

Report of Inspection / Test

Annual NFPA 25

INDUSTRIAL-COMMERCIAL



2023-09-06

Property

Allentown Elementary School
KH

10330 Howells Ferry Road
Semmes AL 36575

Mario Morrisette

Print Date: 2023-09-07

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc
MS-14326-SC AL-3693 LA-F1173 FL-873651-
0001-2007

1209C Highway 613 South
Lucaledale MS 39452

IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Is the clapper and automatic drain valve in place and properly operating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
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SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

VALVE AREA

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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
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ALARMS

Is the alarm valve free from physical damage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

MAINTENANCE

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<p>Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>If sprinklers have been replaced, were they proper replacements?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If conditions were found that required flushing, was flushing of the system conducted?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Was a drain test conducted after opening any closed valve?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Operating stem of all OS&Y valves lubricated, completely closed and reopened?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?</p>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

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Report of Inspection / Test for Asset - Fire Hydrant #1

Fire Hydrant Information

Hydrant ID	#1
Description	American Darling 5-1/4" B84B
Location	Front of Gym

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

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Hydrant Flow Test

Static Pressure	105	Residual Pressure	N/A
Pitot Pressure	40	Orifice Size	2.5
Orifice Coefficient	.77	Flow	816.2

Static Hydrant

Static Pressure	105	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	577.5
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Report of Inspection / Test for Asset - Fire Hydrant #2

Fire Hydrant Information

Hydrant ID	#2
Description	American Darling 5-1/4" B84B
Location	Behind Cafeteria

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	105	Residual Pressure	N/A
Pitot Pressure	40	Orifice Size	2.5
Orifice Coefficient	.77	Flow	816.2

Static Hydrant

Static Pressure	105	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	577.5
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MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
System #1 Wet	125	65	105	3	Yes	Yes
System #2 Wet	125	65	105	3	Yes	Yes

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
System #1 Wet	Block #1	Test & drain Manifold	90	Yes	Yes	Yes	Yes	Yes
System #2 Wet	System #2	Test & drain Manifold	13	Yes	Yes	Yes	Yes	Yes

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VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
System #1 Wet	Control Valve	E. Interior Mech Rm. #212	Butterfly	4 "	Monitored And Locked	Yes	Yes	Yes	Yes	Yes	12.5
System #2 Wet	Control Valve	E. Interior Mech Rm. #212	Butterfly	4 "	Monitored And Locked	Yes	Yes	Yes	Yes	Yes	12.5
System #1 Wet	Delete	Delete	OS&Y	6 "	Locked	N/A	N/A	N/A	N/A	N/A	

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
System #1 Wet	2" Main Drain	E. Interior Mech Rm. #212	Ball Valve	Yes	Yes
System #2 Wet	2" Main Drain	E. Interior Mech Rm. #212	Ball Valve	Yes	Yes

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FIRE PROTECTION, INC.

Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
System #1	E. Interior Mech Rm. #212	1	Potter	Water Flow Switch			Pass
System #2	E. Interior Mech Rm. #212	1	Potter	Water Flow Switch			Pass
	Delete	1		Butterfly Tamper Switch			
	Delete	1		Butterfly Tamper Switch			
	Outside E. Interior Mech Rm. #212	1	FDC	Fire Department Connection			Pass

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Deficiencies - General Questions

Deficiency #1

Are visible sprinklers free of corrosion and physical damage?: No

Notes: Corroded / greased heads in kitchen

Deficiency #1 - Photo #1



Date Taken: September 06, 2023

Deficiency #2

Are visible sprinklers free of foreign materials including paint?: No

Notes: Dusty head in office

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Deficiency #2 - Photo #1



Date Taken: September 06, 2023

Deficiency #3

**Fast response sprinklers 20 or more years old replaced or successfully
sample tested within last 10 years?: No**

Notes: Central model 804A 1996 - still in use through kitchen

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Deficiency #3 - Photo #1



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Deficiency #3 - Photo #2



Date Taken: September 06, 2023

Deficiency #4

Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?: No

Notes: 30 greased chrome pendent heads

Report of Inspection / Test

Annual NFPA 25

INDUSTRIAL-COMMERCIAL



FIRE PROTECTION, INC.

2023-09-06

Property

Allentown Elementary School
KH

10330 Howells Ferry Road
Semmes AL 36575

Mario Morrisette

Print Date: 2023-09-07

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc
MS-14326-SC AL-3693 LA-F1173 FL-873651-
0001-2007

1209C Highway 613 South
Luedale MS 39452

Deficiency #4 - Photo #1



Date Taken: September 06, 2023

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Deficiency #4 - Photo #2



Date Taken: September 06, 2023

Deficiency #5

Are all escutcheon plates installed on sprinkler heads?: No

Notes: Missing Esc in kitchen

Deficiencies - General Wet System Questions

None

Deficiencies - System #1 Wet

None

Deficiencies - System #2 Wet

None

Deficiencies - Fire Hydrant #1

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Deficiency #6

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - Fire Hydrant #2

None

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

None

Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

None

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

None

Deficiencies - Inspectors Test Connection

None

Deficiencies - Valves

None

Deficiencies - Drain Valves

None

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Inspector Signature

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

Inspector Name

Bora Yann
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
153252

Signature

A handwritten signature in black ink, appearing to be 'Bora Yann', written in a cursive style.

Date Completed

2023-09-06

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2023-06-05

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Anna Booth Elementary School
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17001 Hurricane Boulevard
Irvington AL 36544

Mario Morrisette

Print Date: 2023-06-05

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
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IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Is the clapper and automatic drain valve in place and properly operating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
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SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

VALVE AREA

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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
---	---	---	---

ALARMS

Is the alarm valve free from physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

MAINTENANCE

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<p>Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>If sprinklers have been replaced, were they proper replacements?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If conditions were found that required flushing, was flushing of the system conducted?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Was a drain test conducted after opening any closed valve?</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
<p>Operating stem of all OS&Y valves lubricated, completely closed and reopened?</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<p>Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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FIRE PROTECTION, INC.

Report of Inspection / Test for Asset - South east side of school fire hydrant

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

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Static Hydrant

Static Pressure

N/A

Residual Pressure

N/A

Final Hydrant Flow Test

Flow at 20 psi residual pressure:

N/A

Total Flow

N/A

Report of Inspection / Test for Asset - South west side of school fire hydrant

Fire Hydrant Information

Description

CLOW

Location

SW parking lot

Static Hydrant Description

Red Hydrant

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flow acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Front middle of school (west side) fire hydrant

Fire Hydrant Information

Description	CLOW
Location	Front of office
Static Hydrant Description	Red hydrant

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - North west side of school fire hydrant

Fire Hydrant Information

Description	CLOW
Location	NW parking lot
Static Hydrant Description	Red Hydrant

QUESTIONS

Report of Inspection / Test

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2023-06-05

Property

Anna Booth Elementary School
KH

17001 Hurricane Boulevard
Irvington AL 36544

Mario Morrisette

Print Date: 2023-06-05

Conducted by: Bora Yann
NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

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Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:

N/A

Total Flow

N/A

Report of Inspection / Test for Asset - North east side of school fire hydrant

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flow acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure

N/A

Residual Pressure

N/A

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Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Electric Fire Pump

Fire Pump Information

Property Owner	MCPSS
Property Name	Anna Booth Elementary School
Property Address	17001 Hurricane Blvd
Demand(s) of Fire protection systems supplied by pump:	Sprinkler System
Pump (Horizontal or Vertical):	Vertical
Pump Manufacturer	Patterson
Shop/Serial Number	FP-C055841
Model	4x3 VIP
Rated GPM	250
Rated Pressure	105
Rated 150 Pressure	101
Rated 0 Pressure	113
Rated RPM	3555
Suction	City
If Tank, size and height	N/A
Driver, (electric or diesel engine)	Electric
Engine Manufacturer	WEG
Engine Model	030360S3E284JPV
Rated Horsepower	30
Rated Speed	3540

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Rated Voltage	208/230
Operating Voltage	208/230
Rated Amps	74.3 / 37.2
Phase Cycles	3
Service Factor	1.15
Controller Manufacturer	Eaton Cutler Hammer
Controller Shop/Serial Number	16E9597E
Controller Model	F20-30D-LT-F-T-P
Jockey Pump Manufacturer	Baldor
Jockey Pump Model	84Z04005
Jockey Pump Serial Number	F0601304566
Jockey Controller Manufacturer	Eaton Cutler Hammer
Jockey Controller Model	FDJP-1D
Jockey Controller Serial Number	16E9597J
Transfer Switch Manufacturer	N/A
Transfer Switch Model	N/A
Transfer Switch Serial Number	N/A

OWNER SECTION

Is there a Jockey Pump on system?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Jockey Settings? (on/off)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the fire pump in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the pump remained in service since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

CONTROLLER TEST

Did the pump start at least 6 times from automatic sources?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Was each automatic starting feature tested at least once?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
For electric driven pump controllers: on a simulation of a power failure, while pump is under peak load, did the transfer switch transfer from the normal to emergency source without opening overcurrent protection devices on either line?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	For electric driven pump controllers: when normal power was restored, did retransfer from emergency to normal power occur without overcurrent protection devices opening on either line?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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For electric driven pump controllers: were at least half of the automatic and manual starts required performed with the pump connected to the alternate source?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Were all signal conditions simulated demonstrating workable operation?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
---	---	--	---

INSPECTION

Pump house/room proper temperature?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Ventilating louvers free to operate?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are suction, discharge and bypass valves open?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Piping free from leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Suction and system pressure gauges normal?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Suction reservoir, if provided, full?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Wet pit suction screens are clean and in place?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Waterflow test valves in closed position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Controller indicating power on?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Transfer switch indicating normal situation?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Isolation switch closed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Pump in correct phase?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Oil level in motor sight glass in correct range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Circulation relief valve flowing water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Pressure relief valves operating with proper pressure downstream while pump is operational?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

TESTING

Electric pump started automatically?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Electric motor driven pump ran for 10 min?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Packing gland showing slight discharge? (Adjust if necessary)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Packing boxes, bearing and pump casing free from overheating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Time for engine motor to reach full speed:	3	For automatic stop controllers, record time pump runs after starting:	3
Electric motor driven pumps with reduced voltage or reduced current starting, record the time the controller is in the 1st step:	N/A	Are all above times and pressures and results acceptable?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Circulation and pressure relief valves operated properly during all flow tests?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	No alarm indicators or other visible abnormalities observed during no-flow test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Were Suction screens cleaned after flow?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Automatic transfer switch test: Power failure simulated during peak flow?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Automatic transfer switch test: Connection made to alternate source?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Automatic transfer switch test: After termination of simulated power failure did motor reconnect to source?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
All alarm conditions simulated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All alarms operated?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

MAINTENANCE

Fuel tank level, tank float switch, and solenoid valve operation acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Flexible hoses and connectors in fuel and coolant systems acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Oil Level and lube oil heater acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Coolant level acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Water pump for coolant system operating?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Jacket water heater for coolant system okay?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Exhaust system free of leakage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Drain condensate trap on exhaust system operational?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Connections to electrical system acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Cranking voltage acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Isolation switch and circuit breaker exercised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Battery case clean, dry and free of corrosion?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Charger and charge rate passed inspection and battery charge being equalized?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Do Circuit breakers appear clean?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Cleaned or replaced crank case breather in lubrication systems?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Cleaned water strainer in coolant system?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Battery terminals clean and tight?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Electrical systems free of wire chafing?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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Manual starting means on electrical systems operated and boxes, panels and cabinets cleaned?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Antifreeze tested in coolant system?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Flexible exhaust section acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Changed pump bearing lubrication?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Shaft end play acceptable?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Pressure gauges and sensors accurate?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Coupling alignment acceptable?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Transmission coupling, right angle gear drive and mechanical moving parts lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Circuit breakers passed trip test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Emergency manual starting means operated without power?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Electrical connections secure?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the volt meter and ammeter accurate?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Pressure switch settings calibrated?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Motor bearing greased?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Fuel tank free of water and foreign material?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Fuel tank vents and overflow pipes free of obstructions?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Fuel piping acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Antifreeze changed in coolant system?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Heater exchange cleaned out?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Ducts and louvers for combustion air okay?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Exhaust system hanged in supports acceptable and system free of back pressure?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Control and power wiring tight?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
No corrosion on circuit boards?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	No cracked cable wire insulation?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
No leaks in plumbing parts?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	No sign or water on electrical parts?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

FLOW TEST

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Run the pump at no-load, rated load and peak load (usually 150% of the rated load) conditions. For variable speed drivers, run the test with pressure limiting control "on" at 25, 50, 75, 100, 125, and 150% of rated load and then again rated speed w/ the pump isolated from the fire protection system and the relief valve closed.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Was equipment and gauges calibrated?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Date of last calibration	01/31/23	For electric motors operating at the rated voltage and frequency, is the ampere demand on each phase less than or equal to the product of the full load ampere rating times the allowable service factor as stamped on the motor nameplate?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
For electric motors operating under varying voltage, was the product of the actual voltage and current demand on each phase less than or equal to the product of the rated full load current times the rated voltage times the allowable service factor?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	For electric motors operating under varying voltage, did the voltage stay within the range of 95% to 110% of the rated voltage during the test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Did engine-drive unit show no signs of overload or stress?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Was the governor set to properly regulate the engine speed at rated pump speed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Did the gear drive assembly operate without excessive objectionable noise, vibration, or heating?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Was the unit started and brought up to rated speed without interruption under discharge conditions equal to peak load?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Did the pump perform equal to the manufacturer's curve within the accuracy limits of the test equipment?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the unadjusted performance discharge curve meet or exceed the fire protection system demands?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Were there no vibrations that could damage any fire pump component?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the pump perform at all conditions without objectionable overheating of any component?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have electric motor pumps pass the phase reversal test on normal and alternate (if provided) power?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	For vertical turbine pumps taking the suction from wells, is the water level capable of being recorded?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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PERFORMANCE

Rated %	Driver speed: RPM	Total Flow	Net Pressure: PSI	Discharge Pressure: PSI	Suction Pressure: PSI
0%	N/A	Churn Only / No Flow	118.0	162.0	44.0
100%	N/A	257	113.0	155.0	42.0
150%	N/A	386.5	109.0	146.0	37.0
Roof Shot	N/A	N/A	0.0	0.0	0.0

ELECTRIC MOTOR

	L1 Voltage	L1 Amperes	L2 Voltage	L2 Amperes	L3 Voltage	L3 Amperes
0%	N/A	N/A	N/A	N/A	N/A	N/A
100%	N/A	N/A	N/A	N/A	N/A	N/A
150%	N/A	N/A	N/A	N/A	N/A	N/A
Roof Shot	N/A	N/A	N/A	N/A	N/A	N/A

Pump Flow Detail

Coefficient (same for all): .97

Nozzle/Orifice Size: 1.75 (inches)

	PITOT					
	1	2	3	4	5	6
0%	N/A	N/A	N/A	N/A	N/A	N/A
100%	6.7	N/A	N/A	N/A	N/A	N/A
150%	14.9	N/A	N/A	N/A	N/A	N/A
Roof Shot	N/A	N/A	N/A	N/A	N/A	N/A

	FLOW					
0%	Churn Only / No Flow	Churn Only / No Flow	Churn Only / No Flow	Churn Only / No Flow	Churn Only / No Flow	Churn Only / No Flow
100%	257	N/A	N/A	N/A	N/A	N/A
150%	386.5	N/A	N/A	N/A	N/A	N/A
Roof Shot	N/A	N/A	N/A	N/A	N/A	N/A

Report of Inspection / Test

Annual NFPA 25

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Property

Anna Booth Elementary School
KH

17001 Hurricane Boulevard
Irvington AL 36544

Mario Morrisette

Print Date: 2023-06-05

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

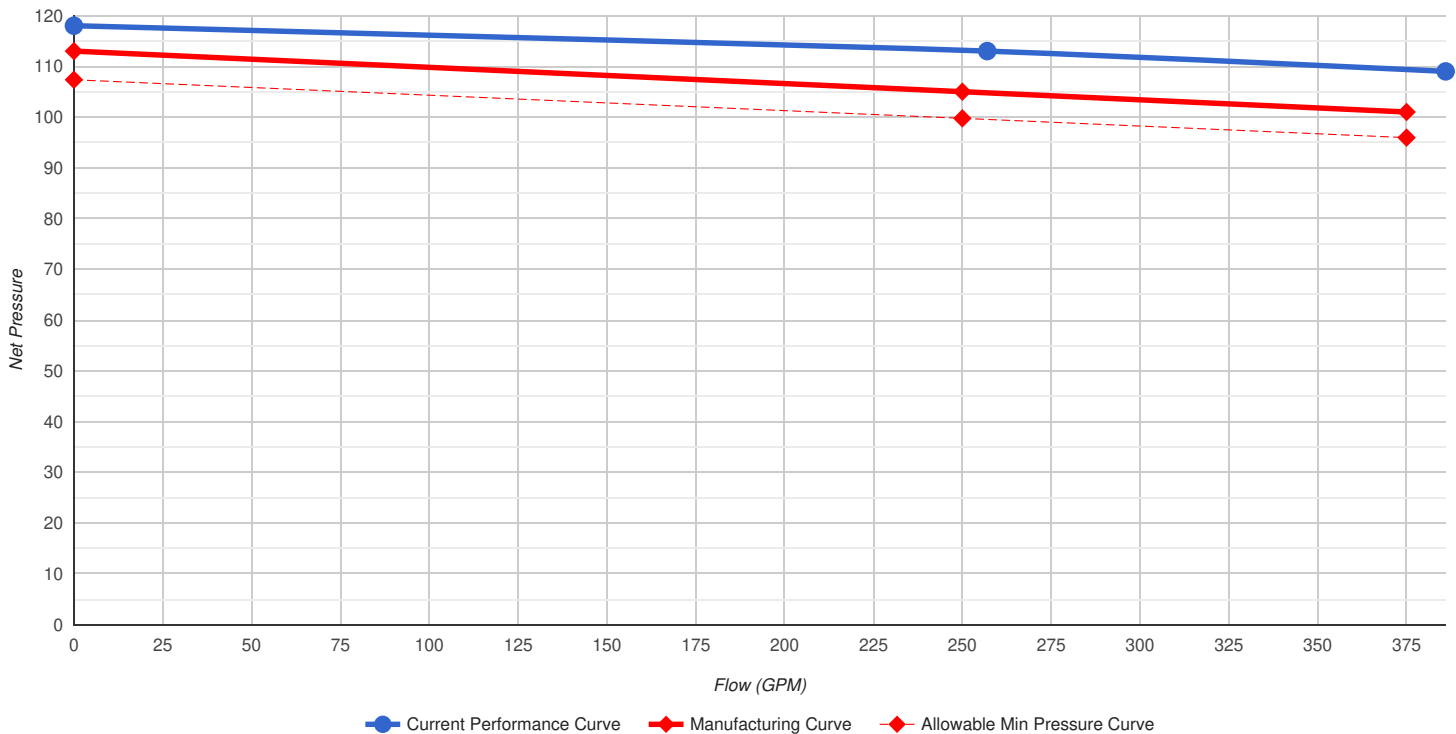
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MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
School Wet	150	155	175	.1	Yes	Yes
Gym Wet	105	155	175	.1	Yes	Yes

