

Report of Inspection/Test

Annual Wet

June 17, 2011

Property

361 Pearl St
361 Pearl St
Burlington, VT 05401

Owner/Agent

168 Summit St
Burlington, VT 05401

Gene Richards
658-5620

Gene Richards
658-5620

77 Ethan Allen Drive
S. Burlington, VT 05403

Phone: 802-951-5909

800-850-5172

Fax: 802-951-5911

Info@AlpineSprinkler.com



Conducted by: James Harrod

Inspection Ref: F-24214

Signatures

Inspector - Printed	Inspector - Signature	Date	I state that the information on this form is correct at the time and place of my inspection, and that all equipment tested at this time was left in operational condition upon completion of this inspection except as noted.
James Harrod			

Water Based System

- Yes Gauges on wet pipe system in good condition and showing normal water supply pressure?
- Yes Alarm devices free from physical damage?
- Yes Hydraulic nameplate, if provided, securely attached to riser and legible?
- Yes Valve supervisory switches indicate movement?

Backflow Valve

- Yes Relief port on reduced pressure backflow prevention assemblies free of continuous discharge?
- Yes Backflow devices passed backflow test?
- Yes Backflow devices passed full flow test?

Fire Department Connection

- Yes Visible and accessible?
- NA Couplings and swivels not damaged and rotate smoothly?
- NA Plugs or caps in place and undamaged?
- Yes Gaskets in place and in good condition?
- Yes Identification sign(s) in place?
- Yes Check valve is not leaking?
- Yes Automatic drain valve in place and operating properly?
- NA Interior free of obstructions (if caps are not in place) ?
- NA Valve clapper operational over its full range (if caps are not in place) ?

Pipe

- Yes In good condition ?
- Yes Free of mechanical damage and not leaking ?
- Yes No external corrosion ?
- Yes Properly aligned ?
- Yes No external loads ?
- Yes Visible pipe hangers and seismic braces not damaged or loose ?
- NA Was an obstruction investigation conducted and the system flushed ?

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Sprinklers

- Yes Sprinkler wrench with spare sprinklers?
- Yes Proper number and type of spare sprinklers?
- Yes Free of corrosion?
- Yes Free of obstructions to spray patterns?
- Yes Free of foreign materials including paint?
- Yes Free of physical damage?
- Yes Are all sprinklers in service dated 1920 or later?
- Yes Fast Response sprinklers in service for less than 20 years? If "no" test sample now and every 10 years.
- NA Standard sprinklers less than 50 years old ? If no test sample now and every 10 years.
- NA If sprinklers have been replaced, were they proper replacements?
- NA Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?

Alarm Valve

- Yes Gauges show normal supply water pressure?
- NA Free from physical damage?
- NA Trim valves in correct (open or closed) position?
- NA No leakage from retarding chamber or drains?

Flow Test

System	Connection Flowed	Outlet Size	Pressure (psi)			Alarms Actuate	Waterflow devices pass test	Results comparable to prior test
			Static	Resid	Static			
Basement	Main drain	1	40	35	40	Yes	Yes	Yes

Valve Inspection List

Description	# of Valves	Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stem Lubricated
Control Valve Chart/Insp/Maint	2	Butterfly	1	Supervised	Yes	Yes	Yes	Yes	NA

Backflow Prevention Assembly Test and Maintenance Report

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Water Company

Property Access

Gene Richards
658-5620

Owner/Agent Contact

Gene Richards
658-5620

Alarm Company		Phone	Reference NA	Date/Time Off NA	Date/Time On NA
Location of Assembly			Service Type-Class-Use	Meter/Acct #	
Device Manufacturer Watts	Model 007M2Qt	Size 1-1/2"	Type DC	Serial No. A12156	Date of Install UNKNOWN
Gauge Manufacturer	Model	Type	Purchase Date	Serial No.	New Install ? No
				Date Calibrated	Next Date Due

	CHECK VALVE #1	CHECK VALVE #2	DIFFERENTIAL PRESSURE RELIEF VALVE	PRESSURE VACUUM BREAKER
INITIAL TEST	<input type="checkbox"/> Leaked <input checked="" type="checkbox"/> Closed tight Pressure drop across check valve 2.1 psi	<input type="checkbox"/> Leaked <input checked="" type="checkbox"/> Closed tight Pressure drop across check valve 2.0 psi	<input type="checkbox"/> Did not open Opened at: _____ psi	<input type="checkbox"/> Did not open Air inlet opened: _____ psi <input type="checkbox"/> Leaked Check held at: _____ psi
REPAIRS	<input checked="" type="checkbox"/> Cleaned <input checked="" type="checkbox"/> REPLACED <input checked="" type="checkbox"/> CV Assembly OR <input checked="" type="checkbox"/> Rubber Kit <input checked="" type="checkbox"/> Disc <input checked="" type="checkbox"/> O-Ring <input checked="" type="checkbox"/> Seat <input checked="" type="checkbox"/> Spring <input checked="" type="checkbox"/> Retainer <input checked="" type="checkbox"/> Stem/Guide <input checked="" type="checkbox"/> Locknuts <input type="checkbox"/> Other	<input checked="" type="checkbox"/> Cleaned <input checked="" type="checkbox"/> REPLACED <input checked="" type="checkbox"/> CV Assembly OR <input checked="" type="checkbox"/> Rubber Kit <input checked="" type="checkbox"/> Disc <input checked="" type="checkbox"/> O-Ring <input checked="" type="checkbox"/> Seat <input checked="" type="checkbox"/> Spring <input checked="" type="checkbox"/> Retainer <input checked="" type="checkbox"/> Stem/Guide <input checked="" type="checkbox"/> Locknuts <input checked="" type="checkbox"/> Other NA	<input type="checkbox"/> Cleaned <input checked="" type="checkbox"/> REPLACED <input type="checkbox"/> RV Assembly OR <input type="checkbox"/> Rubber Kit Disc <input type="checkbox"/> Diaphragm Seat <input type="checkbox"/> Spring Guide <input type="checkbox"/> O-Ring <input type="checkbox"/> Other	<input type="checkbox"/> Cleaned <input checked="" type="checkbox"/> REPLACED <input type="checkbox"/> Air Inlet Disc <input type="checkbox"/> Air Inlet Spring <input type="checkbox"/> Diaphragm <input type="checkbox"/> CV Disc <input type="checkbox"/> Spring <input type="checkbox"/> Guide <input type="checkbox"/> Retainer <input type="checkbox"/> O-Ring <input type="checkbox"/> Other
FINAL TEST	<input checked="" type="checkbox"/> Closed Tight Pressure drop across check valve 2.1 psi	<input checked="" type="checkbox"/> Closed Tight Pressure drop across check valve 2.0 psi	Opened at: _____ psi	<input type="checkbox"/> Satisfactory

RESULTS OF TEST: Pass Fail CONTROL VALVE #2: Tight Leaked LINE PRESSURE: **50**psi

Witness to Assembly Test (Print) _____ Witness to Assembly Test Signature _____ Date _____ I ACKNOWLEDGE THE CONTROL VALVES HAVE BEEN LEFT IN THE OPEN POSITION

APPROVALS

I CERTIFY THAT THIS DATA IS ACCURATE AND REFLECTS THE PROPER OPERATION AND MAINTENANCE OF THE ASSEMBLY

	Certified Tester (Print)	Certified Tester Signature	Date	Certified Tester #	Exp. Date
INITIAL TEST		<i>Debra J...</i>			
FINAL TEST		<i>Debra J...</i>			