrostat	tically tested i	n the last 5	years?	133417	Year Due: NOW	THEFT	11100	X
G. Have al	I gauges 5 or more years old been re	eplaced	or calibrated?	Yea	r Replaced: 201	8	Year Due: 2023		X	(CME)
H. Internal	inspection of the Pipe, Valves and E	ackflow	has been per	rformed with	in the last 5	years?	Year Due: 2022	X		dra-
J. Are all h	noses and hose valves in good cond	ition, fre	e from physic	al damage a	and no leaks	?	a portadiu o	mail meseri	X	HILE
K. Hose (>	5 yrs) connected to the system has I	peen ser	rviced per NF	PA 1962?	Year of Hose: N	1	Year Due: NA		X	
						_	Year Due: 2022	X		
							Year Due: 2022			TOTAL
				BID DI GRADI	THE PERSON NAMED IN	-	with a second of	em) YES	N/A	NO
								1 2 3	IVA	1
	<del></del>							+ 🗘		
								$\rightarrow \Diamond$	D1 100 1	1000
					eturnea to n	ormai p	oosilion?	$\rightarrow$		
								$\rightarrow$		
										110
								YES	N/A	NO
			-					X		a light (
								4	17. 1	HERE.
	ain is piped outside 🔀 Yes 💹 No [	NA, if								NA
Riser Number	Location (Riser)	Size	Static Pressure		PSI Return				on il @ ase	GPM
	MECH ROOM OUTSIDE WET	2"	81	Pressure 62	88	Time 50	The state of the s	THE LOW SERVICE	4.4	Demand
3,015	CAMPAN MANAGEMENT CONTRACTOR			(978/10)	00	30	.10	300 6	4.4	372.3
2	MECH ROOM OUTSIDE DRY	2"	81	60	83	4	.10 2	2535 6	9.2	375.3
			to be that	still to their	MITAL E		an tenten sin		1164	
					10.cm 180 si	A CHINA	r communicación de la comm	Complete Mari		mosis u
			see makes		Heli	-11/11	10	199	17-11	myl Y
- 1	anies de la companie	+			<del>                                     </del>					

SITE CML - NEW ALBANY				DAT	E 06/3	0/2021	
5 - FLOW ALARMS (Questions	s A & B are inspection & te	— st items, based o	on type of inspect	ion performed)	YES	S N/A	NO
A. Did waterflow through the ins	spectors test actuate all m	echanical alarm	s?	HOUSE EL		$\top \times$	
B. Did waterflow through the ins	spectors test actuate all el	ectrical alarms?			X		1
6 - WET SYSTEMS (Questions	A & B are inspection items)	(Questions C, D &	E are tested items	) (Question F is for information)	YES	S N/A	NO
Number of systems 1 Size	es 4" NA NA	NA Make &	VIKING	J-1		10.00	- 10
A. Alarm valves, riser check val	ves, gauges and associat	ed trim are free	from physical da	mage?	X		
B. Trim valves, alarm and super	visory lines are in the app	oropriate open o	r closed position	? (Are Appropriate Signs provided)		X	
C. Is the antifreeze system prote				cold Zone Designator: NA	1	$\perp X$	
D. The antifreeze system protect						$\perp \times$	
E. Was the antifreeze system te	sted at the point of conne	ction to the syst			white	X	
F. Area Protected? NA	140		Ту	rpe NA Connec	tion N	1 2	ote NA°
7 - DRY / PREACTION / DELU	GE SYSTEMS It is the	owner's respons	sibility to maintain	auxiliary drains between insp	ections	Owner Notified	YES
Number of Dry Systems	1 Make and Model	VIKING	F-1	Trip test report attached	Trip	test not re	equired
Number of Pre-Action Systems	0 Make and Model	NA	NA	Trip test report attached	Trip	test not re	equired
Number of Deluge Systems	0 Make and Model	-	NA	Trip test report attached		-	
(Questions A, B, C, G & H are ins			ed items) (Questio		YE		NO
A. Valves, gauges and associat					X		
B. Is the air pressure and primir		CHAPTER WESTERN	TOTAL ASSESSMENT		X	-	ntge.
C. Did the nitrogen generators of		Generator hour m	neter			X	1
D. Did the air compressor opera					X		-
E. Did the low air pressure alarm		2	Palest Barrier Value (Conc.)	February America from	+ 😯	;	
			this inspection?				
F. Auxiliary drains that were ide		1 2 2		not elica condunte base	-		+
G. Valves and trim appear to be			7	ACTIVITY TO SEE A SEE ASSESSMENT	X	· \	
H. Pipe that passes through fre			- 1 2 2	Variable Parks and 2044		+X	V
I. Has the Air Leakage Test bee							
8 - SPRINKLERS, PIPE, AND							NO
A. Is all visible pipe in good cor				leaks?	X	-	-
B. Are visible pipe hangers and					X		
C. Are all sprinklers free from d	lamage, obstructions to sp	oray patterns, fo	reign materials &	correct orientation?	X		
D. Have standard sprinklers 50	or more years old been r	eplaced or succ	essfully tested?			$\perp$ X	
E. Have fast response sprinkler	rs 20 or more years old be	een replaced or	successfully test	ed? Date of Sprinklers 2003		X	
F. Have dry type sprinklers 10	or more years old been re	placed or succe	ssfully tested?	Date of Sprinklers NA		X	
9 - FIRE PUMPS AND STORA	GE TANKS (General Info	ormation concer	ning the property)	Committee of the Committee of the	NO COLUM		
System has Fire Pump: Y	Fire Pump Test Per	formed This Ins	pection: Y N	N/A Report Attach	ed: Y	NN	N/A X
Water Storage Tank Supplies \		Tank Inspection		N N/A Report Atta			N/A/X
			and the second second				
which is attached to this form		a/or inspector red	commendations a	re listed on SERVICE FOLLOW	, or # 6	3FU1779	3
No SERVICE FOLLOW UP RI	EPORT was required during	this inspection.					
I state that the information on the with applicable NFPA 25 test an inspection except as noted on a	nd inspection sections. All	equipment teste	d at this time was				
Name of Inspector	Jarret Hopkins	Signature	Jack -	7-bpd Certifica	tion#	54-2	5-5152
I acknowledge that the inspection understood that all information requested, will be forwarded to	contained herein is provid	ed to the best of					
Name of Owner or Representative	CHAD - TEC	Н	Signatur	e Verbo	1)		
				Water Based Test and	d Inspec	tion Page	2 of 2



or Representative

S. A. Comunale Company Dry Pipe Valve Rev 1.0 12 December 2012

#### An EMCOR Company

### DRY PIPE VALVE TRIP TEST REPORT

Water-based Inspection Report Dry System Page 1 of 1

BRANCH	PHONE NUMBER: 614-291	-7001						(		NATION.	AL ACC	OUN	IT NUMB	ER:	1-8	00-7	76-718	31	
DATE 06	6/30/2021																		
SITE C			_ C	ON	TACT	614-3	74-5	708 ER	/ CA	RS	ON								
ADDRESS 20	00 MARKET ST							PI	НО	NE	614-3	74-5	466						
CITY N	EW ALBANY							_ s <sup>-</sup>	ΓΑ	TE	ОН			ZIF	> _	4321	15		
This inspection is	: Annual Semi-Annual	Q	uarte	∍г <b>і</b> у		/lonthl	у 🔲	Veekl	у	Oth	er								
This inspection is	: Full trip test (water flowed to	inspec	tors	test)	•	Partia	I trip test	(no w	ate	er at inspec	tors test)	Υ	ear Full Flo	ow Te	st D	ue 2	2022		
DRY PIPE VALV	ES	SYS	TEN	Λ#	1	SYS	TEM#			SYSTEM	#	SY	STEM#		S	YST	ГЕМ#		
Valve Serial Num	ber?	0021	094	15											丄				
Manufacturer Nai	me?	VIKI	NG																
Valve Model Num	nber?	F-1													Т				
Valve Size?		4"													$\top$				$\neg$
Area Covered?		ATT	IC						T						$\top$				
Date Last Full Tri	ip Test?	м: 06		Y: 20	19	M:	Y:		$\exists$	M: Y	:	M:	Y:		М	:	Y:		$\neg$
Date last operate	d?	M: 06	;	Y: 20	21	M:	Y:			M: Y	:	M:	Y:		M	1:	Y:		
	Air?		34	4 ps	i		р	si			psi		p:	si	$\top$		r	si	$\neg$
Pressure Before	Test: Water?			1 ps			p	si			psi		p:	si	$\top$		F	si	$\neg$
Size of outlet at to	est valve?	1/2"									1				十				$\Box$
Was gate valve b	pelow dry valve open wide at test?		YE	s	X NO		YES	N	0	YES	S NC		YES	N	0		YES		NO
If not, how many	turns?	SIX		-			_				<u> </u>	Τ,			$\top$		-		
	Air Pressure?	15	;	ps	i		р	si	$\exists$		psi		p:	si	$\top$		Ŀ	si	-
Valve Tripped At	: Water Pressure?	81		ps	i		р	si	$\exists$		psi		p	si	$\top$		ī	si	
	Time?			PT	sec		min	min sec		min	sec		min	se	c		min	s	sec
If full trip test, list	full trip test, list time water reached test opening		mir	PT	sec		min	se	С	min	sec		min	se	С		min	s	sec
	to ITC less than 60 seconds?	PT	·	N >	< NA	П	Y N	N.	/A	Y	N N/A		Y N	N/	/AΙΓ	Υ	N		N/A
VALVE CONDIT	ION / PERFORMANCE	SYS	TEI	VI #	1	SYS	STEM#			SYSTEM	#	SY	STEM#		5	SYS.	TEM#		
	Interior of Valve?	XY		N	TNA		YES	П	10	YES	INC	+-	YES	ΠN	101	_	YES	П	NO
Acceptable	Moving Parts?	XY	_	N	NA	H	YES	ΠN	Ю	YES	NO		YES	N	ıol	┪	YES	_	NO
Condition	Rubber Facing?	XY	_	N	NA		YES	$\square$	10	YES	NO		YES	N	10	1	YES	П	NO
	Seats?	XY	' [	N	NA		YES		10	YES	NO		YES	N	10		YES		NO
	Valve Operated as Designed?	XY		N	NA		YES		10	YES	NO		YES	N	0		YES		NO
	Valve Reset?	XY	T	] N [	NA		YES		10	YES	NO		YES	N	10		YES		NO
Performance	Water Flow Alarm Operate?	XY	$\overline{\Box}$	] N [	NA		YES		10	YES	NO		YES	N	10		YES		NO
	Low Air Trouble Alarm Operate?	X	,	N	NA		Y N		Ά		N N/A		YIN		/A [	Y	N	币	N/A
QUICK OPENIN	G DEVICES	SY	STE	M #	1	SY	STEM#	<u> </u>		SYSTEM		S	YSTEM#		╅	SYS	TEM#	_	
Device Serial Nu	ımber?	NA													$\top$				
Manufacturer Na	ame?	VIKI	NG			$\vdash$									$\top$				
Model Number?		E-1			-					-		Т			$\top$				
Quick Opening D	Device In Service / Operated?		N	0											$\top$				
Air Pressure In U	Jpper Chamber?	0		p	si		ı	si			psi		ŗ	si	$\perp$			psi	
Quick Opening [	Device Tripped At?	NA	ser	c NA	psi		sec	ps	i	sec	psi		sec	ps	si L		sec	ŗ	psi
Explanation which is a	on of "NO" answers, system defic tached to this form.	iencie	es, a	nd/o	· inspe	ector	recomme	ndati	on	s are liste	d on SER	VICI	E FOLLOV	V UP	# 5	<u>;FU1</u>	<u>17793</u>		
No SERVI	CE FOLLOW UP REPORT was req	uired o	nirut	g this	inspe	ction.													
NFPA 25 test an	information on this form is correct at id inspection sections. All equipment DW UP REPORT as stated above.																		
Name of Insp	lamat Hamis	ns		Si	gnatı	ıre	Jan	-	2	1-tong	d-	_ c	ertificati	on #		54	I-25-51	52	
	hat the inspection, deficiencies, and s tained herein is provided to the best o gurisdiction.									rmation and	i that, if re	ques	ted, will be	forwa					
Name of Own	ner CH	AD -	TE	СН				Sign	at	ure	Ve	Y	00	1)					



BRA	NCH PHONE NUMBER: 614-291-7	001			O NAT	ONAL A	CCOUNT N	UMBER	: 1-800	)-776-7	181
DATE	09/10/2021										
SITE	CML - BARNETT				CONTAC	T CHR	ISTIAN FIEL	.DS			
ADDRES	S 3434 EAST LIVINGSTON AVE				PHONE	614-	374-5466				
CITY	COLUMBUS				STATE	ОН		ZII			
This inche	ction is: Annual Semi-Annua	. 🗀 o	uarterly	Monthly	Weekly	Other					
	RS SECTION This section is t		- —					<u> </u>	YES	N/A	NO
	uilding occupied?	o be ans	swered and sig	nea by the C	Jwner or Ow	ners kep	oresentative 		\ <u>\</u>	N/A	NO
		contont	to romained th	o same sin	oo the lest i	anno eti o	-	300	$\rightarrow$		
	occupancy classification and hazard fire protection systems in service?	conten	s remained tr	ie same sin	ce the last i	rispectio	11 (If no, survey red	quired)	$\rightarrow$		
		nortion	o of Dry Syste	ma protocto	nd from tom	noroturo	a halaw 4002		$\Diamond$	3-1211	
	Wet Sprinkler System piping and Wet				ed Horri terri	perature	5 Delow 40°?		$\rightarrow$		
	has been instructed on maintaining the				arlausi C		d C			- h- l	
	n of Sprinklers, Hangers, Pipe and Fi										
	Owner or Representative: verbal ap	<del></del>					vb	1 -			5 x-61
	RAL (Questions A, B, C, D, E, F, H, J								YES	N/A	NO
	e sprinkler systems been extended to									X	
B. Does th	ere appear to be proper clearance be	etween t	he top of all s	torage and	the sprinkle	r deflect	or?		X		
C. Are the	hydraulic nameplate(s) securely atta	ched to	the riser and I	egible? (Ans	swer N/A if syster	n is Pipe Sch	neduled)			X	
D. Is there	a spare head box with the proper nu	mber ar	nd type of spa	re sprinkler	s and wrence	hes?			<u>X</u>		
E. Fire De	pt. Connection in good condition, visi	ble, ace	ssible and ma	rked with IE	signs?					X	
F. Has the	Fire Dept. Connection piping been h	ydrostat	tically tested in	n the last 5	years ?		Year Due: NA			X	
G. Have a	Il gauges 5 or more years old been re	placed	or calibrated?	Yea	r Replaced: NA		Year Due: NA			X	
H. Internal	inspection of the Pipe, Valves and B	ackflow	has been per	formed with	in the last 5	years?	Year Due: NA			X	
J. Are all	hoses and hose valves in good condi	tion, fre	e from physica	al damage a	and no leaks	?				X	1
K. Hose (>	5 yrs) connected to the system has b	een ser	viced per NFF	PA 1962?	Year of Hose: N	A	Year Due: NA			X	
L. Fire bac	ckflow prevention device tested per th	e autho	rity having juri	sdiction?	Month Due: NA		Year Due: NA			X	
M. Forwar	d flow test has been conducted on fir	e backfl	ow device - N	A for systen	ns w/ fire pu	mps?	Year Due: NA			X	T
3 - CONTI	ROL VALVES (Questions A, B & E are	inspectio	on items) (Ques	tion D is a te	st item) (Que	stion C is	a maintenanc	e item)	YES	N/A	NO
A. Are all	sprinkler system main control valves	and all c	ther control v	alves in the	appropriate	open or	r closed posit	tion?		X	
B. Are all	control valves supervised in the appro	opriate o	pen or closed	position? (	Supervision Type	) None				X	
	Il control valves operated through full						osition?			X	
D. Did all	electrical supervisory switches actuat	e super	visory alarms?	?		<u> </u>				X	
E. Are all	control valves easily accessible and r	narked v	with ID signs?	(Valve Location	n) Mechani	cal Roo	m			X	
4 - WATE	R SUPPLY (Question A is a inspection	on item)	(Questions B	& C for infor	mation) (Ma	in Drain i	is a test item)		YES	N/A	NO
A. Did flov	v results have the same or greater PS	SI readir	ngs than previ	ous tests?	(A reductio	n of 10% sho	ould be noted as No	)		IX	T
B. System	water supplied from: X City Water	Elev	ated Tank	Pressure	Tank Su	ction Ta	nk Pond	Oth	er		
		_	no how many	/ 25' hoses						?	NA
Riser	Location (Riser)	Size	Static	Residual	PSI	Alarm	Hy	draulic Ir	formatio	on	
Number	Location (Niser)	Size	Pressure	Pressure	1 1	Time	Design Density	Design Area	PSI Ba		GPM Demand
1	EAST OS MECH ROOM	NA	NA	NA	NA	NA	NA	NA	N	IA	NA
-											
	2								-		
							1	_			



● BRA	NCH PHONE NUMBER: 614-291-7	001			O NATIO	ONAL A	ACCOUNT N	UMBER	: 1-800	-776-7	181
DATE	07/19/2021	11112-1112-1112			military (a) cha						
SITE	CML - REYNOLDSBURG				CONTACT	CHR	RIS				
ADDRES	S 1402 BRICE RD.	Tyliffer.	n to be zery unit	HOTE STEEL ET	PHONE	614-	374-5466	ALFRA TET	2.11		
CITY	REYNOLDSBURG		1 - 1 - 1 - 1		STATE	ОН		ZIP	430	68	
This inspe	ction is: Annual Semi-Annua	ı 🔲 Q	uarterly	Monthly	Weekly [	Other					
1 – OWNE	RS SECTION This section is t	o be ans	wered and sig	ned by the	Owner or Ow	ners Re	presentative		YES	N/A	NO
A. Is the b	uilding occupied?		W Y				Westerly	9 3	X	(era)	HUND.
B. Has the	occupancy classification and hazard	content	s remained th	ne same sin	ce the last in	spectio	n (If no, survey red	quired)	X		livela.
C. Are all t	ire protection systems in service?								X	5 -1	
D. Are all \	Wet Sprinkler System piping and Wet	portions	s of Dry Syste	ems protecte	ed from temp	erature	es below 40°?		X		
E. Owner I	has been instructed on maintaining th	e Dry S	ystem Auxilia	ry Drains?						X	
Inspection	n of Sprinklers, Hangers, Pipe and Fi	ttings w	ill be conduc	ted from Flo	oor Level, Co	nceale	d Spaces are	not requ	uired to	be Ins	spected
Name of C	Owner or Representative: verba	l approv	val via Chad	Signatu	re: 🗸 <	=	sent en	POP.	10	1	. 1
2 – GENE	RAL (Questions A, B, C, D, E, F, H, J	& K are	inspection ite	— ms) (Questic	ons G, L & M	are test	ed items)		YES	N/A	NO
A. Have th	e sprinkler systems been extended to	all visib	ole areas of th	ne building?	(If NO, an Engin	ering Surv	vey is required)	01 11 11	X		
B. Does th	ere appear to be proper clearance be	etween t	he top of all s	torage and	the sprinkler	deflect	tor?	CE-SERVER S	X	WOTHE	
C. Are the	hydraulic nameplate(s) securely atta	ched to	the riser and	legible? (Ans	swer N/A if system	is Pipe Sc	heduled)	may und		X	JESS MILE
D. Is there	a spare head box with the proper nu	mber an	d type of spa	re sprinklers	s and wrencl	nes?	15 1827 01	nin i	X	1	1.0
E. Fire De	pt. Connection in good condition, visil	ble, aces	ssible and ma	rked with ID	) signs?		along Truly	WILL O'TH		X	e. 1 a. 7 A.
F. Has the	Fire Dept. Connection piping been h	ydrostat	ically tested i	n the last 5	years ?		Year Due: 202	2	X	11 5:40	Same of the
G. Have a	Il gauges 5 or more years old been re	placed	or calibrated?	) Yea	r Replaced: 201	7	Year Due: 202	2	X		
H. Internal	inspection of the Pipe, Valves and B	ackflow	has been per	formed with	in the last 5	years?	Year Due: 202	2	X		Enr. West
J. Are all	hoses and hose valves in good condi	tion, free	e from physic	al damage a	and no leaks	?			-Carrier I	X	Libraria
K. Hose (>	5 yrs) connected to the system has b	een ser	viced per NFI	PA 1962?	Year of Hose: N	4	Year Due: NA			X	
L. Fire bad	ckflow prevention device tested per th	e author	ity having jur	isdiction?	Month Due: NA		Year Due: NA			X	- 1
M. Forwar	d flow test has been conducted on fire	e backflo	ow device - N	A for systen	ns w/ fire pu	mps?	Year Due: NA		-	X	-
3 - CONTI	ROL VALVES (Questions A, B & E are	inspectio	n items) (Ques	tion D is a te	st item) (Ques	tion C is	s a maintenanc	e item)	YES	N/A	NO
A. Are all:	sprinkler system main control valves	and all o	ther control v	alves in the	appropriate	open o	r closed posit	tion?	X		
B. Are all	control valves supervised in the appro	opriate o	pen or closed	d position? (	Supervision Type	Chain	& Lock		X		
C. Were a	Il control valves operated through full	range o	f motion, lubr	icated and i	returned to n	ormal p	osition?		X	Weight.	
D. Did all	electrical supervisory switches actuat	e superv	isory alarms	?	HOSE OF STATE	us de la	- SYMME	SAULT	UAV	X	92140
E. Are all	control valves easily accessible and r	narked v	vith ID signs?	(Valve Location	n) Mechanic	al Roo	m		X	r m - in	a many
4 - WATE	R SUPPLY (Question A is a inspection	on item)	(Questions B	& C for infor	mation) (Mai	n Drain	is a test item)	ov antibor	YES	N/A	NO
A. Did flov	v results have the same or greater PS	I readin	gs than previ	ous tests?	(A reduction	of 10% sh	ould be noted as No	0)	X		
B. System	water supplied from: X City Water	Elev	ated Tank	Pressure <sup>-</sup>	Tank Suc	ction Ta	nk Pond	Othe	er		middle.
C. Main dr	ain is piped outside Yes No	NA, if	no how man	y 25' hoses	required to	get outs	ide for a Fon	ward Flo	w Test	?	NA
Riser Number	Location (Riser)	Size	Static Pressure	Residual Pressure	PSI Return	Alarm Time	Design Density	draulic in Design Area	PS	@	GPM Demand
1	Mech Room	1-1/4"	90	60	85	30-	NA	NA		IA	NA
THE STATE OF	en net a notice firm		1	rating a	(D) (S)		office and		3/10	10-1	200 Mills
- 10	where participation of the hardware	n din witi	Particular particular	ED-MONEY DA	III HIGG II	e fina u	n 113/262 111 1	· David	e i mulie	ati eti III	1-17-11
	The Branch and September 1 - 19 million in the	install.	Trompagingun	EUTOVAL S			111 340 111		÷ Dy-		Slen o 1
						of remove			100		
			REPORT (C.)		na Thadwin	21.7640	n Metaly			mita e	suggest a
UL One	Per Company of the London Market										

SITE CML - REYNOLDSBUR	G						DAT	E 07/	19/20	021	
5 - FLOW ALARMS (Questions	A & B	are inspection & te	st items	s, based on	type of inspection	performed)		Y	ES	N/A	NO
A. Did waterflow through the ins	pectors	test actuate all m	echani	cal alarms?	MINESUMEZ X	Table 1	4			X	
B. Did waterflow through the ins	pectors	test actuate all el	ectrical	alarms?		1005.125	Let annual		X		
6 - WET SYSTEMS (Questions	A & B ar	e inspection items) (	(Questio			uestion F is	for information)	YE	ES	N/A	NO
Number of systems 1 Size	s 2 1/2	2" NA NA	NA	Make & Models	VIKING	CHK V	ALVE -LIMITE	D ARE	A		
A. Alarm valves, riser check val	es, gai	uges and associat	ed trim	are free fro	om physical dama	ge?				X	ve en
B. Trim valves, alarm and super									$\rightarrow$	X	
C. Is the antifreeze system prote						Zone Designate				$\rightarrow$	
D. The antifreeze system protect								)	$\rightarrow$	$\rightarrow$	
E. Was the antifreeze system te	sted at	the point of conne	cuon to	the system				_4: •		<u> </u>	te NA°
F. Area Protected? NA					Туре					wner	
7 - DRY / PREACTION / DELU	GE SYS	STEMS It is the	owner's	s responsib	ility to maintain au	ıxiliary draiı	ns between insp	ection		otified	NA
Number of Dry Systems	0	Make and Model	NA		NA	Trip test	report attached	X Tri	ip tes	t not re	quired
Number of Pre-Action Systems	0	Make and Model	NA		NA	Trip test	report attached	X Tri	ip tes	t not re	quired
Number of Deluge Systems	0	Make and Model	NA		NA	Trip test	report attached	X Tri	ip tes	t not re	quired
(Questions A, B, C, G & H are ins	pection	items) (Questions	D, E & I	are tested	items) (Question	F is a maint	enance item)	Y	ES	N/A	NO
A. Valves, gauges and associat	ed trim	are free from phys	sical da	mageand i	n the appropriate	open or clo	sed position?			X	
B. Is the air pressure and primir	g water	r level normal?								X	
C. Did the nitrogen generators of	perate	satisfactorily? G	enerato	or hour met	ter		E North		(6)/1	X	
D. Did the air compressor opera	ite satis	sfactorily?		Soldie	Augustin Se	1	THE PART OF THE PA			X	
E. Did the low air pressure alar	n opera	ate during the test?	?							X	
F. Auxiliary drains that were ide	ntified b	by the owner were	draine	d during thi	s inspection?		J. 1. 200			X	
G. Valves and trim appear to be					remarked to	Part II.	are squite			X	Bil Falls
H. Pipe that passes through fre	-				Made in the	Birthan And	of allowed a second	ы		X	
I. Has the Air Leakage Test bee				within the I	ast 3 years? Year	Performed: N	A			X	
8 - SPRINKLERS, PIPE, AND								ns) Y	ES	N/A	NO
A. Is all visible pipe in good cor							Total Part		X		
B. Are visible pipe hangers and	seismi	c braces free of ph	nysical	damage?					X		
C. Are all sprinklers free from d					ign materials & co	rrect orient	ation?		X		
D. Have standard sprinklers 50										X	
E. Have fast response sprinkler						P Date of Sp	rinklers NA		-	X	
F. Have dry type sprinklers 10 c							rinklers NA	1-	15.00	\(\forall \)	
9 - FIRE PUMPS AND STORA							147				
		ire Pump Test Per	244			1 N/A	Report Attach	and: V			I/AX
						N/A X	4				
Water Storage Tank Supplies V	157 1111		~ 3	Escolation.	erformed: Y I	V[_] N/A[2	Report Atta			]N[_	] N/A[X
Explanation of "NO" answer which is attached to this form		m deficiencies, and	d/or ins	pector reco	mmendations are I	isted on SE	RVICE FOLLOW	V UP #	1		
No SERVICE FOLLOW UP RI		was required during	this ins	pection.							
I state that the information on the with applicable NFPA 25 test an inspection except as noted on a	d inspe	ction sections. All	equipm	ent tested a	at this time was lef						
Name of Inspector	Jorda	n Messmer	Sig	nature	Me		Certifica	ition#	ŧ	54-25	-5260
I acknowledge that the inspection understood that all information requested, will be forwarded to	contain	ed herein is provid	ed to th								
Name of Owner or Representative	ve	rbal approval v	ia Cha	ıd	Signature	Ver	bal ap	PI	0	Von	-1
					+ -	Wate	er Based Test ar	nd Inspe	ection	n Page	2 of 2



# WATER BASED FIRE PROTECTION INSPECTION & TEST REPORT

An EMCOR Company

5.43	NCH PHONE NUMBER:		- DETAILS		NA	TIONAL A	CCOUNT NUMBE	ER: 1-80	0-776-7	'181
DATE	55A 1912									
SITE					CONTA	CT				
ADDRES	ss	- 199			PHONE	DOI: NOTE:	Carried Burney		II, PHILL	
CITY		TY.	The state of		STATE	no bi	7	ZIP		ART III
This inspe	ection is: Annual Semi-Annu	al 🔲 C	Quarterly	Monthly	Weekly	Other				
1 – OWNE	ERS SECTION This section is	to be an:	swered and sid	aned by the	Owner or C	Dwners Rea	presentative	YES	N/A	NO
	uilding occupied?	- 136 (6)						IX	1142	
	occupancy classification and hazare	d conten	ts remained th	ne same sin	ce the las	t inspectio	N (If no suprey required)	1	G. 1-10 (2)	The second
	fire protection systems in service?	a conten	to remained ti	ne same sin	CC THE IGS	t mapeono	11 (II No, Survey required)	+ 💸		
	Wet Sprinkler System piping and We	t portion	e of Dry Syste	ame protecte	ad from to	mperature	s below 40°2	$+ \diamondsuit$		
		-			sa ironi te	Imperature	S DEIOW 40 :	$+ \diamondsuit$		
	has been instructed on maintaining t					0	10			
	n of Sprinklers, Hangers, Pipe and F	iπings w	viii de conduc			Concealed	o Spaces are not re	equirea t	o pe ins	spected
	Owner or Representative:			Signatu —		garlana (A)				
2 – GENE	RAL (Questions A, B, C, D, E, F, H,	J & K are	inspection ite	ms) (Questio	ons G, L &	M are teste	ed items)	YES	N/A	NO
A. Have th	ne sprinkler systems been extended	to all visi	ble areas of t	he building?	(If NO, an Er	ngineering Surv	ey is required)		X	
B. Does th	nere appear to be proper clearance b	etween	the top of all s	storage and	the sprink	ler deflect	or?	X		
C. Are the	hydraulic nameplate(s) securely atta	ached to	the riser and	legible? (An	swer N/A if sys	tem is Pipe Sch	neduled)		X	100000000000000000000000000000000000000
D. Is there	a spare head box with the proper n	umber a	nd type of spa	re sprinkler	s and wre	nches?	STATE OF THE RESERVE	IX	44,19	28 L Th.
E. Fire De	pt. Connection in good condition, vis	ible, ace	ssible and ma	arked with IE	signs?	Survey Co.			X	68 5
F. Has the	Fire Dept. Connection piping been	nydrosta	tically tested i	n the last 5	years ?	ALC: UN	Year Due: NA	1 100 315 (	X	n/dev
	all gauges 5 or more years old been r				r Replaced: 2	2016	Year Due: 2021			X
	I inspection of the Pipe, Valves and I				in the last	5 years?	Year Due: 2021	X		
	hoses and hose valves in good cond						10 10 10 10 1		X	Detect U
	>5 yrs) connected to the system has						Year Due: NA		X	
	ckflow prevention device tested per t		· · · · · · · · · · · · · · · · · · ·		Month Due:		Year Due: NA		X	
	d flow test has been conducted on fi						Year Due: NA	751		
	ROL VALVES (Questions A, B & E are				AL POLINE		a maintenance item)	YES	N/A	NO
	sprinkler system main control valves							1 2	N/A	NO
	control valves supervised in the app							$+ \diamondsuit$		
	ill control valves operated through fu	·	•	-				1		
					returnea ti	o normai p	osition?	12 (10)	$\rightarrow$	10000000
	electrical supervisory switches actua									
	control valves easily accessible and						in a dand idam)	1/7		
	R SUPPLY (Question A is a inspect							YES	N/A	NO
	w results have the same or greater P			_	100		ould be noted as No)	- Water	IX	
	water supplied from: X City Water		vated Tank	Pressure <sup>*</sup>		Suction Ta		ther	Danie in	
C. Main di	rain is piped outside Yes No	XNA, i	f no how man			o get outs	ide for a Forward F			NA
Riser	Location (Riser)	Size	Static	Residual	PSI	Alarm	Design Desig		100	GPM
Number	CUCTORIAL CLOSET	NIA.	Pressure	Pressure	Return	Time	A THEOREM IN A RUGE			Demand
1	CUSTODIAL CLOSET	NA	175	•	٠	•	NA NA	, r	NA A	NA
					STR DETERM		II INTERNATION			W
					- Allin is		CHICALON TO VILLE	E In jur	DOLDER D	DE CONTRACTOR DE
						CE I PAI			(Table 14	modit 9 at
	The same of the sa									
						I		1		