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
School Wet	Riser	1" ITV	1:00	Yes	Yes	Yes	Yes	Yes
Gym Wet	P.E Office	1" ITV	1:08	Yes	Yes	Yes	Yes	Yes

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
School Wet	Muller control valve	S/E corner Riser Room	OS&Y	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	12
Gym Wet	Much control valve	S/E corner Riser Room	OS&Y	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	12
School Wet	Tyco alarm valve	S/E corner Riser Room	Alarm Valve	4 "	Not Applicable	Yes	Yes	N/A	N/A	N/A	
Gym Wet	Tyco Alarm valve	S/E corner Riser Room	Alarm Valve	4 "	Not Applicable	Yes	Yes	N/A	N/A	N/A	
	Muller	Backflow	OS&Y	6 "	Locked	Yes	Yes	N/A	N/A	N/A	
	Muller	Backflow	OS&Y	6 "	Locked	Yes	Yes	N/A	N/A	N/A	

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
School Wet	1-1/4" main Drain	Riser room	Globe Valve	Yes	Yes
Gym Wet	1-1/4" main Drain	Riser Room	Globe Valve	Yes	Yes

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Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
School System #1	Riser Room	1	System Sensor	Water Flow Switch			Pass
Gym System #2	Riser Room	1	Potter	Water Flow Switch			Pass
School System #1	Rear Riser room	1	Potter	Os&Y Tamper Switch			Pass
Gym System #2	Rear Riser Room	1	Potter	Os&Y Tamper Switch			Pass
	Behind Cafeteria	1	FDC	Fire Department Connection			Pass
Behind school	Rear Riser Room	1	Central	Mechanical Water Motor Bell			Pass

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ICFP

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Visit Photos

Systems tagged green



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Deficiencies - General Questions

Deficiency #1

Is the information sign attached and legible?: No

Notes:

Deficiencies - General Wet System Questions

None

Deficiencies - School Wet

None

Deficiencies - Gym Wet

None

Deficiencies - South east side of school fire hydrant

Deficiency #2

Is the hydrant properly painted and is the paint in good condition?: No

Notes:

Deficiency #3

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - South west side of school fire hydrant

Deficiency #4

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - Front middle of school (west side) fire hydrant

Deficiency #5

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - North west side of school fire hydrant

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Deficiency #6

Is the hydrant properly painted and is the paint in good condition?: No

Notes:

Deficiency #7

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - North east side of school fire hydrant

Deficiency #8

Is Exposed piping properly secured and free from leaks or physical damage?:

No

Notes: Leaking at the bottom hydrant flange

Deficiency #8 - Photo #1



Date Taken: June 05, 2023

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Deficiency #9

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - Electric Fire Pump

None

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

None

Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

None

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

None

Deficiencies - Inspectors Test Connection

None

Deficiencies - Valves

None

Deficiencies - Drain Valves

None

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Inspector Signature

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

Inspector Name

Bora Yann
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
153252

Signature

A handwritten signature in black ink, appearing to be 'Bora Yann', written in a cursive style.

Date Completed

2023-06-05

Inspector Signature

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

Inspector Name

Bora Yann
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
153252

Signature

A handwritten signature in black ink, appearing to be 'Bora Yann', written in a cursive style.

Date Completed

2023-02-22

Report of Inspection / Test

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2023-02-22

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IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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FIRE PROTECTION, INC.

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Is the clapper and automatic drain valve in place and properly operating?

Yes
 No
 NA

Is the FDC identification sign(s) in place?

Yes
 No
 NA

SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?

Yes
 No
 NA

Are visible sprinklers in the proper position: upright, pendent, sidewall?

Yes
 No
 NA

Are visible sprinklers free of corrosion and physical damage?

Yes
 No
 NA

Is there proper clearance below the sprinklers?

Yes
 No
 NA

Are visible sprinklers free of foreign materials including paint?

Yes
 No
 NA

Is there liquid in all visible glass bulb sprinklers?

Yes
 No
 NA

Are there spare sprinklers and a sprinkler wrench?

Yes
 No
 NA

Is the information sign attached and legible?

Yes
 No
 NA

Are all the sprinklers dated 1920 or later?

Yes
 No
 NA

Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?

Yes
 No
 NA

Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?

Yes
 No
 NA

Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?

Yes
 No
 NA

Dry-type sprinklers replaced or successfully sample tested within last 10 years?

Yes
 No
 NA

Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?

Yes
 No
 NA

Is the building fully protected by sprinklers?

Yes
 No
 NA

PIPES

Is the visible pipe in good condition with no external corrosion?

Yes
 No
 NA

Does visible pipe have no mechanical damage or leaks?

Yes
 No
 NA

Does visible pipe have no external loads?

Yes
 No
 NA

Are visible pipe hangers and seismic braces not damaged or loose?

Yes
 No
 NA

Is the pipe through freezers free if any ice blockage?

Yes
 No
 NA

Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)

Yes
 No
 NA

VALVE AREA

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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
---	---	---	---

ALARMS

Is the alarm valve free from physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

MAINTENANCE

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<p>Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>If sprinklers have been replaced, were they proper replacements?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If conditions were found that required flushing, was flushing of the system conducted?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Was a drain test conducted after opening any closed valve?</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
<p>Operating stem of all OS&Y valves lubricated, completely closed and reopened?</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<p>Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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FIRE PROTECTION, INC.

Report of Inspection / Test for Asset - South east side of school fire hydrant

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

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Luedale MS 39452

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FIRE PROTECTION, INC.

Static Hydrant

Static Pressure

N/A

Residual Pressure

N/A

Final Hydrant Flow Test

Flow at 20 psi residual pressure:

N/A

Total Flow

N/A

Report of Inspection / Test for Asset - South west side of school fire hydrant

Fire Hydrant Information

Description

CLOW

Location

SW parking lot

Static Hydrant Description

Red Hydrant

QUESTIONS

Is there a hydrant wrench that is available and accessible?

Yes
 No
 NA

Is the hydrant free from cracks or leaks at outlets and on the top?

Yes
 No
 NA

Are pumper and nozzle caps tight?

Yes
 No
 NA

Is the hydrant properly painted and is the paint in good condition?

Yes
 No
 NA

Does the operating nut turn with no difficulty?

Yes
 No
 NA

Did the hydrant flow until clear (minimum of 1 minute)?

Yes
 No
 NA

Are all dry barrels which require pumping identified?

Yes
 No
 NA

Does the hydrant completely shut off?

Yes
 No
 NA

Have the strainers been cleaned (if possible)?

Yes
 No
 NA

Did monitor nozzle flow acceptable water?

Yes
 No
 NA

Have backflow devices, if installed, passed full flow test?

Yes
 No
 NA

Is there no ice or water in the barrel?

Yes
 No
 NA

Are hydrant caps, stems, outlets, and threads lubricated and in good condition?

Yes
 No
 NA

Is Exposed piping properly secured and free from leaks or physical damage?

Yes
 No
 NA

Is the Operating nut not worn, twisted or broken?

Yes
 No
 NA

Is the Road box and shutoff valve visible and accessible?

Yes
 No
 NA

Have dry barrels drained in at least 1 hour?

Yes
 No
 NA

Have control valves been operated through complete range??

Yes
 No
 NA

Report of Inspection / Test

Annual NFPA 25

INDUSTRIAL-COMMERCIAL



2023-02-22

Property

Anna Booth Elementary School
KH

17001 Hurricane Boulevard
Irvington AL 36544

Mario Morrisette

Print Date: 2023-02-22

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc
MS-14326-SC AL-3693 LA-F1173 FL-873651-
0001-2007

1209C Highway 613 South
Lucaledale MS 39452

Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Front middle of school (west side) fire hydrant

Fire Hydrant Information

Description	CLOW
Location	Front of office
Static Hydrant Description	Red hydrant

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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INDUSTRIAL-COMMERCIAL



2023-02-22

Property

Anna Booth Elementary School
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17001 Hurricane Boulevard
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Water-Based Systems # 153252

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Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - North west side of school fire hydrant

Fire Hydrant Information

Description	CLOW
Location	NW parking lot
Static Hydrant Description	Red Hydrant

QUESTIONS

Report of Inspection / Test

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INDUSTRIAL-COMMERCIAL



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Anna Booth Elementary School
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Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Report of Inspection / Test

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INDUSTRIAL-COMMERCIAL



2023-02-22

Property

Anna Booth Elementary School
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:

N/A

Total Flow

N/A

Report of Inspection / Test for Asset - North east side of school fire hydrant

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure

N/A

Residual Pressure

N/A

Report of Inspection / Test

Annual NFPA 25

INDUSTRIAL-COMMERCIAL



2023-02-22

Property

Anna Booth Elementary School
KH

17001 Hurricane Boulevard
Irvington AL 36544

Mario Morrisette

Print Date: 2023-02-22

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc
MS-14326-SC AL-3693 LA-F1173 FL-873651-
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Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
System# 1	150	155	175	.1	Yes	Yes
Gym System	105	155	175	.1	Yes	Yes

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
System# 1	Riser	1" ITV	1:00	Yes	Yes	Yes	Yes	Yes
Gym System	P.E Office	1" ITV	1:08	Yes	Yes	Yes	Yes	Yes

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
System# 1	Muller control valve	S/E corner Riser Room	OS&Y	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	12
Gym System	Much control valve	S/E corner Riser Room	OS&Y	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	12
System# 1	Tyco alarm valve	S/E corner Riser Room	Alarm Valve	4 "	Not Applicable	Yes	Yes	N/A	N/A	N/A	
Gym System	Tyco Alarm valve	S/E corner Riser Room	Alarm Valve	4 "	Not Applicable	Yes	Yes	N/A	N/A	N/A	
	Muller	Backflow	OS&Y	6 "	Locked	Yes	Yes	N/A	N/A	N/A	
	Muller	Backflow	OS&Y	6 "	Locked	Yes	Yes	N/A	N/A	N/A	

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
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Report of Inspection / Test

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Anna Booth Elementary School
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Mario Morrisette

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System# 1	1-1/4" main Drain	Riser room	Globe Valve	Yes	Yes
Gym System	1-1/4" main Drain	Riser Room	Globe Valve	Yes	Yes

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Property

Anna Booth Elementary School
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Mario Morrisette

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Water-Based Systems # 153252

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0001-2007

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INDUSTRIAL-COMMERCIAL



FIRE PROTECTION, INC.

Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
School System #1	Riser Room	1	System Sensor	Water Flow Switch			Pass
Gym System #2	Riser Room	1	Potter	Water Flow Switch			Pass
School System #1	Rear Riser room	1	Potter	Os&Y Tamper Switch			Pass
Gym System #2	Rear Riser Room	1	Potter	Os&Y Tamper Switch			Pass
	Behind Cafeteria	1	FDC	Fire Department Connection			Pass
Behind school	Rear Riser Room	1	Central	Mechanical Water Motor Bell			Pass

Report of Inspection / Test

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Water-Based Systems # 153252

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Luedale MS 39452

INDUSTRIAL-COMMERCIAL

ICFP

FIRE PROTECTION, INC.

Visit Photos

Systems tagged green



Report of Inspection / Test

Annual NFPA 25

INDUSTRIAL-COMMERCIAL



2023-02-22

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KH

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0001-2007

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Luedale MS 39452

Deficiencies - General Questions

Deficiency #1

Is the information sign attached and legible?: No

Notes:

Deficiencies - General Wet System Questions

None

Deficiencies - System# 1

None

Deficiencies - Gym System

None

Deficiencies - South east side of school fire hydrant

Deficiency #2

Is the hydrant properly painted and is the paint in good condition?: No

Notes:

Deficiency #3

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - South west side of school fire hydrant

Deficiency #4

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - Front middle of school (west side) fire hydrant

Deficiency #5

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - North west side of school fire hydrant

Report of Inspection / Test

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2023-02-22

Property

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Deficiency #6

Is the hydrant properly painted and is the paint in good condition?: No

Notes:

Deficiency #7

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - North east side of school fire hydrant

Deficiency #8

Is Exposed piping properly secured and free from leaks or physical damage?:

No

Notes: Leaking at the bottom hydrant flange

Deficiency #8 - Photo #1



Date Taken: February 22, 2023

Report of Inspection / Test

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INDUSTRIAL-COMMERCIAL



2023-02-22

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Anna Booth Elementary School
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Lucedale MS 39452

Deficiency #9

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

None

Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

None

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

None

Deficiencies - Inspectors Test Connection

None

Deficiencies - Valves

None

Deficiencies - Drain Valves

None

Report of Inspection / Test

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INDUSTRIAL-COMMERCIAL



2023-02-22

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Anna Booth Elementary School
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Mario Morrisette

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NICET LEVEL II - Inspection & Testing of
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1209C Highway 613 South
Luedale MS 39452

Inspector Signature

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

Inspector Name

Bora Yann
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
153252

Signature

A handwritten signature in black ink, appearing to be 'Bora Yann', written in a cursive style.

Date Completed

2023-02-22

Report of Inspection / Test

Annual NFPA 25

INDUSTRIAL-COMMERCIAL



FIRE PROTECTION, INC.

2023-09-11

Property

Augusta Evans Special School
KH

6301 Bilox Avenue

Mobile AL 36608

Mario Morrisette

Print Date: 2023-09-12

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc

MS-14326-SC AL-3693 LA-F1173 FL-873651-

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1209C Highway 613 South

Luedale MS 39452

IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

Report of Inspection / Test

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2023-09-11

Property

Augusta Evans Special School
KH

6301 Biloxi Avenue

Mobile AL 36608

Mario Morrisette

Print Date: 2023-09-12

Conducted by: Bora Yann

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FIRE PROTECTION, INC.

Is the clapper and automatic drain valve in place and properly operating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
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SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

VALVE AREA

Report of Inspection / Test

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2023-09-11

Property

Augusta Evans Special School
KH

6301 Bilcox Avenue

Mobile AL 36608

Mario Morrisette

Print Date: 2023-09-12

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc

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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

DRY VALVE

Are enclosures around valves maintaining a minimum of 40 degrees F?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the gauges on systems without low pressure alarms in good condition and showing normal air and water pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
For freezer systems, gauge near compressor reading the same as gauge near the dry-pipe valve?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are they free from physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are trim valves in appropriate (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there no leakage in the intermediate chamber?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on systems with low pressure alarms in good condition and showing normal air and water pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the dry-pipe valve passed inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the priming level correct and has the low air pressure signal passed it's test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the quick opening device passed the test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
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ALARMS

Is the alarm valve free from physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have low temperature alarms passed test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

MAINTENANCE

Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
If sprinklers have been replaced, were they proper replacements?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	If conditions were found that required flushing, was flushing of the system conducted?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Was a drain test conducted after opening any closed valve?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Operating stem of all OS&Y valves lubricated, completely closed and reopened?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are dry-pipe systems kept in dry condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have auxiliary drains been emptied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks, a 50% increase in time from the original system acceptance test required for water to reach the inspector's test connection during a full flow test

- Yes
- No
- NA

Is interior of dry-pipe valves cleaned?

- Yes
- No
- NA

Have low points been drained before freezing weather?

- Yes
- No
- NA

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Report of Inspection / Test for System - Building A - Dry System

DRY VALVE

Have automatic air maintenance devices passed test? Yes
 No
 NA

DRY VALVE TRIP TEST

Dry Valve	Size: 4	Year of Mfr.: 2012	Accelerator	Year of Mfr.: N/A		
Make	Model	Serial no.	Make	Model	Serial no.	
Viking	4"DN -100.	W596069	N/A	N/A	N/A	
	Time to Trip thru test pipe	Water Pressure	Air Pressure	Trip point air pressure	Time water reached test outlet	Alarm Operated
Without Accelerator	N/A	65	25	4	N/A	Yes
With Accelerator	N/A	N/A	N/A	N/A	N/A	N/A

DRY VALVE TRIP TEST (cont)

Were results comparable to previous test? Yes
 No
 NA

Has it passed air leakage test? Yes
 No
 NA

Report of Inspection / Test for System - Building B - Dry System

DRY VALVE

Have automatic air maintenance devices passed test? Yes
 No
 NA

DRY VALVE TRIP TEST

Dry Valve	Size: 4"	Year of Mfr.: 2012	Accelerator	Year of Mfr.: N/A		
Make	Model	Serial no.	Make	Model	Serial no.	
Viking	DN-100	W600041	N/A	N/A	N/A	
	Time to Trip thru test pipe	Water Pressure	Air Pressure	Trip point air pressure	Time water reached test outlet	Alarm Operated
Without Accelerator	N/A	50	27	2	N/A	Yes
With Accelerator	N/A	N/A	N/A	N/A	N/A	N/A

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DRY VALVE TRIP TEST (cont)

Were results comparable to previous test?