SITE	11				DAT	E		
5 - FLOW ALARMS (Questions	A & B a	are inspection & tes	st items, based o	n type of inspection	performed)	YES	N/A	NO
A. Did waterflow through the ins	pectors	test actuate all m	echanical alarm	s?	STATE AND		X	
B. Did waterflow through the ins	pectors	test actuate all ele	ectrical alarms?				X	
6 - WET SYSTEMS (Questions	A & B are	e inspection items) (	Questions C, D &	E are tested items) (Q	uestion F is for information)	YES	N/A	NO
Number of systems 1 Size	es 1"	NA NA	NA Make & Models	STRAIGHT GUT	LIMITED AREA OFF D	OMESTIC		
A. Alarm valves, riser check val	ves, gau	iges and associate			ge?	X		
B. Trim valves, alarm and supe	visory li	nes are in the app	ropriate open o	closed position?	Are Appropriate Signs provided)		X	
C. Is the antifreeze system prot	ected co	rrectly based on t	he listed cold zo	ne? Cold	Zone Designator: NA		X	
D. The antifreeze system protect							X	
E. Was the antifreeze system to	sted at	the point of conne	ction to the syst	em and at the remo			X	
F. Area Protected? NA				Туре	NA Connec	ction NA°	Remo	te NA
7 - DRY / PREACTION / DELU	GE SYS	TEMS It is the	owner's respons	ibility to maintain au	xiliary drains between insp		Owner otified	NA
Number of Dry Systems	0	Make and Model	NA	NA	Trip test report attached	5 21		nuired
		Make and Model		NA		<b>E</b> 2		
Number of Pre-Action Systems					Trip test report attached			
Number of Deluge Systems	0	Make and Model		NA	Trip test report attached			
(Questions A, B, C, G & H are ins	•				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	YES	N/A	NO
A. Valves, gauges and associa			icai damageand	in the appropriate	open or closed position?		$\Diamond$	
B. Is the air pressure and primit	ng water						X	
C. Did the nitrogen generators	perate	satisfactorily? G	enerator hour m	eter			X	15000
D. Did the air compressor opera	ate satis	factorily?		and the second	marine, arrived and		X	
E. Did the low air pressure alar	m opera	te during the test?	Mark male dis			Saul	X	
F. Auxiliary drains that were ide	ntified b	y the owner were	drained during	this inspection?	a fell to the state of the state of	in other	X	
G. Valves and trim appear to be	e protect	ted from temperat	ures below 40°F	?	and the state of the	1/42 1-4	X	
H. Pipe that passes through fre	ezers is	free of ice blocka	ge?	P-1907 (6) 115	celle a service of	344	X	ilg/si
I. Has the Air Leakage Test bee				e last 3 years? Year	Performed: NA	91/	X	
8 - SPRINKLERS, PIPE, AND						s) YES	N/A	NO
A. Is all visible pipe in good cor						X		
B. Are visible pipe hangers and								1907
					reat orientation?	$\rightarrow$		-
C. Are all sprinklers free from o			-	A CONTRACT OF THE RESIDENCE OF	rrect orientation?	X	\/	3 S 10 T / 10
D. Have standard sprinklers 50			•				X	
E. Have fast response sprinkle	rs 20 or	more years old be	en replaced or	successfully tested?	Date of Sprinklers NA	<u> </u>	X	
F. Have dry type sprinklers 10	or more	years old been re	placed or succe	ssfully tested?	Date of Sprinklers NA		X	
9 - FIRE PUMPS AND STORA	GE TAN	NKS (General Info	ormation concern	ning the property)				
System has Fire Pump: Y	X Fi	re Pump Test Per	formed This Ins	pection: Y N	N/A Report Attach	ied: Y	N	I/AX
Water Storage Tank Supplies			Tank Inspection		N/AX Report Atta	ched: Y	IN	N/A
Explanation of "NO" answer which is attached to this for No SERVICE FOLLOW UP R	rs, systei m.	m deficiencies, and	l/or inspector red				U9960	
I state that the information on t with applicable NFPA 25 test ar inspection except as noted on a	d insped	ction sections. All	equipment teste	d at this time was lef	est and inspections were pe t in operational condition u	erformed in pon comp	accor letion o	dance of this
Name of Inspector			Signature		Certifica	tion#	54-25	-4951
I acknowledge that the inspecti understood that all information requested, will be forwarded to	contain	ed herein is provid	ed to the best of					
Name of Owner or Representative		Tracey		Signature	re-un	OP \		
or irebreaemanae		•			Water Based Test an	- ( )	- D	2 -6 2



	NCH PHONE NUMBER: 614-291-7	'001	oran ngon n		O NAT	TIONAL A	CCOUNT	NUMBER	: 1-800	-776-7	181
DATE	N/H/S				CONTA	<b>.</b> T					
SITE			1.1900/121		CONTA	- I					w regula
ADDRES	5		Three are a second		PHONE	-		710			NA LINE
CITY		-			STATE	Бъл <u>-Та</u>		ZIP	-	-	
	ction is: Annual Semi-Annua					Other	ar leviting			(Sh	OR DE
	RS SECTION This section is t	o be ans	wered and sig	ned by the (	Owner or O	wners Rep	resentative		YES	N/A	NO
	uilding occupied?								X		THE IN
	occupancy classification and hazard	content	s remained th	ne same sin	ce the last	inspection	(If no, survey i	required)	X	18,11010	TEACL.
	re protection systems in service?				- Italia				X	o all	
	Wet Sprinkler System piping and Wet				ed from ter	nperatures	s below 40°	?	X		d
	has been instructed on maintaining th								X		
Inspection	n of Sprinklers, Hangers, Pipe and Fi	ttings wi	III be conduc	ted from Flo	or Level, (	Concealed	Spaces ar	re not requ	ired to	be In	spected
Name of C	Owner or Representative: no signa	ture/cov	/id19 concer	<sub>'ns</sub> Signatuı	re:	N					
2 - GENE	RAL (Questions A, B, C, D, E, F, H, J	& K are i	inspection ite	ms) (Questic	ons G, L & I	M are teste	ed items)		YES	N/A	NO
A. Have th	e sprinkler systems been extended to	all visib	ole areas of the	ne building?	(If NO, an Eng	gineering Surve	ey is required)		X		
B. Does th	ere appear to be proper clearance be	etween th	ne top of all s	torage and	the sprinkl	er deflecto	οτ?		X		
C. Are the	hydraulic nameplate(s) securely atta	ched to t	he riser and	legible? (Ans	swer N/A if syst	em is Pipe Sch	eduled)		X	Re M	(4)
D. Is there	a spare head box with the proper nu	mber an	d type of spa	re sprinklers	s and wren	ches?	41	1111	X	W-	-11.87-1
E. Fire De	pt. Connection in good condition, visi	ble, aces	sible and ma	rked with ID	signs?	The lateral	ditty bid	to the contra	X	F-46	ma Vint
F. Has the	Fire Dept. Connection piping been h	ydrostati	ically tested i	n the last 5	years?	institution Topic	Year Due: 20	21	X	M-m	Hiny's
G. Have a	ll gauges 5 or more years old been re	eplaced o	or calibrated?	Yea	r Replaced: 2	016	Year Due: 20	21	X	Local	Winar <sup>4</sup>
H. Internal	inspection of the Pipe, Valves and B	ackflow	has been per	formed with	in the last	5 years?	Year Due: 20	21	X		
J. Are all	hoses and hose valves in good condi	tion, free	from physic	al damage a	and no leal	s?	and co			X	Lanc
K. Hose (>	5 yrs) connected to the system has b	een ser	viced per NFI	PA 1962?	Year of Hose:	NA	Year Due: N	4		X	
L. Fire bac	ckflow prevention device tested per th	e author	ity having jur	isdiction?	Month Due: O	СТ	Year Due: 20	21	X		V
M. Forwar	d flow test has been conducted on fir	e backflo	ow device - N	A for systen	ns w/ fire p	umps?	Year Due: 20	26	X		
3 - CONTI	ROL VALVES (Questions A, B & E are	inspectio	n items) (Ques	tion D is a te	st item) (Qu	estion C is	a maintenar	nce item)	YES	N/A	NO
A. Are all	sprinkler system main control valves	and all o	ther control v	alves in the	appropria	te open or	closed pos	sition?	X		
B. Are all	control valves supervised in the appro	opriate o	pen or closed	d position? (s	Supervision Ty	<sub>pe)</sub> Chain,	Lock & Ta	amper	X	75	1000
C. Were a	Il control valves operated through full	range o	f motion, lubr	icated and r	eturned to	normal p	osition?		X		T. VETE
D. Did all	electrical supervisory switches actuat	e superv	visory alarms	?			Shirt in		X		
	control valves easily accessible and r								X		Ineid
4 - WATE	R SUPPLY (Question A is a inspecti	on item)	(Questions B	& C for infor	mation) (M	ain Drain i	s a test iten	n)	YES	N/A	NO
A. Did flov	v results have the same or greater PS	SI readin	gs than previ	ous tests?	(A reduct	ion of 10% sho	uld be noted as	No)	X		
B. System	water supplied from: X City Water	Elev	ated Tank	Pressure	Γank ∭S	uction Tai	nk Pon	d Othe	r		
C. Main dr	ain is piped outside XYes No	NA, if	no how man	y 25' hoses	required to	get outsi	de for a Fo	rward Flo	w Test	?	NA
Riser	Location (Riser)	Size	Static	Residual	PSI	Alarm		Hydraulic In Design	formatic PSI		GPM
Number	C. Account 1905-2-1-101-2 Continues Operations		Pressure	Pressure	Return	Time	Design Density	Area	Ba	ise	Demand
1	WATER SERVICE ROOM	1-1/4"	65	49	60	25sec	.10	990	50	0.3	291
Destro	The state of the s				110	1917-51	SIT SEEDS		360		
.14	THE SAME IS NOT THE OWNER OF THE OWNER.	p/Ule I	MANUFACTOR MAN		of balls	UE THE 18				10 49 01	
	THE RESIDENCE OF THE PROPERTY	SEN SE	NA BELIGINARY	1111 12 4 111	SCHOOL STATE	ar Esta	offingtion,	BELLEVAN	65 75	21 110 (	0.755044
						ml uses server					
				1897.1			MANAGE IN		90/	metra la	E (11 7) Ta
10											-

SITE								DAT	ſΕ			
5 - FLOW ALARMS (Questions	A & B	are inspection & te	— st items,	based o	n type of insp	ection pe	erformed)		•	YES	N/A	NO
A. Did waterflow through the ins	pectors	test actuate all m	echanic	al alarms	s?	eal me	103 TA				X	
B. Did waterflow through the ins	pectors	test actuate all el	ectrical	alarms?			nus sines in	Color of the last	-	X		
6 - WET SYSTEMS (Questions	A & B ar	e inspection items) (	<b>Question</b>	s C, D &	E are tested ite	ems) (Que:	stion F is for inf	ormation)	,	YES	N/A	NO
Number of systems 1 Size	s 3"	NA NA	NA	Make & Models	VICTAULIC	,	717HR					Seri
A. Alarm valves, riser check val	es, gai	uges and associat					?			X		
B. Trim valves, alarm and super	visory I	ines are in the app	ropriate	open or	closed posit	ion? (Are	Appropriate Signs pr	ovided)			X	
C. Is the antifreeze system prote	ected co	orrectly based on t	he listed	cold zo	ne?	Cold Zon	e Designator: NA				X	
D. The antifreeze system protect	_						- DAV		)	188	X	ism ii
E. Was the antifreeze system to	sted at	the point of conne	ction to	the syste	em and at the	remote	point of the sys			on High	X	Davo.
F. Area Protected? NA						Type N	A	Conne	ction	NA°	Remo	te NA°
7 - DRY / PREACTION / DELU	GE SYS	STEMS It is the	owner's	respons	ibility to main	tain auxili	iary drains betv	veen insp	oectic	ons N	Owner otified	NA
Number of Dry Systems	0	Make and Model	NA		NA		Trip test report	attached	X	- 1	4.2	quired
Number of Pre-Action Systems	0	Make and Model	NA	1000	NA		Trip test report	Mark I				
Number of Deluge Systems	0	Make and Model		The TE	NA		Trip test report					
(Questions A, B, C, G & H are ins	75			are teste		stion F is				YES	N/A	NO
A. Valves, gauges and associat											X	110
B. Is the air pressure and primir									37		X	
			oporato	r hour m	otor					-		
C. Did the nitrogen generators of			CHETALO	i iloui ili	CIGI							
D. Did the air compressor opera				A PAGE	the transmit						$\Diamond$	ph m
E. Did the low air pressure aları				ania ding	umach se	dr-sin	ar ny falitry a	thalin, s	_d b.		X	
F. Auxiliary drains that were ide						1?		o lar	OF III		X	ME.
G. Valves and trim appear to be	protec	ted from temperat	ures bel	ow 40°F	?	100					X	
H. Pipe that passes through fre				11	Well III	Orto Laka	The Land No.	Mar .	0		X	
I. Has the Air Leakage Test bee	n cond	ucted on the Dry S	ystem v	vithin the	last 3 years	? Year Per	formed: NA	6. 1054	qu.	10.00	X	Delli
8 - SPRINKLERS, PIPE, AND	HANGE	RS (Questions A	B & C a	re inspe	ction items) (C	Questions	D, E & F are te	sted iten	ns)	YES	N/A	NO
A. Is all visible pipe in good cor	dition v	vith no external co	rrosion,	physical	damage and	no leaks	?	TO THE TAX		X		
B. Are visible pipe hangers and	seismi	c braces free of ph	ysical d	amage?						X		11.000
C. Are all sprinklers free from d	amage,	obstructions to sp	ray patt	erns, for	eign material	s & corre	ct orientation?			X		
D. Have standard sprinklers 50	or more	e years old been re	eplaced	or succe	essfully tested	1?				-24/.18	X	THE STATE OF
E. Have fast response sprinkle	s 20 or	more years old be	en repla	aced or s	successfully to	ested? D	ate of Sprinklers	2016		-, -	X	
F. Have dry type sprinklers 10					-		ate of Sprinklers				X	
9 - FIRE PUMPS AND STORA					1 1 1 1 1 1			147.				44000
									16.9			
		re Pump Test Per						ort Attach			N N	
Water Storage Tank Supplies V	Vater:	Y N X	I ank Ins	spection	Performed: Y		N/AX Re	port Atta	achec	1: Y	_N	N/AX
Explanation of "NO" answer which is attached to this for No SERVICE FOLLOW UP R	n.				ommendation	s are liste	ed on SERVICE	FOLLOV	V UP	#		AND STREET
I state that the information on the with applicable NFPA 25 test an inspection except as noted on a	d inspe	ction sections. All	equipme	ent tested	at this time v							
Name of Inspector	Jorda	n Messmer	Sign	ature	M	1-		Certifica	ition	#	54-25	-5260
I acknowledge that the inspection understood that all information requested, will be forwarded to	contain	ed herein is provid	ed to the									
Name of Owner or Representative	no si	gnature/covid19	conce	erns	Signa	ture	NA					
					_		Water Base	d Test ar	nd Ins	pection	n Page	2 of 2



	NCH PHONE NUMBER: 614-291-7				O NA	TIONAL A	CCOUNT N	IUMBER	: 1 <b>-</b> 800	0-776-7	181
DATE	ALIE CONTRACTOR ACCOUNTS										
SITE				- 100	CONTA						2 100
ADDRES	s				PHONE						W ALL TON
CITY					STATE	or Ins		ZIF			01 111120
	ction is: Annual Semi-Annua		And the second	· —			100	100	the Division	2	High St
	RS SECTION This section is t	to be ans	wered and sig	gned by the (	Owner or O	wners Rep	resentative	1111	YES	N/A	NO
	uilding occupied?	Af U							X		
	occupancy classification and hazard	content	s remained th	he same sin	ce the last	inspection	1 (If no, survey re	equired)	X		11/10
	fire protection systems in service?	and the same		4		And the same	LETT		X	en lin	V312.
	Wet Sprinkler System piping and Wet	-			ed from ter	mperatures	s below 40°	?	X		
	has been instructed on maintaining th								X	177	
	n of Sprinklers, Hangers, Pipe and Fi					Concealed	Spaces are	not req	uired to	o be Ins	spected
Name of C	Owner or Representative: 10 signa	ture/cov	rid 19 conce	rnsSignatu	re:	1	/4				
2 – GENE	RAL (Questions A, B, C, D, E, F, H, J	& K are	inspection ite	ms) (Questic	ons G, L &	M are teste	ed items)		YES	N/A	NO
A. Have th	e sprinkler systems been extended to	o all visib	ole areas of the	he building?	(If NO, an En	gineering Surve	ey is required)		X		
B. Does th	ere appear to be proper clearance be	etween t	he top of all s	storage and	the sprinkl	ler deflecto	or?		X	M WITH	
C. Are the	hydraulic nameplate(s) securely atta	ched to	the riser and	legible? (Ans	swer N/A if syst	em is Pipe Sch	eduled)	/Tolliforn	X	10.1110	JID E⇒J
D. Is there	a spare head box with the proper nu	mber an	d type of spa	re sprinkler	s and wrer	nches?	ar They		X	17 10 1	
E. Fire De	pt. Connection in good condition, visi	ble, aces	ssible and ma	arked with IC	signs?	- N	el en el i	ner w	X	Helify	gilly (8
F. Has the	Fire Dept. Connection piping been h	ydrostat	ically tested i	n the last 5	years ?	20 (13) (18)	Year Due: 202	25	X	11111-	de propor
G. Have a	Il gauges 5 or more years old been re	eplaced o	or calibrated?	? Yea	r Replaced: 2	020	Year Due: 202	25	X		0
H. Internal	inspection of the Pipe, Valves and B	ackflow	has been per	rformed with	in the last	5 years?	Year Due: 202	25	X	No. 2 p. Li	the second
J. Are all	hoses and hose valves in good condi	tion, free	from physic	al damage a	and no lea	ks?				X	
K. Hose (>	>5 yrs) connected to the system has t	peen ser	viced per NF	PA 1962?	Year of Hose:	NA	Year Due: NA			X	
-	ckflow prevention device tested per th		· · · · · · · · · · · · · · · · · · ·				Year Due: 202	22	X		
	d flow test has been conducted on fir						Year Due: 202	22	X		
3 - CONTI	ROL VALVES (Questions A, B & E are	inspectio	n items) (Ques	stion D is a te	st item) (Qu	estion C is	a maintenand	ce item)	YES	N/A	NO
A. Are all	sprinkler system main control valves	and all o	ther control v	alves in the	appropria	te open or	closed posi	ition?	X		
B. Are all	control valves supervised in the appro	opriate o	pen or closed	d position? (s	Supervision Ty	<sub>(pe)</sub> Tampe	er Switch	CHA-H UH	X	22.11	L-IUI
C. Were a	Il control valves operated through full	range o	f motion, lubi	ricated and r	eturned to	normal p	osition?	Stell recent	X	-,47	1971
	electrical supervisory switches actuat				Mg/Lanen of	C. D. D.	White I	0340311311	X		11107
E. Are all	control valves easily accessible and r	narked v	vith ID signs?	(Valve Location	n) Mechar	nical Roor	n	July 1	X	613.6	Tun. h
	R SUPPLY (Question A is a inspection				-			)	YES	N/A	NO
A. Did flov	v results have the same or greater PS	SI readin	gs than previ	ious tests?	(A reduct	tion of 10% sho	ould be noted as N	(0)	X		
	water supplied from: X City Water		ated Tank	Pressure 7	Tank S	Suction Tar	nk Pond	Othe	er T		
	rain is piped outside XYes No		no how man							2	NA
Riser			Static	Residual	PSI	Alarm	H	ydraulic ir	formation	on	IVA
Number	Location (Riser)	Size	Pressure	Pressure	Return	Time	Design Density	Design Area	PS Ba	@ ase	GPM Demand
1	MECH ROOM MEP	1-1/4"	65	50	60	15SEC	.1	1500	5	3.6	295.2
1,32	Experience of Double Americans			(100) (11	1012	100000	ONTRODUC		101	SEQUE	VQ-r-ma
	NOT WOULD BEEN BUT OF SHIPPING THOSE BEEN BEEN BEEN BEEN BEEN BEEN BEEN BE	s digno h	The paintaint	1 Tomarily 1		net jac is	d meta arm	UII ATEA	na de a	Officer Bu	
	THE COURT OF STREET AND THE SECOND DESIGNATION OF THE PARTY OF THE PAR	(7±0, 54)	Light Dage	off to Jest	ur engoli		of the Late		14 14.15	LIST SE	de la
	_				ne me	Proof to Trail	Success a		107 107	70 10	
	- v = -		a anula	.600	10.05%	birrichen	etshipsi.b		19		mailton a
	DUPLICATE HIT OF THE STREET PRODU					-			-		
		1	I	1	I .	1		l	1	1	

SITE					DAT	Έ		
5 - FLOW ALARMS (Question	s A & B	are inspection & tes	st items, based o	n type of inspection p	performed)	YES	N/A	NO
A. Did waterflow through the in:	spectors	test actuate all m	echanical alarms	s?	NAME AND		X	
B. Did waterflow through the in:	spectors	test actuate all el	ectrical alarms?		INCHES IN	X		
6 - WET SYSTEMS (Questions	A & B ar	re inspection items) (	Questions C, D &	E are tested items) (Qเ	estion F is for information)	YES	N/A	NO
Number of systems 1 Size	es 3"	NA NA	NA Make &	VICTAULIC	717HR			
A. Alarm valves, riser check val	ves, ga	uges and associate	ed trim are free f	rom physical damag	e?	X		
B. Trim valves, alarm and supe	rvisory I	ines are in the app	ropriate open or	closed position? (4	re Appropriate Signs provided)		X	
C. Is the antifreeze system prot	ected co	orrectly based on t	he listed cold zo	ne? Cold Z	one Designator: NA		X	
D. The antifreeze system protect							X	
E. Was the antifreeze system to	ested at	the point of conne	ction to the syste	em and at the remote			X	
F. Area Protected? NA				Туре	NA Connec	ction NA°	Remo	te NA°
7 - DRY / PREACTION / DELU	GE SYS	STEMS It is the	owner's respons	ibility to maintain aux	riliary drains between insp		Owner lotified	NA
Number of Dry Systems	0	Make and Model	NA	NA	Trip test report attached			auired
Number of Pre-Action Systems	0	Make and Model		NA F	Trip test report attached			
Number of Deluge Systems	0	Make and Model		NA [	Trip test report attached			
(Questions A, B, C, G & H are ins			The state of the s			YES	N/A	NO
A. Valves, gauges and associa						120	X	110
B. Is the air pressure and primi	-	THE STREET STATE OF STREET	iour damagodina	in the appropriate o	port or diodod poortion.		V	APIG L
			onorator hour m	otor	The second second	100		-
C. Did the nitrogen generators			enerator hour m	etei				
D. Did the air compressor oper			www.inco.co.co	column from an of	in the high state of the first		$+ \diamondsuit$	off recor
E. Did the low air pressure alar				Committee September 1983	origination of the r	_	X	iantel
F. Auxiliary drains that were ide	entified b	by the owner were	drained during t	his inspection?	Sant cold han value.	8,1	X	
G. Valves and trim appear to b	e protec	ted from temperat	ures below 40°F	?	e That wood outgoing income	T	X	
H. Pipe that passes through fre	ezers is	free of ice blocka	ge?	THIN BE IN CO.	aidiga nieso hia zaje z na	fit	X	G/IVALE
I. Has the Air Leakage Test be	en cond	ucted on the Dry S	ystem within the	last 3 years? Year F	Performed: NA	41	X	imelii
8 - SPRINKLERS, PIPE, AND	HANGE	ERS (Questions A,	B & C are inspec	ction items) (Question	ns D, E & F are tested item	s) YES	N/A	NO
A. Is all visible pipe in good con	ndition v	vith no external co	rrosion, physical	damage and no lea	ks?	X	Park N	- SHAR
B. Are visible pipe hangers and	seismi	c braces free of ph	ysical damage?			X		
C. Are all sprinklers free from o	damage	, obstructions to sp	ray patterns, for	eign materials & cor	rect orientation?	X		
D. Have standard sprinklers 50	or mor	e vears old been re	eplaced or succe	essfully tested?			X	THE PERSON
E. Have fast response sprinkle	rs 20 or	more years old be	en replaced or s	successfully tested?	Date of Sprinklers 2015	1 735	X	1
F. Have dry type sprinklers 10					Date of Sprinklers NA			
		•			Date of optimizers 1474			
9 - FIRE PUMPS AND STORA								
		ire Pump Test Per			N/A Report Attach		N N	I/A X
Water Storage Tank Supplies	Water:	Y N X	Tank Inspection	Performed: Y N	N/A Report Atta	ched: Y	N	N/A X
Explanation of "NO" answe which is attached to this for No SERVICE FOLLOW UP R	m.		almo Currassile	ommendations are lis	sted on SERVICE FOLLOW	/ UP #		e Wastel
I state that the information on t with applicable NFPA 25 test ar inspection except as noted on	nd inspe	ction sections. All	equipment tested	at this time was left				
Name of Inspector	Jorda	n Messmer	Signature	Me	Certifica	tion#	54-25	-5260
I acknowledge that the inspecti understood that all information requested, will be forwarded to	contain	ed herein is provide	ed to the best of t					
Name of Owner or Representative	no siç	gnature/covid 1	9 concerns	Signature	NA			
	_				Water Based Test an	d Inspection	n Page	2 of 2



### **ADDITIONAL SPRINKLER** RISER INFORMATION **REPORT**

1		BRANCH	PHONE	NUMBER:	614-291	-700
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SITE

1 **CML - DUBLIN** 

NATIONAL ACCOUNT NUMBER: 1-800-776-7181

DATE 04/02/2021

Riser			Static	Residual	PSI	Alarm		ydraulic In		
Number	Location (Riser)	Size	Pressure	Pressure	Return	Time	Design Density	Design Area	PSI @ Base	GPM Demand
1	FL1 WATER SERVICE ROOM	1-1/4"	90	60	80	37	.10	1500	55.2	365.7
2	FL1 WATER SERVICE ROOM	1-1/4"	75	50	75	21	.15	1500	77.3	469.9
3	FL1 WATER SERVICE ROOM	1-1/4"	80	65	80	28	.10	1500	62.2	341.6
		-115 (0	the off the	t Hint ou	Le veng	ite irrinati	rašeme nil	ciliano a	li jali y	77-760.10
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						Electron				
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				am32*	T AND	ar district		prigan ini	mit way	RIET IN
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				Young		ry i.s	50.00	17 marrod	1000.330	e sulli
			11 11 11		IIIII II BIQ	201201-003	CL MEDICAL	o tour m	Emiric Princ	o manuar
		V		nvimer sizu						
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							1998 VII 189		DA. B. D. J. L.	
		TC		Contract of the			Sansa Bunis			
500	NA THE PROPERTY.	1 - 1								
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	and the second	7137		TOWARD TO		in war y	-72 = 11 70	- No the Rengian		
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-	AN ANY PROPERTY		62 m-82-	11 xot-3 c	System was				77.19.4	
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		-				1				



### WATER BASED FIRE PROTECTION **INSPECTION & TEST REPORT**

BRANCH PHONE NUMBER: 614-291-7001 NATIONAL ACCOUNT NUMBER: 1-800-776-7181 DATE SITE CONTACT **ADDRESS** PHONE ZIP CITY STATE This inspection is: X Annual Semi-Annual Quarterly Monthly Weekly Other 1 - OWNERS SECTION This section is to be answered and signed by the Owner or Owners Representative YES N/A NO A. Is the building occupied? B. Has the occupancy classification and hazard contents remained the same since the last inspection (If no, survey required) C. Are all fire protection systems in service? D. Are all Wet Sprinkler System piping and Wet portions of Dry Systems protected from temperatures below 40°? E. Owner has been instructed on maintaining the Dry System Auxiliary Drains? Inspection of Sprinklers, Hangers, Pipe and Fittings will be conducted from Floor Level, Concealed Spaces are not required to be Inspected Name of Owner or Representative: Signature: **Christian Fields** 2 - GENERAL (Questions A, B, C, D, E, F, H, J & K are inspection items) (Questions G, L & M are tested items) YES N/A NO A. Have the sprinkler systems been extended to all visible areas of the building? (If NO, an Engineering Survey is required) B. Does there appear to be proper clearance between the top of all storage and the sprinkler deflector? C. Are the hydraulic nameplate(s) securely attached to the riser and legible? (Answer N/A if system is Pipe Scheduled) D. Is there a spare head box with the proper number and type of spare sprinklers and wrenches? E. Fire Dept. Connection in good condition, visible, acessible and marked with ID signs? F. Has the Fire Dept. Connection piping been hydrostatically tested in the last 5 years? Year Due: NA Year Due: 2024 G. Have all gauges 5 or more years old been replaced or calibrated? Year Replaced: 2019 H. Internal inspection of the Pipe, Valves and Backflow has been performed within the last 5 years? Year Due: 2024 J. Are all hoses and hose valves in good condition, free from physical damage and no leaks? K. Hose (>5 yrs) connected to the system has been serviced per NFPA 1962? Year of Hose: NA Year Due: NA Year Due: 2021 L. Fire backflow prevention device tested per the authority having jurisdiction? Menth Due: APR Year Due: NA M. Forward flow test has been conducted on fire backflow device - NA for systems w/ fire pumps? 3 - CONTROL VALVES (Questions A, B & E are inspection items) (Question D is a test item) (Question C is a maintenance item) YES N/A NO A. Are all sprinkler system main control valves and all other control valves in the appropriate open or closed position? B. Are all control valves supervised in the appropriate open or closed position? (Supervision Type) Chain, Lock & Tamper C. Were all control valves operated through full range of motion, lubricated and returned to normal position? D. Did all electrical supervisory switches actuate supervisory alarms? E. Are all control valves easily accessible and marked with ID signs? (Valve Location) Mechanical Room 4 - WATER SUPPLY (Question A is a inspection item) (Questions B & C for information) (Main Drain is a test item) YES N/A NO (A reduction of 10% should be noted as No) A. Did flow results have the same or greater PSI readings than previous tests? B. System water supplied from: X City Water Elevated Tank Pressure Tank Suction Tank Other C. Main drain is piped outside XYes No NA, if no how many 25' hoses required to get outside for a Forward Flow Test? NA Hydraulic Information **PSI** Static Residual Alarm Riser Location (Riser) Size **GPM** Number Pressure Pressure Return Time Demand SEE ATTACHED

SITE									DATE			
5 - FLOW ALARMS (Question:	A & B	are inspection & te	— st items,	based o	n type of inspectio	on per	formed)			YES	N/A	NO
A. Did waterflow through the ins											X	
B. Did waterflow through the ins	pectors	test actuate all el	ectrical	alarms?						X		
6 - WET SYSTEMS (Questions	A & B ar	e inspection items) (	Question	ns C, D & i	E are tested items)	(Ques	tion F is	for infor	mation)	YES	N/A	NO
Number of systems 3 Size	s 3"	NA NA	NA	Make & Models	GLOBE	D	N80					
A. Alarm valves, riser check val	ves, gai	ges and associate	ed trim a			nage?				X		
B. Trim valves, alarm and super								Signs provi	ided)		X	
C. Is the antifreeze system prot	ected co	orrectly based on t	he listed	d cold zo	ne? co	id Zone	Designato	r: NA			X	
D. The antifreeze system protect	tion is r	normal and is not o	vercha	rged? (pi	rotection above the co	ld zone	is consid	ered over	charged)		X	
E. Was the antifreeze system to	sted at	the point of conne	ction to	the syste	em and at the rem	note p	oint of t	he syste	em?		X	
F. Area Protected? NA					Тур	e NA			Connecti	on NA°	Remo	te NA°
7 - DRY / PREACTION / DELU	GE SYS	STEMS It is the	owner's	responsi	ibility to maintain a	auxilia	ary drain	s betwe	en insped	tions	Owner otified	NA
Number of Dry Systems	0	Make and Model	NA		NA		Trip test	report at	tached >	7		quired
Number of Pre-Action Systems	0	Make and Model	NA		NA		Trip test	report at	tached >	Trip tes	st not re	quired
Number of Deluge Systems	0	Make and Model	NA		NA		Trip test	report at	tached >	Trip tes	st not re	quired
(Questions A, B, C, G & H are ins	pection	items) (Questions	D, E & I	are teste	d items) (Question	n F is a	a mainte	enance i	tem)	YES	N/A	NO
A. Valves, gauges and associate	ed trim	are free from phys	ical dar	nage?							X	
B. Trim valves, alarm and supe	rvisory I	ines are in the app	ropriate	open or	closed position?						X	
C. Is the air pressure and primit	ng water	r level normal?		v							X	-
D. Did the air compressor and/o	r nitrog	en generators ope	rate sat	isfactorily	y?						X	
E. Did the low air pressure alar	n opera	te during the test?	)								X	
F. Auxiliary drains that were ide	ntified b	by the owner were	drained	during th	his inspection?						X	
G. Valves and trim appear to be											X	
H. Pipe that passes through fre					. 121						X	
I. Has the Air Leakage Test bee	n condu	ucted on the Dry S	ystem v	vithin the	last 3 years? Ye	ar Perfo	ormed: N	4			X	
8 - SPRINKLERS, PIPE, AND	HANGE	RS (Questions A,	B&Ca	re insped	ction items) (Ques	tions l	D, E & F	are test	ted items)	YES	N/A	NO
A. Is all visible pipe in good cor	dition w	vith no external co	rrosion,	physical	damage and no l	eaks?	?			X	1	
B. Are visible pipe hangers and	seismi	braces free of ph	ysical d	lamage?						X		
C. Are all sprinklers free from d	amage,	obstructions to sp	ray patt	terns, for	eign materials & c	correc	t orienta	ation?		X		
D. Have standard sprinklers 50	or more	e years old been re	eplaced	or succe	ssfully tested?						X	
E. Have fast response sprinkle	s 20 or	more years old be	en repla	aced or s	uccessfully tested	d? Da	te of Spr	inklers 2	2019	_	X	
F. Have dry type sprinklers 10	or more	years old been re	placed o	or succes	sfully tested?	Dat	te of Spri	inklers N	NA		X	
9 - FIRE PUMPS AND STORA			•							1		1
	A 4	re Pump Test Per				N/	AX	Penort	Attached	ı. v	N N	/AX
Water Storage Tank Supplies \	humand				Performed: Y	N N	N/A	2	ort Attach		N	N/AX
				•		14		<u> </u>		-		IVA
Explanation of "NO" answer which is attached to this for No SERVICE FOLLOW UP R	n.		•		ommendations are	elisted	d on SEI	RVICE F	OLLOW U	P#		
I state that the information on the with applicable NFPA 25 test an inspection except as noted on a	d inspec	ction sections. All	equipme	ent tested	at this time was le							
Name of Inspector	Nicl	( Haring	Sign	ature	72			Ce	ertificatio	n#	54-25	-4951
I acknowledge that the inspection understood that all information requested, will be forwarded to	containe	ed herein is provide	ed to the									
Name of Owner or Representative		Christian Fiel	ids		Signature	i-o	Pull	17	1/1	1		
						- (,	Wate	r Based	Test and I	nspectio	n Page 2	2 of 2



BRAI  DATE	NCH PHONE NUMBER: 614-291-7 06/23/2021	001	The same of the same of		○ NAT	IONAL A	ACCOUNT NU	JMBER	: 1-800	)-776- <b>7</b>	181
SITE	CML - FRANKLINTON				CONTAC	CT 614-	832-0750 DA	NIEL W	/EBB		
ADDRES	S 1061 WEST TOWN ST		on a least the	min and our	PHONE	614-	374-2494				1900110
CITY	COLUMBUS	SILL YOU		R I III	STATE	ОН	ugenzia	ZIP	432	22	IN HILL
					- -	4					
	ction is: Annual Semi-Annua		Quarterly	·		Other				of contra	THE TANK
	RS SECTION This section is	to be an	swered and sig	ned by the	Owner or O	vners Re	presentative		YES	N/A	NO
	uilding occupied?								X	tym/hu	9.000
B. Has the	occupancy classification and hazard	conten	ts remained th	ne same sin	ce the last	inspection	n (If no, survey requ	uired)	X		
	ire protection systems in service?								X		
	Net Sprinkler System piping and We				ed from ten	perature	es below 40°?		X	1 33	
	nas been instructed on maintaining th		•				Tell ve		X		
Inspection	of Sprinklers, Hangers, Pipe and Fi	ittings v	vill be conduc	ted from Flo	or Level, C						
Name of C	Owner or Representative:verb	al appr	oval via Pat	Signatu	re:	1/ ~	rbal	0 P		ウンチ	~ 1
2 – GENEI	RAL (Questions A, B, C, D, E, F, H, J	& K are	inspection ite	ms) (Questi	ons G, L & I	l are test	ed items)		YES	N/A	NO
A. Have th	e sprinkler systems been extended t	o all visi	ible areas of th	ne building?	(If NO, an Eng	ineering Sur	vey is required)			X	
B. Does th	ere appear to be proper clearance be	etween	the top of all s	torage and	the sprinkle	er deflect	tor?		X		14.100
C. Are the	hydraulic nameplate(s) securely atta	ched to	the riser and	legible? (An	swer N/A if syste	em is Pipe Sc	heduled)	1-9-		X	
D. Is there	a spare head box with the proper nu	ımber a	nd type of spa	re sprinkler	s and wren	ches?	Neph me	ME Y	X	14 1/4	
E. Fire De	pt. Connection in good condition, visi	ble, ace	ssible and ma	rked with IC	signs?	or Emilia	en as a min	at m	-10	X	Mills -
F. Has the	Fire Dept. Connection piping been h	ydrosta	tically tested in	n the last 5	years ?	tork m	Year Due: NA	1311	mon i	X	shelf?
G. Have a	ll gauges 5 or more years old been re	eplaced	or calibrated?	Yea	r Replaced: 2(	017	Year Due: 2022	2	X	mt.	u asset
H. Internal	inspection of the Pipe, Valves and E	Backflow	has been per	formed with	nin the last	5 years?	Year Due: NA	- 16	lima	X	
J. Are all I	hoses and hose valves in good cond	ition, fre	e from physic	al damage a	and no leak	s?	- Manufa	mak c	- 15-5	X	
K. Hose (>	5 yrs) connected to the system has l	been se	rviced per NFI	PA 1962?	Year of Hose:	NA A	Year Due: NA			X	
L. Fire bac	kflow prevention device tested per th	ne autho	ority having jur	isdiction?	Month Due: N	Α	Year Due: NA		- 3	X	
M. Forwar	d flow test has been conducted on fir	e backf	low device - N	A for syster	ns w/ fire p	umps?	Year Due: NA		V INC.	X	
3 - CONTR	ROL VALVES (Questions A, B & E are	inspecti	on items) (Ques	tion D is a te	st item) (Que	estion C is	s a maintenance	e item)	YES	N/A	NO
A. Are all s	sprinkler system main control valves	and all	other control v	alves in the	appropriat	e open o	r closed positi	ion?	X		
B. Are all o	control valves supervised in the appr	opriate (	open or closed	d position? (	Supervision Typ	pe) Locke	ed Door	- Ve	X	71.5	
C. Were a	Il control valves operated through ful	l range	of motion, lubr	icated and	returned to	normal p	oosition?	475	X	HEW	
D. Did all	electrical supervisory switches actual	te super	rvisory alarms	?	-6	the make	2000	Parali	SIME	X	
E. Are all	control valves easily accessible and	marked	with ID signs?	(Valve Locatio	n) Mechan	ical Roo	m B		X	um liga	Tomabi
4 - WATE	R SUPPLY (Question A is a inspecti	on item)	(Questions B	& C for info	rmation) (Ma	ain Drain	is a test item)		YES	N/A	NO
A. Did flow	v results have the same or greater P	SI readi	ngs than previ	ous tests?	(A reduction	on of 10% sh	ould be noted as No,	)		IX	Jan 8
	water supplied from: X City Water	_	vated Tank	Pressure	Tank S	uction Ta	ank Pond	Othe	r	Selle of	- Internal
			if no how man	v 25' hoses				ard Flo	w Test	?	NA
Riser	Location (Riser)	Size	Static	Residual		Alarm	Hy	draulic In	formati	on	The species
Number	Location (Niser)	Size	Pressure	Pressure	Return	Time	Design Density	Design Area	B	ase	GPM Demand
1	2ND FL OUTSIDE MECH ROOM	NA	80	NA	NA	NA	NA	NA	N	IA	NA
2	2ND FL MECH ROOM	NA	80	NA	NA	NA	NA	NA	ı	IA	NA
70		III SII W			e Galled	1101		Healing	(1)		W. Y.
	The second secon				HC III						
-			SOUTH STREET								
						NV/CV per			=W		
	THE RESIDENCE OF THE PARTY OF T										

SITE CML - FRANKLINION						DA	IE 06/23	/2021	
5 - FLOW ALARMS (Questions	A & B are inspection	& test items, ba	ased on type of inspe	ection per	formed)		YES	N/A	NO
A. Did waterflow through the ins	pectors test actuate a	II mechanical	alarms?		9/11	8		$\perp$ X	
B. Did waterflow through the ins	pectors test actuate a	III electrical ala	ırms?	10	murki.	are arres		X	
6 - WET SYSTEMS (Questions	A & B are inspection iter	ns) (Questions (	C, D & E are tested ite	ms) (Ques	tion F is	for information	) YES	N/A	NO
Number of systems 2 Size	s 1" NA NA	NA M	ake & STRAIGHT	GUT C	FF DO	MESTIC		1815)	
A. Alarm valves, riser check val	ves, gauges and asso	ciated trim are	free from physical	damage?		- Badd	X		in agricul
B. Trim valves, alarm and super	The same of the sa		· · · · · · · · · · · · · · · · · · ·	on? (Are A	\ppropriate	Signs provided)		X	
C. Is the antifreeze system prote				Cold Zone		****		$\perp X$	
D. The antifreeze system protect							1)	$+$ $\overset{\times}{\sim}$	
E. Was the antifreeze system te	sted at the point of co	nnection to the	e system and at the					X	. 0
F. Area Protected? NA				Type NA		Carle Contract of the Contract	ection NA		ote NA°
7 - DRY / PREACTION / DELU	GE SYSTEMS It is	the owner's re-	sponsibility to maint	tain auxilia	ary drain	s between ins	pections	Owner Notified	NA
Number of Dry Systems	0 Make and Mo	del NA	NA		Trip test	report attached	Trip	test not re	equired
Number of Pre-Action Systems	0 Make and Mo	del NA	NA	7-14	Trip test	report attached	Trip	test not re	equired
Number of Deluge Systems	0 Make and Mo	del NA	NA		Trip test	report attached	Trip	test not re	equired
(Questions A, B, C, G & H are ins	pection items) (Question	ons D, E & I are	e tested items) (Que				YES		NO
A. Valves, gauges and associat	ed trim are free from p	ohysical dama	geand in the approp	riate ope	n or clo	sed position?		X	
B. Is the air pressure and primir	ng water level normal?							X	
C. Did the nitrogen generators of	perate satisfactorily?	Generator h	our meter					X	
D. Did the air compressor opera	ate satisfactorily?		- management		ed and			X	
E. Did the low air pressure alarr		est?		A Kong ang				X	
F. Auxiliary drains that were ide			uring this inspection	?	to and	Water Street		X	
G. Valves and trim appear to be						Local Inc.		X	1
H. Pipe that passes through fre									
I. Has the Air Leakage Test bee	411 2414		nin the last 3 years?	Year Perf	ormed: N	A	1.7	$\rightarrow \Diamond$	
8 - SPRINKLERS, PIPE, AND				7	AF STATE		ms) YES	S N/A	NO
A. Is all visible pipe in good cor	The second secon		A SHAPE OF THE PERSON AND ADDRESS OF			Of the party	X	1	1 years
B. Are visible pipe hangers and	seismic braces free c	of physical dan	nage?	The state of the s	-	7	X		
C. Are all sprinklers free from d	amage, obstructions t	o spray patteri	ns, foreign materials	s & correc	t orient	ation?	X		
D. Have standard sprinklers 50	or more years old bee	en replaced or	successfully tested	1?				X	
E. Have fast response sprinkler	rs 20 or more years ol	d been replace	ed or successfully te	ested? Da	ite of Sp	rinklers NA		X	
F. Have dry type sprinklers 10 c	or more years old bee	n replaced or s	successfully tested?	? Da	te of Spr	rinklers NA		X	
9 - FIRE PUMPS AND STORA	GE TANKS (General	Information co	oncerning the proper	rty)	a merica		Такаше		
System has Fire Pump: Y	Fire Pump Test	Performed Thi	is Inspection: Y	N N	AX	Report Attac	hed: Y	N	N/A X
Water Storage Tank Supplies V		T	ection Performed: Y		N/A	Report Att		N	N/A X
Explanation of "NO" answer		-	C. Bulletinski sami					46.04	
which is attached to this form	the state of the state of the state of	and/or mspeci	or recommendations	s are rister	u on se	KVICE I OLLO	-	- 7007	
No SERVICE FOLLOW UP RI	EPORT was required dur	ring this inspect	ion.						
I state that the information on the with applicable NFPA 25 test an inspection except as noted on a	d inspection sections.	All equipment	tested at this time w						
Name of Inspector	Jordan Messmer	Signat	ure MA	1		Certific	ation#	54-25	5-5260
I acknowledge that the inspection understood that all information requested, will be forwarded to	contained herein is pro	ovided to the be			rson pro		ormation a	and that,	if
Name of Owner or Representative	verbal approv	/al via Pat	Signat	ure	0	I DON'T C	APP		-
			<del></del> -	+	Wate	er Based Test a	nd Inspec	ion Page	2 of 2



	NCH PHONE NUMBER: 614-291-	7001			O NATIO	DNAL A	ACCOUNT N	UMBER	: 1-800	-776-7	181
DATE	06/09/2021										
SITE	CML - LINDEN	-			CONTACT		RISTIAN FIE	LDS			
	S 2223 CLEVELAND AVE				PHONE		374-5466				
CITY	COLUMBUS				STATE	ОН		ZIF	432	11	
This inspec	ction is: Annual Semi-Annu	al 🔲 C	Quarterly	Monthly _	Weekly [	Other					
1 - OWNE	RS SECTION This section is	to be an	swered and sig	gned by the (	Owner or Owi	ners Re	presentative	CE I	YES	N/A	NO
A. Is the bu	uilding occupied?	507 4	VIII.						X		
B. Has the	occupancy classification and hazard	d conten	ts remained th	ne same sin	ce the last in	spectio	n (If no, survey re	equired)	X	DOTAL.	0787
C. Are all fi	ire protection systems in service?					Facus	arlevali i o		X	2 mil	N.
D. Are all V	Net Sprinkler System piping and We	t portion	s of Dry Syste	ems protecte	ed from temp	erature	es below 40°	?	X		
E. Owner h	nas been instructed on maintaining t	he Dry S	ystem Auxilia	ry Drains?		WIT			X		
Inspection	n of Sprinklers, Hangers, Pipe and F	ittings w	vill be conduc	ted from Flo	or Level, Co	nceale	d Spaces are	e not req	uired to	be Ins	spected
Name of C	Owner or Representative: 'erbal ap	proval	from Chris A	IleiSignatu	re:	14	550	0 V =	)		
	RAL (Questions A, B, C, D, E, F, H,	•				are test			YES	N/A	NO
A. Have the	e sprinkler systems been extended	o all visi	ble areas of the	he building?	(If NO, an Engine	ering Sun	vey is required)			X	
B. Does the	ere appear to be proper clearance b	etween	the top of all s	storage and	the sprinkler	deflect	tor?		X	49 (90) 101	1/2/
	hydraulic nameplate(s) securely atta		<del>-</del>					di-	1	X	TUD
	a spare head box with the proper no			-			Auto de seu c	a Alexa	X	Tu McSI	1111-1111
	pt. Connection in good condition, vis					B)TV	Although a To		9300	X	ell to
F. Has the	Fire Dept. Connection piping been I	nydrosta	tically tested i	n the last 5	years ?	e de la co	Year Due: 202	22	X	nicin	marki v
	Il gauges 5 or more years old been r	<u> </u>			r Replaced: 201	7	Year Due: 202	22	X		500
	inspection of the Pipe, Valves and I				in the last 5	years?	Year Due: NA		is miles	X	
	hoses and hose valves in good cond						100			X	1
	5 yrs) connected to the system has						Year Due: NA			X	
	kflow prevention device tested per t				Month Due: NA		Year Due: NA			X	
	d flow test has been conducted on fi				ns w/ fire pur	nps?	Year Due: NA			X	
3 - CONTR	ROL VALVES (Questions A, B & E are	inspection	on items) (Ques	stion D is a te	st item) (Ques	tion C is	s a maintenan	ce item)	YES	N/A	NO
A. Are all s	sprinkler system main control valves	and all	other control v	alves in the	appropriate	open o	r closed pos	ition?	X		
	control valves supervised in the appr					-	<del></del>		X		
	Il control valves operated through fu							r - m	X	envry	975
D. Did all e	electrical supervisory switches actua	te super	visory alarms	?	not control w	-	1 1000000	-W/104	GHA	X	Balle
	control valves easily accessible and	i			n) Mechanic	al Roo	m	15 J. W	X	915 2	100
4 - WATEI	R SUPPLY (Question A is a inspect	ion item)	(Questions B	& C for infor	mation) (Mai	n Drain	is a test item	)	YES	N/A	NO
A. Did flow	v results have the same or greater P	SI readir	ngs than previ	ious tests?	(A reduction	of 10% sh	ould be noted as N	lo)		X	
B. System	water supplied from: X City Water	Elev	vated Tank	Pressure <sup>-</sup>	Tank Suc	tion Ta	ank Pond	Othe	er		
C. Main dr	ain is piped outside Yes No	XNA, i	f no how man	y 25' hoses	required to g	et outs	side for a For	ward Flo	w Test	?	NA
Riser	Location (Riser)	Size	Static	Residual	PSI	Alarm	Н	lydraulic Ir	formation	on .	GPM
Number	• •	O.LO	Pressure	Pressure	Return	Time	Design Density	Design Area	PSI Ba	ise	Demand
1	1ST FL MECH ROOM	NA	75	NA	NA	NA	NA	NA	N	Α	NA
THE ACT	ALTERNATION OF THE PROPERTY AND ADDRESS OF THE PROPERTY ADDRESS OF THE			1912	100165	TISTIST	THE HOER		T. POIT	11-41	
							DAMES OF				
				-					16,600	Marilla e a	
											No. of Contrast
							STAR THEAT			100	
	and a restored and the same at the same.								$\top$		

SITE CML - LINDEN									DAT	TE 6	/9/202	1 00:00	
5 - FLOW ALARMS (Question	s A & B are in	spection & te	st item	s, based o	n type of insp	ection pe	rformed)				YES	N/A	NO
A. Did waterflow through the ins	spectors test	actuate all m	echan	ical alarm	s?	87 98	MI BA	E.				X	
B. Did waterflow through the ins	spectors test	actuate all e	lectrica	l alarms?								X	
6 - WET SYSTEMS (Questions	A & B are insp	ection items)	(Questi	ons C, D &	E are tested ite	ems) (Que:	stion F is f	for infor	mation)		YES	N/A	NO
Number of systems 1 Size	es 2" N	A NA	NA	Make & Models	STRAIGHT	GUT	LIMITED	AREA	COPF	ER	OFF [	OMES	STIC
A. Alarm valves, riser check val	ves, gauges	and associat	ed trim			damage	?	700	AUA.		X	10 pt	iens/
B. Trim valves, alarm and supe	rvisory lines a	are in the app	oropria	te open o	closed posit	ion? (Are	Appropriate S	Signs provi	ded)			X	
C. Is the antifreeze system prot							e Designator					X	
D. The antifreeze system protect										)		X	
E. Was the antifreeze system to	sted at the p	oint of conne	ection to	o the syste	em and at the	e remote	point of th					X	LPSO.
F. Area Protected? NA						Type N	A		Conne	ctior	NA NA	Remo	te NA°
7 - DRY / PREACTION / DELU	GE SYSTEM	IS It is the	owner	's respons	ibility to main	tain auxili	iary drain:	s betwe	en insp	oecti		Owner lotified	NA
Number of Dry Systems	0 Mak	e and Model	NA		NA		Trip test r	report a	tached	X	Trip tes	st not re	quired
Number of Pre-Action Systems	0 Mak	e and Model	NA	- T	NA	WUIDII LE	Trip test r	report a	tached	X	Trip te	st not re	quired
Number of Deluge Systems	0 Mak	e and Model	NA		NA		Trip test r	report a	tached	X	Trip te	st not re	quired
(Questions A, B, C, G & H are ins			1	I are teste	ed items) (Que	stion F is	<del></del>			<u> </u>	YES	N/A	NO
A. Valves, gauges and associate	ted trim are fi	ree from phys	sical da	amageand	in the appro	priate ope	en or clos	sed pos	ition?			X	THE RES
B. Is the air pressure and primin	ng water leve	l normal?	THE	William II								X	
C. Did the nitrogen generators	operate satis	factorily? G	enerat	or hour m	eter							X	
D. Did the air compressor opera												X	
E. Did the low air pressure alar			2	- 1 X III				h li s				X	
				d during t	hia inanastia	2							
F. Auxiliary drains that were ide					-	17							
G. Valves and trim appear to be				elow 40°F		101	- 1111111111111111111111111111111111111						
H. Pipe that passes through fre				ما الما الما الما الما الما الما الما ا		2 Year Bea	danmad, NA		-				-61-1-2
I. Has the Air Leakage Test bee						ed -					\/F0		NO
A. Is all visible pipe in good cor								are tes	tea iten	ns)	YES	N/A	NO
						i iio leaks	5 f			-	$\Leftrightarrow$		100000
B. Are visible pipe hangers and									_		$\stackrel{\times}{\smile}$		
C. Are all sprinklers free from c					-		ect orienta	ation?			X		
D. Have standard sprinklers 50												X	
E. Have fast response sprinkle	rs 20 or more	years old be	een rep	placed or s	successfully t	ested? D	ate of Spri	inklers	AV			X	
F. Have dry type sprinklers 10	or more year	s old been re	placed	or succe	ssfully tested	? D	ate of Spri	inklers	AV			X	
9 - FIRE PUMPS AND STORA	GE TANKS	(General Inf	ormatic	n concern	ing the prope	erty)							
System has Fire Pump: Y	Fire Pu	ımp Test Pei	formed	This Insp	pection: Y	N	V/A X	Repor	t Attach	ned:	Y	N N	I/AX
Water Storage Tank Supplies	Water: Y	NX	Tank I	nspection	Performed: Y	N	N/A X	Rep	ort Atta	ache	d: Y	N	N/A X
Explanation of "NO" answer	rs. system de	ficiencies, an	d/or ins	pector rec	ommendation	s are liste	ed on SEF	RVICE	OLLOV	V UP	#	III may	opil 5
which is attached to this for		mai nomerië	To the	er some		*	1 1974				-	1071.55	III III II
No SERVICE FOLLOW UP R	EPORT was re	equired during	this ins	pection.									
I state that the information on t with applicable NFPA 25 test ar inspection except as noted on a	nd inspection	sections. All	equipn	nent tested	d at this time v	. All test	and inspe	ections nal con	were po dition u	erfor Ipon	med ir compl	accord	dance f this
Name of Inspector	Jordan Me	essmer	Sig	gnature	M	1		С	ertifica	tior	ı #	54-25	-5260
I acknowledge that the inspecti understood that all information requested, will be forwarded to	contained he	rein is provid	led to ti										
Name of Owner	Verbal app	roval from	Chris	Allen	Signa	ture	Va	500	7/	11			

Water Based Test and Inspection Page 2 of 2



### **ADDITIONAL SPRINKLER** RISER INFORMATION **REPORT**

**BRANCH PHONE NUMBER: 614-291-7001** 

NATIONAL ACCOUNT NUMBER: 1-800-776-7181

CML - MAIN (INSPECTION) SITE

DATE 12/15/2021

Riser	The street is a street of the	Name (		Residual		Alarm	Hydraulic Information					
Number	Location (Riser)	Size	Pressure	Pressure	Return	Time	Design Density	Design Area	PSI @ Base	GPM Demand		
1	DRY FIRE PUMP ROOM AREA A	2"	117	AIR - 35	- der	3	NA	NA	NA	NA		
2	DRY FIRE PUMP ROOM AREA B	2"	119	AIR - 37	(12)	3	NA	NA	NA	NA		
3	DRY MAINT SHOP SW GARAGE	2"	119	AIR - 45	T-VAI	3	NA	NA	NA	NA		
4	DRY MAINT SHOP SE GARAGE	2"	120	AIR - 44	El fiai	3	NA	NA	NA	NA		
5	DRY MAINT SHOP DOCK	2"	119	79	117	3	NA	NA	NA	NA		
6	PRE ACTION MAINT SHOP	1-1/4"	119	AIR - 35	- 100	3	NA	NA	NA	NA		
7	PRE ACTION PENTHOUSE	1-1/4"	98	AIR - 21	110	3	NA	NA	NA	NA		
8	PENTHOUSE STAIR (WET)	1-1/4"	86	geu-sni)	1-9	44	.15	1950	90.36	697.7		
9	3RD FL S. STAIR (WET)	1-1/4"	92	Page 1		41	NA	NA	NA	NA		
10	2ND FL S. STAIR (WET)	1-1/4"	94	4.14.	90	43	NA	NA	NA	NA		
11	1ST FL S. STAIR (WET)	1-1/4"	110	Evo-Situ		33	NA	NA	NA	NA		
12	BASEMENT S. STAIR (WET)	1-1/4"	120		1 -#	32	NA	NA	NA	NA		
13	2ND FL STAIR 2	1-1/4"	110	how that	1 .00	37				1000		
14	1ST FL STAIR 2	1-1/4"	116	Bi-qc-P <sub>2</sub> , p	1 - 520	28	10	01111111	Barry			
	2000		ACTUE V	PRINCE NA	4-13					Prist III		
			NE THE ST	100 10	el ne							
	TOLERA TOLERA	-177	The second				- 2-		1 6 7	N. A.		
	Trans.	10.7	1033/475 (2)	marks 1					OBEY			
	SERVE TO THE PROPERTY OF THE P	11/0	17 DOM:	7266.7	1 10			311	0.002.53	C DESCRIPTION		
	500			and the same of	7							
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	9869		amela .	26b31.57	1 13/	1			F 11000			
		4490	er suting						4 110	U.T.I.L. ENG		
	3E/4	34.79		78.880.0	l de				- 240	5 1 3 21 h		
	1 1 1	L PAR		Transition in	+ 70							
	9991		The House	BIT TO	11:20				1511	= 200K/L		
	123.5	1,036	RECEIPTED	PROGRAM I	1,120				10.0			
	11 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1											
	9-3-29 3-7-29	- 0.00			1 (22)					AVALLE		
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	Was a second follows or be-	int des	erio tantanta		257	3 (844)	Martin Day	da mada	marian			



### INITIATING and SUPERVISORY DEVICE REPORT

(Functional & Sensitivity Testing)

DATE: 12/15/2021

BRANCH PHONE NUMBER: 614-291-7001	NATIONAL ACCOUNT NUMBER: 1-800-776-7181
OB NAME: CML - MAIN (INSPECTION)	INSPECTION FREQUENCY: Annual SemiAnnual
DDITIONAL BUILDING DATA: PG. 1	Quarterly Monthly Weekly Other