Yes

No

NA

Has it passed air leakage test?

Yes

No

NA

Report of Inspection / Test for System - Building C - Dry System

DRY VALVE

Have automatic air maintenance devices passed test?

Yes

No

NA

DRY VALVE TRIP TEST

Dry Valve

Size: 4"

Year of Mfr.: 2012

Accelerator

Year of Mfr.: N/A

Make

Model

Serial no.

Make

Model

Serial no.

Viking

DN-100

W596069

N/A

N/A

N/A

Time to Trip thru test
pipe

Water
Pressure

Air
Pressure

Trip point air
pressure

Time water reached test
outlet

Alarm
Operated

Without
Accelerator

N/A

50

30

4

N/A

Yes

With Accelerator

N/A

N/A

N/A

N/A

N/A

N/A

DRY VALVE TRIP TEST (cont)

Were results comparable to previous test?

Yes

No

NA

Has it passed air leakage test?

Yes

No

NA

Report of Inspection / Test for Asset - Fire Hydrant #1

Fire Hydrant Information

Hydrant ID

#1

Description

M&H 5-1/4"

Location

@ Main Entrance Front of School

QUESTIONS

Is there a hydrant wrench that is available and accessible?

Yes

No

NA

Is the hydrant free from cracks or leaks at outlets and on
the top?

Yes

No

NA

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Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	50	Residual Pressure	N/A
Pitot Pressure	25	Orifice Size	2.5
Orifice Coefficient	1.0	Flow	840

Static Hydrant

Static Pressure	50	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	750
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Report of Inspection / Test for Asset - Fire Hydrant #2

Fire Hydrant Information

Hydrant ID	#2
Description	M&H. 5-1/4"
Location	@ Cafeteria Parking Lot

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

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Hydrant Flow Test

Static Pressure	50	Residual Pressure	N/A
Pitot Pressure	25	Orifice Size	2.5
Orifice Coefficient	1.0	Flow	840

Static Hydrant

Static Pressure	50	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	750
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Report of Inspection / Test for Asset - Fire Hydrant #3

Fire Hydrant Information

Hydrant ID	#3
Description	MH Anniston
Location	North of Basketball Court

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	25	Orifice Size	2.5
Orifice Coefficient	1.0	Flow	840

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	750
-----------------------------------	-----	------------	-----

MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
Building A - Wet System	50	30	55	3	Yes	Yes
Building A - Dry System	55	35	50	3	Yes	Yes
Building B - Wet System	65	40	50	3	Yes	Yes
Building B - Dry System	50	30	50	3	Yes	Yes
Building C - Wet System	70	35	55	3	Yes	Yes
Building C - Dry System	55	31	50	3	Yes	Yes
Building D - Wet System	50	40	50	3	Yes	Yes

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Property

Augusta Evans Special School
KH

6301 Bilox Avenue

Mobile AL 36608

Mario Morrisette

Print Date: 2023-09-12

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc

MS-14326-SC AL-3693 LA-F1173 FL-873651-

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FIRE PROTECTION, INC.

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
Building A - Wet System	Classroom A-132 Closet	1" Inspectors Test Valve	68	Yes	Yes	Yes	Yes	Yes
Building A - Dry System	Classroom A-132 Closet	1" Inspectors Test Valve	N/A	Yes	Yes	Yes	Yes	Yes
Building B - Wet System	Mechanical Room B-103	1" Inspectors Test Valve	63	Yes	Yes	Yes	Yes	Yes
Building B - Dry System	Mechanical Room B-103	1" Inspectors Test Valve	N/A	Yes	Yes	Yes	Yes	Yes
Building C - Wet System	Classroom C-106 Restroom	1" Inspectors Test Valve	52	Yes	Yes	Yes	No	Yes
Building C - Dry System	Classroom C-106 Restroom	1" Inspectors Test Valve	N/A	Yes	Yes	Yes	Yes	Yes
Building D - Wet System	Mardi Gras Bead Storage Room	1" Ball	61	Yes	Yes	Yes	Yes	Yes

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
Building A - Wet System	Control Valve	S Exterior Mechanical Bldg A	Butterfly	4 "	Monitored And Locked	Yes	Yes	Yes	Yes	Yes	11
Building A - Dry System	Dry Control Valve	S Exterior Mechanical Bldg A	Butterfly	4 "	Monitored And Locked	Yes	Yes	Yes	Yes	Yes	11
Building B - Wet System	Control valve	SW Exterior Mechanical Bldg B	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	11
Building B - Dry System	Kennedy Control Valve	SW Exterior Mechanical Bldg B	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	11
Building C - Wet System	Global Control Valve	S Exterior Mechanical Bldg C	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	13
Building C - Dry System	Kennedy Control Valve	S Exterior Mechanical Bldg C	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	11
Building D - Wet System	Kennedy Control Valve	SW Exterior Mechanical Bldg B	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	11

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
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FIRE PROTECTION, INC.

Building D - Wet System	1-1/2" Main Drain	@ Riser	Ball Valve	Yes	Yes
Building A - Dry System	2" Main Drain	@ Riser	Angle Valve	N/A	Yes
Building A - Wet System	2" Main Drain	@ Riser	Ball Valve	Yes	Yes
Building C - Wet System	2" Main Drain	@ Riser	Ball Valve	Yes	Yes
Building C - Dry System	2" Main Drain	@ Riser	Angle Valve	Yes	Yes
Building B - Dry System	2" Main Drain	@ Riser	Angle Valve	N/A	Yes
Building B - Wet System	2" Main Drain	@ Riser	Ball Valve	Yes	Yes

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FIRE PROTECTION, INC.

Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
S Exterior Mechanical Bldg C	Building C Dry System	1	Potter	Low Air Pressure Switch			Pass
	Building C Dry System	1	Potter	Alarm Pressure Switch			Pass
SW Exterior Mechanical Bldg B	Building B Dry System	1	Potter	Low Air Pressure Switch			Pass
	Building B Dry System	1	Potter	Alarm Pressure Switch			Pass
S Exterior Mechanical Bldg A	Building A Dry System	1	Potter	Low Air Pressure Switch			Pass
	Building A Dry System	1	Potter	Alarm Pressure Switch			Pass
S Exterior Mechanical Bldg C	Building C Dry System	1	Kennedy	Butterfly Tamper Switch			Pass
SW Exterior Mechanical Bldg B	Building B Dry System	1	Kennedy	Butterfly Tamper Switch			Pass
S Exterior Mechanical Bldg A	Building A Dry System	1	Kennedy	Butterfly Tamper Switch			Pass
S Exterior Mechanical Bldg C	Building C Dry System	1	Husky	Air Compressor			Pass
SW Exterior Mechanical Bldg B	Building B Dry System	1	Ingersoll Rand	Air Compressor			Pass
S Exterior Mechanical Bldg A	Building A Dry System	1	Husky	Air Compressor			Pass
S Exterior Mechanical Bldg C	Building C Wet System	1	Potter	Water Flow Switch			Pass
SW Exterior Mechanical Bldg B	Building B Wet System	1	Potter	Water Flow Switch			Pass
S Exterior Mechanical Bldg A	Building A Wet System	1	Potter	Water Flow Switch			Pass
S Exterior Mechanical Bldg C	Building C Wet System	1	Global	Butterfly Tamper Switch		Did not report to F/A panel	Fail

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FIRE PROTECTION, INC.

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
SW Exterior Mechanical Bldg B	Building B Wet System	1	Kennedy	Butterfly Tamper Switch			Pass
S Exterior Mechanical Bldg A	Building A Wet System	1	Kennedy	Butterfly Tamper Switch			Pass
SW Exterior Mechanical Bldg B	Building D Wet System	1	Potter	Water Flow Switch			Pass
SW Exterior Mechanical Bldg B	Building D Wet System	1	Kennedy	Butterfly Tamper Switch			Pass
South wall behind fencing	Exterior of Riser Room @ Building C	1	FDC	Fire Department Connection			Pass
South of A Bldg	Remote for Buildings B & D	1	FDC	Fire Department Connection			Pass
South wall A Bldg	S. Exterior of Riser Room @ Building A	1	FDC	Fire Department Connection			Pass

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Deficiencies - General Questions

Deficiency #1

Are all check valves externally inspected, operating properly, and are in good condition?: No

Notes: Water backing into drain cup while performing MD . Check is not working

Deficiency #1 - Photo #1



Date Taken: September 11, 2023

Deficiency #2

Do valve supervisory switches indicate movement?: No

Notes: Bldg C wet- Control valve did not report to F/A panel

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Deficiency #2 - Photo #1



Date Taken: September 11, 2023

Deficiency #3

Does visible pipe have no mechanical damage or leaks?: No

Notes: Bldg C - ITV leaking by

Deficiency #4

Are all escutcheon plates installed on sprinkler heads?: No

Notes: Cafeteria- missing 2 esc

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FIRE PROTECTION, INC.

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Deficiency #4 - Photo #1



Date Taken: September 11, 2023

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Deficiency #4 - Photo #2



Date Taken: September 11, 2023

Deficiencies - General Wet System Questions

None

Deficiencies - General Dry System Questions

None

Deficiencies - Building A - Wet System

None

Deficiencies - Building A - Dry System

None

Deficiencies - Building B - Wet System

None

Deficiencies - Building B - Dry System

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Deficiency #5

Sprinkler Type: Dry

Have automatic air maintenance devices passed test?: No

Notes: Air is restricted even through fast fill / bypass .exceeds 30mns to air up

Deficiencies - Building C - Wet System

None

Deficiencies - Building C - Dry System

None

Deficiencies - Building D - Wet System

None

Deficiencies - Fire Hydrant #1

Deficiency #6

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - Fire Hydrant #2

Deficiency #7

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - Fire Hydrant #3

None

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

None

Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

None

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Deficiencies - OS&Y Tamper Switch

None

Deficiencies - Butterfly Tamper Switch

Deficiency #8

Address: S Exterior Mechanical Bldg C

Status: Fail

Location: Building C Wet System

Equipment Type: Butterfly Tamper Switch

QTY: 1

Description: 4" Butterfly Tamper Valve

Notes:

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

None

Deficiencies - Alarm Pressure Switch

None

Deficiencies - Inspectors Test Connection

None

Deficiencies - Valves

Deficiency #9

Location: S Exterior Mechanical Bldg C

Valve Type: Butterfly

Size: 4

Description: Global Control Valve

Notes: Did not report to F/A panel

Deficiencies - Drain Valves

None

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Inspector Signature

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

Inspector Name

Bora Yann
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
153252

Signature

A handwritten signature in black ink, appearing to read 'Bora Yann', is written in the signature field.

Date Completed

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150 Provident Lane

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IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Is the clapper and automatic drain valve in place and properly operating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
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SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

VALVE AREA

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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
---	---	---	---

ALARMS

Is the alarm valve free from physical damage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

MAINTENANCE

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<p>Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>If sprinklers have been replaced, were they proper replacements?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If conditions were found that required flushing, was flushing of the system conducted?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Was a drain test conducted after opening any closed valve?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Operating stem of all OS&Y valves lubricated, completely closed and reopened?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?</p>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

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Mobile AL 36608

Mario Morrisette

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Conducted by: Bora Yann

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Report of Inspection / Test for Asset - Fire Hydrant #2

Fire Hydrant Information

Hydrant ID	#2
Description	American Darling 5-1/4" B84B
Location	North End of Parking Lot

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

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Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	63	Residual Pressure	45
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Fire Hydrant #1

Fire Hydrant Information

Hydrant ID	Red Hydrant
Description	Mueller 5-1/4
Location	Outside Office Exterior HVAC Mech Rm

QUESTIONS

Is there a hydrant wrench that is available and accessible? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	60	Residual Pressure	50
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
Office Wet System	60	50	60	1	Yes	Yes
Main Bldg Wet	68	45	63	1	Yes	Yes

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
Office Wet System	@ Riser Exterior Mech Rm	1" globe valve with test assembly	58	Yes	No	Yes	Yes	Yes
Main Bldg Wet	2nd FI classroom #220 RR	1" Globe valve	43	Yes	Yes	Yes	Yes	Yes

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VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
Office Wet System	CLOW	Middle Courtyard	Post Indicator	6 "	Not Secured	Yes	No	N/A	Yes	Yes	
Main Bldg Wet	CLOW PIV	N Exterior storage Rm	Post Indicator	6 "	Not Secured	Yes	Yes	N/A	Yes	Yes	
Office Wet System	Nibco	SE Exterior Mechanical Room	Butterfly	3 "	Monitored And Locked	Yes	Yes	Yes	Yes	Yes	10

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
Office Wet System	1-1/4" Main Drain	Mech Room S/W Corner	Ball Valve	Yes	Yes
Main Bldg Wet	2" Main Drain	North Building Riser Room	Ball Valve	Yes	Yes

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Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
Office Bldg	Exterior S/ W Mech Room	1	Potter	Water Flow Switch		58sec ;manually tested	Pass
Office bldg	Exterior S/W Mech Room	1	Nibco	Butterfly Tamper Switch			Pass
Office Bldg	Outside S/ W Mech Room	1	FDC	Fire Department Connection		Swivel seized	Fail
Main Bldg	North System	1	Potter	Water Flow Switch			Pass
Main Bldg	Outside NW Storage Room	1	FDC	Fire Department Connection		Swivel seized	Fail

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Questions with Photos and Notes

Fire Hydrant #2 - Is there a hydrant wrench that is available and accessible?

N/A

Notes:



Fire Hydrant #1 - Is there a hydrant wrench that is available and accessible?

N/A

Notes:

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Valve - Nibco SE Exterior Mechanical Room

Notes:

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Valve - CLOW PIV N Exterior storage Rm

Notes:

Valve is not secured

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Deficiencies - General Questions

Deficiency #1

Do valve supervisory switches indicate movement?: No

Notes: PIVs are not supervised

Deficiency #1 - Photo #1



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Deficiency #1 - Photo #2



Date Taken: July 13, 2023

Deficiency #2

The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?: No

Notes: Office - test valve broken ; manually tested flow switch

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Deficiency #2 - Photo #1



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Deficiency #2 - Photo #2



Date Taken: July 13, 2023

Deficiency #3

Is the FDC easily accessible?: No

Notes: Main Bldg - FDC is behind a locked gate

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Deficiency #3 - Photo #1



Date Taken: July 13, 2023

Deficiency #4

Is the FDC swivels and couplings not damaged?: No

Notes: Main Bldg - FDC swivel is seized/ needs lubrication

Office - swivel seized

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Deficiency #4 - Photo #1



Date Taken: July 13, 2023

Deficiency #5

Are visible sprinklers free of corrosion and physical damage?: No

Notes: Kitchen - greased / corroded 3/4 chrome pendent
Kitchen exterior washroom - 1 corroded
Office - leaking fluid 1/2 chrome pendent

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Deficiency #5 - Photo #1



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Deficiency #5 - Photo #2



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Deficiency #5 - Photo #3



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Deficiency #5 - Photo #4



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Deficiency #5 - Photo #5



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Deficiency #5 - Photo #6



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Deficiency #5 - Photo #7



Date Taken: July 13, 2023

Deficiency #6

Are visible sprinklers free of foreign materials including paint?: No

Notes: Cafeteria - dusty heads

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Deficiency #6 - Photo #1



Date Taken: July 13, 2023

Deficiency #7

Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?: No

Notes: Kitchen sprinkler heads are greased (20)

Deficiency #8

Are control valves properly sealed and/or supervised?: No

Notes: Both PIV are not secured but are behind locked fence

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Deficiency #8 - Photo #1



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Deficiency #8 - Photo #2



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Deficiency #9

Is the building fully protected by sprinklers?: No

Notes: Main Bldg riser rm - no coverage

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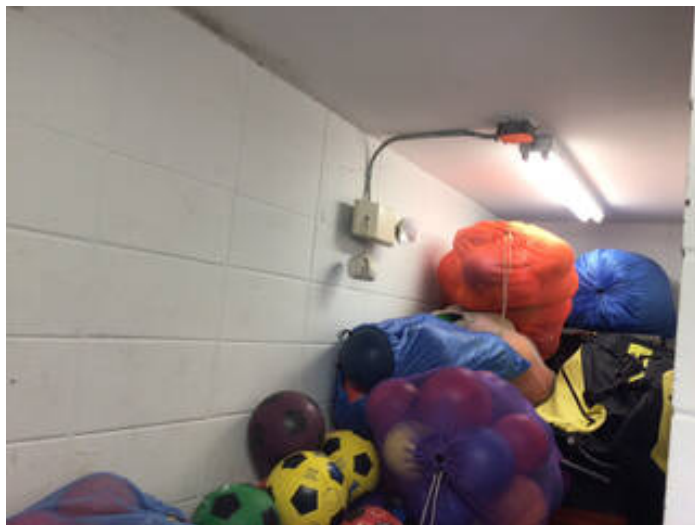
1209C Highway 613 South
Luedale MS 39452

Deficiency #9 - Photo #1



Date Taken: July 13, 2023

Deficiency #9 - Photo #2



Date Taken: July 13, 2023

Deficiency #10

Are all escutcheon plates installed on sprinkler heads?: No

Notes: Office -1

Exterior kitchen washroom - 1

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INDUSTRIAL-COMMERCIAL



2023-07-13

Property

Austin Elementary School
KH

150 Provident Lane
Mobile AL 36608

Mario Morrisette

Print Date: 2023-07-13

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc
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Deficiency #10 - Photo #1



Date Taken: July 13, 2023

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FIRE PROTECTION, INC.