LOCATION	DEVICE TYPE	ZONE / ADDRESS	TYPE OF INSPECTION	FACTORY SETTING	MEASURED SETTING	STATUS
AHU 6	PDD	L02D026	FUNCTIONAL			PASS
AHU 6 RM AREA SMOKE	PSD	L02D027	FUNCTIONAL	I had che	um same a	PASS
MICROFILM 3RD FL	PDD	L02D028	FUNCTIONAL	655		PASS
MENS RR 3RD FL	PDD	L02D029	FUNCTIONAL	B DESCRIPTION	ub-iturds rei	PASS
GH INFO 3RD FL	PDD	L02D030	FUNCTIONAL			PASS
ATRIUM BALCONY 3RD FL	PDD	L02D031	FUNCTIONAL			PASS
BEAM 3RD FL	BD	L02D033	FUNCTIONAL	1923	10 4-11/25	PASS
ELEV A LOBBY 3RD FL	PSD	L02D034	FUNCTIONAL			PASS
ELEV A TOP OF SHAFT	PSD	L02D035	VISUAL	1 - 1 - 10	tarress - R	PASS
ELEV A TOP SHAFT	FHD	L02D036	VISUAL	Times se	with the same	PASS
ADULT REFERENCE 3RD FL	PDD	L02D037	FUNCTIONAL			PASS
ADULT REFERENCE 3RD FL	PDD	L02D038	FUNCTIONAL	le area	VI A SELECTION	PASS
KITCHEN 3035A 3RD FL	PDD	L02D039	FUNCTIONAL			PASS
ADULT REF OPEN 3RD FL	PSD	L02D040	FUNCTIONAL			PASS
BY ELEC 3031 3RD FL	PDD	L02D041	FUNCTIONAL		MATORIES 1	PASS
SW ROOF	PDD	L02D042	FUNCTIONAL	4-1-		PASS
SW ROOF	PDD	L02D043	FUNCTIONAL	6	PW PEAKE R	PASS
NW ROOF	PDD	L02D044	FUNCTIONAL			PASS
NW ROOF	PDD	L02D045	FUNCTIONAL	10 179-01		PASS
NE ROOF	PDD	L02D046	FUNCTIONAL		Calling	PASS
NE ROOF	PDD	L02D047	FUNCTIONAL	1		PASS
ELEV B LOBBY ROOF PENTHOUSE	PSD	L02D048	FUNCTIONAL		2 81471	PASS
ELEV B SHAFT	PSD	L02D049	VISUAL	1 9 -		PASS
ELEV B SHAFT	FHD	L02D050	VISUAL			PASS
ELEV A MACH RM	PSD	L02D051	FUNCTIONAL			PASS
ELEV A MACH RM	FHD	L02D052	FUNCTIONAL			PASS
AHU 4 RETURN ROOF	PDD	L02D057	FUNCTIONAL			PASS
AHU 4 SUPPLY ROOF	PDD	L02D058	FUNCTIONAL			PASS
AREA C ELEC RM 2ND FL	PDD	L02D060	FUNCTIONAL			PASS
CORRIDOR 2023 2ND FL	PDD	L02D061	FUNCTIONAL	I		PASS
CORRIDOR 2023 2ND FL	PDD	L02D062	FUNCTIONAL			PASS
IT CLOSET 2004 2ND FL	PSD	L02D063	FUNCTIONAL			PASS
ELEV B LOBBY 2ND FL	PSD	L02D064	FUNCTIONAL	1		PASS
ELEV A LOBBY 2ND FL	PSD	L02D065	FUNCTIONAL			PASS
ATRIUM BALCONY 2ND FL	PDD	L02D066	FUNCTIONAL			PASS
TEENS 2010 2ND FL	PDD	L02D067	FUNCTIONAL			PASS
BY OPEN STUDY 2ND FL	PDD	L02D068	FUNCTIONAL			PASS
IT CLOSET 3RD FL	PSD	L02D069	FUNCTIONAL			PASS
ELEC RM 2000A 2ND FL	PSD	L02D078	FUNCTIONAL	I		PASS
ELEC 2113 2ND FL	PSD	L02D079	FUNCTIONAL			PASS
ELEC 2005 2ND FL	PSD	L02D080	FUNCTIONAL			PASS
STORAGE 200C 2ND FL	PSD	L02D081	FUNCTIONAL	II		PASS
ELEC 3001 3RD FL	PSD	L02D083	FUNCTIONAL			PASS
ELEC 3056 3RD FL	PSD	L02D085	FUNCTIONAL			PASS
DETECTOR L02D086	PSD	L02D086	FUNCTIONAL			PASS
ELEC 3047A 3RD FL	PSD	L02D087	FUNCTIONAL			PASS
ELEC RM PENTHOUSE	PSD	L02D089	FUNCTIONAL	+		PASS

Are services required on Fire Alarm Components: YES NO How many devices this page require Service: 0

BD=BEAM DETECTOR, DH=DOOR HOLDER, FD=FLAME DETECTOR, FHD=FIXED TEMP HEAT DETECTOR, RRD=RATE OF RISE HEAT DETECTOR, C=CHIME FSS=FIRE SUPPRESSION SYSTEM, IDD=ION DUCT DETECTOR, ISD=ION SMOKE DETECTOR, PDD=PHOTO DUCT DETECTOR, PSD=PHOTO SMOKE DETECTOR, MPS=MANUAL PULL STATION, SSD=SINGLE STATION DETECTOR, ST=STROBE, B=BELL, H=HORN, HS=HORN/STROBE, S=SPEAKER, FPR=FIRE PUMP RUN, TS=TAMPER SWITCH, WPS=WATER PRESSURE SWITCH, LAS=LOW AIR SUPERVISORY SWITCH, WFS=WATER FLOW SWITCH, LSD=LASER SMOKE DETECTOR, ACD=ACCUMULATION SMOKE DETECTOR, IRD=INFRARED SMOKE DETECTOR, CDD=CARBON MONOXIDE DETECTOR, FPP=FIRE PUMP POWER, O=OTHER, AS=ABORT SWITCH, SS=SPEAKER/STROBE, KH=KITCHEN HOOD, EML=ELECTROMAGNETIC LOCK, NC=NURSE CALL



### SERVICE FOLLOW UP REPORT SFU75606

SITE

**CML - MAIN (INSPECTION)** 

System Comments - Continued:

- (A) VISUAL INSPECTION BATTERIES SHALL BE INSPECTED FOR CORROSION OR LEAKAGE. TIGHTNESS OF CONNECTIONS SHALL BE CHECKED AND ENSURED. IF NECESSARY, BATTERY TERMINALS OR CONNECTIONS SHALL BE CLEANED AND COATED. ELECTROLYTE LEVEL IN LEAD-ACID BATTERIES SHALL BE VISUALLY INSPECTED.
- (B) BATTERY REPLACEMENT BATTERIES SHALL BE REPLACED IN ACCORDANCE WITH THE RECOMMENDATIONS OF THE ALARM EQUIPMENT MANUFACTURER OR WHEN THE RECHARGED BATTERY VOLTAGE OR CURRENT FALLS BELOW THE MANUFACTURER'S RECOMMENDATIONS.
- (C) CHARGER TEST OPERATION OF BATTERY CHARGER SHALL BE CHECKED IN ACCORDANCE WITH CHARGER TEST FOR THE SPECIFIC TYPE OF BATTERY.
- (D) DISCHARGE TEST WITH THE BATTERY CHARGER DISCONNECTED, THE BATTERIES SHALL BE LOAD TESTED FOLLOWING THE MANUFACTURER'S RECOMMENDATIONS. THE VOLTAGE LEVEL SHALL NOT FALL BELOW THE LEVELS SPECIFIED.

EXCEPTION: AN ARTIFICIAL LOAD EQUAL TO THE FULL FIRE ALARM LOAD CONNECTED TO THE BATTERY SHALL BE PERMITTED TO BE USED IN CONDUCTING THIS TEST.

(E) LOAD VOLTAGE TEST WITH THE BATTERY CHARGER DISCONNECTED, THE TERMINAL VOLTAGE SHALL BE MEASURED WHILE SUPPLYING THE MAXIMUM LOAD REQUIRED BY ITS APPLICATION. THE VOLTAGE LEVEL SHALL NOT FALL BELOW THE LEVELS SPECIFIED FOR THE SPECIFIC TYPE OF BATTERY. IF THE VOLTAGE FALLS BELOW THE LEVEL SPECIFIED, CORRECTIVE ACTION SHALL BE TAKEN AND THE BATTERIES SHALL BE RETESTED.

EXCEPTION: AN ARTIFICIAL LOAD EQUAL TO THE FULL FIRE ALARM

**TABLE 14.4.5 TESTING FREQUENCIES** 

#### 6. BATTERIES-FIRE ALARM SYSTEMS

- (A) LEAD-ACID TYPE (1) CHARGER TEST (REPLACE BATTERY AS NEEDED.); (2) DISCHARGE TEST (30 MINUTES); (3) LOAD VOLTAGE TEST; (4) SPECIFIC GRAVITY
- (B) NICKEL-CADMIUM TYPE (1) CHARGER TEST (REPLACE BATTERY AS NEEDED.); (2) DISCHARGE TEST (30 MINUTES); (3) LOAD VOLTAGE TEST
- (C) PRIMARY TYPE (DRY CELL) (1) AGE TEST
- (D) SEALED LEAD-ACID TYPE (1) CHARGER TEST (REPLACE BATTERY WITHIN 5 YEARS AFTER MANUFACTURE OR MORE FREQUENTLY AS NEEDED.);
- (2) DISCHARGE TEST (30 MINUTES); (3) LOAD VOLTAGE TEST

NOTES:

TOTAL III MAINT ENANGE LEAD Signature			
		TOUR EARLIEST CC	PRAEMIEMOE.
PLEASE PROVIDE A GO	OTE TO REPAIR THESE TEMS.		) ( 0 c= 10 0; 1
Name of Owner or Representative	TONY H MAINTENANCE LEAD	Signature	VEIDAI



BRA  DATE	NCH PHONE NUMBER: 614-291-7	7001	e entre		O NAT	IONAL A	ACCOUNT I	NUMBER	k: 1-800	0-776-7	'181
SITE	CML - SOUTHEAST				CONTAC	T CUB	IS ALLEN				
	S 3980 S. HAMILTON RD.	204	100	- N	PHONE		738-2087			1.417	
CITY	GROVEPORT	-	No. of the last		STATE		130-2001	711	9 431	25	19.31111
CITT	GROVEFORT				SIAIE	ОН			431	25	
This inspec	ction is: Annual Semi-Annua	al C	Quarterly	Monthly	Weekly	Other					
1 – OWNE	RS SECTION This section is	to be an	swered and sig	ned by the (	Owner or Ow	ners Re	oresentative		YES	N/A	NO
A. Is the bu	uilding occupied?	ME							X		i rad
B. Has the	occupancy classification and hazard	conten	ts remained th	ne same sin	ce the last i	nspectio	n (If no, survey n	equired)	X	gatrol	Type
C. Are all f	ire protection systems in service?					Mad			X	No. of	
D. Are all \	Wet Sprinkler System piping and We	t portion	s of Dry Syste	ems protecte	ed from tem	perature	s below 40°	?	X		
E. Owner h	nas been instructed on maintaining the	ne Dry S	System Auxilia	ry Drains?					X		
Inspection	of Sprinklers, Hangers, Pipe and F	ittings v	vill be conduc	ted from Flo	or Level, C	onceale	d Spaces ar	e not req	uired t	o be in:	spected
Name of C	Owner or Representative:	Chris	Allen	Signatu	re:	トレイン	S ALL	5P00	/\	me	_
2 - GENEI	RAL (Questions A, B, C, D, E, F, H,			— ms) (Questic					YES	N/A	NO
	e sprinkler systems been extended t								X		
	ere appear to be proper clearance b				3376			WITH THE	X	19	Mary Land
	hydraulic nameplate(s) securely atta				··········			)HSID	X		
	a spare head box with the proper nu						519/4	mile a	X		nd =
	pt. Connection in good condition, vis						31 F 35	mikhi	X	ottle	His .
	Fire Dept. Connection piping been h					art at a	Year Due: NC	w			X
	Il gauges 5 or more years old been r	*			r Replaced: 20	19	Year Due: 20		X		-
	inspection of the Pipe, Valves and E	-				-			/\		X
	hoses and hose valves in good cond						Tour Duc			X	
	5 yrs) connected to the system has						Year Due: NA			X	
	ckflow prevention device tested per the		· · · · · · · · · · · · · · · · · · ·		Month Due: DE		Year Due: 20		X		
	d flow test has been conducted on fi						Year Due: NC				X
	ROL VALVES (Questions A, B & E are							r-silvesil	YES	N/A	NO
	sprinkler system main control valves								X	N/A	NO
	control valves supervised in the appr								X		
	ll control valves operated through ful			·				- 70	X		1 196
	electrical supervisory switches actua				Otal Hou to	TOTTICAL P		30 107	X	1179	SERVE
	control valves easily accessible and				Mechani	cal Roo	m	(II) = I	X		
	R SUPPLY (Question A is a inspect							)	YES	N/A	NO
	v results have the same or greater P						ould be noted as I		X	1	T
	water supplied from: X City Water		vated Tank	Pressure		iction Ta		-	er		
	ain is piped outside Yes X No		f no how man							2	1
Riser			Static	Residual	PSI	Alarm		lydraulic li	nformati	on	
Number	Location (Riser)	Size	Pressure	Pressure	Return	Time	Design Density	Design Area	PS B	i @ ase	GPM Demand
WET	MECH ROOM	2"	85	65	75	:24	NA	1500	3	32	514
DRY	MECH ROOM	2"	85	65	74	:05	NA	1500	4	17	730
	company of the religious regularities and the second section of the second section of the second section of the second section of the second section s				41				10 11 10	0-1	
	THE RESERVE OF THE PARTY OF THE						YE WALL	B 43 1960	-1		EN PLANT
			COLUMN CONTROL		100	Jr					
									10.5	152/1	614427
		1			1		1				

SITE CML - SOUTHEAST							DA	IF 09/	23/2	:021	
5 - FLOW ALARMS (Questions	s A & B are inspection & te	— st items, based o	n type of inspectio	n pei	rformed)			Y	ES	N/A	NO
A. Did waterflow through the inspectors test actuate all mechanical alarms?											
B. Did waterflow through the ins		$\overline{X}$									
6 - WET SYSTEMS (Questions	YE	ES	N/A	NO							
Number of systems 1 Size	es 4" NA NA	NA Make & Models	VICTAULIC	5	3/751						
A. Alarm valves, riser check val		<									
B. Trim valves, alarm and super		. 14	X								
C. Is the antifreeze system prote				ļ							
D. The antifreeze system protect	)		X								
E. Was the antifreeze system to			X								
F. Area Protected? NA		10.0	Тур	e NA	7		Conne	ction N			ote NA°
7 - DRY / PREACTION / DELU	GE SYSTEMS It is the	owner's responsi	ibility to maintain a	uxili	ary draii	ns betw	een insp	pection		Owner lotified	YES
Number of Dry Systems	1 Make and Model	VICTAULIC	S/756	X	Trip test	report a	ttached	Tri	p tes	st not re	quired
Number of Pre-Action Systems	0 Make and Model	NA	NA		Trip test	report a	ittached	X Tri	p tes	st not re	quired
Number of Deluge Systems	0 Make and Model	NA	NA		Trip test	report a	ittached	XTri	ip te:	st not re	equired
(Questions A, B, C, G & H are ins	pection items) (Questions	D, E & I are teste	d items) (Question	Fis					ES	N/A	NO
A. Valves, gauges and associat	ed trim are free from phys	sical damageand	in the appropriate	оре	n or clo	sed po	sition?	>	<		
B. Is the air pressure and priming water level normal?											
C. Did the nitrogen generators operate satisfactorily? Generator hour meter											J. 10.
D. Did the air compressor operate satisfactorily?											
E. Did the low air pressure alarm operate during the test?											
F. Auxiliary drains that were identified by the owner were drained during this inspection?  G. Valves and trim appear to be protected from temperatures below 40°F?											
H. Pipe that passes through freezers is free of ice blockage?											-
I. Has the Air Leakage Test been conducted on the Dry System within the last 3 years? Year Performed: 2021  8 - SPRINKLERS, PIPE, AND HANGERS (Questions A, B & C are inspection items) (Questions D, E & F are tested items											NO
A. Is all visible pipe in good cor		- 100				are tes	ited iten		ES X	N/A	
B. Are visible pipe hangers and			damage and no .	June	The same	-	7 10 4		×		By and
C. Are all sprinklers free from d			eign materials & c	orre	ct orient	ation?		-	<u> </u>	-	
					or onom	auoii.			Χ	\ <u>\</u>	1-228
D. Have standard sprinklers 50 or more years old been replaced or successfully tested?											\ <u>\</u>
E. Have fast response sprinklers 20 or more years old been replaced or successfully tested? Date of Sprinklers 2000  F. Have dry type sprinklers 10 or more years old been replaced or successfully tested?  Date of Sprinklers NA											X
F. Have dry type sprinklers 10				Da	ate of Spi	rinklers	NA			X	4-36
9 - FIRE PUMPS AND STORA				_			ev. 116	Lond	_		
System has Fire Pump: Y N	Fire Pump Test Per	formed This Insp	ection: Y N	N	I/A X		t Attach		一	N	I/A X
Water Storage Tank Supplies \	Water: Y N N	Tank Inspection	Performed: Y	N_	N/A	Rep	ort Atta	ached:	YL	N	N/AX
Explanation of "NO" answer which is attached to this for	m.		ommendations are	liste	d on SE	RVICE	FOLLOV	V UP #	SF	J4713	7
I state that the information on the with applicable NFPA 25 test an inspection except as noted on a	his form is correct at the tin ad inspection sections. All	ne and place of the	at this time was le								
Name of Inspector	Scott Jones	Signature	Scott D	leo	8	c	ertifica	ation #		54-25	-3647
I acknowledge that the inspection understood that all information requested, will be forwarded to	contained herein is provide	ed to the best of t	nts were discussed	l with ne pe	me upo	oviding	the info	rmatio	n an	d that,	if
Name of Owner	Chris Aller		Signature	C	HAT	5 6	PLLE	N. (.r	- C	INVL	
or Representative	Onnis Allei			_	7						0 - ( 0
					vvate	er Based	d Test ar	na inspe	3CtlO	n Page	2 OT 2



S. A. Comunale Company Dry Pipe Valve Rev 1.0 12 December 2012

#### An EMCOR Company

### DRY PIPE VALVE TRIP TEST REPORT

Water-based Inspection Report Dry System Page 1 of 1

BRANC	ЭН РНО	ONE NUMBER: 614-291	-7001						(	$\Box$	NA	TIONAL	ACCO	DUN	T NUMB	ER:	1-8	<b>100</b> -	776-718	<b>31</b>	
DATE 09/23/2021																					
SITE	CML -	SOUTHEAST							С	01	CHRIS ALLEN										
ADDRESS	3980 S	. HAMILTON RD.							_ Р	НС	ONE 614-738-2087										
CITY	GROV	EPORT									TE		ОН			ZIF	Р	432	215		
This inspection is: Annual Semi-Annual Quarterly					rly		/lonth	ly 🗌	Week	dy		Other									
This inspection	is:	Full trip test (water flowed to	inspec	tors	test)	•	Partia	al trip test	(no v	vate	er at	inspector	s test)	Ye	ear Full Flo	ow Te	est l	Due	2023		
DRY PIPE VALVES			SYSTEM# 1				SYSTEM#			SYSTEM#			SYSTEM#				SYSTEM#				
Valve Serial Number?		S040756500														$\perp$					
Manufacturer Name?		VICTAULIC														$\downarrow$					
Valve Model Number?		S/756														$\downarrow$				$\blacksquare$	
Valve Size?	_		4"														4				_
Area Covered?			DORM / ATTIC													4					
Date Last Full	Trip Tes	it?	M:10 Y:2020			M: Y:			_	M: Y:			M: Y:			-	M: Y:				
Date last opera	ited?		M: 09 Y: 2021						-			M: Y:				M: Y:					
Pressure Befor	e Test:	Air?	29 psi				psi			psi			psi				psi				
		Water?	85 psi			psi			psi			psi				psi					
Size of outlet a			1/2"	TVE	c	ZINO		YES		10		YES	NO	-	YES	□ <sub>N</sub>	10	_	YES		NO
Was gate valve below dry valve open wide at test?		TUD	YE	9 <u>/</u>	KINO		169		VO		TES	NO	1	TES	IN	4		TES	Ш	NO	
If not, how many turns?  Air Pressure?  Valve Tripped At: Water Pressure?  Time?		THREE						ei			n	vei	psi			$\dashv$	psi				
			11 psi 85 psi			psi psi			psi			psi			+	psi					
		0 min 5 sec			min sec			20	min sec					-	· · ·						
If full trip test			NA		NA			min	SE		_	min	sec	-	min	se	$\rightarrow$		min		sec
If full trip test, list time water reached test opening?  Is water delivery to ITC less than 60 seconds?		ΠY		N S			<u>Y ∏N</u>	_	J/A		Y N	N/A		YIN		I/A	<u> </u>	Y N	_	N/A	
VALVE CONDITION / PERFORMANCE		SYS			1	SY	STEM#			SY	STEM #		-	STEM#		$\rightarrow$	SY	STEM#	_	-00	
		ior of Valve?	XY	_	N	NA.		YES	П	NO	-	YES	NO	-	YES	ΠN	VO		YES	_	NO
I	-	Moving Parts?			N	NA		YES	=	NO		YES	NO	-	YES	=	VO		YES		NO
Condition		Rubber Facing?			N	NA		YES		NO		YES	NO		YES	Ī١	NO	П	YES		NO
	Sea	ts?	XY		N	NA		YES		NO		YES	NO		YES		NO		YES		NO
	Valv	e Operated as Designed?	XY		N	NA		YES		NO		YES	NO		YES	N	10		YES		NO
	Valv	e Reset?	XY		N	NA		YES		NO		YES	NO		YES		NO		YES		NO
Performance	Wat	er Flow Alarm Operate?	XY		N [	NA		YES		NO		YES	NC		YES		NO		YES		NO
L	Low	Air Trouble Alarm Operate?	XY		] N [	NA		Y N		I/A		Y N	N/A		Y N		I/A		Y N		N/A
QUICK OPENING DEVICES		SYSTEM# 1				SYSTEM#				SYSTEM#			SYSTEM#				SYSTEM#				
Device Serial Number?		NA																			
Manufacturer Name?		NA																			
Model Number?		NA																			
Quick Opening Device In Service / Operated?		NA															:				
Air Pressure In Upper Chamber?  Quick Opening Device Tripped At?			NA psi			sec psi			ci	sec psi			sec psi			ei	sec psi			nei	
Explana	ition of	"NO" answers, system deficed to this form.					ector				ns ar			VICE		:_		SFL			-
		ed to this form. OLLOW UP REPORT was req	uired o	durin	a thic	insne	ction														
I state that th	e inform	nation on this form is correct at pection sections. All equipment	the tin	ne ar	- nd pla	ce of t	this in	spection.	All to	est ndi	and i	inspection	ns were	perfo	ormed in a	cord on ex	lanc cep	e wi t as	th applica	able any	
SERVICE FOL	LOW UF	P REPORT as stated above.				gnatu		Sco		-					ertificati				54-25-36		
Lacknowledge	e that the	e inspection, deficiencies, and s	uggest	ed in	– nprov	ement:	s were	discusse	d with	ı m	e upo	n comple	tion of t	— he in	spection. I	lt is u	nde	rsto	od that all		—
authority hav	ing juris	I herein is provided to the best o diction.	or the k	nowl	eage	of the	perso	n providin	g the	into	ormat				ALLE						
Name of O		C	hris <i>i</i>	Alle	n				Sig	nat	ture	VE	RUSP	14	APPR	$\mathcal{V}_{O_t}$	, /Δ	-			

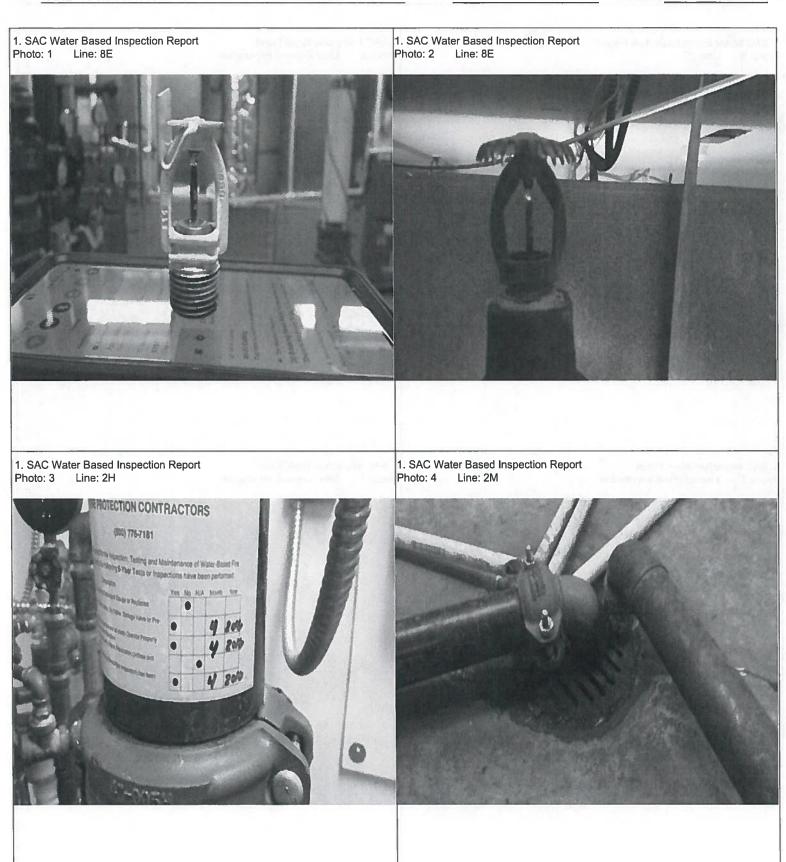


### INSPECTION / SERVICE PICTURES REPORT

SITE CML - SOUTHEAST

DATE 09/23/2021

TICKET# 47137



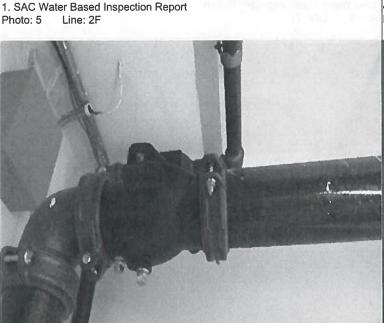


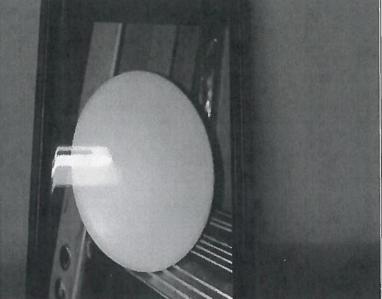
### INSPECTION / SERVICE PICTURES REPORT

SITE CML - SOUTHEAST

DATE 09/23/2021

TICKET# 47137





4. SAC Inspection Work Ticket
Photo: 7 Line: General Information

SAC Inspection Work Ticket
 Photo: 8 Line: General Information







## SERVICE FOLLOW UP REPORT SFU47137

BRANC	CH PHONE NUMBER: 614-291-7001	O NATION	NATIONAL ACCOUNT NUMBER: 1-800-776-7181				
DATE	09/23/2021						
SITE	CML - SOUTHEAST	CONTACT	PAT CRUM				
ADDRESS	3980 S. HAMILTON RD.	PHONE	614-374-2494	and the state of the first			
CITY	GROVEPORT	STATE	ОН	ZIP 43125			
	FOLLOW UP REPORT CONTAINS A DESCRIPTION OF ITEMS THAT COULD CAUSE THE S REPAIRED BECAUSE THEY COULD POSE SERIOUS LIFE SAFETY ISSUES TO THE BUILI		TION PROPERLY IN THE	EVENT OF A FIRE. IT IS RECOMMENDED	)		
Name of In	Scott Jones	Signature _	Scott.	Jones	3,1		
System Co	omments:						

- 1. SAC WATER BASED INSPECTION REPORT
- QUESTION: 8E (SEE PHOTO 1, 2)

5.3.1.1.1.2 SPRINKLERS MANUFACTURED USING FAST-RESPONSE ELEMENTS THAT HAVE BEEN IN SERVICE FOR 20 YEARS SHALL BE REPLACED, OR REPRESENTATIVE SAMPLES SHALL BE TESTED. THEY SHALL BE RETESTED AT 10-YEAR INTERVALS.

5.3.1,1.1.1 SPRINKLERS MANUFACTURED PRIOR TO 1920 SHALL BE REPLACED.

5.3.1.2\* A REPRESENTATIVE SAMPLE OF SPRINKLERS FOR TESTING PER 5.3.1.1.1 SHALL CONSIST OF A MINIMUM OF NOT LESS THAN FOUR SPRINKLERS OR 1 PERCENT OF THE NUMBER OF SPRINKLERS PER INDIVIDUAL SPRINKLER SAMPLE. WHICHEVER IS GREATER.

NOTES: IT APPEARS 1999 & 2000 QUICK RESPONSE SPRINKLER IN MECHANICAL ROOMS NEED REPLACED AND OR TESTED.

- 1. SAC WATER BASED INSPECTION REPORT
- QUESTION: 2H (SEE PHOTO 3)

14.2.1 AN INSPECTION OF PIPING AND BRANCH LINE CONDITIONS SHALL BE CONDUCTED EVERY 5 YEARS BY OPENING A FLUSHING CONNECTION AT THE END OF ONE MAIN AND BY REMOVING A SPRINKLER TOWARD THE END OF ONE BRANCH LINE FOR THE PURPOSE OF INSPECTING FOR THE PRESENCE OF FOREIGN ORGANIC AND INORGANIC MATERIAL.

- 13.4.1.2\* ALARM VALVES AND THEIR ASSOCIATED STRAINERS, FILTERS, AND RESTRICTION ORIFICES SHALL BE INSPECTED INTERNALLY EVERY 5 YEARS UNLESS TESTS INDICATE A GREATER FREQUENCY IS NECESSARY.
- 13.4.2.1 INSPECTION. VALVES SHALL BE INSPECTED INTERNALLY EVERY 5 YEARS TO VERIFY THAT ALL COMPONENTS OPERATE CORRECTLY, MOVE FREELY, AND ARE IN GOOD CONDITION.
- 13.4.3.1.7.1 INTERNAL INSPECTION OF VALVES THAT CAN BE RESET WITHOUT REMOVAL OF A FACEPLATE SHALL BE PERMITTED TO BE CONDUCTED EVERY 5 YEARS.
- 13.4.3.1.8 STRAINERS, FILTERS, RESTRICTED ORIFICES, AND DIAPHRAGM CHAMBERS SHALL BE INSPECTED INTERNALLY EVERY 5 YEARS UNLESS TESTS INDICATE A GREATER FREQUENCY IS NECESSARY.
- 13.4.4.1.6 STRAINERS, FILTERS, AND RESTRICTED ORIFICES SHALL BE INSPECTED INTERNALLY EVERY 5 YEARS UNLESS TESTS INDICATE A GREATER FREQUENCY IS NECESSARY.

NOTES: IT APPEARS 1 WET AND 1 DRY SPRINKLER SYSTEMS ARE DUE FOR 5 YEAR INTERNAL PIPE INSPECTION. IT APPEARS 2 FIRE BACKFLOWS ARE DUE FOR 5 YEAR INTERNAL INSPECTION. IT APPEARS 1 FIRE DEPARTMENT CONNECTION CHECK VALVE IS DUE FOR 5 YEAR INTERNAL INSPECTION.



#### SERVICE FOLLOW UP REPORT SFU47137

SITE

**CML - SOUTHEAST** 

System Comments - Continued:

- 1. SAC WATER BASED INSPECTION REPORT
- QUESTION: 2M (SEE PHOTO 4)

13.6.2.1\* ALL BACKFLOW PREVENTERS INSTALLED IN FIRE PROTECTION SYSTEM PIPING SHALL BE TESTED ANNUALLY IN ACCORDANCE WITH THE FOLLOWING:

(1) A FORWARD FLOW TEST SHALL BE CONDUCTED AT THE DESIGNED FLOW RATE, INCLUDING HOSE STREAM DEMAND OF THE SYSTEM WHERE HYDRANTS OR INSIDE HOSE STATIONS ARE LOCATED DOWNSTREAM OF THE BACKFLOW PREVENTER.

NOTES: IT APPEARS FIRE BACKFLOW IS DUE FOR ANNUAL FORWARD FLOW TEST.
NOTE: 2" GROOVED ADAPTER AND HOSE WITH HOSE MONSTER NEEDED TO PERFORM FORWARD FLOW TEST.

- 1. SAC WATER BASED INSPECTION REPORT
- QUESTION: 2F (SEE PHOTO 5)

13.7.4 THE PIPING FROM THE FIRE DEPARTMENT CONNECTION TO THE FIRE DEPARTMENT CHECK VALVE SHALL BE HYDROSTATICALLY TESTED AT 150 PSI (10 BAR) FOR 2 HOURS AT LEAST ONCE EVERY 5 YEARS.

NOTES: IT APPEARS 1 FIRE DEPARTMENT CONNECTION CKECK VALVE IS DUE FOR 5 YEAR HYDROSTATIC TEST.