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Deficiency #10 - Photo #2



Date Taken: July 13, 2023

Deficiencies - General Wet System Questions

None

Deficiencies - Office Wet System

None

Deficiencies - Main Bldg Wet

None

Deficiencies - Fire Hydrant #2

None

Deficiencies - Fire Hydrant #1

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Deficiency #11

Are hydrant caps, stems, outlets, and threads lubricated and in good condition?: No

Notes: 5" cap seized ; needs lubrication

Deficiency #11 - Photo #1



Date Taken: July 13, 2023

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

None

Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

None

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Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

Deficiency #12

Address: Office Bldg

Status: Fail

Location: Outside S/ W Mech Room

Equipment Type: Fire Department Connection

QTY: 1

Description: Siamese connection

Notes:

Deficiency #13

Address: Main Bldg

Status: Fail

Location: Outside NW Storage Room

Equipment Type: Fire Department Connection

QTY: 1

Description: Siamese Connection

Notes:

Deficiencies - Inspectors Test Connection

Deficiency #14

Location: @ Riser Exterior Mech Rm

Description: 1" globe valve with test assembly

Terminates in Smooth Orifice?: No

Notes: Globe valve missing handle & stripped ; manually tested flowswitch

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Deficiency #14 - Photo #1



Date Taken: July 13, 2023

Deficiencies - Valves

Deficiency #15

Location: Middle Courtyard

Valve Type: post_indicator

Size: 6

Description: CLOW

Easily Accessible?: No

Notes:

Deficiencies - Drain Valves

None

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FIRE PROTECTION, INC.

Recommendations

Both system Purple Tagged

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Inspector Signature

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

Inspector Name

Bora Yann
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
153252

Signature

A handwritten signature in black ink, appearing to read 'BY', is written in the signature field.

Date Completed

2023-07-13

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Water-Based Systems # 153252

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IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Baker High School
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Is the clapper and automatic drain valve in place and properly operating?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
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SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

VALVE AREA

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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
---	---	---	---

ALARMS

Is the alarm valve free from physical damage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

MAINTENANCE

Report of Inspection / Test

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<p>Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>If sprinklers have been replaced, were they proper replacements?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If conditions were found that required flushing, was flushing of the system conducted?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Was a drain test conducted after opening any closed valve?</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
<p>Operating stem of all OS&Y valves lubricated, completely closed and reopened?</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<p>Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?</p>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

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Report of Inspection / Test for Asset - Hydrant #1

Fire Hydrant Information

Hydrant ID	#1
Description	Mueller 5-1/4"
Location	Left of Cafeteria behind Dumpsters

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

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Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	95	Residual Pressure	75
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Hydrant #2

Fire Hydrant Information

Hydrant ID	#2
Description	Mueller 5-1/4"
Location	Front of Gym

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	95	Residual Pressure	75
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Hydrant #3

Fire Hydrant Information

Hydrant ID	#3
Description	Mueller 5-1/4" 584N
Location	Behind Softball Field Corner of Gym
Static Hydrant Description	Grey body / orange top

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Does the operating nut turn with no difficulty?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	95	Residual Pressure	75
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
Main Building System #1	95	75	95	1	Yes	Yes
Main Building System #2	115	75	105	1	Yes	Yes
Main Building System #3	95	75	95	1	Yes	Yes
Main Building System #4	95	75	95	1	Yes	Yes
Gym	65	45	65	1	Yes	Yes
Auditorium	55	40	55	1	Yes	Yes
Annex Building	N/A	N/A	N/A	N/A	No	No

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
Main Building System #1	Classroom 74 Closet	1" Inspectors Test Valve	1:04	Yes	Yes	Yes	No	Yes
Main Building System #2	In Room 74	1" Inspectors Test Valve	22	Yes	No	No	N/A	Yes
Main Building System #3	2nd Floor	1" Inspectors Test Valve	30	Yes	No	No	N/A	Yes
Main Building System #4	Classroom 268 Closet above Ceiling	1" Inspectors Test Valve	1:09	Yes	Yes	Yes	Yes	Yes
Gym	Girls Locker Room above Ceiling	1" Inspectors Test Valve	1:21	Yes	Yes	No	No	Yes
Auditorium	Storage Room Left side of Stage	2" Inspectors Test Valve	60	Yes	Yes	No	Yes	Yes
Annex Building	@ Riser	1" Inspectors Test Valve		N/A	N/A	No	N/A	N/A

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
Main Building System #1	Mueller OS&Y	Exterior Riser Room behind Cafeteria	OS&Y	6 "	Monitored	Yes	Yes	Yes	Yes	Yes	19

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VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
Main Building System #2	Mueller OS&Y	Exterior Riser Room behind Cafeteria	Butterfly	3 "	Monitored	Yes	Yes	Yes	Yes	Yes	13
Main Building System #3	Muller control valve	Exterior Riser Room behind Cafeteria	OS&Y	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	13
Main Building System #4	Mueller OS&Y	Exterior Riser Room behind Cafeteria	OS&Y	6 "	Monitored	Yes	Yes	Yes	Yes	Yes	19
Gym	Mueller OS&Y	Exterior Riser Room	OS&Y	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	13
Auditorium	Victaulic Butterfly Tamper Valve	Exterior Riser Room	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	16
Annex Building	Tyco Butterfly Tamper Valve	Exterior Mechanical Room	Butterfly	4 "	Monitored	N/A	No	N/A	No	N/A	6

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
Main Building System #1	2" Main Drain	@ Riser	Angle Valve	Yes	Yes
Main Building System #2	2" Main Drain	@ Riser	Angle Valve	Yes	Yes
Main Building System #3	2" Main Drain	@ Riser	Angle Valve	Yes	Yes
Main Building System #4	2" Main Drain	@ Riser	Angle Valve	Yes	Yes
Gym	2" Main Drain	@ Riser	Angle Valve	Yes	Yes
Auditorium	2" Main Drain	@ Riser	Angle Valve	Yes	Yes
Annex Building	2" Main Drain	@ Riser	Ball Valve	No	No

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Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
	Main Building System #1 / 1st Floor	1	Potter	Water Flow Switch			Pass
	Main Building System #1 / 1st Floor	1	Potter	Os&Y Tamper Switch			Pass
	Delete	1	Delete	Butterfly Tamper Switch			
	Exterior Main Building Riser Room	1	FDC	Fire Department Connection		Sign is faded	Pass
	Main Building System #2 / 1st floor	1	Potter	Water Flow Switch		Manually tested	Pass
	Main Building System #3 / 2nd floor	1	Potter	Water Flow Switch			Pass
	Main Building System #4 / 2nd Floor	1	Potter	Water Flow Switch		Manually tested	Pass
	Gym	1	Potter	Water Flow Switch		Manually tested	Pass
	Auditorium	1	Potter	Water Flow Switch			Pass
	Annex	1	Potter	Water Flow Switch		Could not test	N/A
	Gym	1	Potter	Os&Y Tamper Switch		Needs adj	Pass
	Auditorium	1	Victaulic	Butterfly Tamper Switch			Pass
	Annex	1	Tyco	Butterfly Tamper Switch		Could not test	N/A
	Main Building System #3 / 2nd Floor	1	Potter	Os&Y Tamper Switch			Pass
	Main Building System #4 / 2nd floor	1	Potter	Os&Y Tamper Switch			Pass
	Main Building System #2/ 1st Floor	1	Potter	Os&Y Tamper Switch			Pass

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Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
	Auditorium Remote FDC @ Rear of Gym	1	FDC	Fire Department Connection			
	Gym Remote FDC @ Rear of Gym	1	FDC	Fire Department Connection			Pass
	Annex Remote FDC @ Backflow by Street	1	FDC	Fire Department Connection			Pass

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Deficiencies - General Questions

Deficiency #1

Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?: No

Notes: School- did not visually see data plaque

Deficiency #2

The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?: No

Notes: Systems 2&4- could not locate ITV
Recommend adding ITV @ risers for systems 1-4
Gym - could not locate ITV
Auditorium- ITV inaccessible, storage room full
Annex - Riser room inaccessible, padlocked

Deficiency #3

Is the FDC swivels and couplings not damaged?: No

Notes: Needs lubrication/ swivel will not spin. Not sure if Knox caps are on too tight

Deficiency #4

Is the FDC identification sign(s) in place?: No

Notes: Main school - sign faded

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Deficiency #4 - Photo #1



Date Taken: June 20, 2023

Deficiency #5

Is the visible pipe in good condition with no external corrosion?: No

Notes: System #1 ITV piping is corroded/ rusty

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Deficiency #5 - Photo #1



Date Taken: June 22, 2023

Deficiency #6

Does visible pipe have no mechanical damage or leaks?: No

Notes: System #1 ITV pipe is leaking

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Deficiency #6 - Photo #1



Date Taken: June 22, 2023

Deficiency #7

Are there the proper number and type of spare sprinklers?: No

Notes: Auditorium- short on spares
Gym -short on spares

Deficiency #8

Is there proper clearance below the sprinklers?: No

Notes: Kitchen pantry

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Deficiency #8 - Photo #1



Date Taken: June 22, 2023

Deficiency #9

Are visible sprinklers free of foreign materials including paint?: No

Notes: School- dusty heads throughout
Gym- dusty heads throughout
Auditorium- dusty heads

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Deficiency #9 - Photo #1



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Deficiency #9 - Photo #2



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Deficiency #9 - Photo #3



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Deficiency #9 - Photo #4



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Deficiency #9 - Photo #5



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Deficiency #9 - Photo #6



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Deficiency #9 - Photo #7



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Deficiency #9 - Photo #8



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Deficiency #9 - Photo #9



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Deficiency #9 - Photo #10



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Deficiency #9 - Photo #11



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Deficiency #9 - Photo #12



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Deficiency #9 - Photo #13



Date Taken: June 22, 2023

Deficiency #10

Are there spare sprinklers and a sprinkler wrench?: No

Notes: School- Missing wrench
Auditorium- missing head cabinet & wrench
Gym - missing head cabinet & wrench

Deficiency #11

Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?: No

Notes: Greased / corroded heads throughout kitchen area

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Deficiency #11 - Photo #1



Date Taken: June 22, 2023

Deficiency #12

Are all escutcheon plates installed on sprinkler heads?: No

Notes: Outside of Stairwell #2 restroom
Office storage missing tile
Auditorium - missing 2 esc 1/2 white SR
Annex bldg - missing 2 esc chrome 3/4 SR

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Deficiency #12 - Photo #1



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Deficiency #12 - Photo #2



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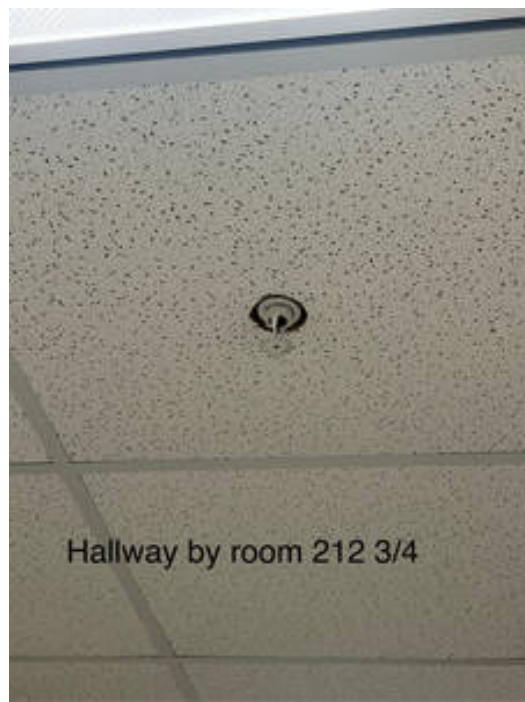
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Conducted by: Bora Yann
NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc
MS-14326-SC AL-3693 LA-F1173 FL-873651-
0001-2007
1209C Highway 613 South
Lucaledale MS 39452

Deficiency #12 - Photo #3



Hallway by room 212 3/4

Date Taken: June 22, 2023

Report of Inspection / Test

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2023-06-22

Property

Baker High School
KH

8901 Airport Boulevard
Mobile AL 36608

Mario Morrisette

Print Date: 2023-06-22

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FIRE PROTECTION, INC.

Deficiency #12 - Photo #4



Date Taken: June 22, 2023

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FIRE PROTECTION, INC.

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Deficiency #12 - Photo #5



Date Taken: June 22, 2023

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Deficiency #12 - Photo #6



Date Taken: June 22, 2023

Deficiencies - General Wet System Questions

None

Deficiencies - Main Building System #1

None

Deficiencies - Main Building System #2

None

Deficiencies - Main Building System #3

None

Deficiencies - Main Building System #4

None

Deficiencies - Gym

None

Deficiencies - Auditorium

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None

Deficiencies - Annex Building

Deficiency #13

Sprinkler Type: Wet
Are results comparable to previous test: No

Notes:

Deficiency #14

Sprinkler Type: Wet
Is flow observed?: No

Notes:

Deficiencies - Hydrant #1

Deficiency #15

Is the hydrant properly painted and is the paint in good condition?: No

Notes: Needs to be repainted
Grey body / orange top

Deficiency #15 - Photo #1



Date Taken: June 20, 2023

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Deficiency #16

Is the Road box and shutoff valve visible and accessible?: No

Notes: Did not visually see one near by

Deficiencies - Hydrant #2

Deficiency #17

Is the Road box and shutoff valve visible and accessible?: No

Notes: Did not visually see one near by

Deficiencies - Hydrant #3

Deficiency #18

Does the operating nut turn with no difficulty?: No

Notes: Hydrant does not open smoothly , stem needs lubrication

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

None

Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

None

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

None

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Deficiencies - Inspectors Test Connection

Deficiency #19

Location: @ Riser

Description: 1" Inspectors Test Valve

Easily Accessible?: No

Notes:

Deficiency #20

Location: Storage Room Left side of Stage

Description: 2" Inspectors Test Valve

Easily Accessible?: No

Notes: Hard to access, needs to be kept clear

Deficiency #21

Location: Girls Locker Room above Ceiling

Description: 1" Inspectors Test Valve

Easily Accessible?: No

Signs: No

Notes: Manually tested switch .

Needs relocating to riser , ITV in girls locker room

Deficiency #22

Location: 2nd Floor

Description: 1" Inspectors Test Valve

Terminates in Smooth Orifice?: No

Easily Accessible?: No

Notes: Manually tested ;could not locate ITV

Deficiency #23

Location: In Room 74

Description: 1" Inspectors Test Valve

Terminates in Smooth Orifice?: No

Easily Accessible?: No

Notes: Manually tested flowswitch, could not find ITV

Deficiency #24

Location: Classroom 74 Closet

Description: 1" Inspectors Test Valve

Signs: No

Notes: No sign . Corroded / rusty pipe

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Deficiency #24 - Photo #1



Date Taken: June 22, 2023

Deficiencies - Valves

Deficiency #25

Location: Exterior Mechanical Room
Valve Type: butter_fly
Size: 4
Description: Tyco Butterfly Tamper Valve
Easily Accessible?: No
Exercised?: No

Notes: Gate locked ; no keys inaccessible

Deficiencies - Drain Valves

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FIRE PROTECTION, INC.

Deficiency #26

Location: @ Riser

Description: 2" Main Drain

Dry Type: ball_valve

Aux Drain Drained?: No

Water Flow Observed?: No

Notes: Inaccessible

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Recommendations

- School - purple tagged
- Gym - purple tagged
- Auditorium- purple tagged
- Annex bldg - N/A could not access riser room ; padlocked

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Inspector Signature

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

Inspector Name

Bora Yann
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
153252

Signature

A handwritten signature in black ink, appearing to read 'Bora Yann', is written over a large, faint, light-colored watermark of the same signature.

Date Completed

2023-06-22

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504 Government Street

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IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Building Occupancy?	Office Building
Are all Identification Signs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Is the clapper and automatic drain valve in place and properly operating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
---	---	---	---

SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

VALVE AREA

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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
---	---	---	---

ALARMS

Is the alarm valve free from physical damage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

MAINTENANCE

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FIRE PROTECTION, INC.

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<p>Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>If sprinklers have been replaced, were they proper replacements?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If conditions were found that required flushing, was flushing of the system conducted?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Was a drain test conducted after opening any closed valve?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Operating stem of all OS&Y valves lubricated, completely closed and reopened?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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FIRE PROTECTION, INC.

MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
Barton Academy	80	60	75	3	Yes	Yes
Cafeteria	80	60	75	3	Yes	Yes

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
Barton Academy	NE (Exterior)Exploration Lab Mech Rm.	1" ITV	33	Yes	Yes	Yes	Yes	Yes
Cafeteria	Auditorium	1" test& Drain	37	Yes	Yes	Yes	Yes	Yes

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
Barton Academy	control valve	NE (Exterior)Exploration Lab Mech Rm.	Butterfly	6 "	Monitored	Yes	Yes	Yes	Yes	Yes	9
Cafeteria	Auditorium Riser Rm	Cafeteria	Butterfly	2-1/2 "	Monitored And Locked	Yes	Yes	Yes	Yes	Yes	9

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
Cafeteria	1.25	Auditorium	Angle Valve	N/A	Yes
Barton Academy	2" Main Drain	NE (Exterior)Exploration Lab Mech Rm.	Globe Valve	N/A	Yes

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FIRE PROTECTION, INC.

Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
	NE (Exterior)Exploration Lab Mech Rm.	1	Potter	Water Flow Switch			Pass
	Delete	1	Delete	Os&Y Tamper Switch			
	Facing S. Lawrence St.	1	FDC on Backflow	Fire Department Connection			
	Delete	1	Delete	Os&Y Tamper Switch			

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Deficiencies - General Questions

Deficiency #1

Are the gauges on system in good condition and showing normal water supply pressure?: No

Notes: Gauges are 2018 , needs replacing

Deficiency #1 - Photo #1



Date Taken: September 13, 2023

Deficiency #2

Does visible pipe have no mechanical damage or leaks?: No

Notes: Cafeteria system - 1.25 MD is leaking by

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Deficiency #2 - Photo #1



Date Taken: September 13, 2023

Deficiencies - General Wet System Questions

None

Deficiencies - Barton Academy

None

Deficiencies - Cafeteria

None

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

None

Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

Report of Inspection / Test

Annual NFPA 25

2023-09-13

Property

Barton Academy
KH

504 Government Street

Mobile AL 36602

Mario Morrisette

Print Date: 2023-09-14

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc

MS-14326-SC AL-3693 LA-F1173 FL-873651-

0001-2007

1209C Highway 613 South

Lucaledale MS 39452

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FIRE PROTECTION, INC.

None

Deficiencies - OS&Y Tamper Switch

None

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

None

Deficiencies - Alarm Pressure Switch

None

Deficiencies - PIV Tamper Switch

None

Deficiencies - Ball Valve Tamper

None

Deficiencies - Inspectors Test Connection

None

Deficiencies - Valves

None

Deficiencies - Drain Valves

None

Report of Inspection / Test

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Inspector Signature

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

Inspector Name

Bora Yann
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
153252

Signature

A handwritten signature in black ink, appearing to be 'Bora Yann', written in a cursive style.

Date Completed

2023-09-13

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IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Building Occupancy?	Office Building
Are all Identification Signs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc

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FIRE PROTECTION, INC.

Is the clapper and automatic drain valve in place and properly operating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
---	---	---	---

SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

VALVE AREA

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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

DRY VALVE

Are enclosures around valves maintaining a minimum of 40 degrees F?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the gauges on systems without low pressure alarms in good condition and showing normal air and water pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
For freezer systems, gauge near compressor reading the same as gauge near the dry-pipe valve?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are they free from physical damage?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Are trim valves in appropriate (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there no leakage in the intermediate chamber?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on systems with low pressure alarms in good condition and showing normal air and water pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the dry-pipe valve passed inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the priming level correct and has the low air pressure signal passed it's test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has the quick opening device passed the test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
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ALARMS

Is the alarm valve free from physical damage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have low temperature alarms passed test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

MAINTENANCE

Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
If sprinklers have been replaced, were they proper replacements?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	If conditions were found that required flushing, was flushing of the system conducted?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Was a drain test conducted after opening any closed valve?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Operating stem of all OS&Y valves lubricated, completely closed and reopened?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are dry-pipe systems kept in dry condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have auxiliary drains been emptied?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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FIRE PROTECTION, INC.

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Yes

No

NA

Is interior of dry-pipe valves cleaned?

Yes

No

NA

Have low points been drained before freezing weather?

Yes

No

NA

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FIRE PROTECTION, INC.

Report of Inspection / Test for System - Attic system

DRY VALVE

Have automatic air maintenance devices passed test? Yes
 No
 NA

DRY VALVE TRIP TEST

Dry Valve	Size: 4	Year of Mfr.:	Accelerator	Year of Mfr.:		
Make	Model	Serial no.	Make	Model	Serial no.	
tyco	dpv-1					
	Time to Trip thru test pipe	Water Pressure	Air Pressure	Trip point air pressure	Time water reached test outlet	Alarm Operated
Without Accelerator	N/A	75	30	N/A	N/A	Yes
With Accelerator	N/A	N/A	N/A	N/A	N/A	N/A

DRY VALVE TRIP TEST (cont)

Were results comparable to previous test? Yes
 No
 NA

Has it passed air leakage test? Yes
 No
 NA

MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
Attic system	75	45	75	3	Yes	Yes
2nd fl system	75	45	75	3	Yes	Yes
1st fl system	75	45	75	3	Yes	Yes
Cafeteria / Auditorium system	0	0	0	N/A	No	N/A
Basement system	75	45	75	3	Yes	Yes

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
Attic system	@ Riser	Alarm line	5	Yes	Yes	Yes	Yes	Yes

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INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
2nd fl system	@ Riser	1" Test & Drain	37	Yes	Yes	Yes	Yes	Yes
1st fl system	@ Riser	1" Test & Drain	39	Yes	Yes	Yes	Yes	Yes
Cafeteria / Auditorium system	@ Riser	1" ITV		N/A	N/A	N/A	N/A	N/A
Basement system	@ Riser	1" Test & Drain	25	Yes	Yes	Yes	Yes	Yes

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
Attic system	Control valve	Basement	OS&Y	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	18
2nd fl system	Control valve	Basement	Butterfly	2-1/2 "	Monitored	Yes	Yes	Yes	Yes	Yes	16
1st fl system	Control valve	Basement	Butterfly	2-1/2 "	Monitored	Yes	Yes	Yes	Yes	Yes	16
Basement system	Control valve	Basement	Butterfly	2-1/2 "	Monitored	Yes	Yes	Yes	Yes	Yes	16

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
2nd fl system	1-1/4" main Drain	Riser	Globe Valve	N/A	Yes
1st fl system	1-1/4" main Drain	Riser	Globe Valve	N/A	Yes
Basement system	1-1/4" main Drain	Riser	Globe Valve	N/A	Yes
Attic system	2" main Drain	Riser	Globe Valve	N/A	Yes

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Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
	S. Cedar St.	1	Siamese Connection	Fire Department Connection			Pass
Attic	Basement	1	Tamper Switch	Os&Y Tamper Switch		Reports as common trouble , needs adjusting	Pass
1st Fl	Basement	1	Victaulic	Butterfly Tamper Switch			Pass
2nd Fl	Basement	1	Victaulic	Butterfly Tamper Switch			Pass
Cafeteria	Basement	1	Landsdale	Butterfly Tamper Switch		Valved off	N/A
Basement	Basement	1	Tamper Switch	Butterfly Tamper Switch			Pass
Attic	Basement	1	Potter	Water Flow Switch		Alarm line test only	Pass
1st Fl	Basement	1	Potter	Water Flow Switch			Pass
2nd Fl	Basement	1	Potter	Water Flow Switch			Pass
Cafeteria	Basement	1	Potter	Water Flow Switch			Pass
Basement	Basement	1	Potter	Water Flow Switch			Pass

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Questions with Photos and Notes

Attic system - Without Accelerator: Did alarm operate?

Yes

Notes:

Alarm line test only

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Deficiencies - General Questions

Deficiency #1

Is the building occupied?: No

Notes: Bldg is vacant . There is no Power or Air in the Bldg

Deficiency #2

Are all fire protection systems in service?: No

Notes: Auditorium/ Cafeteria system is Valved off . Not in service

Deficiency #3

Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?: No

Notes: Auditorium/ Cafeteria system is Valved off . Not in service

Deficiency #4

Are the gauges on system in good condition and showing normal water supply pressure?: No

Notes: Gauges are dated 2018 - needs replacing

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Deficiency #4 - Photo #1



Date Taken: September 13, 2023

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FIRE PROTECTION, INC.

Deficiency #4 - Photo #2



Date Taken: September 13, 2023

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Mobile AL 36602

Mario Morrisette

Print Date: 2023-09-14

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc

MS-14326-SC AL-3693 LA-F1173 FL-873651-

0001-2007

1209C Highway 613 South

Luedale MS 39452

Deficiency #4 - Photo #3



Date Taken: September 13, 2023

Deficiency #5

Do valve supervisory switches indicate movement?: No

Notes: Attic system - Potter osysu-2 needs adjusting- did not receive signal when closing valve

Deficiency #6

Is the visible pipe in good condition with no external corrosion?: No

Notes: Attic system - drain pipe corroded

Report of Inspection / Test

Annual NFPA 25

INDUSTRIAL-COMMERCIAL



2023-09-13

Property

Barton Academy (Yerby Bldg)
KH

504 Government Street

Mobile AL 36602

Mario Morrisette

Print Date: 2023-09-14

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0001-2007

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Luedale MS 39452

Deficiency #6 - Photo #1



Date Taken: September 13, 2023

Deficiency #7

Are there the proper number and type of spare sprinklers?: No

Notes: Did not visually see

Deficiency #8

Are there spare sprinklers and a sprinkler wrench?: No

Notes: Did not visually see

Deficiencies - General Wet System Questions

None

Deficiencies - General Dry System Questions

Deficiency #9

Are they free from physical damage?: No

Notes: Drain pipe corroded

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Deficiency #9 - Photo #1



Date Taken: September 13, 2023

Deficiencies - Attic system

Deficiency #10

Sprinkler Type: Dry

Have automatic air maintenance devices passed test?: No

Notes: Air compressor is not in service

Deficiencies - 2nd fl system

None

Deficiencies - 1st fl system

None

Deficiencies - Cafeteria / Auditorium system

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Deficiency #11

Sprinkler Type: Wet

Is flow observed?: No

Notes: Not in service

Deficiencies - Basement system

None

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

None

Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

None

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

None

Deficiencies - Alarm Pressure Switch

None

Deficiencies - PIV Tamper Switch

None

Deficiencies - Ball Valve Tamper

None

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FIRE PROTECTION, INC.

Deficiencies - Inspectors Test Connection

None

Deficiencies - Valves

None

Deficiencies - Drain Valves

None

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The logo for Industrial Commercial Fire Protection, Inc. features the letters 'ICFP' in a large, bold, yellow font with a red-to-orange gradient. The letters are outlined in black and set against a white background with a thin red border.

FIRE PROTECTION, INC.

Recommendations

Bldg is vacant

Systems are located in the basement

Basement has no power , lights or moving air. Basement is VERY DUSTY and makes it had to breathe.

Dry system- Air Compressor is working

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Inspector Signature

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

Inspector Name

Bora Yann
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
153252

Signature

A handwritten signature in black ink, appearing to read 'Bora Yann', is written over a large, faint, light-colored watermark of the same signature.

Date Completed

2023-09-13

Report of Inspection / Test

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INDUSTRIAL-COMMERCIAL



2023-04-18

Property
Blount High School
KH

5450 Lott Road
Mobile AL 36613
Mario Morrisette
Print Date: 2023-04-19

Conducted by: Bora Yann
NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc
MS-14326-SC AL-3693 LA-F1173 FL-873651-
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IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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FIRE PROTECTION, INC.

Is the clapper and automatic drain valve in place and properly operating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
---	---	---	---

SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

VALVE AREA

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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are valve enclosures maintaining a minimum of 40 degrees F?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are gauges on non-supervised systems in good condition and showing normal water and air pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the priming level correct and has the low air pressure signal passed it's test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Has the quick opening device passed the test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have manual activation devices passed test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have automatic air maintenance devices passed test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
DELUGE/PREACTION VALVES			
For freezer systems, gauge near compressor reading the same as gauge near the preaction valve?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are preaction and deluge valves free from physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the electrical components in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are trim valves in appropriate (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is there no leakage in the valve seat?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are gauges on supervised systems indicate that normal pressure is being maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Have preaction and deluge valves that need to be opened to be reset passed an internal inspection? Yes
 No
 NA

DELUGE TRIP TEST

Was there free discharge from all nozzles? Yes
 No
 NA

Pressure reading at hydraulically most remote nozzle: N/A

Residual pressure reading at deluge valve: N/A

Were results comparable to design values? Yes
 No
 NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging? Yes
 No
 NA

Have backflow devices passed forward flow test? Yes
 No
 NA

ALARMS

Is the alarm valve free from physical damage? Yes
 No
 NA

Is the trim in correct (open or closed) position? Yes
 No
 NA

Is there no leakage in the retarding chamber or drains? Yes
 No
 NA

Are alarms and supervisory devices not damaged? Yes
 No
 NA

Do low temperature alarms look ok? Yes
 No
 NA

Have low temperature alarms passed test? Yes
 No
 NA

MAINTENANCE

Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks Yes
 No
 NA

If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced? Yes
 No
 NA

If sprinklers have been replaced, were they proper replacements? Yes
 No
 NA

If conditions were found that required flushing, was flushing of the system conducted? Yes
 No
 NA

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Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Was a drain test conducted after opening any closed valve? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Operating stem of all OS&Y valves lubricated, completely closed and reopened? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks, a 50% increase in time from the original system acceptance test required for water to reach the inspector's test connection during a full flow test <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have auxiliary drains been opened? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have compressors and air dryers been maintained according to manufacturer's instructions? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have low points been drained before freezing weather? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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Report of Inspection / Test for System - Building D Deluge System

Report of Inspection / Test for Asset - Fire Pump

Fire Pump Information

Property Name	Blount high school
Demand(s) of Fire protection systems supplied by pump:	Sprinkler systems
Pump (Horizontal or Vertical):	Vertical
Pump Manufacturer	A-C
Shop/Serial Number	03-039211-01-01
Model	6x6x11F-S
Rated GPM	750
Rated Pressure	50
Rated 150 Pressure	44
Rated 0 Pressure	55
Suction	City
If Tank, size and height	n/a
Driver, (electric or diesel engine)	Electric
Engine Manufacturer	U.S electrical
Engine Shop/Serial Number	FF40S2EV-P
Rated Horsepower	40
Rated Speed	1780
Rated Voltage	460/230
Operating Voltage	460/230
Rated Amps	46/92
Phase Cycles	3
Service Factor	1.15
Controller Manufacturer	Eaton cutler hammer
Controller Shop/Serial Number	16B-4936
Controller Model	FD70-40D-LMR-L1-X1-F

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Jockey Pump Manufacturer	MTH
Jockey Pump Model	T41J25
Jockey Pump Serial Number	030-80218-6
Jockey Controller Manufacturer	Eaton cutler hammer
Jockey Controller Model	FDJP-1D
Jockey Controller Serial Number	16B-4936JP
Transfer Switch Manufacturer	N/a
Transfer Switch Model	N/a
Transfer Switch Serial Number	n/a

OWNER SECTION

Is there a Jockey Pump on system?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Jockey Settings? (on/off)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the fire pump in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the pump remained in service since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

CONTROLLER TEST

Did the pump start at least 6 times from automatic sources?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Was each automatic starting feature tested at least once?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
For electric driven pump controllers: on a simulation of a power failure, while pump is under peak load, did the transfer switch transfer from the normal to emergency source without opening overcurrent protection devices on either line?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	For electric driven pump controllers: when normal power was restored, did retransfer from emergency to normal power occur without overcurrent protection devices opening on either line?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
For electric driven pump controllers: were at least half of the automatic and manual starts required performed with the pump connected to the alternate source?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Were all signal conditions simulated demonstrating workable operation?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

INSPECTION

Pump house/room proper temperature?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Ventilating louvers free to operate?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are suction, discharge and bypass valves open?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Piping free from leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Suction and system pressure gauges normal?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Suction reservoir, if provided, full?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Wet pit suction screens are clean and in place?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Waterflow test valves in closed position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Controller indicating power on?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Transfer switch indicating normal situation?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Isolation switch closed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Pump in correct phase?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Oil level in motor sight glass in correct range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Circulation relief valve flowing water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Pressure relief valves operating with proper pressure downstream while pump is operational?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

TESTING

Electric pump started automatically?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Electric motor driven pump ran for 10 min?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Packing gland showing slight discharge? (Adjust if necessary)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Packing boxes, bearing and pump casing free from overheating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Time for engine motor to reach full speed:	N/A	For automatic stop controllers, record time pump runs after starting:	3
Electric motor driven pumps with reduced voltage or reduced current starting, record the time the controller is in the 1st step:	5	Are all above times and pressures and results acceptable?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Circulation and pressure relief valves operated properly during all flow tests?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	No alarm indicators or other visible abnormalities observed during no-flow test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Were Suction screens cleaned after flow?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Automatic transfer switch test: Power failure simulated during peak flow?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Automatic transfer switch test: Connection made to alternate source?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Automatic transfer switch test: After termination of simulated power failure did motor reconnect to source?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
All alarm conditions simulated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All alarms operated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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Property
Blount High School
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5450 Lott Road
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Conducted by: Bora Yann
NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc
MS-14326-SC AL-3693 LA-F1173 FL-873651-
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MAINTENANCE

Fuel tank level, tank float switch, and solenoid valve operation acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Flexible hoses and connectors in fuel and coolant systems acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Oil Level and lube oil heater acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Coolant level acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Water pump for coolant system operating?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Jacket water heater for coolant system okay?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Exhaust system free of leakage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Drain condensate trap on exhaust system operational?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Connections to electrical system acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Cranking voltage acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Isolation switch and circuit breaker exercised?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Battery case clean, dry and free of corrosion?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Charger and charge rate passed inspection and battery charge being equalized?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Do Circuit breakers appear clean?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Cleaned or replaced crank case breather in lubrication systems?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Cleaned water strainer in coolant system?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Battery terminals clean and tight?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Electrical systems free of wire chafing?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Manual starting means on electrical systems operated and boxes, panels and cabinets cleaned?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Antifreeze tested in coolant system?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Flexible exhaust section acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Changed pump bearing lubrication?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Shaft end play acceptable?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Pressure gauges and sensors accurate?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Coupling alignment acceptable?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Transmission coupling, right angle gear drive and mechanical moving parts lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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Circuit breakers passed trip test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Emergency manual starting means operated without power?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Electrical connections secure?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the volt meter and ammeter accurate?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Pressure switch settings calibrated?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Motor bearing greased?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Fuel tank free of water and foreign material?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Fuel tank vents and overflow pipes free of obstructions?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Fuel piping acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Antifreeze changed in coolant system?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Heater exchange cleaned out?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Ducts and louvers for combustion air okay?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Exhaust system hanged in supports acceptable and system free of back pressure?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Control and power wiring tight?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
No corrosion on circuit boards?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	No cracked cable wire insulation?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
No leaks in plumbing parts?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	No sign or water on electrical parts?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

FLOW TEST

Run the pump at no-load, rated load and peak load (usually 150% of the rated load) conditions. For variable speed drivers, run the test with pressure limiting control "on" at 25, 50, 75, 100, 125, and 150% of rated load and then again rated speed w/ the pump isolated from the fire protection system and the relief valve closed.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Was equipment and gauges calibrated?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Date of last calibration	07/12/2023	For electric motors operating at the rated voltage and frequency, is the ampere demand on each phase less than or equal to the product of the full load ampere rating times the allowable service factor as stamped on the motor nameplate?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
For electric motors operating under varying voltage, was the product of the actual voltage and current demand on each phase less than or equal to the product of the rated full load current times the rated voltage times the allowable service factor?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	For electric motors operating under varying voltage, did the voltage stay within the range of 95% to 110% of the rated voltage during the test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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Did engine-drive unit show no signs of overload or stress?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Was the governor set to properly regulate the engine speed at rated pump speed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Did the gear drive assembly operate without excessive objectionable noise, vibration, or heating?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Was the unit started and brought up to rated speed without interruption under discharge conditions equal to peak load?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Did the pump perform equal to the manufacturer's curve within the accuracy limits of the test equipment?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the unadjusted performance discharge curve meet or exceed the fire protection system demands?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Were there no vibrations that could damage any fire pump component?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the pump perform at all conditions without objectionable overheating of any component?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have electric motor pumps pass the phase reversal test on normal and alternate (if provided) power?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	For vertical turbine pumps taking the suction from wells, is the water level capable of being recorded?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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PERFORMANCE

Rated %	Driver speed: RPM	Total Flow	Net Pressure: PSI	Discharge Pressure: PSI	Suction Pressure: PSI
0%	N/A	Churn / No Flow	51.0	98.0	47.0
100%	N/A	772	50.0	68.0	18.0
150%	N/A	1158	45.0	45.0	0.0
Roof Shot	N/A	N/A	0.0	0.0	0.0

ELECTRIC MOTOR

	L1 Voltage	L1 Amperes	L2 Voltage	L2 Amperes	L3 Voltage	L3 Amperes
0%	N/A	N/A	N/A	N/A	N/A	N/A
100%	N/A	N/A	N/A	N/A	N/A	N/A
150%	N/A	N/A	N/A	N/A	N/A	N/A
Roof Shot	N/A	N/A	N/A	N/A	N/A	N/A

Pump Flow Detail

Coefficient (same for all): 97

Nozzle/Orifice Size: 1.75 (inches)

	PITOT					
	1	2	3	4	5	6
0%	N/A	N/A	N/A	N/A	N/A	N/A
100%	15	15	0	0	0	0
150%	15	15	15	N/A	N/A	N/A
Roof Shot	N/A	N/A	N/A	N/A	N/A	N/A

	FLOW					
	Churn / No Flow	Churn / No Flow	Churn / No Flow	Churn / No Flow	Churn / No Flow	Churn / No Flow
0%	Churn / No Flow	Churn / No Flow	Churn / No Flow	Churn / No Flow	Churn / No Flow	Churn / No Flow
100%	386	386	N/A	N/A	N/A	N/A
150%	386	386	386	0	0	0
Roof Shot	N/A	N/A	N/A	N/A	N/A	N/A

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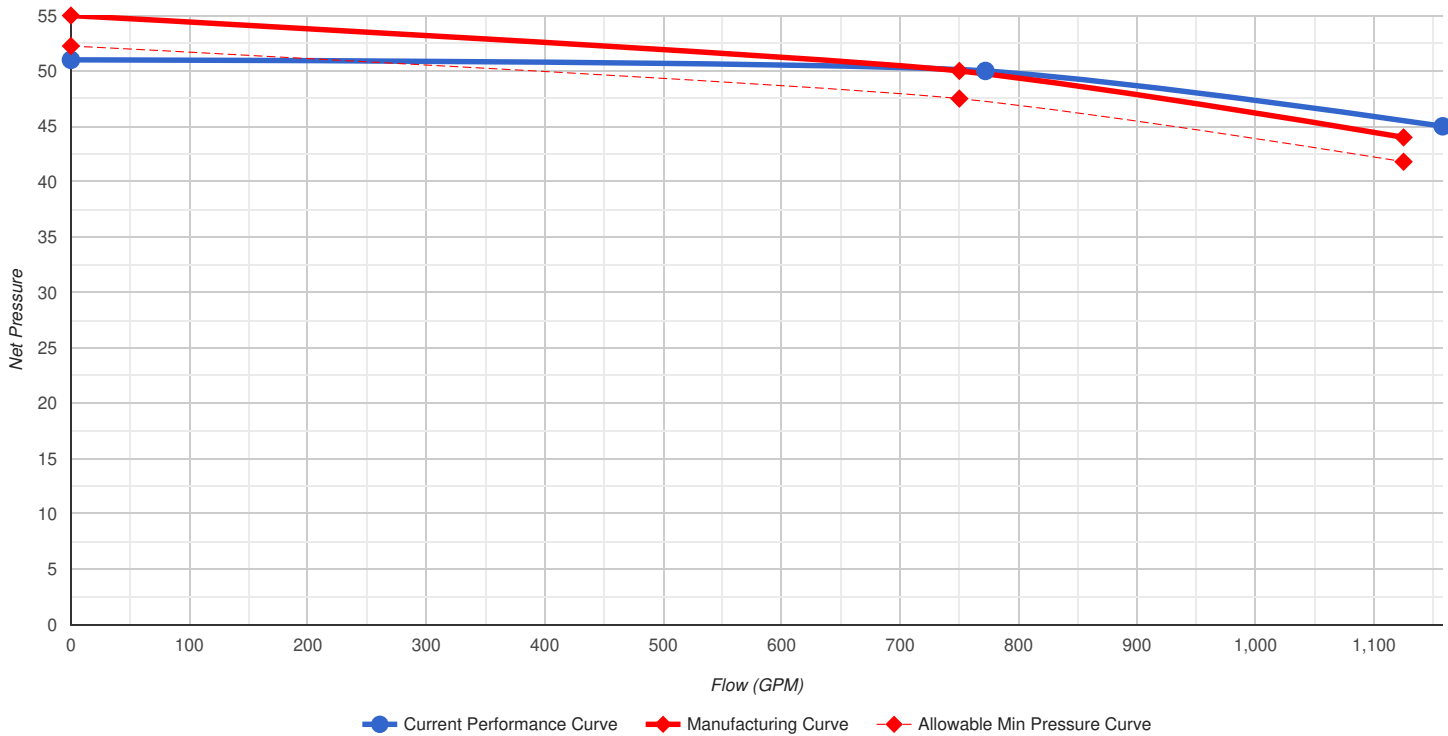
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FIRE PROTECTION, INC.



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Report of Inspection / Test for Asset - Fire Hydrant #1

Fire Hydrant Information

Hydrant ID	#1
Description	Mueller 5-1/4"
Location	Next to the Track

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have control valves been operated through complete range??	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

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Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Fire Hydrant #2

Fire Hydrant Information

Hydrant ID	#2
Description	Mueller 5-1/4"
Location	N.E corner of School

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flow acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Fire Hydrant #3

Fire Hydrant Information

Hydrant ID	#3
Description	N.W corner of School

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Fire Hydrant #4

Fire Hydrant Information

Hydrant ID	#4
Description	Mueller 5-1/4"

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2023-04-18

Property
Blount High School
KH

5450 Lott Road
Mobile AL 36613
Mario Morrisette
Print Date: 2023-04-19

Conducted by: Bora Yann
NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc
MS-14326-SC AL-3693 LA-F1173 FL-873651-
0001-2007
1209C Highway 613 South
Luedale MS 39452

Location

S.W corner of School

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flow acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

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Static Hydrant

Static Pressure

N/A

Residual Pressure

N/A

Final Hydrant Flow Test

Flow at 20 psi residual pressure:

N/A

Total Flow

N/A

Report of Inspection / Test for Asset - Fire Hydrant #5

Fire Hydrant Information

Hydrant ID

#5

Description

Mueller 5-1/4"

Location

S.E corner of School

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
---	---	--	---

Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
---------------------------------	---

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
System A Bldg.	70	50	67	.1	Yes	Yes
System B Bldg.	70	45	69	.1	Yes	Yes
System G Bldg.	65	45	69	.1	Yes	Yes
System E Bldg.	60	45	55	.1	Yes	Yes
Building D Deluge System	115	70	110	.1	Yes	Yes
System C Bldg.	60	40	63	.1	Yes	Yes
System F Bldg.	65	40	70	.1	Yes	Yes
Building D Wet System	100	70	115	.1	Yes	Yes

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
System A Bldg.	@ Riser	1-1/4" Inspectors Test Valve	35	Yes	Yes	Yes	Yes	Yes

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INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
System B Bldg.	@ Riser	1-1/4" Inspectors Test Valve	1:06	Yes	Yes	Yes	Yes	Yes
System G Bldg.	Filter Storage by South Exit Door	1" Inspectors Test Valve		No	Yes	Yes	Yes	No
System E Bldg.	@ Riser	1-1/4" Inspectors Test Valve	1:51	Yes	Yes	Yes	Yes	No
Building D Deluge System	Delete	Delete	alarm test Line	Yes	Yes	Yes	Yes	Yes
System C Bldg.	@ Riser	1-1/4" Inspectors Test Valve	30	Yes	Yes	Yes	Yes	Yes
System F Bldg.	@ Riser	1-1/4" Inspectors Test Valve	1:58	Yes	Yes	Yes	Yes	No
Building D Wet System	@ Riser	1" Inspectors Test Valve	1:15	Yes	Yes	Yes	Yes	Yes

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
System A Bldg.	4" Mueller OS&Y	Exterior Riser Room North side of Building	OS&Y	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	14
System B Bldg.	4" Muller OS&Y	Exterior Riser Room South side of Building	OS&Y	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	14
System G Bldg.	4" Muller OS&Y	Riser Room	OS&Y	4 "	Monitored	Yes	Yes	No	Yes	Yes	14
System E Bldg.	4" Mueller OS&Y	Exterior Riser Room West side of Building	OS&Y	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	14
Building D Deluge System	1-1/2" Milwaukee Butterfly Tamper Valve	Exterior Riser Room South side Building	Butterball	1-1/2 "	Monitored	Yes	Yes	Yes	Yes	Yes	7.5
System C Bldg.	4" Mueller OS&Y	Exterior Riser Room South side of Building	OS&Y	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	14
System F Bldg.	4" Mueller OS&Y	Exterior Riser Room East side of Building	OS&Y	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	14
Building D Wet System	6" Kennedy Butterfly Tamper Valve	Exterior Riser Room South side of Building	Butterfly	6 "	Monitored	Yes	Yes	Yes	Yes	Yes	10.5

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FIRE PROTECTION, INC.

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
System A Bldg.	2" Main Drain	@ Riser	Globe Valve	Yes	Yes
System B Bldg.	2" Main Drain	@ Riser	Ball Valve	Yes	Yes
System G Bldg.	2" Main Drain	@ Riser	Ball Valve	Yes	Yes
System E Bldg.	2" Main Drain	@ Riser	Ball Valve	Yes	Yes
Building D Deluge System	2" Main Drain	@ Riser	Ball Valve	Yes	Yes
System C Bldg.	2" Main Drain	@ Riser	Ball Valve	Yes	Yes
System F Bldg.	2" Main Drain	@ Riser	Ball Valve	Yes	Yes

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Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
	Building A Wet System	1	Potter	Water Flow Switch			Pass
	Building A Wet System	1	Potter	Os&Y Tamper Switch		Manually tested; needs Adj	Pass
	@ Backflow	1	FDC	Fire Department Connection		No caps	Fail
	Building D Deluge System	1	Potter	Low Air Pressure Switch			N/A
	Building D Deluge System	1	SpeedAire	Air Compressor			Pass
	Building G Wet System	1	Potter	Os&Y Tamper Switch		Did not report to fire panel	Fail
	Building G Wet System	1	Potter	Water Flow Switch	Critical	Did not activate F/A	Fail
	Building B Wet System	1	Potter	Os&Y Tamper Switch		Manually tested; needs Adj.	Pass
	Building B Wet System	1	Potter	Water Flow Switch			Pass
	Building E Wet System	1	Potter	Os&Y Tamper Switch			Pass
	Building E Wet System	1	Potter	Water Flow Switch		Exceeded 90 sec (1:51)	Fail
	Building C Wet System	1	Potter	Os&Y Tamper Switch			Pass
	Building C Wet System	1	Potter	Water Flow Switch			Pass
	Building F Wet System	1	Potter	Os&Y Tamper Switch			Pass
	Building F Wet System	1	Potter	Water Flow Switch		Exceeded 90 sec (1:58)	Fail
	Building D Deluge System	1	Milwaukee	Butterfly Tamper Switch			Pass

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FIRE PROTECTION, INC.

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
	Building D Deluge System	1	Potter	Alarm Pressure Switch			Pass
	Building D Wet System	1	Kennedy	Butterfly Tamper Switch			
	Building D Wet System	1	Potter	Water Flow Switch			Pass

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Questions with Photos and Notes

Fire Pump - For electric motors operating at the rated voltage and frequency, is the ampere demand on each phase less than or equal to the product of the full load ampere rating times the allowable service factor as stamped on the motor nameplate?

N/A

Notes:

Can not open control panel to access screen when FP is running

- Is the FDC swivels and couplings not damaged?

Yes

Notes:

Could not check swivels. Wasps nest inside FDC



Visit Photos

FP - multiple troubles

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Deficiencies - General Questions

Deficiency #1

Are all fire protection systems in service?: No

Notes:

Deficiency #2

Do valve supervisory switches indicate movement?: No

Notes: A & B - supervisory did not report when opening and closing valve , manually tested .
G Bldg - supervisory did not report

Deficiency #3

The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?: No

Notes: G-Bldg - Waterflow did not active F/A
F & E Bldg - Waterflow times exceeded 90 sec

Deficiency #4

Are alarms and supervisory devices not damaged?: No

Notes: Tamper valves needs adjustment on A- B

Deficiency #5

Are the FDC caps and plugs in place?: No

Notes: Missing caps

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Deficiency #5 - Photo #1



Date Taken: April 18, 2023

Deficiency #6

Are visible sprinklers free of foreign materials including paint?: No

Notes: OutsideB119
Cafeteria-2 heads with protectors still on
G- Bldg - painted upright heads

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Deficiency #6 - Photo #1



Date Taken: April 18, 2023

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Deficiency #6 - Photo #2



Date Taken: April 18, 2023

Deficiency #7

Are there spare sprinklers and a sprinkler wrench?: No

Notes: No wrench in bldgs B & E

Deficiency #8

Are all escutcheon plates installed on sprinkler heads?: No

Notes: A Bldg

Library- 1

Outside office -1

Office hall- 3 (3/4)

A Hall to B Hall -1 (3/4)

B Hall - assist Principle- tile wet and tile needs replacing, missing esc

Cafeteria - 15 (3/4) chrome

Cafeteria Kitchen 10 (1/2) chrome

E Bldg entrance - 2 (1/2)

E103- 1 (1/2)

E108-2 (1/2)

E111- 1 (1/2)

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Deficiency #8 - Photo #1



Date Taken: April 18, 2023

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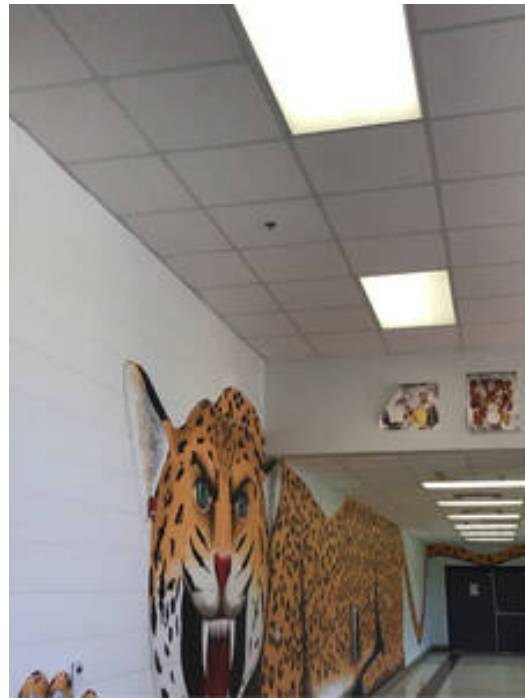
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Deficiency #8 - Photo #2



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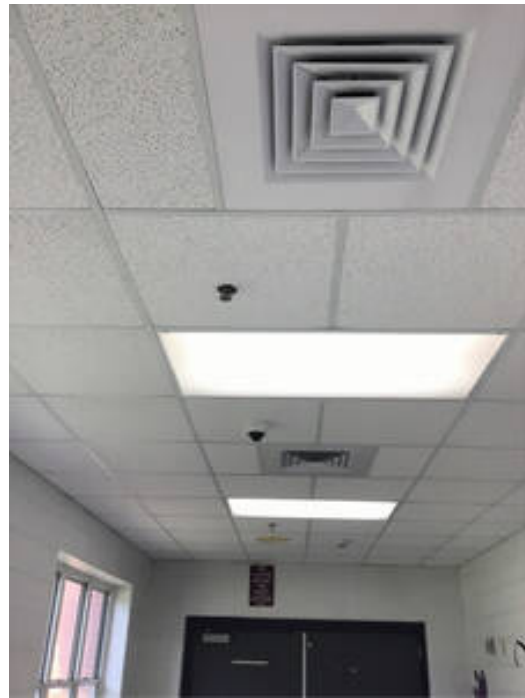
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FIRE PROTECTION, INC.