- 4. SAC INSPECTION WORK TICKET
- QUESTION: GENERAL INFORMATION (SEE PHOTO 6, 7, 8)

WHILE PERFORMING THE INSPECTION, AN ISSUE OUTSIDE NFPA 25 WAS DISCOVERED AND WILL NEED TO BE ADDRESSED. SEE INSPECTORS NOTE ON SFU FOR ADDITIONAL DETAILS.

NOTES: MULTI PURPOSE ROOM MISSING TWO WHITE CONCEALED COVERS.

1 FIRE DEPARTMENT CONNECTION CAP IS BROKEN AND NEEDS REPLACED.

Ιa	icknowledge that this SERVICE FOLLOW UP REPORT was discussed with me upon completion of the inspection. It is understood that all information contained herein is provided to the best of
the	e knowledge of the person providing such information.
C	PLEASE SCHEDULE A SERVICE TECHNICIAN TO REPAIR THESE ITEMS AT YOUR EARLIEST CONVENIENCE.
	DI EASE PROVIDE A CHOTE TO BEDAID THESE ITEMS

Name of Owner or Representative

Chris Allen

Signature VETU

CHAIS ALLEN - CIML VERBAL APPROJAL



# WATER BASED FIRE PROTECTION INSPECTION & TEST REPORT

BRANCH PHONE NUMBER: 614-291-7001     NATIONAL ACCOUNT NUMBER	R: 1-800	-776-7	181
DATE 07/27/2021			
SITE CML - NEW WHITEHALL CONTACT CHRISTIAN FIELDS			
ADDRESS 4445 EAST BROAD ST PHONE 614-374-5466			and the same
CITY COLUMBUS STATE OH Z	IP 432	13	
This inspection is: Annual Semi-Annual Quarterly Monthly Weekly Other	md, p	STREET, TO	ik go
1 – OWNERS SECTION This section is to be answered and signed by the Owner or Owners Representative	YES	N/A	NO
A. Is the building occupied?	X		175.4
B. Has the occupancy classification and hazard contents remained the same since the last inspection (If no, survey required)	X	MARK!	13/5/6
C. Are all fire protection systems in service?	X		
D. Are all Wet Sprinkler System piping and Wet portions of Dry Systems protected from temperatures below 40°?	X		
E. Owner has been instructed on maintaining the Dry System Auxiliary Drains?		X	
Inspection of Sprinklers, Hangers, Pipe and Fittings will be conducted from Floor Level, Concealed Spaces are not re		be Ins	pected
Chris Allen Signature.	C.		
2 – GENERAL (Questions A, B, C, D, E, F, H, J & K are inspection items) (Questions G, L & M are tested items)	YES	N/A	NO
A. Have the sprinkler systems been extended to all visible areas of the building? (If NO, an Engineering Survey is required)	X		
B. Does there appear to be proper clearance between the top of all storage and the sprinkler deflector?	X		
C. Are the hydraulic nameplate(s) securely attached to the riser and legible? (Answer N/A if system is Pipe Scheduled)	X		
D. Is there a spare head box with the proper number and type of spare sprinklers and wrenches?	X	(6) (A	
E. Fire Dept. Connection in good condition, visible, acessible and marked with ID signs?	X		5.335.174
F. Has the Fire Dept. Connection piping been hydrostatically tested in the last 5 years?  Year Due: 2025	X	11. Popus	12 141 2
G. Have all gauges 5 or more years old been replaced or calibrated? Year Replaced: 2020 Year Due: 2025	X	METALL.	1000
H. Internal inspection of the Pipe, Valves and Backflow has been performed within the last 5 years? Year Due: 2025	X		uttur
J. Are all hoses and hose valves in good condition, free from physical damage and no leaks?	faid i	X	dynu
K. Hose (>5 yrs) connected to the system has been serviced per NFPA 1962? Year of Hose: NA		X	Marca
L. Fire backflow prevention device tested per the authority having jurisdiction? Month Due: JAN Year Due: 2022	$\perp \times$		
M. Forward flow test has been conducted on fire backflow device - NA for systems w/ fire pumps?  Year Due: 2022	IX		
3 - CONTROL VALVES (Questions A, B & E are inspection items) (Question D is a test item) (Question C is a maintenance item)	YES	N/A	NO
A. Are all sprinkler system main control valves and all other control valves in the appropriate open or closed position?	$\downarrow \sim$		
B. Are all control valves supervised in the appropriate open or closed position? (supervision Type) Tamper Switch	$\downarrow \sim$		
C. Were all control valves operated through full range of motion, lubricated and returned to normal position?	1X		
D. Did all electrical supervisory switches actuate supervisory alarms?	$\perp \sim$		
E. Are all control valves easily accessible and marked with ID signs? (Valve Location) Sprinkler Riser Room	IX	4110	4,400
4 - WATER SUPPLY (Question A is a inspection item) (Questions B & C for information) (Main Drain is a test item)	YES	N/A	NO
A. Did flow results have the same or greater PSI readings than previous tests? (A reduction of 10% should be noted as No)			
	her	100	edite.
C. Main drain is piped outside Yes No NA, if no how many 25' hoses required to get outside for a Forward F	low Test Information		NA
Riser Location (Riser) Size Static Residual PSI Alarm Hydraulic Design Design Design Pressure Pressure Return Time			GPM Demand
1 RISER ROOM 2" 80 65 71 :32 .10 154		0	325
THE SECOND CONTRACTOR OF THE SECOND CONTRACTOR	76.13	etigt if	10.800
			Access des
infransingmentment publicaging over a the appropriate feet atoms of which any interprior in each			
Telefronomic metro esti participano di montro del mentro della constanza della			

SITE CML - NEW WHITEHA	LL.					DAT	E 07/27/	2021	
5 - FLOW ALARMS (Question	ns A & B are inspection & te	st items, based o	on type of insp	ection p	erformed)	100 Miles	YES	N/A	NO
A. Did waterflow through the inspectors test actuate all mechanical alarms?									
B. Did waterflow through the inspectors test actuate all electrical alarms?									11115
6 - WET SYSTEMS (Questions A & B are inspection items) (Questions C, D & E are tested items) (Question F is for information)									NO
Number of systems 1 Sizes 4" NA NA NA MA Make & VICTAULIC 717R									91
A. Alarm valves, riser check valves, gauges and associated trim are free from physical damage?									1-1111
B. Trim valves, alarm and supervisory lines are in the appropriate open or closed position? (Are Appropriate Signs provided)								X	1176
C. Is the antifreeze system protected correctly based on the listed cold zone?  Cold Zone Designator: NA  D. The antifreeze system protection is normal and is not overcharged? (protection above the cold zone is considered overcharged)									
E. Was the antifreeze system to							D LEW		
F. Area Protected? NA	- Cotod at the point of conne	odon to the eyes		Type N			tion NA	Remo	ote NA°
7 - DRY / PREACTION / DELU	JGE SYSTEMS It is the	owner's respons	sibility to main	1			actions	Owner	ALA.
Number of Dry Systems	0 Make and Model		NA		-	report attached	1	Notified	
			NA NA					TENTED I	
Number of Pre-Action Systems			No. of Street,				Trip te		
Number of Deluge Systems (Questions A, B, C, G & H are in	0 Make and Model		NA	estion E i		report attached			
A. Valves, gauges and associa							YES	N/A	NO
B. Is the air pressure and prim		sical damageant	и по аррго	priate op	CIT OF CIO	oca position:		1	
C. Did the nitrogen generators		Generator hour m	neter	_					
		denerator nour n	ietei					10	
D. Did the air compressor ope								+	
E. Did the low air pressure ala			41-1-1	0		Mary Lawy		$+ \diamondsuit$	
F. Auxiliary drains that were id				n?			7		
G. Valves and trim appear to b					- Marie	The Art			
H. Pipe that passes through fr			a lant 2 vanes	2 V D-	oformed, NI			$+ \diamond$	
I. Has the Air Leakage Test be		A comment of the same of					-) VEC	N/A	NO
8 - SPRINKLERS, PIPE, AND			- Asia in a mark			are tested item	s) YES	N/A	NO
A. Is all visible pipe in good co			1780-1 1 2 2 2 2 2 2 2 2 2	no leak	Sr	21-11-0-11-21-3			1 U. 12
B. Are visible pipe hangers an					-		X		
C. Are all sprinklers free from					ect orienta	ation?	X		
D. Have standard sprinklers 5		-						X	
E. Have fast response sprinkle							and the same	X	
F. Have dry type sprinklers 10					Date of Spr	inklers NA		X	
9 - FIRE PUMPS AND STOR	•			erty)		the herita	Kreen el		
System has Fire Pump: Y	N Fire Pump Test Per	formed This Ins	pection: Y	N_	N/A X	Report Attach	ed: Y	N N	VA X
Water Storage Tank Supplies	Water: Y N	Tank Inspection	Performed: \	N	N/A	Report Atta	ched: Y	N	N/A
which is attached to this fo	REPORT was required during this form is correct at the tire and inspection sections. All	this inspection.  ne and place of t equipment teste	his inspection d at this time v	. All test	and inspe	ections were pe	rformed i	n accor	dance
Name of Inspector	Scott Jones	Signature	Scott 1	2	2	Certifica	tion#	54-25	5-3647
I acknowledge that the inspect	tion, deficiencies, and sugge	ested improveme	nts were disci	ussed wit	th me upo	n completion of	f the insp	ection.	It is
requested, will be forwarded to								·	
Name of Owner or Representative	Chris Aller	n	Signa	ture	LHRI	L APPRIO	EN		

Water Based Test and Inspection Page 2 of 2



## WATER BASED FIRE PROTECTION INSPECTION & TEST REPORT

BRAN	NCH PHONE NUMBER: 614-291-7	7001			O NATI	ONAL	ACCOUNT NUME	BER:	1-800	)-776-7	181
DATE	10/17/2021										
SITE	CML - MLK NEW		Or I I I I I I I I I I I I I I I I I I I	- Marie		_	N DRAKE			- Marine	
ADDRESS			an source	Contract of	PHONE	614-	645-2275	HOOK		- 31	
CITY	COLUMBUS				STATE	ОН		ZIP	432	03	
This inspec	tion is: Annual Semi-Annua	al 🔲 Q	uarterly	Monthly	Weekly	Other	ware a subsection				
1 – OWNEI	RS SECTION This section is	to be ans	swered and sig	ned by the (	Owner or Ow	ners Re	presentative	1	/ES	N/A	NO
A. Is the bu	ilding occupied?	/D1 etc						XI 70	X		
B. Has the	occupancy classification and hazard	content	ts remained th	ne same sin	ce the last ir	spection	On (If no, survey required)	12 D	X	16.400	The
C. Are all fi	re protection systems in service?				- A				X		
	Vet Sprinkler System piping and We	t portion:	s of Dry Syste	ems protecte	ed from temp	perature	es below 40°?		X		
	as been instructed on maintaining the								$\stackrel{\frown}{\times}$		
	of Sprinklers, Hangers, Pipe and F				or Level. Co	nceale	d Spaces are not	requi	ired to	be Ins	pected
				The Assessment of the Control							1
			al via Darren							ALLA	NO
	RAL (Questions A, B, C, D, E, F, H, J							1	YES	N/A	NO
	e sprinkler systems been extended t								$\Diamond$		THE RESERVE
	ere appear to be proper clearance b								X		
	hydraulic nameplate(s) securely atta						heduled)		X	1/2	MINES.
D. Is there	a spare head box with the proper nu	ımber ar	nd type of spa	re sprinkler	s and wrenc	hes?	ma Aleksan same	118	X	II. MISI	
E. Fire Dep	t. Connection in good condition, visit	ble, ace	ssible and ma	arked with ID	signs?	9 - 199	e agregadomica i	WILL	X	the left is	= figur
F. Has the	Fire Dept. Connection piping been h	nydrostat	tically tested in	n the last 5	years?	9	Year Due: 2023	13	X	919	grunne
G. Have all	gauges 5 or more years old been r	eplaced	or calibrated?	Yea	r Replaced: NA	Min. I	Year Due: 2023	192		X	خيد ن
H. Internal	inspection of the Pipe, Valves and E	Backflow	has been per	formed with	in the last 5	years?	Year Due: 2023	7		X	361.14
J. Are all h	oses and hose valves in good cond	ition, fre	e from physica	al damage a	and no leaks	?	- September 1			X	The state of
K. Hose (>	5 yrs) connected to the system has	been ser	viced per NFI	PA 1962?	Year of Hose: N	A	Year Due: NA			X	
	kflow prevention device tested per the						Year Due: 2022		X		
	d flow test has been conducted on file						Year Due: NA			X	
	COL VALVES (Questions A, B & E are	20101010101					s a maintenance iter	n) ,	YES	N/A	NO
A. Are all s	prinkler system main control valves	and all c	other control v	alves in the	appropriate	open c	r closed position?		X	100	
	control valves supervised in the appr							_	X	PERM	
	I control valves operated through ful	•	·					11 (6)	X	pov j	HILI
	electrical supervisory switches actua				TOTAL TIPE TO T	ioiiiiai j	3001110111	01	$\stackrel{\checkmark}{\vee}$	147	187117
	control valves easily accessible and				. Outoido I	211/ 05 1	A/DIV		$\Diamond$		
	R SUPPLY (Question A is a inspect			-					YES	N/A	NO
							ould be noted as No)	alimite.	V	IN/A	INO
	results have the same or greater P								<del></del>	, 1	
	water supplied from: X City Water		ated Tank	Pressure `		ction Ta		Other		5 1 1	
C. Main dra	ain is piped outside Yes No	X NA, il		_			side for a Forward				NA
Riser Number	Location (Riser)	Size	Static Pressure	Residual		Alarm Time		iic inic ign rea	PS	<b>@</b>	GPM
	MED DOOM	2"		Pressure			THE PERSON NAMED IN COLUMN	00			Demand
1	MEP ROOM	-	90	70	85	20	.10 9	00	49	.10	183.54
	- In the state of			113,541					3,010		MAN SHEET C
_	The section and in the imperior	d mine h		EVIDENCE I		in i mi	HOME HOST OF A		ılmı ə	111111	ex mu
	Service and a series out formule and	100		914 TO 1855	210 1 1 2 1		ylmating # hol				
			- makelita	1	ander etc.		I I I I I I I I I I I I I I I I I I I		2-	30	
F				+					_		

SITE CML - MLK NEW	A TANK				DATE	10/17/2	2021	
5 - FLOW ALARMS (Questions	s A & B are inspection & te	est items, based	on type of inspection	performed)	A	YES	N/A	NO
A. Did waterflow through the ins			X					
B. Did waterflow through the ins	<u>X</u>							
6 - WET SYSTEMS (Questions	A & B are inspection items)	(Questions C, D &		Question F is for infor	nation)	YES	N/A	NO
Number of systems 1 Size	WELL A	enth of	10.5	11.00				
A. Alarm valves, riser check val		$\times$						
B. Trim valves, alarm and super	ded)		X					
C. Is the antifreeze system prote			$\perp$ X					
D. The antifreeze system protect		The state of the s					$\rightarrow$	-
E. Was the antifreeze system to	sted at the point of conne	ection to the sys			Connectio	0		1- 210
F. Area Protected? NA			Туре				Owner	
7 - DRY / PREACTION / DELU	GE SYSTEMS It is the	e owner's respon	sibility to maintain au	ıxiliary drains betwe	en inspect		lotified	NA
Number of Dry Systems	0 Make and Model	NA .	NA	Trip test report at	ached 🔀	Trip tes	st not re	quired
Number of Pre-Action Systems	0 Make and Model	NA NA	NA	Trip test report at	tached 🔀	Trip tes	st not re	quired
Number of Deluge Systems	0 Make and Model	I NA	NA	Trip test report at	tached X	Trip te	st not re	quired
(Questions A, B, C, G & H are ins	pection items) (Questions	D, E & I are test	ted items) (Question	F is a maintenance i	lem)	YES	N/A	NO
A. Valves, gauges and associat	ted trim are free from phy	sical damagean	d in the appropriate	open or closed pos	ition?		X	
B. Is the air pressure and primir	ng water level normal?						X	
C. Did the nitrogen generators	operate satisfactorily?	Generator hour n	neter	- Television - September -			X	
D. Did the air compressor opera	ate satisfactorily?		the state of the state of	Secretification - West - To			X	
E. Did the low air pressure alar	m operate during the test	?	Carry Table	p to the said			X	
F. Auxiliary drains that were ide	entified by the owner were	e drained during	this inspection?	o William pudgo-	7, 20.0		X	31.51
G. Valves and trim appear to be protected from temperatures below 40°F?							X	
H. Pipe that passes through freezers is free of ice blockage?							X	T.Vmr
I. Has the Air Leakage Test bee			e last 3 years? Year	Performed: NA	John M.		X	
8 - SPRINKLERS, PIPE, AND	7.00			a supply of the state of	ed items)	YES	N/A	NO
A. Is all visible pipe in good cor			Figure 1 and 1 at 1			X		
B. Are visible pipe hangers and						X		-
C. Are all sprinklers free from d				errect orientation?		X		
D. Have standard sprinklers 50				arout orioination.			V	1007
E. Have fast response sprinkle				Date of Sprinklers 2	019			
							1	
F. Have dry type sprinklers 10	L. Addition of the Control of the Co			Date of Sprinklers N	IA		1	
9 - FIRE PUMPS AND STORA					Tiple 188			
System has Fire Pump: Y N	Fire Pump Test Pe				Attached		иШи	/AX
Water Storage Tank Supplies \	Water: Y N	Tank Inspection	n Performed: Y f	N/AX Repo	ort Attache	ed: Y	_N	N/A X
Explanation of "NO" answer	rs, system deficiencies, an	d/or inspector re	commendations are I	isted on SERVICE F	OLLOW U	P#		
which is attached to this for								Dane 1
No SERVICE FOLLOW UP R								
I state that the information on the with applicable NFPA 25 test an inspection except as noted on a	nd inspection sections. All	equipment teste	ed at this time was lef					
Name of Inspector	Jordan Messmer	Signature	m	Ce	ertificatio	n #	54-25	-5260
I acknowledge that the inspecti understood that all information requested, will be forwarded to	contained herein is provid	led to the best of						
Name of Owner	verbal approval vi	ia Darren	Signature	Verba	OP	DV	-01	< l

Water Based Test and Inspection Page 2 of 2



INSPECTION WORK TICKET							
Ticket #							
Customer #							
Customer PO #							
Scheduled Date							
<b>Completed Date</b>							
Inspected By							

				Addit	ional Inspector or Fitter:	Yes	N	o			
JOE	3			QTY	INSPECTION ITEMS		PRICE	AMOUNT			
SITE											
CONTAC	CT										
PHONI	E										
FAX											
BILI	<u> </u>										
ТО											
CONTAC	^T										
PHONI											
FAX	-										
Site Not	es:										
					INSPE	CTION 1	<b>FOTAL</b>				
				QTY	INSPECTION MATERIA		PRICE	AMOUNT			
Comments / Corrections:			'								
					INSPECTION MATE	RIALS	<b>TOTAL</b>				
			-	YES	S NO NA CITY CHARGES	BACKFLOW	/ INSPECTION	ON FEE			
					RATE SFU FROM INSPECTION	YES	-				
ALL CON	TROL VALVES LEFT IN OPEN	POSIT		(SELECT YES WHEN AN INSPECTION <b>DOES NOT</b> GENERATE A SFU, SELECT NA WHEN INSPECTION GENERATES A SFU OR A SFU IS NOT REQUIRED)							
	YES NO N/A			QTY	MISCELLANEOUS CHAI		PRICE	AMOUNT			
	ICE FOLLOW UP REPORT AT		)								
`	YES NO SFU NUMBER:										
AD	DITIONAL INSPECTOR OR FIT	TTER									
1.	2.				(	OTHER 1					
Technician Name		Count		Thank	You - Invoice to Follow	Ins	pection Total				
	I confirm that the above wo	ork has l	oeen satis	factoril	y completed.	Materia	al Total				
	SEE REVERSE SIDE FOR A	DDITIO	NAL TERI	MS AN	D CONDITIONS	Othe	er Total				
Custome	er		Custome				Tax				
Name			Signatur	е		Tot	al Cost				



#### **WATER BASED FIRE** T

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munale	PROTECTION
An EMCOR Company	INSPECTION & TEST REPORT

В	RANCH PHONE NU	MBE	R: _				NAT	IONAL A	CCOUNT N	UMBER: 1	-800-77	76-718°	1
DATE			_										
SITE							CONTAC	СТ					
ADDRES	s						PHONE						
CITY							STATE			ZIP			
This inspe	ction is: Semi-A	nnua	l Q	uarterly	Other_								
1 – OWNE	RS SECTION										YES	N/A	NO
A. Are all f	ire protection system	s in s	service?										
	RAL (Questions A, B										YES	N/A	NO
	hydraulic nameplate	-	•									<u> </u>	
	pt. Connection coupl					-		-		ed?			
	pt. Connection visible					•		-				<u> </u>	
	pt. Connection check					`	<u> </u>	· · · · · ·		•		<u> </u>	
	ses, hose valves & st				le, in good c	ondition, free	from phys	sical dama	ige and no l	eaks?	1/=2		ليبا
	ROL VALVES (Ques				, i.a. a. y. a. la maa	-0					YES	N/A	NO
	electrical supervisory  R SUPPLY (Que		A is a tes	· ·			r nor quarto	or w/ bookflo	na proventor	on avotom)	YES	N/A	NO
	ssure results at full fl			•		n Test one rise r previous tes				on system)	ILO	IN/A	
Riser				i i	Static	Residual	PSI	Alarm	H	lydraulic Info		<u> </u>	
Number	Location	(RIS	er)	Size	Pressure			Time	Design Density	Design Area	PSI @ Base	) G De	SPM emand
5 - FLOW ALARMS (Question B is a inspected item) (Questions A & C are tested items)									YES	N/A	NO		
A. Did waterflow through the inspector's test or alarm test line actuate mechanical alarms?													
B. Pressur	e switches & vane ty	pe wa	aterflow	witches a	re in good c	ondition, secu	rely attach	hed w/ no	leaks?				
	erflow through the in:	spect	ors test o	r alarm lir	ne actuate pi	essure or va	ne type wa	aterflow sw	vitch?				
	M INFORMATION	(Gen		tion conce		n components							
Number of	wet systems?		Sizes			Make / Mode	ls						
Number of	dry systems?		Sizes			Make / Mode	ls						
Number of	preaction systems?		Sizes			Make / Mode	ls						
	deluge systems?		Sizes			Make / Mode	ls						
	PREACTION AND D				3 & C are tes	ted items)				1	YES	N/A	NO
A. Is the ai	r pressure and primir	ng wa	ater level	normal?								<u></u>	
B. Quick o	pening device operat	ed co	orrectly?										
C. Did the	low air pressure alar	m ope	erate dur	ing the tes	st?								
	nation of "NO" answe		stem def	iciencies,	and/or inspe	ctor recomme	ndations ar	re listed on	SERVICE F	OLLOW UF	· #		—
	ERVICE FOLLOW UP I			•									
with applic	the information on the cable NFPA 25 test and except as noted on a	d insp	ection se	ctions. Al	Il equipment	tested at this	time was le						
Name of	Inspector				Signat	ure			Cei	rtification	#		
understoo	edge that the inspection d that all information , will be forwarded to	conta	ined here	in is provi	ded to the be								5
Name of or Repres	-					s	ignature						
								-	Water Ba	sed Test and	Inspection	n Page 1	of



INSPECTION WORK TICKET							
Ticket #							
Customer #							
Customer PO #							
Scheduled Date							
<b>Completed Date</b>							
Inspected By							

				Addit	ional Inspector or Fitter:	Yes	N	o			
JOE	3			QTY	INSPECTION ITEMS		PRICE	AMOUNT			
SITE											
CONTAC	CT										
PHONI	E										
FAX											
BILI	<u> </u>										
ТО											
CONTAC	^T										
PHONI											
FAX	-										
Site Not	es:										
					INSPE	CTION 1	<b>FOTAL</b>				
				QTY	INSPECTION MATERIA		PRICE	AMOUNT			
Comments / Corrections:			'								
					INSPECTION MATE	RIALS	<b>TOTAL</b>				
			-	YES	S NO NA CITY CHARGES	BACKFLOW	/ INSPECTION	ON FEE			
					RATE SFU FROM INSPECTION	YES	-				
ALL CON	TROL VALVES LEFT IN OPEN	POSIT		(SELECT YES WHEN AN INSPECTION <b>DOES NOT</b> GENERATE A SFU, SELECT NA WHEN INSPECTION GENERATES A SFU OR A SFU IS NOT REQUIRED)							
	YES NO N/A			QTY	MISCELLANEOUS CHAI		PRICE	AMOUNT			
	ICE FOLLOW UP REPORT AT		)								
`	YES NO SFU NUMBER:										
AD	DITIONAL INSPECTOR OR FIT	TTER									
1.	2.				(	OTHER 1					
Technician Name		Count		Thank	You - Invoice to Follow	Ins	pection Total				
	I confirm that the above wo	ork has l	oeen satis	factoril	y completed.	Materia	al Total				
	SEE REVERSE SIDE FOR A	DDITIO	NAL TERI	MS AN	D CONDITIONS	Othe	er Total				
Custome	er		Custome				Tax				
Name			Signatur	е		Tot	al Cost				



INSPECTION WOR	RK TICKET
Ticket #	
Customer #	
Customer PO #	
Scheduled Date	
<b>Completed Date</b>	
Inspected By	

				Addit	ional Inspector or Fitter:	Yes	N	o
JOE	3			QTY	INSPECTION ITEMS		PRICE	AMOUNT
SITE								
CONTAC	CT							
PHONI	E							
FAX								
BILI	<u> </u>							
ТО								
CONTAC	^T							
PHONI								
FAX	-							
Site Not	es:							
					INSPE	CTION 1	<b>FOTAL</b>	
				QTY	INSPECTION MATERIA		PRICE	AMOUNT
Comme	nts / Corrections:			'				
					INSPECTION MATE	RIALS	<b>TOTAL</b>	
			-	YES	S NO NA CITY CHARGES	BACKFLOW	/ INSPECTION	ON FEE
					RATE SFU FROM INSPECTION	YES	-	
ALL CON	TROL VALVES LEFT IN OPEN	POSIT			YES WHEN AN INSPECTION <b>DOES NOT</b> GENEF ES A SFU OR A SFU IS NOT REQUIRED)	RATE A SFU, SE	LECT NA WHEN	NINSPECTION
	YES NO N/A			QTY	MISCELLANEOUS CHAI		PRICE	AMOUNT
	ICE FOLLOW UP REPORT AT		)					
`	YES NO SFU NUMBER:							
AD	DITIONAL INSPECTOR OR FIT	TTER						
1.	2.				(	OTHER 1		
Technician Name		Count		Thank	You - Invoice to Follow	Ins	pection Total	
	I confirm that the above wo	ork has l	oeen satis	factoril	y completed.	Materia	al Total	
	SEE REVERSE SIDE FOR A	DDITIO	NAL TERI	MS AN	D CONDITIONS	Othe	er Total	
Custome	er		Custome				Tax	
Name			Signatur	е		Tot	al Cost	



#### **WATER BASED FIRE** T

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munale	PROTECTION
An EMCOR Company	INSPECTION & TEST REPORT

В	RANCH PHONE NU	MBE	R: _				NAT	IONAL A	CCOUNT N	UMBER: 1	-800-77	76-718°	1
DATE			_										
SITE							CONTAC	СТ					
ADDRES	s						PHONE						
CITY							STATE			ZIP			
This inspe	ction is: Semi-A	nnua	l Q	uarterly	Other_								
1 – OWNE	RS SECTION										YES	N/A	NO
A. Are all f	ire protection system	s in s	service?										
	RAL (Questions A, B										YES	N/A	NO
	hydraulic nameplate	-										<u> </u>	
	pt. Connection coupl					-		-		ed?			
	pt. Connection visible					•		-				<u> </u>	
	pt. Connection check					`	<u> </u>	· · · · · ·		•		<u> </u>	
	ses, hose valves & st				le, in good c	ondition, free	from phys	sical dama	ige and no l	eaks?	1/=2		ليبا
	ROL VALVES (Ques				, i.a. a. y. a. la maa	-0					YES	N/A	NO
	electrical supervisory  R SUPPLY (Que		A is a tes	· ·			r nor quarto	or w/ bookflo	na proventor	on avotom)	YES	N/A	NO
	ssure results at full fl			•		n Test one rise r previous tes				on system)	ILO	IN/A	
Riser				i i	Static	Residual	PSI	Alarm	H	lydraulic Info		<u> </u>	
Number	Location	(RIS	er)	Size	Pressure			Time	Design Density	Design Area	PSI @ Base	) G De	SPM emand
5 - FLOW	ALARMS (Questio	n B is	a inspec	ted item) (	Questions A	& C are tested	d items)				YES	N/A	NO
A. Did wate	erflow through the ins	spect	or's test	or alarm te	est line actua	ite mechanica	al alarms?						
B. Pressur	e switches & vane ty	pe wa	aterflow	witches a	re in good c	ondition, secu	rely attach	hed w/ no	leaks?				
	erflow through the in:	spect	ors test o	r alarm lir	ne actuate pi	essure or va	ne type wa	aterflow sw	vitch?				
	M INFORMATION	(Gen		tion conce		n components							
Number of	wet systems?		Sizes			Make / Mode	ls						
Number of	dry systems?		Sizes			Make / Mode	ls						
Number of	preaction systems?		Sizes			Make / Mode	ls						
	deluge systems?		Sizes			Make / Mode	ls						
	PREACTION AND D				3 & C are tes	ted items)				1	YES	N/A	NO
A. Is the ai	r pressure and primir	ng wa	ater level	normal?								<u></u>	
B. Quick o	pening device operat	ed co	orrectly?										
C. Did the	low air pressure alar	m ope	erate dur	ing the tes	st?								
	nation of "NO" answe		stem def	iciencies,	and/or inspe	ctor recomme	ndations ar	re listed on	SERVICE F	OLLOW UF	· #		—
	ERVICE FOLLOW UP I			•									
with applic	the information on the cable NFPA 25 test and except as noted on a	d insp	ection se	ctions. Al	Il equipment	tested at this	time was le						
Name of	Inspector				Signat	ure			Cei	rtification	#		
I acknowledge that the inspection, deficiencies, and suggested improvements were discussed with me upon completion of the in understood that all information contained herein is provided to the best of the knowledge of the person providing the information requested, will be forwarded to the authority having jurisdiction.												5	
Name of or Repres	-					s	ignature						
								-	Water Ba	sed Test and	Inspection	n Page 1	of