Deficiency #8 - Photo #3



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Deficiency #8 - Photo #4



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Deficiency #8 - Photo #5



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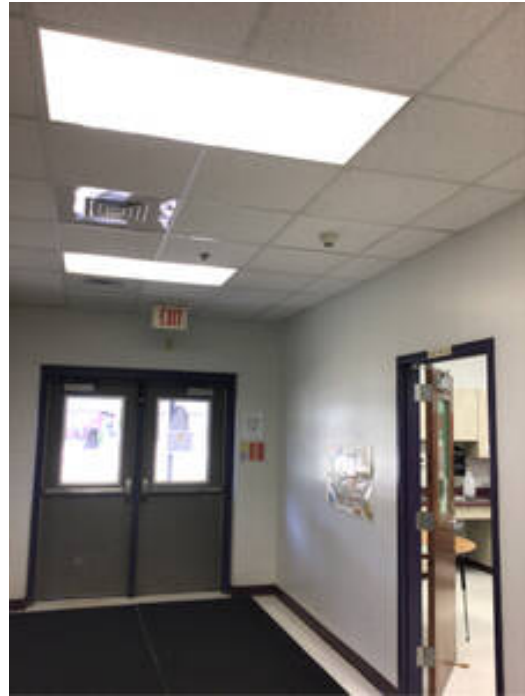
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Deficiency #8 - Photo #6



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Deficiency #8 - Photo #7



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Print Date: 2023-04-19

Conducted by: Bora Yann
NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc
MS-14326-SC AL-3693 LA-F1173 FL-873651-
0001-2007
1209C Highway 613 South
Luedale MS 39452

INDUSTRIAL-COMMERCIAL



FIRE PROTECTION, INC.

Deficiency #8 - Photo #8



Date Taken: April 18, 2023

Report of Inspection / Test

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2023-04-18

Property

Blount High School
KH

5450 Lott Road
Mobile AL 36613

Mario Morrisette

Print Date: 2023-04-19

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Deficiency #8 - Photo #9



Date Taken: April 18, 2023

Deficiencies - General Wet System Questions

None

Deficiencies - General Deluge System Questions

None

Deficiencies - System A Bldg.

None

Deficiencies - System B Bldg.

None

Deficiencies - System G Bldg.

None

Deficiencies - System E Bldg.

None

Deficiencies - Building D Deluge System

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None

Deficiencies - System C Bldg.

None

Deficiencies - System F Bldg.

None

Deficiencies - Building D Wet System

None

Deficiencies - Fire Pump

None

Deficiencies - Fire Hydrant #1

Deficiency #9

Did the hydrant flow until clear (minimum of 1 minute)?: No

Notes: Hydrant inside locked gate. Inaccessible

Deficiencies - Fire Hydrant #2

Deficiency #10

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - Fire Hydrant #3

Deficiency #11

Are hydrant caps, stems, outlets, and threads lubricated and in good condition?: No

Notes: 2.5 cap leaking , Seals is bad

Deficiency #12

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - Fire Hydrant #4

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Deficiency #13

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - Fire Hydrant #5

Deficiency #14

Is the Road box and shutoff valve visible and accessible?: No

Notes: Hydrant lacking pressure during flow

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

Deficiency #15

Address

Location: Building E Wet System

Equipment Type: #EquipmentType:0x0000563c5d3334d0>

QTY: 1

Description: VSR

Status: Fail

Notes:

Deficiency #16

Address

Location: Building F Wet System

Equipment Type: #EquipmentType:0x0000563c5d3334d0>

QTY: 1

Description: VSR-F

Status: Fail

Notes:

Deficiency #17

Address

Location: Building G Wet System

Equipment Type: #EquipmentType:0x0000563c5d3334d0>

QTY: 1

Description: VSR-F

Status: Fail

Notes:

Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

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None

Deficiencies - OS&Y Tamper Switch

Deficiency #18

Address

Location: Building G Wet System

Equipment Type: #EquipmentType:0x0000563c5d333200>

QTY: 1

Description: OSYSU-2

Status: Fail

Notes:

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

Deficiency #19

Address

Location: @ Backflow

Equipment Type: #EquipmentType:0x0000563c5d3332eb8>

QTY: 1

Description

Status: Fail

Notes:

Deficiencies - Alarm Pressure Switch

None

Deficiencies - Inspectors Test Connection

Deficiency #20

Location: Filter Storage by South Exit Door

Description: 1" Inspectors Test Valve

Pass?: No

Was alarm reported?: No

Notes: Exceeded 90 sec , no alarms

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Deficiency #21

Location: @ Riser

Description: 1-1/4" Inspectors Test Valve

Pass?: No

Notes: Waterflow time to activate F/A exceeds 90sec
Missing Test & Drain handle

Deficiency #22

Location: @ Riser

Description: 1-1/4" Inspectors Test Valve

Pass?: No

Notes: Exceeded 90 sec for alarm activation

Deficiencies - Valves

Deficiency #23

Location: Riser Room

Valve Type: o_s_y

Size: 4

Description: 4" Muller OS&Y

Signs: No

Notes: Missing sign

Deficiencies - Drain Valves

None

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Inspector Signature

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

Inspector Name

Bora Yann
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
153252

Signature

A handwritten signature in black ink, appearing to be "Bora Yann", written in a cursive style.

Date Completed

2023-04-18

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2023-02-24

Property

Breitling Elementary School
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8350 Grand Bay Wilmer Road

Grand Bay AL 36541

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NICET LEVEL II - Inspection & Testing of
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IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Is the clapper and automatic drain valve in place and properly operating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
---	---	---	---

SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

VALVE AREA

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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
---	---	---	---

ALARMS

Is the alarm valve free from physical damage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

MAINTENANCE

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<p>Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>If sprinklers have been replaced, were they proper replacements?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If conditions were found that required flushing, was flushing of the system conducted?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Was a drain test conducted after opening any closed valve?</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
<p>Operating stem of all OS&Y valves lubricated, completely closed and reopened?</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<p>Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Report of Inspection / Test for Asset - Fire Hydrant #1 N.E Corner of School

Fire Hydrant Information

Hydrant ID	Hydrant #1
Description	Mueller 5-1/4" 584N
Location	N.E Corner of School

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

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Hydrant Flow Test

Static Pressure	65	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Fire Hydrant #2 N.W Corner of School

Fire Hydrant Information

Hydrant ID	Hydrant #2
Description	Mueller 5-1/4" 584N
Location	N.W Corner of School

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flow acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Mario Morrisette

Print Date: 2023-02-27

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc
MS-14326-SC AL-3693 LA-F1173 FL-873651-
0001-2007

1209C Highway 613 South
Lucaledale MS 39452

Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	65	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Fire Hydrant #3 Front Entrance

Fire Hydrant Information

Hydrant ID	Hydrant #3
Description	Mueller 5-1/4" 584N
Location	Front Entrance

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

Report of Inspection / Test

Annual NFPA 25

INDUSTRIAL-COMMERCIAL



FIRE PROTECTION, INC.

2023-02-24

Property

Breitling Elementary School
KH

8350 Grand Bay Wilmer Road

Grand Bay AL 36541

Mario Morrisette

Print Date: 2023-02-27

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NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc

MS-14326-SC AL-3693 LA-F1173 FL-873651-

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Lucedale MS 39452

Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	65	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Fire Hydrant #4 S.E Corner of School

Fire Hydrant Information

Hydrant ID	Hydrant #4
Description	Mueller 5-1/4" 584N

Report of Inspection / Test

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Property

Breitling Elementary School
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Print Date: 2023-02-27

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Industrial Commercial Fire Protection, Inc

MS-14326-SC AL-3693 LA-F1173 FL-873651-

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FIRE PROTECTION, INC.

Location

S.E Corner of School

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flow acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	65	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

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INDUSTRIAL-COMMERCIAL



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Property

Breitling Elementary School
KH

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Mario Morrisette

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NICET LEVEL II - Inspection & Testing of
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Industrial Commercial Fire Protection, Inc
MS-14326-SC AL-3693 LA-F1173 FL-873651-
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Lucedale MS 39452

Static Hydrant

Static Pressure

N/A

Residual Pressure

N/A

Final Hydrant Flow Test

Flow at 20 psi residual pressure:

N/A

Total Flow

N/A

Report of Inspection / Test for Asset - Fire Hydrant #5 S.W Corner of School

Fire Hydrant Information

Hydrant ID

Hydrant #5

Description

Mueller 5-1/4" 584N

Location

S.W Corner of School

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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INDUSTRIAL-COMMERCIAL



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Property

Breitling Elementary School
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8350 Grand Bay Wilmer Road

Grand Bay AL 36541

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NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc

MS-14326-SC AL-3693 LA-F1173 FL-873651-

0001-2007

1209C Highway 613 South

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Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
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Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
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Hydrant Flow Test

Static Pressure	65	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Fire Hydrant #6 Backside of School

Fire Hydrant Information

Hydrant ID	Hydrant #6
Description	Mueller 5-1/4" 584N
Location	Backside of School

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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Water-Based Systems # 153252

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Have backflow devices, if installed, passed full flow test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	65	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
South System	175	165	175	.1	Yes	Yes
North System	175	160	175	.1	Yes	Yes

Report of Inspection / Test

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Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc

MS-14326-SC AL-3693 LA-F1173 FL-873651-

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FIRE PROTECTION, INC.

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
South System	Cafeteria kitchen rear door	1" Inspectors Test Valve	38	Yes	Yes	Yes	Yes	Yes
North System	Room 110 N.E Corner above Ceiling	1" Inspectors Test Valve	1:45	Yes	Yes	Yes	Yes	Yes

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
South System	Control valve	Riser Room	OS&Y	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	13
North System	Control Valve	Riser Room	OS&Y	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	13
North System	Suction Valve	Riser Room	OS&Y	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	13
South System	Discharge/ Dead head valve.	Riser Room	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	13
South System	Test Header Control Valve	Riser Room	Butterfly	4 "	Monitored	N/A	Yes	Yes	N/A	N/A	

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
South System	1" Aux	Gym closet SE	Globe Valve	Yes	Yes
North System	2" Main Drain	Riser Room	Angle Valve	Yes	Yes
South System	2" Main Drain	Riser Room	Angle Valve	Yes	Yes

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FIRE PROTECTION, INC.

Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
	Remote FDC next to Dumpsters	1	FDC	Fire Department Connection		Sign faded	Pass
	North System	1	Potter	Water Flow Switch			Pass
	South System	1	Potter	Water Flow Switch			Pass
	North System	1	Potter	Os&Y Tamper Switch			Pass
	South System	1	Potter	Os&Y Tamper Switch			Pass
	Riser Room / Suction Valve	1	System Sensor	Os&Y Tamper Switch			Pass
	Riser Room / Deadhead Control Valve	1	Victaulic	Butterfly Tamper Switch			Pass
	Riser Room / Test Header Control Valve	1	Victaulic	Butterfly Tamper Switch			Pass

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Breitling Elementary School
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Water-Based Systems # 153252

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MS-14326-SC AL-3693 LA-F1173 FL-873651-

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The logo for Industrial Commercial Fire Protection, Inc. features the letters 'ICFP' in a large, bold, yellow-to-orange gradient font. The letters are outlined in blue and have a slight shadow effect. The 'I' and 'C' are connected at the top, and the 'F' and 'P' are connected at the top. The letters are set against a white background with a thin blue horizontal line above and below them.

FIRE PROTECTION, INC.

Questions with Photos and Notes

ITV - 1" Inspectors Test Valve Room 110 N.E Corner above Ceiling

Notes:

Exceeded 90 sec

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Deficiencies - General Questions

Deficiency #1

Is the FDC identification sign(s) in place?: No

Notes: Sign faded

Deficiency #1 - Photo #1



Date Taken: February 24, 2023

Deficiency #2

Is the information sign attached and legible?: No

Notes:

Deficiencies - General Wet System Questions

None

Deficiencies - South System

None

Deficiencies - North System

None

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Breitling Elementary School
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Deficiencies - Fire Hydrant #1 N.E Corner of School

None

Deficiencies - Fire Hydrant #2 N.W Corner of School

Deficiency #3

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - Fire Hydrant #3 Front Entrance

Deficiency #4

Are hydrant caps, stems, outlets, and threads lubricated and in good condition?: No

Notes: 2.5 threaded sleeve bad ; can not tight up cap

Deficiency #4 - Photo #1



Date Taken: February 24, 2023

Deficiencies - Fire Hydrant #4 S.E Corner of School

Report of Inspection / Test

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2023-02-24

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Breitling Elementary School
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Print Date: 2023-02-27

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Deficiency #5

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - Fire Hydrant #5 S.W Corner of School

None

Deficiencies - Fire Hydrant #6 Backside of School

None

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

None

Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

None

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

None

Deficiencies - Inspectors Test Connection

None

Deficiencies - Valves

None

Report of Inspection / Test

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2023-02-24

Property

Breitling Elementary School
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FIRE PROTECTION, INC.

Deficiencies - Drain Valves

None

Report of Inspection / Test

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2023-02-24

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Water-Based Systems # 153252

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1209C Highway 613 South

Luedale MS 39452

Inspector Signature

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

Inspector Name

Bora Yann
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
153252

Signature

A handwritten signature in black ink, appearing to be "Bora Yann", written in a cursive style.

Date Completed

2023-02-24

Report of Inspection / Test

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INDUSTRIAL-COMMERCIAL



2023-07-28

Property

Bryant High School
KH

14001 Hurricane Boulevard

Irvington AL 36544

Mario Morrisette

Print Date: 2023-07-28

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc

MS-14326-SC AL-3693 LA-F1173 FL-873651-

0001-2007

1209C Highway 613 South

Lucaledale MS 39452

IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Is the clapper and automatic drain valve in place and properly operating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
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SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

VALVE AREA

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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
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ALARMS

Is the alarm valve free from physical damage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

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<p>Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>If sprinklers have been replaced, were they proper replacements?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If conditions were found that required flushing, was flushing of the system conducted?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Was a drain test conducted after opening any closed valve?</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
<p>Operating stem of all OS&Y valves lubricated, completely closed and reopened?</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<p>Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?</p>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

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FIRE PROTECTION, INC.

Report of Inspection / Test for Asset - Fire Pump

Fire Pump Information

Property Name Alma Bryant high school

Demand(s) of Fire protection systems supplied by pump: Sprinkler system

Pump (Horizontal or Vertical): Horizontal

Pump Manufacturer Patterson

Shop/Serial Number FP-C14572-001

Model 8x5x17 SSC

Rated GPM 1000

Rated Pressure 95

Rated 150 Pressure 67

Rated 0 Pressure 116

Rated RPM 1775

Suction City

Driver, (electric or diesel engine) Electric

Engine Manufacturer Weg

Engine Model 075180P3E365TS

Rated Horsepower 75

Rated Speed 1780

Rated Voltage 208/230

Operating Voltage 208/230

Rated Amps 189/171

Phase Cycles 3

Service Factor 1.15

Controller Manufacturer Master control systems

Controller Shop/Serial Number 83642

Controller Model MC0-75-46-H

Jockey Pump Manufacturer Baldor

Jockey Pump Model 84Z00007

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Jockey Pump Serial Number	34F140-283F5
Jockey Controller Manufacturer	Master control systems
Jockey Controller Model	PMC-1.5-3-46
Jockey Controller Serial Number	80100
Transfer Switch Manufacturer	Master control systems
Transfer Switch Model	MC0-75-46-H
Transfer Switch Serial Number	83642

OWNER SECTION

Is there a Jockey Pump on system?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Jockey Settings? (on/off)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the fire pump in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the pump remained in service since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

CONTROLLER TEST

Did the pump start at least 6 times from automatic sources?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Was each automatic starting feature tested at least once?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
For electric driven pump controllers: on a simulation of a power failure, while pump is under peak load, did the transfer switch transfer from the normal to emergency source without opening overcurrent protection devices on either line?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	For electric driven pump controllers: when normal power was restored, did retransfer from emergency to normal power occur without overcurrent protection devices opening on either line?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
For electric driven pump controllers: were at least half of the automatic and manual starts required performed with the pump connected to the alternate source?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Were all signal conditions simulated demonstrating workable operation?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

INSPECTION

Pump house/room proper temperature?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Ventilating louvers free to operate?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are suction, discharge and bypass valves open?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is Piping free from leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Suction and system pressure gauges normal?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Suction reservoir, if provided, full?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Wet pit suction screens are clean and in place?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Waterflow test valves in closed position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Controller indicating power on?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Transfer switch indicating normal situation?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Isolation switch closed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Pump in correct phase?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Oil level in motor sight glass in correct range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Circulation relief valve flowing water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Pressure relief valves operating with proper pressure downstream while pump is operational?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