<b>BACKFLOW</b>	<b>PREVENTER</b>
FORWARD	<b>FLOW TEST</b>

				A	n EMCC	JR Col	mpan	y								
( BRAN	ICH P	HONE I	NUM	BER: 614	I-291-7001	1			$\bigcirc$ ı	NATION	AL AC	COUNT	NUMBE	R: 1-	800-77	76-7181
DATE	05/13	3/2021		-												
SITE	CML	- NOR	ГНЅІІ	DE (NEW)					COI	NTACT	MARI	K SPOR	CK			
ADDRESS	1423	NORTI	н ніс	GH STREE	Т				PHO	ONE	(614)	246-122	0			
CITY	COL	UMBUS	3						STA	TE	ОН			ZIP	43201	
NFPA 25	– Req	uiremen	ıts (20	002, 2008 &	2011):									-		
1. A forward downstream					e system de	emand, i	ncluding	hose stre	am demand,	where hy	drants o	or inside h	ose static	ns are	locate	:d
2. For backflo	•		ized 2	2" and under	, the forward	d flow tes	st shall b	e accepta	ble to conduc	t without	measur	ring flow, v	where the	test o	utlet is	of size to flow
<ol> <li>Where con</li> <li>A forward f</li> </ol>												igh the he	addlaw ar	rovont.	or doviv	20
NFPA 13				·	ere armuari	iire puriț	testing	causes in	e system den	ianu to no	JW IIIIOI	agn the ba	acknow pr	evenie	ar devic	e.
The backflo	ow prev	ention a	ssem	ıblv shall be	forward flow	v tested t	o ensure	e proper o	peration.							
2. The minimu	-			•						hose strea	am den	nand whei	e applica	ble.		
D.4.01/E1.01	-		214	# OF TEST	TEST	DITOT		STATIC	RESIDUAL	SYSTE	M S	YSTEM	MAIN	FIRE	HOSE	REQUIRED
BACKFLOW MANUFACTU		BACKFL SIZE	OW	OUTLETS FLOWING	NOZZLE SIZE	or PSI	GPM	PSI (System side of BF)	PSI (System side of BF)	DEMAN	ND	PSI draulic Sticker)	DRAIN SIZE	YES		TOTAL FT REQUIRED
AMES		6"		1	1-1/8"	26	187	65	49	291	50	).3	1-1/4"		X	NA
Location / Sys	tem Nu	ımber		WATER	SERVICE	ROOM		Test Outle	ets for Forward	d Flow Tes	st? Y	'ES N/	$A \times NO$	Amou	nt? <b>0</b>	Size? NA
BACKFLO	A/ F	BACKFL	οw	# OF TEST		PITOT		STATIC	RESIDUAL	SYSTE	M S	YSTEM	MAIN	FIRE	HOSE	REQUIRED
MANUFACTU		SIZE		OUTLETS FLOWING	NOZZLE SIZE	or PSI	GPM	PSI (System side of BF)	PSI (System side of BF)	DEMAN (Hydraulic St		PSI draulic Sticker	DRAIN SIZE	YES	NO	TOTAL FT REQUIRED
Lasation / Con	N.							T4-0-4	-t- f F	1.51	-40 )	(EQ. N	IA NO	A	+O	0:0
Location / Sys	stem int	ımber			T	1			ets for Forward	1		ES N/		Amou		Size?
BACKFLOV MANUFACTU		BACKFL SIZE	.Ovv	# OF TEST OUTLETS FLOWING	TEST NOZZLE SIZE	PITOT or PSI	GPM	STATIC PSI (System side of BF)	RESIDUAL PSI (System side of BF)	SYSTE DEMAN (Hydraulic St	ID	YSTEM PSI draulic Sticker	MAIN DRAIN SIZE	YES		TOTAL FT REQUIRED
								,								
Location / Sys	tem Nu	ımber						Test Outle	ets for Forward	d Flow Tes	st? Y	'ES N/	'A NO	Amou	nt?	Size?
BACKFLOV	w E	BACKFL	ow	# OF TEST	TEST	PITOT		STATIC	RESIDUAL	SYSTE		YSTEM	MAIN	FIRE	HOSE	REQUIRED
MANUFACTU		SIZE		OUTLETS FLOWING	NOZZLE SIZE	or PSI	GPM	PSI (System side of BF)	PSI (System side of BF)	DEMAN (Hydraulic St		PSI draulic Sticker)	DRAIN SIZE	YES	NO	TOTAL FT REQUIRED
Location / Sys	tem Nu	ımber						Test Outle	ets for Forward	l Flow Tes	st? Y	'ES N/	A NO	Amou	nt?	Size?
The Backflo		<u> </u>	Pas	sed the Fo	rward Flo	w Test:		YES	NO NO	31101110		20 11				0.201
		(0)						)								
test outlets t	to achie	eve the d	esire	d flow rate.	This system	was ins	talled pri	or to the c	hown on the l described test onal test outle	and does	not re	quire addi	tional tes	t outlet	ts be in	
outlets to ac	hieve tl	ne desire	ed flov	w rate. Furth	ner investiga				hown on the h							
can be found	d on the	e Service	Follo	ow Up report	:#		_									
I state that the with applica inspection e	ble NF	PA 25 te	est an	nd inspectio	n sections	. All equ	uipment	tested at	this time wa							
Name of In	spect	or Jo	orda	n Messm	er	Sign	ature	J	M			Cert	ification	ı# 5	4-25-5	260
	that al	l inform	ation	contained	herein is p	rovided	to the b		were discus knowledge			•			•	
Name of O	wner	n		nature/co					Signatu	re	N	14				



#### Customer # 146393 **Customer PO#** Columbus Scheduled Date 05/31/2021 Completed Date 05/13/2021 ANNUAL SPRINKLER AND FWD FLOW INSPECTION Inspected By )Yes (●)No Additional Inspector or Fitter: CML - NORTHSIDE (NEW) JOB QTY **INSPECTION ITEMS** PRICE **AMOUNT** SITE 1 **ANNUAL WET INSPECTION** 1423 NORTH HIGH STREET 1 COLUMBUS, OH 43201 FORWARD FLOW TEST BACKFLOW CONTACT MARK SPORCK **PHONE FAX COLUMBUS METROPOLITAN LIBRARY** BILL 96 S GRANT AVE TO COLUMBUS, OH 43215 CONTACT **ACCOUNTS PAYABLE PHONE** 614-769-0518 FAX Site Notes: **INSPECTION TOTAL** 180 **1WS 1FF 3BF 7FE** QTY **INSPECTION MATERIALS** PRICE **AMOUNT** Comments / Corrections: **INSPECTION MATERIALS TOTAL** NO NA CITY CHARGES BACKFLOW INSPECTION FEE YES X NA **GENERATE SFU FROM INSPECTION** (SELECT YES WHEN AN INSPECTION **DOES NOT** GENERATE A SFU, SELECT NA WHEN INSPECTION GENERATES A SFU OR A SFU IS NOT REQUIRED) ALL CONTROL VALVES LEFT IN OPEN POSITION X YES NO N/A QTY **PRICE AMOUNT MISCELLANEOUS CHARGES** SERVICE FOLLOW UP REPORT ATTACHED CITY BACKFLOW INSPECTION FEE ( )YES (●) NO SFU NUMBER: STATE OF DELAWARE FEE ADDITIONAL INSPECTOR OR FITTER **OTHER TOTAL** 1. NA 2. NA Inspection Technician Jordan Messmer Count 2 Thank You - Invoice to Follow 180 Name **Total** I confirm that the above work has been satisfactorily completed. **Material Total** SEE REVERSE SIDE FOR ADDITIONAL TERMS AND CONDITIONS Other Total Tax Customer Customer Name **Signature** Total Cost 180 E-mail tax exempt certificate to: tax.exempt@comunale.com

INSPECTION WORK TICKET

Ticket # 11189



## WATER BASED FIRE PROTECTION INSPECTION & TEST REPORT

	All Li	noon	oumpany								
BRA  DATE	ANCH PHONE NUMBER: 614-291-	7001			○ NA	TIONAL A	ACCOUNT	NUMBER	R: 1-80	0-776-7	7181
SITE					CONTA	СТ					
ADDRES					PHONE						
CITY					STATE			ZI	P		
This inens	ection is: Annual Semi-Annua		Quarterly	Monthly	- Weekly	Other					
-	ERS SECTION This section is			, , <u>,</u>	_ ′				YES	N/A	NO
	puilding occupied?			,					X	1,7,7	
	e occupancy classification and hazard	d conten	ts remained th	ne same sir	ce the last	t inspectio	n (If no survey i	required)	$\overrightarrow{\times}$		
	fire protection systems in service?						(	oquou)	$\overrightarrow{\times}$		
	Wet Sprinkler System piping and We	t nortion	s of Dry Syste	ems protect	ed from te	mnerature	s helow 40°	?	$\overrightarrow{\nabla}$		
	has been instructed on maintaining th	-				mporataro		-	$\rightarrow$		1
	on of Sprinklers, Hangers, Pipe and F		•	•	or Level	Concealer	d Snaces ar	e not red	uired t	o he In	spected
						Concealed	u opaces ai	e not req	uneat	o be iii	specieu
	Owner or Representative: no signa					1 1			\/=o		
	RAL (Questions A, B, C, D, E, F, H, J								YES	N/A	NO
	ne sprinkler systems been extended t								$\stackrel{\times}{\rightarrow}$		1
	nere appear to be proper clearance be				-				$\stackrel{\times}{\hookrightarrow}$		1
	e hydraulic nameplate(s) securely atta						neduled)		$\rightarrow$		1
	e a spare head box with the proper nu			-		nches?			$\stackrel{\times}{\rightarrow}$		1
	ept. Connection in good condition, visi								$\overset{\times}{\longrightarrow}$		1
	e Fire Dept. Connection piping been h	-					Year Due: 20		<u>X</u>		
	all gauges 5 or more years old been re	-			ır Replaced: 2		Year Due: 20		<u>X</u>		
	I inspection of the Pipe, Valves and B						Year Due: 20	21	<u> </u>		
J. Are all	hoses and hose valves in good condi	ition, fre	e from physica	al damage a	and no lea	ks?				LX	
•	>5 yrs) connected to the system has b				Year of Hose:	NA	Year Due: NA	-		X	
	ckflow prevention device tested per the				Month Due:		Year Due: 20		<u>X</u>		
	rd flow test has been conducted on fir						Year Due: 20	i	<u> </u>		<u> </u>
	ROL VALVES (Questions A, B & E are								YES	N/A	NO
	sprinkler system main control valves					-			<u>X</u>		
	control valves supervised in the appro	-						amper	<u>X</u>		
C. Were a	all control valves operated through full	range o	of motion, lubr	icated and	returned to	normal p	osition?		<u>X</u>		
D. Did all	electrical supervisory switches actuat	e super	visory alarms	?					<u>X</u>		
	control valves easily accessible and r			-					<u>X</u>		
4 - WATE	R SUPPLY (Question A is a inspection	on item)	(Questions B	& C for infor	mation) (M	lain Drain i	is a test item	)	YES	N/A	NO
A. Did flov	w results have the same or greater PS	SI readin	gs than previ	ous tests?	(A reduct	tion of 10% sho	ould be noted as I	Vo)	<u> </u>		
B. System	n water supplied from: X City Water	Elev	ated Tank	Pressure <sup>-</sup>	TankS	Suction Ta	nk Pond	lOthe	er		
C. Main dı	rain is piped outside 🔀 Yes 🗌 No 🛚	NA, if	no how many	y 25' hoses	required to	o get outsi					NA
Riser Number	Location (Riser)	Size	Static Pressure	Residual Pressure	PSI Return	Alarm Time	Design Density	lydraulic In Design Area	PSI	@	GPM
1	WATER SERVICE ROOM	1-1/4"	65	49	60	25sec	.10	990		).3	Demand 291
<u>'</u>	WATER SERVICE ROOM	1-1/4	03	73	00	20360	.10	330	30	,.5	
									+		

SITE										DAT	E		
5 - FLOW ALARMS (Questions	A & B &	are inspection	& tes	st items,	based o	n type of inspec	tion p	erformed	)		YES	N/A	NO
A. Did waterflow through the ins	pectors	test actuate	all me	echanic	al alarms	s?						X	
B. Did waterflow through the ins	pectors	test actuate	all ele	ectrical	alarms?						$\times$		
6 - WET SYSTEMS (Questions	A & B are	e inspection ite	ems) (	Questio	ns C, D &	E are tested items	s) (Que	estion F is	for infor	mation)	YES	N/A	NO
Number of systems 1 Size	s <b>3"</b>	NA N	Α	NA	Make & Models	VICTAULIC		717HR					
A. Alarm valves, riser check val	√es, gau	iges and asso	ociate	ed trim a		rom physical da	mage	?			X		
B. Trim valves, alarm and super	visory li	nes are in the	е арр	ropriate	open or	closed position	? (Are	e Appropriate	e Signs provid	ded)		X	
C. Is the antifreeze system prote	ected co	rrectly based	d on th	ne listed	d cold zo	ne?	Cold Zo	ne Designat	or: NA			X	
D. The antifreeze system protect	tion is n	ormal and is	not o	verchar	ged? (p	rotection above the	cold zo	ne is consi	dered over	charged)		X	
E. Was the antifreeze system te	sted at t	the point of co	onne	ction to	the syste	em and at the re	mote	point of				X	
F. Area Protected? <b>NA</b>						Ty	ype <b>N</b>	A	(	Connec	tion <b>NA</b> °	Remo	te NA°
7 - DRY / PREACTION / DELU	GE SYS	TEMS It is	s the	owner's	responsi	ibility to maintaiı	n auxi	liary drai	ns betwe	en inspe	ctions	Owner otified	NA
Number of Dry Systems	0	Make and Mo	odel	NA		NA		Trip test	report att	ached	Trip tes	st not re	quired
Number of Pre-Action Systems	0	Make and Mo	odel	NA		NA		Trip test	report att	ached	X Trip tes	st not re	quired
Number of Deluge Systems	0	Make and Mo	odel	NA		NA		Trip test	report att	ached	X Trip tes	st not re	quired
(Questions A, B, C, G & H are ins	pection	items) (Quest	ions L	D, E & I	are teste	ed items) (Questi	on F is	s a maint	enance it	tem)	YES	N/A	NO
A. Valves, gauges and associate	ed trim a	are free from	physi	ical dan	nageand	in the appropria	ate op	en or clo	sed posi	tion?		X	
B. Is the air pressure and primin	g water	level normal	?									X	
C. Did the nitrogen generators of	perate :	satisfactorily?	, Ge	enerato	r hour me	eter						X	
D. Did the air compressor opera	-											X	
E. Did the low air pressure alarr			test?									X	
F. Auxiliary drains that were ide				drained	during th	his inspection?						$\langle \cdot \rangle$	
G. Valves and trim appear to be		-											
H. Pipe that passes through free	•	•			OW <del>T</del> O I	:							
I. Has the Air Leakage Test bee					ithin the	last 3 years?	Year Pe	rformed: N	^				
										ad itama	) YES	N/A	NO
8 - SPRINKLERS, PIPE, AND I  A. Is all visible pipe in good con									are lesie	eu items	) 1E3	IN/A	NO
B. Are visible pipe hangers and						damage and no	leand	<b>.</b>			$+ \diamondsuit$		
C. Are all sprinklers free from da						eign materials &	corre	ect orient	ation?		X		
D. Have standard sprinklers 50							. 00110	0110111				×	
E. Have fast response sprinkler		-		•		<u> </u>	ad2 D	ate of Sn	rinklers 2	016			
F. Have dry type sprinklers 10 c		•				<u> </u>			rinklers N				
		·	-			<u> </u>		ate of opi	IIIIICI3 N	A			
9 - FIRE PUMPS AND STORA		•							1_		. $\square$	$\overline{}$	
	_	e Pump Test						V/A X	Report			V N/	
Water Storage Tank Supplies V	/ater: `	Y N <u>X</u>	Т	ank Ins	spection I	Performed: Y	_ N	N/A >	Repo	rt Attac	hed: Y	N	N/A X
Explanation of "NO" answers which is attached to this form No SERVICE FOLLOW UP RE	1.			·		ommendations a	re liste	ed on SE	RVICE FO	DLLOW	UP #		
I state that the information on th with applicable NFPA 25 test and inspection except as noted on a	d inspect	tion sections.	All e	quipme	nt tested	at this time was							
Name of Inspector Jordan Messmer Signature Certificat											on#	54-25-	5260
I acknowledge that the inspection, deficiencies, and suggested improvements were discussed with me upon completion of understood that all information contained herein is provided to the best of the knowledge of the person providing the inforrequested, will be forwarded to the authority having jurisdiction.											•		
Name of Owner or Representative	no sig	nature/covi	id19	conce	rns	Signature	•	N	14				
•								Wate	er Based T	est and	Inspection	Page 2	of 2



INSPECTION WOR	RK TICKET
Ticket #	
Customer #	
Customer PO #	
Scheduled Date	
<b>Completed Date</b>	
Inspected By	

				Addit	ional Inspector or Fitter:	Yes	N	o
JOE	3			QTY	INSPECTION ITEMS		PRICE	AMOUNT
SITE								
CONTAC	CT							
PHONI	E							
FAX								
BILI	<u> </u>							
ТО								
CONTAC	^T							
PHONI								
FAX	-							
Site Not	es:							
					INSPE	CTION 1	<b>FOTAL</b>	
				QTY	INSPECTION MATERIA		PRICE	AMOUNT
Comme	nts / Corrections:			'				
					INSPECTION MATE	RIALS	<b>TOTAL</b>	
			-	YES	S NO NA CITY CHARGES	BACKFLOW	/ INSPECTION	ON FEE
					RATE SFU FROM INSPECTION	YES	-	
ALL CON	TROL VALVES LEFT IN OPEN	POSIT			YES WHEN AN INSPECTION <b>DOES NOT</b> GENEF ES A SFU OR A SFU IS NOT REQUIRED)	RATE A SFU, SE	LECT NA WHEN	NINSPECTION
	YES NO N/A			QTY	MISCELLANEOUS CHAI		PRICE	AMOUNT
	ICE FOLLOW UP REPORT AT		)					
`	YES NO SFU NUMBER:							
AD	DITIONAL INSPECTOR OR FIT	TTER						
1.	2.				(	OTHER 1		
Technician Name		Count		Thank	You - Invoice to Follow	Ins	pection Total	
	I confirm that the above wo	ork has l	oeen satis	factoril	y completed.	Materia	al Total	
	SEE REVERSE SIDE FOR A	DDITIO	NAL TERI	MS AN	D CONDITIONS	Othe	er Total	
Custome	er		Custome				Tax	
Name			Signatur	е		Tot	al Cost	



#### **WATER BASED FIRE** T

	***************************************
munale	PROTECTION
An EMCOR Company	INSPECTION & TEST REPORT

В	RANCH PHONE NU	MBE	R: _				NAT	IONAL A	CCOUNT N	UMBER: 1	-800-77	76-718°	1
DATE			_										
SITE							CONTAC	СТ					
ADDRES	s						PHONE						
CITY							STATE			ZIP			
This inspe	ction is: Semi-A	nnua	l Q	uarterly	Other_								
1 – OWNE	RS SECTION										YES	N/A	NO
A. Are all f	ire protection system	s in s	service?										
	RAL (Questions A, B										YES	N/A	NO
	hydraulic nameplate	-										<u> </u>	
	pt. Connection coupl					-		-		ed?			
	pt. Connection visible					•		-				<u> </u>	
	pt. Connection check					`	<u> </u>	· · · · · ·		•		<u> </u>	
	ses, hose valves & st				le, in good c	ondition, free	from phys	sical dama	ige and no l	eaks?	1/=2		ليبا
	ROL VALVES (Ques				, i.a. a. y. a. la maa	-0					YES	N/A	NO
	electrical supervisory  R SUPPLY (Que		A is a tes	· ·			r nor quarto	or w/ bookflo	na proventor	on avotom)	YES	N/A	NO
	ssure results at full fl			•		n Test one rise r previous tes				on system)	ILO	IN/A	
Riser				i i	Static	Residual	PSI	Alarm	H	lydraulic Info		<u> </u>	
Number	Location	(RIS	er)	Size	Pressure			Time	Design Density	Design Area	PSI @ Base	) G De	SPM emand
5 - FLOW	ALARMS (Questio	n B is	a inspec	ted item) (	Questions A	& C are tested	d items)			l	YES	N/A	NO
A. Did wate	erflow through the ins	spect	or's test	or alarm te	est line actua	ite mechanica	al alarms?						
B. Pressur	e switches & vane ty	pe wa	aterflow	witches a	re in good c	ondition, secu	rely attach	hed w/ no	leaks?				
	erflow through the in:	spect	ors test o	r alarm lir	ne actuate pi	essure or va	ne type wa	aterflow sw	vitch?				
	M INFORMATION	(Gen		tion conce		n components							
Number of	wet systems?		Sizes			Make / Mode	ls						
Number of	dry systems?		Sizes			Make / Mode	ls						
Number of	preaction systems?		Sizes			Make / Mode	ls						
	deluge systems?		Sizes			Make / Mode	ls						
	PREACTION AND D				3 & C are tes	ted items)				1	YES	N/A	NO
A. Is the ai	r pressure and primir	ng wa	ater level	normal?								<u></u>	
B. Quick o	pening device operat	ed co	orrectly?										
C. Did the	low air pressure alar	m op	erate dur	ing the tes	st?								
	nation of "NO" answe		stem def	iciencies,	and/or inspe	ctor recomme	ndations ar	re listed on	SERVICE F	OLLOW UF	· #		—
	ERVICE FOLLOW UP I			•									
with applic	the information on the cable NFPA 25 test and except as noted on a	d insp	ection se	ctions. Al	Il equipment	tested at this	time was le						
Name of	Inspector				Signat	ure			Cei	rtification	#		
I acknowledge that the inspection, deficiencies, and suggested improvements were discussed with me upon completion of the in understood that all information contained herein is provided to the best of the knowledge of the person providing the information requested, will be forwarded to the authority having jurisdiction.												5	
Name of or Repres	-					s	ignature						
								-	Water Ba	sed Test and	Inspection	n Page 1	of



### FIRE ALARM INSPECTION & TEST REPORT

BRAN	CH PHON	E NUMBE	R:						1	OITAN	NAL ACC	COUNT	NUMBER	R: 1-800	-776-7	'181
DATE				A	DDITION	IAL BUIL	DING	DATA	1							
SITE									C	ONTAC	T					
ADDRESS	-								_ PH	HONE	_					
CITY									_	TATE	_			ZIP		
MONITORIN	IG ENTIT	<b>v</b>								HONE	_					
WONTOKII	IG LIVIII	'							- ''	IONL	_					
This inspect	ion is:	Annual	Sen	ni-Ann	ual	Quarterl	ly	Mor	nthly	V	Veekly	Oth	ner			
Type Trans	mission	Digita	ıl	Multip	olex	Mo	:Cullor	ì		Revers	e Polarit	у	RF		Othe	r
Panel Manu	facturer				Mode	l Numbe	r	•			Туре		Address	sable	Har	rd Wired
ALARM INI	FIATING F	FVICES /	AND CIRC	:UIT II	NFORM	ATION	•									
Qty of device		uit Class	Type of			411011		Qty o	f dev	ices	Circuit	Class	Type o	f device		
			Manual S											etectors		
			ION Dete	ectors									Waterfl	ow Switcl	hes	
			Photo De	etectors	3								Superv	isory Swi	tches	
			Duct Det	ectors												
ALARM NO	TIFICATION	N APPLIA	ANCES A	ND CI	RCUIT I	NEORMA	TION									
Qty of device		uit Class	Type of			iti Ortini		Qty o	f dev	ices	Circui	Class	Type of	device		
			Bells										Strobe			
			Horns										Horn/S	trobes		
			Speakers	s												
			Chimes													
SUPERVISO	ORY SIGN	AL-INITIA	TING DE	VICES	AND C	IRCUIT IN	NFORI	MATIO	N							
Qty of device	1	uit Class	Type of					Qty o		ices	Circuit	Class	Type of	device		
			Building	Temp									Generate	or or Con	troller T	rouble
			Site Wat	er Tem	р								Generate	or Engine	Runnir	ng
			Site Wat	er Leve	el								Generate	or in Auto	Positio	n
			Fire Pur	np Runi	ning								Switch T	ransfer		
			Fire Pur	np or Pu	ump Cont	roller Trou	ble									
			Fire Pur													
			Fire Pur	np Auto	Position											
SIGNALING	LINE CIF	CUITS														
Qty and Style	(see NFPA	72, Table 6	6-6.1) of Si	gnaling	line circu	its connec	ted to s	system		Qty			Style	(s)		
SYSTEM PO	OWER SU	PPLIES														
		inal Voltage	)											AMPS	;	
Over Cur	ent Protect	ion: Type			Fuse				Circu	uit Break	er			AMPS	;	
Location	Primary Su	pply Panelb	oard)					Disco	nnect	ing Mea	ıns Locatio	on (Fuse	or Breake	r #)		
B. Secondar	y (Standby)	: Stora	ge Battery	(	Other:			AMP	HR R	ating						
Calculate	d capacity t	o operate sy	stem, in h	ours		24	60	Oth	er:							
En	gine-Driven	generator d	edicated to	fire ala	arm syste	m. Locatio	n of fue	el storaç	ge:							
TYPE BATT	ERY															
Dry Cell		Nickel Cadr	nium	Se	aled Lead	d-Acid	Le	ad-Acid	t	Othe	er:					
C. Emergend	y or standb	y system us	ed as a ba	ckup to	primary	power sup	ply, ins	tead of	using	a secor	ndary pow	er suppl	y.			
Emer	gency syste	em describe	d in NFPA	70, Art	icle 700											
Lega	ly required	standby des	cribed in N	NFPA 7	0, Article	701										
Optio	nal standby	system des	scribed in N	NFPA 7	0, Article	702, which	also m	neets th	e per	formanc	e requirer	nents of	Article 700	or 701	·	

PRIOR TO ANY TES	STING							SECONDARY POW	/ER				
Notifications Are Mad	1	NA	No		Who	)	Time	Туре	Visual	Functional	NA	Comments	
Building Management								Battery Condition					
Monitoring Entity								Load Voltage					
Other:								Discharge Test					
INITIATING & SUPER	VISOI	ם אא	FVICE	TES	TS & I	NSPECTION	าทร	Amp Hour Reading					
(ON SEPARATE FOR			_					Specific Gravity					
COMMUNICATIONS	•					.D LIIILIK	, LITO	Batteries Meet NFPA	72 Tes	t Requireme	ents:	Yes No	NA
					_							•	
SYSTEM TESTS & I		_	NS ctional	NI A		0		T	\ <i>r</i> :	F		0	
Type	visuai	Fun	ctional	NA		Comment	ıs	Type		Functional	NA	Comments	
Control Panel		-						Transient Suppressors					
Interface Equipment								Remote Annunciators					
Lamps/LEDS		-						Audible					
Fuses								Visual					
Primary Power Supply								Speakers					
Trouble Signals								Voice Clarity					
Disconnect Switches								Door Holders					
Ground Fault Monitor								Door Unlock					
Туре	Visual	Fun	ctional	NA		Comments		Interface Equipment	Visual	Functional	NA	Comments	
Phone Set								Elevator Recall					
Phone Jack								HVAC Shut Down					
Off-Hook Indicator								Specify:					
Amplifier(s)								Special Hazards	Visual	Functional	NA	Comments	
Tone Generators								Specify:					
Call in Signal Silence								Specify:					
System Performance								Specify:					
SUPERVISING STATIO	ON MOI	NITOF	RING	l	Yes	NA	No	Time		L	Co	mments	
Alarm Signal								<del>-</del>					
Alarm Restoral													
Trouble Signal													
Trouble Restoral													
Supervisory Signal													
Supervisory Restoral						İ							
NOTIFIED TESTING C	OMDI E				V	NA	N	NA/Ib a				Time a	
	OWPLE	:16			Yes	INA	No	Who				Time	
Building Management													
Monitoring Entity													
Other:													
HAS SENSITIVITY B	EEN C	OMP	LETE	D AS	PER N	IFPA 72 C	R LOCA	L STATE CODES: YE	ES	NO N	Α		
Year Sensitivity Testir	ng Con	nplete	ed:		Y	ear Sensiti	vity Testi	ng Due:	How \	Was Sensit	ivity Te	ested:	
				<b></b> .	DDITI			-		DEATER	\/ <b>F</b> 0	NO NA	
WHILE PERFORMING	IHE و	INSI	ECII	ON A	אוווטט	ONAL II EI	VIS WER	E NOTED THAT NEEL	COR	RECTED:	YES	NO NA	
Explanation of "NC attached to this form.	)" answ	vers,	system	defi	ciencies	s, and/or in	spector re	ecommendations are lis	ted on	SERVICE FO	DLLOW	/ UP #	,
No SERVICE FOLL	OW UP	REP	ORT wa	as rec	uired du	urina this ins	spection.						
						ŭ	•	ction. All test and inspection	ons wer	e nerformed in	accord	lance with annlicable N	FΡΔ
	ctions.	All eq	uipment					onal condition upon compl					
Name of Inspector						s	Signature			Cer	tificat	ion #	
								discussed with me upon co providing the information a					ity
Name of Owner or Representative								Signature					

**DATE** 

Fire Alarm Test and Inspection Page 2 of

SITE

JIIE				0,	MIE	
LOCATION	DEVICE TYPE	ZONE / ADDRESS	TYPE OF INSPECTION	FACTORY SETTING	MEASURED SETTING	STATUS
					_	
		<u> </u>	Ī			<u> </u>

NO How many devices this page require Service: BD=BEAM DETECTOR, DH=DOOR HOLDER, FD=FLAME DETECTOR, FHD=FIXED TEMP HEAT DETECTOR, RRD=RATE OF RISE HEAT DETECTOR, C=CHIME FSS=FIRE SUPPRESSION SYSTEM, IDD=ION DUCT DETECTOR, ISD=ION SMOKE DETECTOR, PDD=PHOTO DUCT DETECTOR, PSD=PHOTO SMOKE DETECTOR, MPS=MANUAL PULL STATION, SSD=SINGLE STATION DETECTOR, ST=STROBE, B=BELL, H=HORN, HS=HORN/STROBE, S=SPEAKER, FPR=FIRE PUMP RUN, TS=TAMPER SWITCH, WPS=WATER PRESSURE SWITCH, LAS=LOW AIR SUPERVISORY SWITCH, WFS=WATER FLOW SWITCH, LSD=LASER SMOKE DETECTOR, ACD=ACCUMULATION SMOKE DETECTOR, IRD=INFRARED SMOKE DETECTOR, CDD=CARBON MONOXIDE DETECTOR, FPP=FIRE PUMP POWER, O=OTHER, AS=ABORT SWITCH, SS=SPEAKER/STROBE, KH=KITCHEN HOOD, EML=ELECTROMAGNETIC LOCK, NC=NURSE CALL

YES

Are services required on Fire Alarm Components:

CITE

DATE



### FIRE ALARM INSPECTION & TEST REPORT

		AN EM	CUH	Company		_ <b>\</b>	-	3 I K	LFOI	<b>\ I</b>		
( BRAN	CH PHONE NUMBER	R: 614-29	91-7	001	(	) NATIOI	NAL A	CCOUNT	NUMBER	: 1-800-	776-7	181
DATE	02/04/2021		-	ADDITIONAL BUILDING	DATA							
SITE	CML - NORTHSID	E (NEW)			_	CONTAC	T	MARK S	PORCK			
ADDRESS	1423 NORTH HIGI	H STREET	Г			PHONE		(614) 246	5-1220			
CITY	COLUMBUS					STATE		OH		ZIP 43	201	
MONITORI	NG ENTITY STANL	EY / SEC	URI	TY		PHONE		614-849-				
						-						
This inspec	tion is: Annual	X Sem	i-An	nual Quarterly	Mon	thly \	Neekly	Othe	er			
Type Trans	smission X Digita		Mult	iplex McCullo	h	Revers	se Pola	rity	RF		Othe	r
Panel Man	ufacturer NOTIFIE	ER		Model Number N	IFS-320		Тур	oe X	Addressa	able	Har	d Wired
ALARM INI	ITIATING DEVICES A	AND CIRC	UIT	INFORMATION								
Qty of devi		Type of o			Qty of	devices	Circ	uit Class	Type of	device		
9	CLASS B	Manual S				1	CLA	ASS B	Heat Det			
0	NA	ION Dete	ctors			1	CLA	ASS B	Waterflo	w Switch	es	
10	CLASS B	Photo De	tecto	rs		4	CLA	ASS B	Supervis	ory Swit	ches	
20	CLASS B	Duct Dete	ectors	S								
AL ADM NO	TIEICATION APPLIA	VNCES VI	אם כ	CIRCUIT INFORMATION	J							
Qty of devi		Type of d				devices	Circ	uit Class	Type of o	device		
0	NA	Bells		-		16		ASS B	Strobes			
0	NA	Horns				24	CLA	ASS B	Horn/Str	obes		
0	NA	Speakers										
0	NA	Chimes										
CUDEDVIC	ODV CICNIAL INITIA	TING DEV	// 0 =	C AND CIDCUIT INFO	NAATIOI	NI.			1			
Qty of devi		Type of o		S AND CIRCUIT INFOR		devices	Circu	uit Class	Type of d	evice		
0	NA	Building 7			Qty Oi	0	NA	iit Olass	Generator		oller T	rouble
0	NA NA	Site Wate				0	NA		Generator			
0	NA NA	Site Wate		'		0	NA		Generator			
0	NA NA	Fire Pum				0	NA		Switch Tra			
0	NA		•	Pump Controller Trouble								
0	NA	Fire Pum		<u> </u>								
0	NA			to Position								
SIGNAL INC	G LINE CIRCUITS											
		i-6.1) of Sig	nalin	g line circuits connected to	system	Qty	, ;	3	Style(s	;) Y		
	,	, ,		<u> </u>						<u>′                                      </u>		
	OWER SUPPLIES (Main): Nominal Voltage	. 1	120							AMPS	$\neg \tau$	20
	rrent Protection: Type	;	120	Fuse		Circuit Break	ωr.			AMPS	-	20
	(Primary Supply Panelb	oard)	<u>_</u>	LEC RM 205B PNL 2	1 1	necting Mea		ation (Fuse (	or Breaker	1		20
	L 4	ge Battery		Other:		HR Rating		18.0	or breaker	<i>''')</i>		
	ed capacity to operate sy		urs	X 24 60	Othe			10.0				
				alarm system. Location of fu								
	-	- 3.02.04 10		System Location of it	5.5149							
TYPE BAT		, 1 15			,							1
Dry Ce		<u>.</u>	_		ead-Acid	Othe						
				to primary power supply, in	stead of u	ısıng a secor	ndary po	ower supply	-			
	rgency system describe											
	ally required standby des								V-11-1 =00	701		
NA Optio	onai standby system des	scribed in N	гPА	70, Article 702, which also	meets the	e performand	e requir	rements of A	articie /00 (	or /U1		

Fire Alarm Test and Inspection Page 1 of 3

PRIOR TO ANY TESTING

Notifications Are Mad	e Yes	NA N	)	Wh	10	Т	Гime	Туре	Visual	Functional	NA	C	Comn	nents	
Building Management		X	MA	RK		8:0	00	Battery Condition	X						
Monitoring Entity		X	LIB	RARY S	SECURIT	Y 8:0	00	Load Voltage		X					
Other:								Discharge Test		X					
<b>INITIATING &amp; SUPER</b>	RVISOF	RY DEVI	CE TE	STS &	INSPECT	rions	<b>3</b>	Amp Hour Reading		X					
(ON SEPARATE FOR	RM) - #	OF PAG	ES A	TTACH	ED EMER	RGEN	CY	Specific Gravity		$\times$					
COMMUNICATIONS	EQUIP	MENT	1					Batteries Meet NFPA	72 Tes	t Requirem	ents:	● Ye	s	No	NA
CVCTEM TECTO 9 II	NEDEC	SHORE													
SYSTEM TESTS & II		Functio	nal NA	1	Comme	nte		Туре	Vieus	Functional	NA		omm	onte	
Control Panel	Visuai	Tanctio	\ \	,	Commi	1113		Transient Suppressors	+	runctional	V		011111	iciito	
Interface Equipment			$\dashv \circlearrowleft$	<u> </u>				Remote Annunciators	1			•			
Lamps/LEDS			$\dashv \Diamond$	<del>}</del>  -				Audible				•	-		
Fuses			+	,   ·				Visual				•			
Primary Power Supply			+	<u>,                                    </u>				Speakers			$+ \diamondsuit$	•			
Trouble Signals		1	+					Voice Clarity							
Disconnect Switches			+	<u>,                                    </u>				Door Holders			$\rightarrow$	•			
			+	· ·								•			
Ground Fault Monitor				. -				Door Unlock							
Туре	Visual	Functio	nal NA	1	Commen	ts		Interface Equipment	Visua	Functional	NA	C	Comm	nents	
Phone Set			$\times$	΄.				Elevator Recall			X				
Phone Jack			$\times$	΄ .				HVAC Shut Down			X				
Off-Hook Indicator			X	( -				Specify:							
Amplifier(s)			$\overline{}$	(   -				Special Hazards	Visual	Functional	NA	С	Comm	nents	
Tone Generators			$\neg$	(   -				Specify:							
Call in Signal Silence			X					Specify:							
System Performance			X					Specify:							
SUPERVISING STATIC	ON MON	NITORING	;	Yes	NA	No		Time		•	Co	mments			
Alarm Signal					X		NA								
Alarm Restoral					X		NA								
Trouble Signal					X		NA								
Trouble Restoral					X		NA								
Supervisory Signal					X		NA								
Supervisory Restoral					X		NA								
NOTIFIED TESTING OF	OMBI E				NA I	М.		NATI.				T			
NOTIFIED TESTING CO	OMPLE	IIE .		Yes	NA	No		Who		0.00		Time			
Building Management				$+ \diamondsuit$			MA			9:30					
Monitoring Entity				X			LIB	RARY SECURITY		9:30					
Other:															
HAS SENSITIVITY BI	EEN C	OMPLE	ΓED A	S PER	NFPA 72	OR L	OCAL	STATE CODES: Y	ES(	) NO( )	IA(  )	)			
Year Sensitivity Testin	na Com	npleted:	2018	Y	ear Sens	itivitv	Testir	ng Due: 2020	How	Was Sensi	tivitv Te	ested: G	EMI	NI	
-	_	-				-						$\frown$			
WHILE PERFORMING	3 THE	INSPEC	TION	ADDITI	ONAL IT	EMS \	WERE	NOTED THAT NEE	D COR	RECTED:	YES(	U NO	'	) NA (	
Explanation of "NO attached to this form.	)" answ	ers, sys	em de	ficiencie	s, and/or	inspec	tor re	commendations are lis	sted on	SERVICE F	OLLOW	/ UP #			,
No SERVICE FOLL	OW UP	REPOR1	was r	equired d	luring this i	inspect	tion.								
I state that the information 72 test and inspection see FOLLOW UP REPORT as	ctions. /	All equipn													
Name of Inspector		Haring				Sign	ature	m		Ce	rtificat	ion#5	4-25	-4951	
I acknowledge that the insinformation contained her having jurisdiction.															

Signature

SECONDARY POWER

Mark

Name of Owner

or Representative

LOCATION	DEVICE TYPE	ZONE / ADDRESS	TYPE OF INSPECTION	FACTORY SETTING	MEASURED SETTING	STATUS
DATA ROOM	PSD	1D001	VISUAL	0.5-3.43		PASS
MECH ROOM 207	PSD	1D002	VISUAL	0.5-3.43		PASS
FC-4A RM 207	PDD	1D003	VISUAL	0.0 0.40		PASS
FC-2.8 RM 207	PDD	1D003	VISUAL			PASS
FC-2.4B RM 207	PDD	1D005	VISUAL			PASS
FC-2.2 RM 207	PDD	1D005	VISUAL			PASS
FC-1.1 RM 207	PDD	1D000	VISUAL			PASS
FC-2.1 RM 207	PDD	1D007 1D008	VISUAL	+		PASS
2ND FL ELEV LOBBY	PSD	1D008	VISUAL	0.5-3.43		PASS
ELEV SHAFT	PSD	1D009 1D011	VISUAL	0.5-3.43		PASS
FC-1.8 RM 205A	PDD	1D011	VISUAL	0.5-3.43		PASS
FC-1.5 RM 205A	PDD	1D014 1D015	VISUAL	+		PASS
		<b>+</b>				
FC-1.4 RM 205A	PDD	1D016	VISUAL			PASS
FC-2.6 RM 205A	PDD	1D017	VISUAL			PASS
FC-2.9 RM 205A	PDD	1D018	VISUAL			PASS
FC-1.6 RM 205A	PDD	1D019	VISUAL	+		PASS
FC-1.7 RM 205A	PDD	1D020	VISUAL	0.5.0.45		PASS
MECH RM 205A	PSD	1D021	VISUAL	0.5-3.43		PASS
ELEC RM 205B	PSD	1D022	VISUAL	0.5-3.43		PASS
WATER SERVIC RM	PSD	1D024	VISUAL	0.5-3.43		PASS
FC-1.17 RM 125	PDD	1D032	VISUAL			PASS
FC-1.8 RM 118	PDD	1D033	VISUAL			PASS
1ST FL ELEV LOBBY	PSD	1D036	VISUAL	0.5-3.43		PASS
FC 1-2 RM 109A	PDD	1D037	VISUAL			PASS
FC 1-3 RM 109	PDD	1D038	VISUAL			PASS
MECH RM 134	PSD	1D042	VISUAL	0.5-3.43		PASS
FC 1.12 RM 134	PDD	1D043	VISUAL			PASS
FC 1.13 RM 134	PDD	1D044	VISUAL			PASS
ELEV EQ RM	FHD	1D048	VISUAL			PASS
FC 2.3 RM 207	PDD	1D052	VISUAL			PASS
ELEV EQ RM	PSD	1D054	VISUAL	0.5-3.43		PASS
ELEV BATTERY BACK UP PWR	0	1M010	VISUAL			PASS
2ND FL COMMODITY	MPS	1M012	VISUAL			PASS
2ND FL CORR 206	MPS	1M013	VISUAL			PASS
STAIR 2 EXIT	MPS	1M023	VISUAL			PASS
BOOSTER PANEL	0	1M025	VISUAL			PASS
TAMPER 1 WATER SERVICE RM	TS	1M026	VISUAL			PASS
TAMPER 2 WATER SERVICE RM	TS	1M027	VISUAL			PASS
PIV VALVE	TS	1M028	VISUAL			PASS
MAIN CONTROL WATER SERVICE RM	TS	1M029	VISUAL			PASS
WATER FLOW WATER SERVICE RM	WFS	1M030	VISUAL			PASS
TOP OF STAIR 2	MPS	1M031	VISUAL			PASS
RECEIVING	MPS	1M034	VISUAL			PASS
ENTRANCE 110	MPS	1M035	VISUAL			PASS
STAIR 1 EXIT	MPS	1M039	VISUAL			PASS
ENTRANCE 101	MPS	1M040	VISUAL			PASS
KNOX BOX	0	1M041	VISUAL			PASS
TOP OF STAIR 1	MPS	1M045	VISUAL			PASS
DOAZ SHUTDOWN RELAY	0	1M046	VISUAL	+		PASS
HVAC SHUTDOWN RELAY	0	1M047	VISUAL			PASS
SHUNT TRIP RELAY	0	1M047 1M049	VISUAL			PASS
PRIMARY RECALL RELAY	0	1M049 1M050	VISUAL	+		PASS
ALTERNATE RECALL RELAY	0	1M050	VISUAL			PASS
	10	I CUIVI I	VIOUAL	1		LASS
FIREMANS HAT RELAY	0	1M053	VISUAL			PASS

NO How many devices this page require Service: Are services required on Fire Alarm Components: ( YES

BD=BEAM DETECTOR, DH=DOOR HOLDER, FD=FLAME DETECTOR, FHD=FIXED TEMP HEAT DETECTOR, RRD=RATE OF RISE HEAT DETECTOR, C=CHIME FSS=FIRE SUPPRESSION SYSTEM, IDD=ION DUCT DETECTOR, ISD=ION SMOKE DETECTOR, PDD=PHOTO DUCT DETECTOR, PSD=PHOTO SMOKE DETECTOR, MPS=MANUAL PULL STATION, SSD=SINGLE STATION DETECTOR, ST=STROBE, B=BELL, H=HORN, HS=HORN/STROBE, S=SPEAKER, FPR=FIRE PUMP RUN, TS=TAMPER SWITCH, WPS=WATER PRESSURE SWITCH, LAS=LOW AIR SUPERVISORY SWITCH, WFS=WATER FLOW SWITCH, LSD=LASER SMOKE DETECTOR, ACD=ACCUMULATION SMOKE DETECTOR, IRD=INFRARED SMOKE DETECTOR, CDD=CARBON MONOXIDE DETECTOR, FPP=FIRE PUMP POWER, O=OTHER, AS=ABORT SWITCH, SS=SPEAKER/STROBE, KH=KITCHEN HOOD, EML=ELECTROMAGNETIC LOCK, NC=NURSE CALL



### FIRE EXTINGUISHER INSPECTION REPORT

		All LINCON	oonipa	ily										
BRANCH PHON	E NUM	IBER: 614-291-700	1		∑NA.	TIONA	L ACCOU	INT NUM	BER:	: 1-8	00-7	76-7	181	
DATE														
SITE					CON	ГАСТ								
ADDRESS					PHO	ΝE								
CITY					STAT	Έ				ZIF	_			
This inspection is: XA		Semi-Annual [	Quar			Weekl	у				YES	N.	/A N	ON
A. Are all extinguishers fr										$\perp$	Д			
B. Are the operating instr										$\perp$	Д			
C. Are all safety seals an					age?					$\perp$	Д	┷		
D. Do all extinguishers se	em to	be full by weighing or	r hefting?	)							Х			
E. Are all extinguishers fr	ee fron	n physical damage, le	eaks, cor	rosion, and clogged	nozzle	es?					Х			
F. Are all pressure gauge	s are i	n the operable range	or position	on?							X			
G. Are all HMIS (Hazardo	ous Ma	terials Information Sy	stem) lal	pels in place?							X			
H. Are fire extinguishers I	being ir	nspected at a minimu	m of 30-	day intervals by occ	upant (	or cont	ractor.				X			
		E ET	RE	RE ER			INSPEC	TIONS P	ERF	ORM	IED	(X)		
LOCATION OF EXTINGUISHER	SIZE	AGENT TYPE ABC / BC CO2 PURPLE K HALOTRON WE' CHEMICAL HALON 1211 AAAF / FFFP	MANUFACTURE DATE	MANUFACTURE OF FIRE EXTINGUISHER	INSPECTION	SERVICE NEEDED	6YR – 12 YR DUE DATE	HYDRO DUE DATE	BRACKET	COLLAR	GAUGE	PULL PIN	PULL PIN SEAL	SIGNAGE
FL2 BY ELEV	10	ABC	2016	KIDDE	X		2022	2028	X	X	X	X	X	X
FL2 SE QUIET AREA	10	ABC	2016	KIDDE	X		2022	2028	X	X	X	X	X	X
FL2 BY STUDY RM 4	10	ABC	2017	KIDDE	X		2023	2029	X	X	X	X	X	X
FL1 BY ELEV EQ RM	10	ABC	2016	KIDDE	X		2022	2028	X	X	X	X	X	X
FL1 BREAK RM SINK	5	ABC	2017	ANSUL	X		2023	2029	X	X	X	X	X	X
FL1 BY KITCHENETTE	10	ABC	2017	KIDDE	X		2023	2029	X	X	X	X	X	X
FL2 MECH RM 205A	10	ABC	2016	KIDDE	$\perp \times$		2022	2028	X	X	X	X	X	X
	-				-			-	<u> </u>	<u> </u>			<u> </u>	
					-			-	<del>                                     </del>		├	<del>                                     </del>		-
					1					<del> </del>				-
					1					<del> </del>				-
					+			+	+-	$\vdash$	-	-	<del>                                     </del>	-
					+			+	+-	$\vdash$	-	<del>                                     </del>		-
					-				+			-		-
					+			+	-					
Are services required o	n the I	Fire Extinguishers:	YE	ES NO Ho	w mar	y unit	s this pag	je require	e Ser	vice	:			<u> </u>
Explanation of "NO" a which is attached to the			and/or in	spector recommenda	ations a	are liste	ed on SER\	VICE FOLI	-OW I	UP#				_
No SERVICE FOLLOW	UP RE	PORT was required dur	ring this in	spection.										
I state that the informatio with applicable NFPA 10 t inspection except as note	test and	d inspection sections.	All equip	ment tested at this t										
Name of Inspector	lick H	aring	s	ignature	2	~_		Certif	icatio	on #				
I acknowledge that the insunderstood that all information requested, will be forward	nation o	contained herein is pro	ovided to	the best of the know										
Name of Owner or Representative	lark (			Si	gnatu	re	Ale				<i></i>			



•	A	n EM	COR C	omp	any		tomer		393
	Calumbus					Custon		-	
	Columbus					Schedu	led Date	e 02/2	8/2021
QTLY SP	KR SEMI ANN ALARM AND ANN	FIRE EX	(T			Complet	ted Date	e 02/0	4/2021
	INSPECTION					Inspe	cted B	y	
JOB	CML - NORTHSIDE (	NEW)			ional Inspect		Yes	<b>●</b> N	
				QTY	INSPE	CTION ITEMS		PRICE	AMOUNT
SITE	1423 NORTH HIGH STREET	Γ		1	QUARTERLY	WET INSPECTIO	N		
	COLUMBUS, OH 43201			1	SEMI-ANNUA	L ALARM INSPE	CTION		
CONTAC	MARK SPORCK			1	ANNUAL FIR	E EXTINGUISHER	RINSP		
PHONE									
FAX									
BILL	COLUMBUS METROP LIBRARY	OLITAI	N						
	96 S GRANT AVE								
TO	COLUMBUS, OH 43215								
CONTAC	T ACCOUNTS PAYABLE								
PHONE	614-769-0518								
FAX									
Site Note	es:								
1WS 1FF 3B	F 7FE					INSPE	CTION T	OTAL	215
				QTY	INSPE	CTION MATERIA		PRICE	AMOUNT
Commer	nts / Corrections:			4					
					INCDE	OTION MATE	DIALCT	OTAL	
					INSPE	CTION MATE	KIALS I	OTAL	
				YE	S NO NA	A CITY CHARGES I	BACKFLOW	INSPECTION	ON FEE
				GENE	RATE SFU FRO	OM INSPECTION	YES	<b>⊠</b> NA	
ALL CON	TROL VALVES LEFT IN OPEN		ION	(SELECT) GENERAT	YES WHEN AN INSPEC FES A SFU OR A SFU I	CTION <b>DOES NOT</b> GENER S NOT REQUIRED)	ATE A SFU, SEL	ECT NA WHEN	N INSPECTION
	☐ YES ☐ NO ☐ N/A			QTY	MISCELL	ANEOUS CHAP	RGES	PRICE	AMOUNT
SERVI	CE FOLLOW UP REPORT AT	TACHE	D		CITY BACKFL	OW INSPECTION	IFEE		
Y	'ES NO SFU NUMBER:				STATE OF DE	LAWARE FEE			
ADI	DITIONAL INSPECTOR OR FI	ΓTER							
1. NA	2. NA				<u>'</u>	C	THER T	OTAL	
Technician Name	Nick Haring	Count	1	Thanl	k You - Invoice	e to Follow	Insp	ection Total	215
	I confirm that the above we	ork has	been sati	sfactori	ly completed.		Materia	l Total	
	SEE REVERSE SIDE FOR A				• •	NS	Othe	r Total	
Custome	r		Custom	er	111-	- 0		Tax	

Signature

Name

**Total Cost** 

**INSPECTION WORK TICKET** 

Ticket # 980845



WATER BASED FIRE	
PROTECTION	
<b>INSPECTION &amp; TEST REPORT</b>	Γ

Water Based Test and Inspection Page 1 of 1

<b>©</b> В	RANCH PHONE NU	MBE	R:	614-291-7	001	NATIONAL ACCOUNT NUMBER: 1-800-776-7181							
DATE													
SITE				<del></del>			CONTA	СТ					
ADDRES	s						PHONE						
CITY							STATE			ZIP			
This incos	ction is: Semi-A	nnuc	J	Quartarly	Other		-						
This inspe	RS SECTION	mua	II	Quarterly	Other						YES	N/A	NO
	ire protection system	e in e	sarvice	2							\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	IN/A	NO
	RAL (Questions A, B				items)						YES	N/A	NO
	hydraulic nameplate					d legible? (An	swer N/A if syst	tem is Pipe Sch	eduled)		X		
1	ot. Connection coupl	-								ed?	X		
<u> </u>	pt. Connection visible										X		
<del></del>	pt. Connection check									tly?	X		
<del></del>	ses, hose valves & s						-			-		X	
3 - CONTE	ROL VALVES (Ques	stion	A is a t	tested item)							YES	N/A	NO
A. Did all e	electrical supervisory	swite	ches a	ctuate super	visory alarm	s?						X	
4 - WATEI	R SUPPLY (Que	stion	A is a	tested item)	(Main Drai	in Test one rise	r per quarte	er w/ backflo	w preventer	on system)	YES	N/A	NO
A. Are pres	ssure results at full fl	ow g	reater	or equal to a	cceptance o	or previous tes					X		
Riser Number	Location	(Ris	er)	Size	Static Pressure	Residual Pressure	PSI Return	Alarm Time	Design Density	lydraulic Inf Design Area	PSI @ Base	) [6	PM mand
1	WATER SERVICE	R00	M	1-1/4"	60		·		.10	990	50.3		291
5 - FLOW	ALARMS (Questio	n B is	s a ins <sub>l</sub>	pected item) (	Questions A	& C are teste	d items)	1	l	1	YES	N/A	NO
A. Did wate	erflow through the ins	spect	or's te	st or alarm te	est line actua	ate mechanic	al alarms?	1				X	
B. Pressur	e switches & vane ty	pe w	aterflo	w switches a	re in good c	ondition, secu	rely attac	hed w/ no	leaks?			X	
	erflow through the in	•			<u> </u>			aterflow sw	vitch?			X	
	MINFORMATION					m components							
	wet systems?	1	Sizes			Make / Mode		ULIC	717HR				
Number of	dry systems?	0	Sizes	NA		Make / Mode			NA				
Number of	preaction systems?	0	Sizes	NA		Make / Mode	ls NA		NA				
	deluge systems?	0	Sizes			Make / Mode	ls NA		NA				
	PREACTION AND D				B & C are tes	ted items)					YES	N/A	NO
A. Is the ai	r pressure and primi	ng wa	ater le	/el normal?								X	
B. Quick o	pening device operat	ed c	orrectly	/?								X	
C. Did the	low air pressure alar	т ор	erate o	during the tes	st?							X	
	nation of "NO" answe		ystem	deficiencies,	and/or inspe	ctor recomme	ndations a	re listed on	SERVICE F	OLLOW UI	°#		
No SI	ERVICE FOLLOW UP I	REPC	RT wa	s required duri	ing this inspec	ction.							
with applic	the information on that able NFPA 25 test an except as noted on a	d ins	pection	sections. A	II equipment	tested at this	time was le						
Name of	Inspector	N	ick Ha	aring	Signat	ure	2		Ce	rtification	# 5	4-25-49	951
understoo	dge that the inspection d that all information will be forwarded to	conta	ined h	erein is provi	ded to the be								6
Name of Owner or Representative Mark Signature									<i></i>				



### FIRE ALARM INSPECTION & TEST REPORT

_			An EM	COR	Compa	ny		_	&	ΙĿ	SI	R	EPOF	<b>X</b> I		
( <b>•</b> ) BI	RANCH P	HONE NUMBER	R: 614-29	91-70	01				) NATIOI	NAL A	ccol	JNT I	NUMBER:	1-800	-776-7	'181
DATE	05	/13/2021		A	DDITIO	NAL BUILI	DING	DATA								
SITE	CN	IL - PARSONS (	NEW)					_	CONTAC	T	ACC	OUN	NTS PAYA	BLE		
ADDRI		13 PARSONS A	•						PHONE		-		0518			
CITY		DLUMBUS	<u> </u>						STATE		OH	700		ZIP 4:	2215	
			EV						PHONE			476		-11 4	1213	
MONT	OKING E	NTITY STANL	.E 1						PHONE		0//-	4/0-	4900			
This ins	spection is	V V	Sem	i-Anr	nual	Quarterly	y [	Month	nly \	Weekly	y	Oth	er			
Type T	ransmiss	sion X Digital		Multi	plex	Mc	Cullol	า [	Revers	se Pola	arity		RF		Othe	:r
Panel I	Manufact	urer NOTIFIE	R		Mod	el Number	N	FS-320		Ту	ре	X	Addressa	ble	Har	rd Wired
ALARI	/ INITIAT	ING DEVICES A	ND CIRC	UIT I	NFORM	IATION										
	devices	Circuit Class	Type of o					Qty of	devices	Circ	uit Cla	ass	Type of o	device		
	6	CLASS B	Manual S	tation	s			(	)	NA	\		Heat Det	ectors	-	
	0	NA	ION Dete	ctors					1	CL	ASS E	3	Waterflov	v Switcl	nes	
	3	CLASS B	Photo De	tector	s			;	3	CL	ASS E	3	Superviso	ory Swi	ches	
	1	CLASS B	Duct Dete	ectors												
ΔΙ ΔΡΙ	/ NOTIFIC	CATION APPLIA	NCES AI	ND C	IRCUIT	INFORMA	TION									
	devices	Circuit Class	Type of d			IIII OIIIIA	<u> </u>	Qty of	devices	Circ	cuit Cla	ass	Type of d	evice		
	0	NA	Bells						7	CL	ASS E	3	Strobes		-	
	0	NA	Horns					1	4		ASS E		Horn/Stro	bes		
	0	NA	Speakers													
	0	NA	Chimes												-	
CLIDE	NICODY	SIGNAL-INITIA	TING DEV	//CE	S AND C	NDCHIT IN	EOD.	MATION	ı							
	devices	Circuit Class	Type of o			JINCOIT IN	I		devices	Circ	uit Cla	ss	Type of de	vice		
	0	NA	Building 1						0	NA	<u> </u>		Generator		roller T	rouble
	0	NA	Site Wate		מר				0	NA			Generator			
	0	NA	Site Wate		<u> </u>				0	NA			Generator			
	0	NA	Fire Pum	p Run	ining				0	NA			Switch Tra	nsfer		
	0	NA				troller Troub	ole		_							
	0	NA	Fire Pum	p Pow	/er											
	0	NA	Fire Pum	p Auto	Position	1									-	
SIGNA	LING LIN	E CIRCUITS														
		NFPA 72, Table 6	-6.1) of Sig	naling	line circ	uits connecte	ed to s	system	Qty	,	4		Style(s	) Y		
CVCTE	M DOWE	D CUDDUIES								l					-	
		R SUPPLIES ): Nominal Voltage		120										AMPS		20
		Protection: Type		120	Fuse			X c	ircuit Break	er				AMPS	-	20
		ary Supply Panelbo	pard)	MF		MEP PNL	P1	- 1			ation (I	Fuse	or Breaker #			
		andby): X Storag			Other:		• •		Rating		7.0	400	or Broaker /	,   0.		
	- '	acity to operate sy		-		X 24	60	Other		l						
NA		Oriven generator de			larm syst											
					.,,,,			. 5-								
	BATTERY		nim	<u> </u>	ا ادعاد	ما ۸ د: یا آ	٦.	od A at d								
	y Cell	Nickel Cadn	<u>.</u>		ealed Lea			ad-Acid	Othe		.014/0==	الممار				
	-	standby system use y system described				power supp	ny, ins	lead of US	sing a secol	пиагу р	ower s	uppiy				
		quired standby des		-		701										
	<u> </u>	tandby system des					aleo n	neets the	nerformano	e requi	iremen	ts of /	Article 700 c	r 701		
11/1	Optional Si	anaby system des	oribod III IV	^ /	o, Alliot	, , OZ, WITIOH	uist II	IOUG IIIC	portormant	, o requi	0111011	13 01 /	" " " I O O C			,

Fire Alarm Test and Inspection Page 1 of 3

FOLLOW UP REPORT as stated above.

**Certification # 54-25-5260** Signature

I acknowledge that the inspection, deficiencies, and suggested improvements were discussed with me upon completion of the inspection. It is understood that all information contained herein is provided to the best of the knowledge of the person providing the information and that, if requested, will be forwarded to the authority

having jurisdiction. Name of Owner Signature no signature/covid 19 concerns

or Representative

					-	
LOCATION	DEVICE TYPE	ZONE / ADDRESS	TYPE OF INSPECTION	FACTORY SETTING	MEASURED SETTING	STATUS
MECH RM MEP ABOVE FACP	PSD	1D001	FUNCTIONAL	0.5-3.43		PASS
STORAGE RM 137	PSD	1D007	FUNCTIONAL	0.5-3.43		PASS
MENS RR	PDD	1D008	FUNCTIONAL	0.5-3.43		PASS
DATA RM 114	PSD	1D014	FUNCTIONAL	0.5-3.43		PASS
CHILDREN RM EXIT	MPS	1M001	FUNCTIONAL			PASS
STAFF LOUNGE RM	MPS	1M002	FUNCTIONAL			PASS
RECEIVING RM 121	MPS	1M003	FUNCTIONAL			PASS
BACK VESTIBULE 127	MPS	1M004	FUNCTIONAL			PASS
MAIN VESTIBULE 129	MPS	1M005	FUNCTIONAL			PASS
CORRIDOR 146	MPS	1M006	FUNCTIONAL			PASS
MECH RM MEP TAMPER	TS	1M010	FUNCTIONAL			PASS
MECH RM MEP TAMPER	TS	1M011	FUNCTIONAL			PASS
OUTSIDE MECH RM MEP TAMPER	TS	1M012	FUNCTIONAL			PASS
MECH RM MEP WATERFLOW	WFS	1M013	FUNCTIONAL			PASS
		<u> </u>		1		1
		<u> </u>		1		1
		<u> </u>		1		1
	1					
	1					
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	1	-				ļ
			1			

Are services required on Fire Alarm Components: YES NO How many devices this page require Service: NA

BD=BEAM DETECTOR, DH=DOOR HOLDER, FD=FLAME DETECTOR, FHD=FIXED TEMP HEAT DETECTOR, RRD=RATE OF RISE HEAT DETECTOR, C=CHIME FSS=FIRE SUPPRESSION SYSTEM, IDD=ION DUCT DETECTOR, ISD=ION SMOKE DETECTOR, PDD=PHOTO DUCT DETECTOR, PSD=PHOTO SMOKE DETECTOR, MPS=MANUAL PULL STATION, SSD=SINGLE STATION DETECTOR, ST=STROBE, B=BELL, H=HORN, HS=HORN/STROBE, S=SPEAKER, FPR=FIRE PUMP RUN, TS=TAMPER SWITCH, WPS=WATER PRESSURE SWITCH, LAS=LOW AIR SUPERVISORY SWITCH, WFS=WATER FLOW SWITCH, LSD=LASER SMOKE DETECTOR, ACD=ACCUMULATION SMOKE DETECTOR, IRD=INFRARED SMOKE DETECTOR, CDD=CARBON MONOXIDE DETECTOR, FPP=FIRE PUMP POWER, O=OTHER, AS=ABORT SWITCH, SS=SPEAKER/STROBE, KH=KITCHEN HOOD, EML=ELECTROMAGNETIC LOCK, NC=NURSE CALL



### BACKFLOW PREVENTER FORWARD FLOW TEST

BRANCH	PHONE NUM		I-291-700		прип	,	$\bigcirc$ 1	NATIONAL	ACCOUNT	NUMBE	:R: 1-8	00-77	76-7181
DATE							$\circ$						
SITE							CON	NTACT					
ADDRESS							PHC	NE					
CITY							STA				ZIP		
_											_		
NFPA 25 – Re	equirements (2	2002, 2008 &	2011):										
<ol> <li>A forward flow downstream of the</li> </ol>			e system d	emand, i	ncluding	hose stream	am demand, v	where hydran	its or inside h	ose static	ns are	locate	d
<ol><li>For backflow pr the system demar</li></ol>		2" and under	, the forwar	d flow te	st shall b	e accepta	ble to conduc	t without mea	asuring flow, v	where the	test ou	ıtlet is	of size to flow
3. Where connect	-							•					
4. A forward flow t	test shall not be	required wh	ere annual	fire pump	testing	causes the	e system dem	nand to flow the	hrough the ba	ackflow pr	evente	r devic	æ.
) NFPA 13 – Re	quirements (2	007):											
1. The backflow pr	evention assen	nbly shall be	forward flov	v tested t	o ensure	proper of	peration.						
2. The minimum flo	ow rate require	d by the abov	e reference	shall be	the syst	em demai	nd, including l	nose stream	demand wher	e applica	ble.		
		# OF TEST	TEST			STATIC	RESIDUAL	SYSTEM	SYSTEM	MAIN	FIRE I	HOSE	REQUIRED
BACKFLOW MANUFACTURE	BACKFLOW SIZE	OUTLETS	NOZZLE SIZE	or PSI	GPM	PSI (System	PSI (System	DEMAND	PSI	DRAIN SIZE	YES	NO	TOTAL FT
VATTS	6"	1	1-3/4"	10	280	side of BF)	side of BF) 50	(Hydraulic Sticker)	53.6	1-1/4"		X	REQUIRED 0
ocation / System l	Number	M	EP ROOM	1	I	Test Outle	ets for Forward	I Flow Test?	YES N/	A X NO	Amoun	t? <b>0</b>	Size? NA
	<u> </u>	# OF TEST	TEST			STATIC	RESIDUAL	SYSTEM	SYSTEM	MAIN	EIDE I	HOSE	DECLUBED
BACKFLOW MANUFACTURE	BACKFLOW SIZE	# OF TEST OUTLETS	NOZZLE	PITOT or PSI	GPM	PSI	PSI	DEMAND	PSI	DRAIN			TOTAL FT
WIANOFACTORE	SIZE	FLOWING	SIZE	01 F31		(System side of BF)	(System side of BF)	(Hydraulic Sticker)	(Hydraulic Sticker)	SIZE	YES	NO	REQUIRED
anation / Cyatam	Niumahari					Task Outle	to for Forman	L Flanc Talet?	VEO N/	A NO	Amoun	+2	Size?
ocation / System	Number						ets for Forward	i Flow Test?	YES N/	A NO	Amoun	L!	Size?
BACKFLOW	BACKFLOW	# OF TEST OUTLETS	TEST NOZZLE	PITOT	GPM	STATIC PSI	RESIDUAL PSI	SYSTEM DEMAND	SYSTEM PSI	MAIN DRAIN	FIRE	HOSE	REQUIRED
MANUFACTURE	SIZE	FLOWING	SIZE	or PSI	GFIVI	(System side of BF)	(System side of BF)	(Hydraulic Sticker)			YES	NO	TOTAL FT REQUIRED
ocation / System	Number					Test Outle	ets for Forward	flow Test?	YES N/	A NO	Amoun	t?	Size?
DAGKEL OW	DACKEL OW	# OF TEST	TEST	DITOT		STATIC	RESIDUAL	SYSTEM	SYSTEM	MAIN	FIRE I	HOSE	REQUIRED
BACKFLOW MANUFACTURE	BACKFLOW SIZE	OUTLETS	NOZZLE	or PSI	GPM	PSI (System	PSI (System	DEMAND	PSI	DRAIN	YES	NO	TOTAL FT
		FLOWING	SIZE			side of BF)	side of BF)	(Hydraulic Sticker)	(Hydraulic Sticker)	SIZE	0		REQUIRED
ocation / System	Number	1			l	Test Outle	ets for Forward	I Flow Test?	YES N/	A NO	Amoun	t?	Size?
The Backflow D	evice (s) Pas	ssed the Fo	rward Flo	w Test	:	YES	NO				•		
П <sub>т.</sub> .													
test outlets to acl		ed flow rate.	This system	n was ins	talled pri	or to the d	lescribed test	and does no	t require addi	tional tes	t outlets	be in	
					'								nough toot
outlets to achieve		w rate. Furth	ner investiga										
I state that the in	formation on	this form is	correct at t	he time	— and plac	e of this	inspection.	All test and i	inspections v	were per	formed	in ac	cordance
with applicable inspection except	NFPA 25 test a	nd inspection	n sections	. All eq	uipment	tested at	this time wa						
Name of Inspe	ctor Jorda	an Messm	er	Sign	ature	J	M		Cert	ification	ı #		
I acknowledge the understood that requested, will be	all information	n contained	herein is p	rovided	to the b								
Name of Owne or Representat	r	gnature/co					Signatu	re ~	N/A				



#### An EMCOR Company Customer # 146393 **Customer PO#** Columbus Scheduled Date 04/30/2021 Completed Date 05/16/2021 ANN SPKR FWD FLOW FIRE EXT AND ALARM INSPECTION Inspected By )Yes (●)No Additional Inspector or Fitter: CML - PARSONS (NEW) **JOB** QTY **INSPECTION ITEMS** PRICE **AMOUNT** SITE **ANNUAL ALARM INSPECTION** 1113 PARSONS AVE 1 1 COLUMBUS, OH 43215 ANNUAL WET INSPECTION CONTACT **ACCOUNTS PAYABLE** FORWARD FLOW TEST BACKFLOW **PHONE FAX COLUMBUS METROPOLITAN LIBRARY** BILL 96 S GRANT AVE TO COLUMBUS, OH 43215 **ACCOUNTS PAYABLE** CONTACT **PHONE** 614-769-0518 **FAX** Site Notes: **INSPECTION TOTAL 1WS 3BF 8FE** 435 QTY **INSPECTION MATERIALS** PRICE **AMOUNT** Comments / Corrections: FIRE EXTINGUISHER INSPECTION COMPLETED ON SEPERATE TICKET #20886 **INSPECTION MATERIALS TOTAL** NO NA CITY CHARGES BACKFLOW INSPECTION FEE **GENERATE SFU FROM INSPECTION** YES X NA (SELECT YES WHEN AN INSPECTION **DOES NOT** GENERATE A SFU, SELECT NA WHEN INSPECTION GENERATES A SFU OR A SFU IS NOT REQUIRED) ALL CONTROL VALVES LEFT IN OPEN POSITION XYES NO N/A QTY **PRICE AMOUNT MISCELLANEOUS CHARGES** SERVICE FOLLOW UP REPORT ATTACHED CITY BACKFLOW INSPECTION FEE YES NO SFU NUMBER: STATE OF DELAWARE FEE ADDITIONAL INSPECTOR OR FITTER 1. NA **OTHER TOTAL** 2. NA Inspection Technician Jordan Messmer Count 2 Thank You - Invoice to Follow 435 Name **Total** I confirm that the above work has been satisfactorily completed. **Material Total** SEE REVERSE SIDE FOR ADDITIONAL TERMS AND CONDITIONS Other Total Tax Customer Customer Name **Signature** Total Cost 435

INSPECTION WORK TICKET

Ticket # | 996005



## WATER BASED FIRE PROTECTION INSPECTION & TEST REPORT

BRANCH PHONE NUMB	ER: 614-291-7001			○ NA	TIONAL A	ACCOUNT	NUMBER	R: 1-80	)-776-7	181
DATE				CONTA	CT					
SITE				CONTA						
ADDRESS				PHONE	·					
CITY				STATE			ZII	<i>'</i> —		
This inspection is: Annual	Semi-Annual C	Quarterly	Monthly _	Weekly	Other					
1 – OWNERS SECTION	This section is to be ans	swered and sig	gned by the	Owner or C	Owners Rep	oresentative		YES	N/A	NO
A. Is the building occupied?								<u>X</u>		
Has the occupancy classification		ts remained th	ne same sin	ce the las	t inspectio	n (If no, survey i	required)	<u>X</u>		
C. Are all fire protection system								<u>X</u>		
D. Are all Wet Sprinkler System	· · · -			ed from te	mperature	s below 40°	??	<u>X</u>		
E. Owner has been instructed o		-	•					<u> </u>		
Inspection of Sprinklers, Hang	ers, Pipe and Fittings w	ill be conduc	ted from Flo	oor Level,	Concealed	d Spaces ar	e not req	uired t	be Ins	spected
Name of Owner or Representa	ative: no signature/co	vid 19 conce	<sub>rns</sub> Signatu	re:		/4				
2 – GENERAL (Questions A, E	3, C, D, E, F, H, J & K are	inspection ite	ms) (Questi	ons G, L &	M are teste	ed items)		YES	N/A	NO
A. Have the sprinkler systems b	een extended to all visi	ble areas of th	ne building?	(If NO, an En	ngineering Surv	ey is required)		X		
B. Does there appear to be prop	per clearance between t	the top of all s	torage and	the sprink	ler deflect	or?		X		
C. Are the hydraulic nameplate(	(s) securely attached to	the riser and	legible? (An	swer N/A if sys	tem is Pipe Sch	neduled)		<u>X</u>		
D. Is there a spare head box with	th the proper number ar	nd type of spa	re sprinkler	s and wrei	nches?			X		
E. Fire Dept. Connection in goo	d condition, visible, ace	ssible and ma	rked with IE	) signs?				X		
F. Has the Fire Dept. Connection	on piping been hydrosta	tically tested in	n the last 5	years ?		Year Due: 20	25	<u>X</u>		
G. Have all gauges 5 or more y	ears old been replaced	or calibrated?	Yea	r Replaced: 2	2020	Year Due: 20	25	<u> </u>		
H. Internal inspection of the Pip	e, Valves and Backflow	has been per	formed with	in the last	5 years?	Year Due: 20	25	$\times$		
J. Are all hoses and hose valve	s in good condition, fre	e from physica	al damage a	and no lea	ks?				X	
K. Hose (>5 yrs) connected to the	he system has been ser	rviced per NFI	PA 1962?	Year of Hose:	NA	Year Due: NA	<b>\</b>		X	
L. Fire backflow prevention devi	ice tested per the autho	rity having juri	isdiction?	Month Due: J	AN	Year Due: 20	22	X		
M. Forward flow test has been o	conducted on fire backfl	ow device - N	A for syster	ns w/ fire p	oumps?	Year Due: 20	22	X		
3 - CONTROL VALVES (Questi	ions A, B & E are inspectio	on items) (Ques	tion D is a te	st item) (Qu	estion C is	a maintenan	ce item)	YES	N/A	NO
A. Are all sprinkler system main	control valves and all c	other control v	alves in the	appropria	te open or	closed pos	ition?	<u>X</u>		
<ol> <li>Are all control valves supervi</li> </ol>								<u>X</u>		
C. Were all control valves opera	ated through full range o	of motion, lubr	icated and ı	eturned to	normal p	osition?		<u>X</u>		
D. Did all electrical supervisory								<u>X</u>		
E. Are all control valves easily a			-					<u> </u>		
4 - WATER SUPPLY (Question				mation) (M	lain Drain i	s a test item	<u>)</u>	YES	N/A	NO
A. Did flow results have the san		ngs than previ	ous tests?	(A reduct	tion of 10% sho	uld be noted as I	Vo)	<u> </u>		
B. System water supplied from:		ated Tank _	Pressure <sup>-</sup>	ΓankS	Suction Tai	nk Pond	IOthe	er		
C. Main drain is piped outside	Yes No NA, if	no how many	25' hoses							NA
Riser Location (I	Riser) Size	Static Pressure	Residual	PSI Return	Alarm	Design Density	lydraulic In Design	PSI	@	GPM
1 MECH ROOM MEP	1-1/4"	65	Pressure 50	60	Time 15SEC	.1	1500	53		295.2
I WIEGIT KOOM WEI	1-1/4	03	30	- 00	13020	••	1300	- 30		233.2

SITE										DAT	E		
5 - FLOW ALARMS (Questions	A & B &	are inspection	& test	– t items, l	based o	n type of inspect	ion pe	erformed	)		YES	N/A	NO
A. Did waterflow through the ins	pectors	test actuate a	all me	chanica	l alarms	s?						X	
B. Did waterflow through the ins	pectors	test actuate a	all elec	ctrical a	larms?						X		
6 - WET SYSTEMS (Questions	A & B are	e inspection ite	ms) (Q	uestions	s C, D & I	E are tested items	) (Que	estion F is	for infor	mation)	YES	N/A	NO
Number of systems 1 Size	es <b>3"</b>	NA NA	A 1	AV I	Make & Models	VICTAULIC		717HR					
A. Alarm valves, riser check val	ves, gau	iges and asso	ciated			rom physical da	mage	?			X		
B. Trim valves, alarm and super	visory li	nes are in the	appro	opriate o	open or	closed position	? (Are	e Appropriate	e Signs provi	ded)		X	
C. Is the antifreeze system prote	ected co	rrectly based	on the	e listed	cold zoı	ne?	Cold Zor	ne Designat	or: NA			X	
D. The antifreeze system protect	tion is n	ormal and is i	not ov	ercharg/	jed? (pr	rotection above the o	cold zoi	ne is consi	dered over	charged)		X	
E. Was the antifreeze system te	sted at t	the point of co	nnect	tion to th	ne syste	em and at the re	mote	point of				X	1
F. Area Protected? <b>NA</b>						Ту	/pe <b>N</b>	Α	(	Connec	tion <b>NA</b> °	Remo	te NA°
7 - DRY / PREACTION / DELU	GE SYS	TEMS It is	the o	wner's r	esponsi	ibility to maintair	auxil	liary drai	ns betwe	en insp	ections	Owner lotified	NA
Number of Dry Systems	0	Make and Mo	odel N	AV		NA		Trip tes	t report at	tached [	XTrip te	st not re	quired
Number of Pre-Action Systems	0	Make and Mo	odel N	AA		NA		Trip test	t report at	tached [	X Trip te	st not re	quired
Number of Deluge Systems 0 Make and Model NA NA Trip test report attached \( \)											Trip te	st not re	quired
(Questions A, B, C, G & H are ins	pection	items) (Questi	ons D	, E & I a	re teste	d items) (Questio	on F is	s a maint	tenance i	tem)	YES	N/A	NO
A. Valves, gauges and associat	ed trim a	are free from	physic	cal dama	ageand	in the appropria	te op	en or clo	sed pos	tion?		X	
B. Is the air pressure and primin	g water	level normal?	)									X	
C. Did the nitrogen generators of	perate	satisfactorily?	Ger	nerator l	hour me	eter						X	
D. Did the air compressor opera	-	-										X	
		-	est?									X	
E. Did the low air pressure alarm operate during the test?  F. Auxiliary drains that were identified by the owner were drained during this inspection?											X		
G. Valves and trim appear to be		-											
H. Pipe that passes through free	•	·			W <del>4</del> 0 1 :	•							
I. Has the Air Leakage Test bee					thin the	last 3 years?	/ear Pei	rformed: N	^				
										ad itam.	s) YES	N/A	NO
8 - SPRINKLERS, PIPE, AND I A. Is all visible pipe in good con									- are test	ea nem	s) 1E3	IN/A	NO
B. Are visible pipe hangers and						damage and no	ICAN	): 					
C. Are all sprinklers free from d						eign materials &	corre	ect orient	ation?		X		
D. Have standard sprinklers 50							00110	0110111			/\	X	
E. Have fast response sprinkler			•			<u> </u>	242 D	ate of Sn	rinklers 2	015			
F. Have dry type sprinklers 10 c		<u> </u>		-		-			rinklers N				
3 31 1		<u>'</u>	•					atc of op	TITICIS N	A			
9 - FIRE PUMPS AND STORA	<b>.</b> .	•							1_		. $\square$	$\overline{}$	
'		e Pump Test			-		\_\	V/A X	Report			N N/.	
Water Storage Tank Supplies V	/ater: `	Y N	Ta	ank Insp	ection F	Performed: Y	_ N	N/A	Repo	rt Attac	hed: Y	N	N/A X
Explanation of "NO" answers which is attached to this form No SERVICE FOLLOW UP RE	1.	•		•		ommendations ar	e liste	ed on SE	RVICE FO	DLLOW	UP #		
I state that the information on th with applicable NFPA 25 test and inspection except as noted on a	d inspect	tion sections.	All eq	quipment	t tested	at this time was							
Name of Inspector Jordan Messmer Signature Certificati										ion#	54-25-	5260	
I acknowledge that the inspection, deficiencies, and suggested improvements were discussed with me upon completion of t understood that all information contained herein is provided to the best of the knowledge of the person providing the inform requested, will be forwarded to the authority having jurisdiction.													
Name of Owner or Representative	no sigı	nature/covid	d 19 d	concer	ns	Signature	)		J/A				
or Representative no signature/covid 19 concerns Signature  Water Based Test a											Inspection	n Page 2	of 2



### FIRE ALARM INSPECTION & TEST REPORT

BRAN	CH PHON	E NUMBE	R:						1	OITAN	NAL ACC	OUNT	NUMBER	R: 1-800	776-7	181
DATE				A	DDITION	IAL BUIL	DING	DATA	1							
SITE									C	ONTAC	Т					
ADDRESS	-								_ PH	HONE	_					
CITY									_	TATE	_			ZIP		
MONITORIN	IG ENTIT	<b>v</b>								HONE	_					
WONTOKII	IG LIVIII	'							- ''	IONL	_					
This inspect	ion is:	Annual	Sen	ni-Ann	ual	Quarterl	ly	Mor	nthly	V	Veekly	Oth	ner			
Type Trans	mission	Digita	ıl	Multip	olex	Mo	:Cullor	1		Revers	e Polarit	/	RF		Other	
Panel Manu	facturer				Mode	l Numbe	r				Туре		Address	able	Har	d Wired
ALARM INI	FIATING F	FVICES /	AND CIRC	:UIT II	NFORM	ATION	•					•				
Qty of device		uit Class	Type of			411011		Qty o	f dev	ices	Circuit	Class	Type o	f device		
			Manual S											etectors		
			ION Dete	ectors									Waterfl	ow Switch	nes	
			Photo De	etectors	3								Superv	isory Swit	ches	
			Duct Det	ectors												
ALARM NO	TIFICATION	N APPLIA	ANCES A	ND CI	RCUIT I	NEORMA	TION									
Qty of device		uit Class	Type of			iti Ortini		Qty o	f dev	ices	Circuit	Class	Type of	device		
			Bells										Strobes			
			Horns										Horn/S	trobes		
			Speakers	s												
			Chimes													
SUPERVISO	ORY SIGN	AL-INITIA	TING DE	VICES	AND C	IRCUIT IN	NFORI	MATIO	N							
Qty of device	1	uit Class	Type of					Qty o		ices	Circuit	Class	Type of	device		
			Building	Temp									Generato	or or Cont	roller T	rouble
			Site Wat	er Tem	р								Generato	or Engine	Runnin	g
			Site Wat	er Leve	el								Generato	or in Auto	Positio	n
			Fire Pur	np Runi	ning								Switch T	ransfer		
			Fire Pur	np or Pu	ump Cont	roller Trou	ble									
			Fire Pur													
			Fire Pur	np Auto	Position											
SIGNALING	LINE CIF	CUITS														
Qty and Style	(see NFPA	72, Table 6	6-6.1) of Si	gnaling	line circu	its connec	ted to s	ystem		Qty			Style	(s)		
SYSTEM PO	OWER SU	PPLIES														
		inal Voltage	)											AMPS		
Over Cur	ent Protect	ion: Type			Fuse				Circu	uit Break	er			AMPS		
Location	Primary Su	pply Panelb	oard)					Disco	nnect	ing Mea	ns Locatio	n (Fuse	or Breake	r #)		
B. Secondar	y (Standby)	: Stora	ge Battery	(	Other:			AMP	HR R	ating						
Calculate	d capacity t	o operate sy	stem, in h	ours		24	60	Oth	er:							
Eng	gine-Driven	generator d	edicated to	fire ala	arm syste	m. Locatio	n of fue	el storaç	ge:							
TYPE BATT	ERY															
Dry Cell		Nickel Cadr	nium	Se	aled Lead	d-Acid	Le	ad-Acid	t	Othe	r:					
C. Emergend	y or standb	y system us	ed as a ba	ckup to	primary	power sup	ply, ins	tead of	using	a secor	ndary pow	er suppl	y.			
Emer	gency syste	em describe	d in NFPA	70, Art	icle 700											
Lega	ly required	standby des	cribed in N	NFPA 7	0, Article	701										
Optio	nal standby	system des	scribed in N	NFPA 7	0, Article	702, which	also m	neets th	e per	formanc	e requiren	nents of	Article 700	or 701	·	

PRIOR TO ANY TES	STING							SECONDARY POW	/ER				
Notifications Are Mad	1	NA	No		Who	)	Time	Туре	Visual	Functional	NA	Comments	
Building Management								Battery Condition					
Monitoring Entity								Load Voltage					
Other:								Discharge Test					
INITIATING & SUPER	VISOI	ם אא	FVICE	TES	TS & I	NSPECTION	าทร	Amp Hour Reading					
(ON SEPARATE FOR			_					Specific Gravity					
COMMUNICATIONS	•					.D LIIILIK	22.101	Batteries Meet NFPA	72 Tes	t Requireme	ents:	Yes No	NA
					_							•	
SYSTEM TESTS & I		_	NS ctional	NI A		0		T	\ <i>r</i> :	F		0	
Type	visuai	Fun	ctional	NA		Comment	ıs	Type		Functional	NA	Comments	
Control Panel		-						Transient Suppressors					
Interface Equipment								Remote Annunciators					
Lamps/LEDS		-						Audible					
Fuses								Visual					
Primary Power Supply								Speakers					
Trouble Signals								Voice Clarity					
Disconnect Switches								Door Holders					
Ground Fault Monitor								Door Unlock					
Туре	Visual	Fun	ctional	NA		Comments		Interface Equipment	Visual	Functional	NA	Comments	
Phone Set								Elevator Recall					
Phone Jack								HVAC Shut Down					
Off-Hook Indicator								Specify:					
Amplifier(s)								Special Hazards	Visual	Functional	NA	Comments	
Tone Generators								Specify:					
Call in Signal Silence								Specify:					
System Performance								Specify:					
SUPERVISING STATIO	ON MOI	NITOF	RING	l	Yes	NA	No	Time		L	Co	mments	
Alarm Signal								<del>-</del>					
Alarm Restoral													
Trouble Signal													
Trouble Restoral													
Supervisory Signal													
Supervisory Restoral						İ							
NOTIFIED TESTING C	OMDI E				V	NA	N	NA/Ib a				Time a	
	OWPLE	:16			Yes	INA	No	Who				Time	
Building Management													
Monitoring Entity													
Other:													
HAS SENSITIVITY B	EEN C	OMP	LETE	D AS	PER N	IFPA 72 C	R LOCA	L STATE CODES: YE	ES	NO N	Α		
Year Sensitivity Testir	ng Con	nplete	ed:		Y	ear Sensiti	vity Testi	ng Due:	How \	Was Sensit	ivity Te	ested:	
				<b></b> .	DDITI			-		DEATER	\/ <b>F</b> 0	NO NA	
WHILE PERFORMING	IHE و	INSI	ECII	ON A	אוווטט	ONAL II EI	VIS WER	E NOTED THAT NEEL	COR	RECTED:	YES	NO NA	
Explanation of "NC attached to this form.	)" answ	vers,	system	defi	ciencies	s, and/or in	spector re	ecommendations are lis	ted on	SERVICE FO	DLLOW	/ UP #	,
No SERVICE FOLL	OW UP	REP	ORT wa	as rec	uired du	urina this ins	spection.						
						ŭ	•	ction. All test and inspection	ons wer	e nerformed in	accord	lance with applicable N	FΡΔ
	ctions.	All eq	uipment					onal condition upon compl					
Name of Inspector Signature					Signature	ture Certification #							
								discussed with me upon co providing the information a					ity
Name of Owner Signature							Signature						

**DATE** 

Fire Alarm Test and Inspection Page 2 of

SITE

JIE						
LOCATION	DEVICE TYPE	ZONE / ADDRESS	TYPE OF INSPECTION	FACTORY SETTING	MEASURED SETTING	STATUS
					_	
	Ī			ĺ		

NO How many devices this page require Service: BD=BEAM DETECTOR, DH=DOOR HOLDER, FD=FLAME DETECTOR, FHD=FIXED TEMP HEAT DETECTOR, RRD=RATE OF RISE HEAT DETECTOR, C=CHIME FSS=FIRE SUPPRESSION SYSTEM, IDD=ION DUCT DETECTOR, ISD=ION SMOKE DETECTOR, PDD=PHOTO DUCT DETECTOR, PSD=PHOTO SMOKE DETECTOR, MPS=MANUAL PULL STATION, SSD=SINGLE STATION DETECTOR, ST=STROBE, B=BELL, H=HORN, HS=HORN/STROBE, S=SPEAKER, FPR=FIRE PUMP RUN, TS=TAMPER SWITCH, WPS=WATER PRESSURE SWITCH, LAS=LOW AIR SUPERVISORY SWITCH, WFS=WATER FLOW SWITCH, LSD=LASER SMOKE DETECTOR, ACD=ACCUMULATION SMOKE DETECTOR, IRD=INFRARED SMOKE DETECTOR, CDD=CARBON MONOXIDE DETECTOR, FPP=FIRE PUMP POWER, O=OTHER, AS=ABORT SWITCH, SS=SPEAKER/STROBE, KH=KITCHEN HOOD, EML=ELECTROMAGNETIC LOCK, NC=NURSE CALL

YES

Are services required on Fire Alarm Components:

CITE

DATE



INSPECTION WOR	RK TICKET
Ticket #	
Customer #	
Customer PO #	
Scheduled Date	
<b>Completed Date</b>	
Inspected By	

				Addit	ional Inspector or Fitter:	Yes	N	o
JOE	3			QTY	INSPECTION ITEMS		PRICE	AMOUNT
SITE								
CONTAC	CT							
PHONI	E							
FAX								
BILI	<u> </u>							
ТО								
CONTAC	^T							
PHONI								
FAX	-							
Site Not	es:							
					INSPE	CTION	<b>FOTAL</b>	
				QTY	INSPECTION MATERIA		PRICE	AMOUNT
Comme	nts / Corrections:							
					INSPECTION MATE	RIALS	<b>TOTAL</b>	
			-	YES	S NO NA CITY CHARGES	BACKFLOW	/ INSPECTION	ON FEE
					RATE SFU FROM INSPECTION	YES	NA	
ALL CON	TROL VALVES LEFT IN OPEN	POSIT	ION	(SELECT '	YES WHEN AN INSPECTION <b>DOES NOT</b> GENEF 'ES A SFU OR A SFU IS NOT REQUIRED)	RATE A SFU, SE	LECT NA WHEN	NINSPECTION
	YES NO N/A			QTY	MISCELLANEOUS CHAP		PRICE	AMOUNT
	ICE FOLLOW UP REPORT AT		)					
`	YES NO SFU NUMBER:							
AD	DITIONAL INSPECTOR OR FIT	ΓTER						
1.	2.					OTHER T		
Technician Name		Count		Thank	You - Invoice to Follow	Ins	pection Total	
	I confirm that the above we	ork has I	oeen satis	factori	y completed.	Materi	al Total	
	SEE REVERSE SIDE FOR A	DDITIO	NAL TERI	MS AN	D CONDITIONS	Othe	er Total	
Custome	er		Custome				Tax	
Name			Signatur	е		Tot	al Cost	



#### **WATER BASED FIRE** T

	***************************************
munale	PROTECTION
An EMCOR Company	INSPECTION & TEST REPORT

В	BRANCH PHONE NUMBER: NATIONAL ACCOUNT NUMBER: 1-800-776-7181												
DATE			_										
SITE							CONTAC	СТ					
ADDRES	s						PHONE						
CITY							STATE			ZIP			
This inspe	ction is: Semi-A	nnua	l Q	uarterly	Other_								
1 – OWNE	RS SECTION										YES	N/A	NO
A. Are all f	ire protection system	s in s	service?										
	RAL (Questions A, B			_							YES	N/A	NO
	hydraulic nameplate	-										<u> </u>	
	pt. Connection coupl					-		-		ed?			
	pt. Connection visible					•		-				<b></b>	
	pt. Connection check						· ·			•			
	ses, hose valves & st				le, in good c	ondition, free	from phys	sical dama	ge and no I	eaks?			
3 - CONTROL VALVES (Question A is a tested item)										YES	N/A	NO	
A. Did all electrical supervisory switches actuate supervisory alarms?  4 - WATER SUPPLY (Question A is a tested item) (Main Drain Test one riser per quarter w/ backflow preventer on system)										YES	N/A	NO	
	ssure results at full fl			•					-	on system)	ILO	IN/A	
Riser				i i	Static	Residual	PSI	Alarm	F	lydraulic Info		<u> </u>	
Number	Location	(RIS	er)	Size	Pressure			Time	Design Density	Design Area	PSI @ Base	) G • De	SPM emand
5 - FLOW	ALARMS (Questio	n B is	a inspec	ted item) (	Questions A	& C are tested	d items)				YES	N/A	NO
A. Did wate	erflow through the ins	spect	or's test	or alarm te	est line actua	ite mechanica	al alarms?						
B. Pressur	e switches & vane ty	pe wa	aterflow	witches a	re in good c	ondition, secu	rely attach	hed w/ no	leaks?				
C. Did wat	erflow through the in	spect	ors test o	r alarm lir	ne actuate pi	essure or va	ne type wa	aterflow sw	/itch?				
	M INFORMATION	(Gen	aral ques	tion conce		n components							
Number of	wet systems?		Sizes			Make / Mode	ls						
Number of	dry systems?		Sizes			Make / Mode	ls						
Number of	preaction systems?		Sizes			Make / Mode	ls						
	deluge systems?		Sizes			Make / Mode	ls						
	PREACTION AND D				3 & C are tes	ted items)				1	YES	N/A	NO
A. Is the ai	r pressure and primir	ng wa	ater level	normal?								<u> </u>	
B. Quick o	pening device operat	ed co	orrectly?									<b></b>	
C. Did the	low air pressure alar	m ope	erate dur	ing the tes	st?							<u> </u>	
	anation of "NO" answe n is attached to this fo		/stem def	iciencies,	and/or inspe	ctor recomme	ndations ar	re listed on	SERVICE F	OLLOW UF	°#		_
	ERVICE FOLLOW UP I			•									
with applic	the information on the cable NFPA 25 test and except as noted on a	d insp	ection se	ctions. Al	Il equipment	tested at this	time was le						
Name of	Inspector				Signat	ure			Cei	rtification	#		
understoo	edge that the inspection d that all information , will be forwarded to	conta	ined here	in is provi	ded to the be								5
Name of or Repres	-					S	ignature						
								-	Water Ba	sed Test and	Inspection	n Page 1	of