TESTING

Electric pump started automatically?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Electric motor driven pump ran for 10 min?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Packing gland showing slight discharge? (Adjust if necessary)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Packing boxes, bearing and pump casing free from overheating?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Time for engine motor to reach full speed:	N/A	For automatic stop controllers, record time pump runs after starting:	N/A
Electric motor driven pumps with reduced voltage or reduced current starting, record the time the controller is in the 1st step:	N/A	Are all above times and pressures and results acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Circulation and pressure relief valves operated properly during all flow tests?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	No alarm indicators or other visible abnormalities observed during no-flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Were Suction screens cleaned after flow?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Automatic transfer switch test: Power failure simulated during peak flow?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Automatic transfer switch test: Connection made to alternate source?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Automatic transfer switch test: After termination of simulated power failure did motor reconnect to source?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
All alarm conditions simulated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	All alarms operated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Fuel tank level, tank float switch, and solenoid valve operation acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Flexible hoses and connectors in fuel and coolant systems acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Oil Level and lube oil heater acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Coolant level acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Water pump for coolant system operating?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Jacket water heater for coolant system okay?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Exhaust system free of leakage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Drain condensate trap on exhaust system operational?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Connections to electrical system acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Cranking voltage acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Isolation switch and circuit breaker exercised?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Battery case clean, dry and free of corrosion?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Charger and charge rate passed inspection and battery charge being equalized?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Do Circuit breakers appear clean?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Cleaned or replaced crank case breather in lubrication systems?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Cleaned water strainer in coolant system?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Battery terminals clean and tight?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Electrical systems free of wire chafing?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Manual starting means on electrical systems operated and boxes, panels and cabinets cleaned?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Antifreeze tested in coolant system?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Flexible exhaust section acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Changed pump bearing lubrication?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Shaft end play acceptable?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Pressure gauges and sensors accurate?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Coupling alignment acceptable?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Transmission coupling, right angle gear drive and mechanical moving parts lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Circuit breakers passed trip test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Emergency manual starting means operated without power?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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Electrical connections secure?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the volt meter and ammeter accurate?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Pressure switch settings calibrated?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Motor bearing greased?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Fuel tank free of water and foreign material?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Fuel tank vents and overflow pipes free of obstructions?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Fuel piping acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Antifreeze changed in coolant system?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Heater exchange cleaned out?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Ducts and louvers for combustion air okay?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Exhaust system hanged in supports acceptable and system free of back pressure?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Control and power wiring tight?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
No corrosion on circuit boards?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	No cracked cable wire insulation?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
No leaks in plumbing parts?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	No sign or water on electrical parts?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

FLOW TEST

Run the pump at no-load, rated load and peak load (usually 150% of the rated load) conditions. For variable speed drivers, run the test with pressure limiting control "on" at 25, 50, 75, 100, 125, and 150% of rated load and then again rated speed w/ the pump isolated from the fire protection system and the relief valve closed.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Was equipment and gauges calibrated?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Date of last calibration	N/A	For electric motors operating at the rated voltage and frequency, is the ampere demand on each phase less than or equal to the product of the full load ampere rating times the allowable service factor as stamped on the motor nameplate?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
For electric motors operating under varying voltage, was the product of the actual voltage and current demand on each phase less than or equal to the product of the rated full load current times the rated voltage times the allowable service factor?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	For electric motors operating under varying voltage, did the voltage stay within the range of 95% to 110% of the rated voltage during the test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Did engine-drive unit show no signs of overload or stress?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Was the governor set to properly regulate the engine speed at rated pump speed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

Report of Inspection / Test

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2023-07-28

Property

Bryant High School
KH

14001 Hurricane Boulevard
Irvington AL 36544

Mario Morrisette

Print Date: 2023-07-28

Conducted by: Bora Yann
NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc
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1209C Highway 613 South
Lucaledale MS 39452

Did the gear drive assembly operate without excessive objectionable noise, vibration, or heating?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Was the unit started and brought up to rated speed without interruption under discharge conditions equal to peak load?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Did the pump perform equal to the manufacturer's curve within the accuracy limits of the test equipment?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did the unadjusted performance discharge curve meet or exceed the fire protection system demands?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Were there no vibrations that could damage any fire pump component?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the pump perform at all conditions without objectionable overheating of any component?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have electric motor pumps pass the phase reversal test on normal and alternate (if provided) power?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	For vertical turbine pumps taking the suction from wells, is the water level capable of being recorded?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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PERFORMANCE

Rated %	Driver speed: RPM	Total Flow	Net Pressure: PSI	Discharge Pressure: PSI	Suction Pressure: PSI
0%	N/A	No Flow / Churn Only	113.0	168.0	55.0
100%	N/A	1030	0.0	0.0	0.0
150%	N/A	1545	0.0	0.0	0.0
Roof Shot	N/A	N/A	0.0	0.0	0.0

ELECTRIC MOTOR

	L1 Voltage	L1 Amperes	L2 Voltage	L2 Amperes	L3 Voltage	L3 Amperes
0%	N/A	N/A	N/A	N/A	N/A	N/A
100%	N/A	N/A	N/A	N/A	N/A	N/A
150%	N/A	N/A	N/A	N/A	N/A	N/A
Roof Shot	N/A	N/A	N/A	N/A	N/A	N/A

Pump Flow Detail

Coefficient (same for all): .97

Nozzle/Orifice Size: 1.75 (inches)

	PITOT					
	1	2	3	4	5	6
0%	N/A	N/A	N/A	N/A	N/A	N/A
100%	26.5	26.5	0	0	0	0
150%	26.5	26.5	26.5	N/A	N/A	N/A
Roof Shot	N/A	N/A	N/A	N/A	N/A	N/A

	FLOW					
	No Flow / Churn Only	No Flow / Churn Only	No Flow / Churn Only	No Flow / Churn Only	No Flow / Churn Only	No Flow / Churn Only
0%	No Flow / Churn Only	No Flow / Churn Only	No Flow / Churn Only	No Flow / Churn Only	No Flow / Churn Only	No Flow / Churn Only
100%	515	515	N/A	N/A	N/A	N/A
150%	515	515	515	0	0	0
Roof Shot	N/A	N/A	N/A	N/A	N/A	N/A

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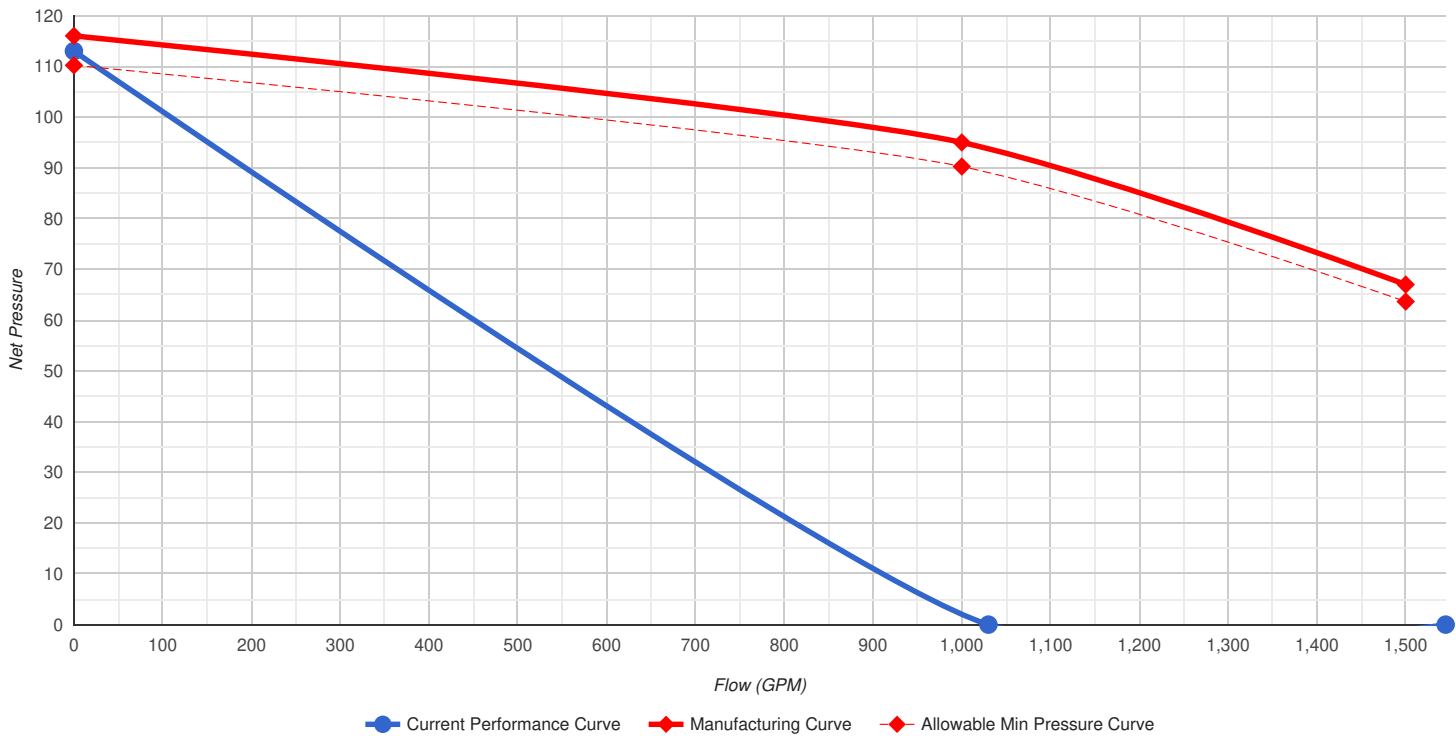
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FIRE PROTECTION, INC.



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FIRE PROTECTION, INC.

Report of Inspection / Test for Asset - South of school by fish tanks fire hydrant

Fire Hydrant Information

Description American Darling

Location Near fish pond

Static Hydrant Description Red Hydrant

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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Are monitor nozzles lubricated? Yes
 No
 NA

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - In front of office fire hydrant

Fire Hydrant Information

Description	American Darling
Location	Front of office
Static Hydrant Description	Red hydrant

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - NE side of gym fire hydrant

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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FIRE PROTECTION, INC.

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Property

Bryant High School
KH

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Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - SE side of gym fire hydrant

Fire Hydrant Information

Description	Mueller
Location	SE Gym
Static Hydrant Description	Red Hydrant

QUESTIONS

Report of Inspection / Test

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Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:

N/A

Total Flow

N/A

Report of Inspection / Test for Asset - North of Football field Concession

Fire Hydrant Information

Description

5 1/4

Location

North of Concessions

Static Hydrant Description

Red Hydrant

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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Are monitor nozzles lubricated? Yes
 No
 NA

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - SE of Field House Hydrant

Fire Hydrant Information

Description	Mueller 5 1/4
Location	SE of Field House
Static Hydrant Description	Red Hydrant

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Front of Dance Studio

Fire Hydrant Information

Description	Unknown
Location	Gillespie Dance Studio
Static Hydrant Description	Red Hydrant

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

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Does the operating nut turn with no difficulty?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have control valves been operated through complete range??	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
B Hall System	130	N/A	N/A	N/A	No	Yes
H Hall System	190	90	170	3	Yes	Yes
Dance Hall System	N/A	N/A	N/A	N/A	No	No
Field House System	200	150	190	3	Yes	Yes
Voltech Bldg Wet System	145	100	190	3	Yes	Yes
Gym System	200	140	180	3	Yes	Yes
500 Building System	200	130	154	3	Yes	Yes

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
B Hall System	A Hall Room A11 N.W Corner above Ceiling	1" ITV	N/A	N/A	N/A	N/A	N/A	N/A
H Hall System	G Hall Room G8 N.E Corner above Ceiling	1" ITV	21	Yes	No	No	Yes	Yes
Dance Hall System	Riser Room above Ceiling	1" globe valve above ceiling (12'AFF)		N/A	N/A	N/A	N/A	N/A
Field House System	2nd Floor Meeting Room	1" ITV	36	Yes	Yes	Yes	Yes	Yes
Voltech Bldg Wet System	S.W Corner of Welding Area by Roll Up Door	1" ITV	44	Yes	Yes	Yes	Yes	Yes
Gym System	Girls Locker Room Shower	1" ITV	62	Yes	No	No	No	Yes
500 Building System	Riser	1" globe Valve	42	Yes	Yes	Yes	Yes	Yes

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VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
B Hall System	Stock ham control valve	Room B2 Storage Closet	OS&Y	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	10
H Hall System	Kennedy control valve	Room H4 Storage Closet	OS&Y	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	13
Dance Hall System	Victaulic control valve	Riser Room	Butterfly	2-1/2 "	Monitored	Yes	No	Yes	No	N/A	
Field House System	Kennedy control valve	NE corner	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	10.5
Voltech Bldg Wet System	Victaulic control valve	NE corner	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	14
Gym System	Muller control valve	Storage Closet	OS&Y	3 "	Monitored	Yes	Yes	Yes	Yes	Yes	16
500 Building System	Nibco control valve	South Outside Mechanical Room	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	13
Dance Hall System	Victaulic Check	Riser Room	Check Valve	2-1/2 "	Not Applicable	N/A	N/A	N/A	N/A	N/A	
500 Building System	Globe check	South Outside Mechanical Room	Riser Check Valve	4 "	Not Applicable	Yes	Yes	Yes	N/A	N/A	
Voltech Bldg Wet System	Victaulic Check	NE corner	Riser Check Valve	4 "	Not Applicable	Yes	Yes	N/A	N/A	N/A	
B Hall System	Central Check	Room B2 Storage Closet	Riser Check Valve	4 "	Not Applicable	Yes	Yes	Yes	N/A	N/A	
Field House System	Viking Check	NE corner	Riser Check Valve	4 "	Not Applicable	Yes	Yes	Yes	N/A	N/A	
H Hall System	Central Check	Room H4 Storage Closet	Riser Check Valve	4 "	Not Applicable	Yes	Yes	Yes	N/A	N/A	
Voltech Bldg Wet System	CLOW	Outside of Riser	Post Indicator	4 "	Not Secured	Yes	Yes	Yes	Yes	Yes	18
	Muller	Backflow	OS&Y	6 "	Locked	N/A	N/A	N/A	N/A	N/A	
	Muller	Backflow	OS&Y	6 "	Locked	N/A	N/A	N/A	N/A	N/A	

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
Dance Hall System	1-1/4" main Drain	On Riser	Globe Valve	Yes	Yes
Gym System	1-1/4" main Drain	On Riser	Globe Valve	Yes	Yes
B Hall System	1-1/4" main Drain	On Riser	Globe Valve	Yes	No
Gym System	1" Aux	Boys locker room shower	Globe Valve	Yes	Yes
500 Building System	2" main Drain	On Riser	Globe Valve	Yes	Yes
H Hall System	2" main Drain	On Riser	Globe Valve	Yes	Yes

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Field House System	2" main Drain	On Riser	Globe Valve	Yes	Yes
Voltech Bldg Wet System	2" main Drain	On Riser	Globe Valve	Yes	Yes

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Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
	B Hall	1	Potter	Water Flow Switch			Pass
	B hall	1	Potter	Os&Y Tamper Switch		Valve is shut	Pass
	H hall	1	Potter	Water Flow Switch		21sec, manually tested	Pass
	H hall	1	Potter	Os&Y Tamper Switch			Pass
	Dance hall	1	Potter	Water Flow Switch			N/A
	Dance hall	1		Butterfly Tamper Switch			N/A
	Field house	1	Potter	Water Flow Switch			Pass
	Field house	1		Butterfly Tamper Switch			Pass
	Weld shop	1	Potter	Water Flow Switch			Pass
	Weld shop	1		Butterfly Tamper Switch			Pass
	Gym	1	Potter	Water Flow Switch		62 sec manually tested	Pass
	Gym	1	Potter	Os&Y Tamper Switch			Pass
	500 Building	1	Potter	Water Flow Switch			Pass
	500 Building	1		Butterfly Tamper Switch			Pass
	Dance Hall	1	FDC	Fire Department Connection		Swivels seized; Bush obstructing access, faded sign	Fail

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Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
	Weld Shop	1	FDC	Fire Department Connection		Not visible , signfadex	Pass
	Field House	1	FDC	Fire Department Connection		Not visible, No sign , missing cap	Fail
	500 Building	1	Remote FDC	Fire Department Connection			Pass
	Delete	1	Delete	Water Flow Switch			
B Hall, H Hall, First Aid Admin, Gym & 500 Building	Side of Building 500	1	Remote FDC	Fire Department Connection			Pass

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Questions with Photos and Notes

Fire Pump - Is there a Jockey Pump on system?

Yes

Notes:

Jockey pump was constantly running upon arrival . Pump running hot

Drain Valve - 1" Aux Boys locker room shower

Notes:



ITV - 1" ITV A Hall Room A11 N.W Corner above Ceiling

Notes:

System has a leak. System is shut down

ITV - 1" globe valve above ceiling (12'AFF) Riser Room above Ceiling

Notes:

Inaccessible, floors getting waxed

H hall - Potter - Water Flow Switch

Notes:

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Floors waxed, inaccessible

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Deficiencies - General Questions

Deficiency #1

Are all Identification Signs in place?: No

Notes:

Deficiency #2

Are visible sprinklers free of corrosion and physical damage?: No

Notes: Voltech - corroded head in bathroom

Deficiency #2 - Photo #1



Date Taken: July 28, 2023

Deficiency #3

Are control valves properly sealed and/or supervised?: No

Notes: Voltech - PIV is not secured

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Deficiency #3 - Photo #1



Date Taken: July 28, 2023

Deficiency #4

The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?: No

Notes: Some were manually tested, ITV Inaccessible, floors getting waxed

Deficiency #5

Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?: No

Notes: Missing on all risers

Deficiency #6

Are all escutcheon plates installed on sprinkler heads?: No

Notes: Gym - missing @ Boys Bathroom
Voltech - @ storage rm
OutsideH Hall - missing 3/4 white tyco

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Deficiency #6 - Photo #1



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Deficiency #6 - Photo #2



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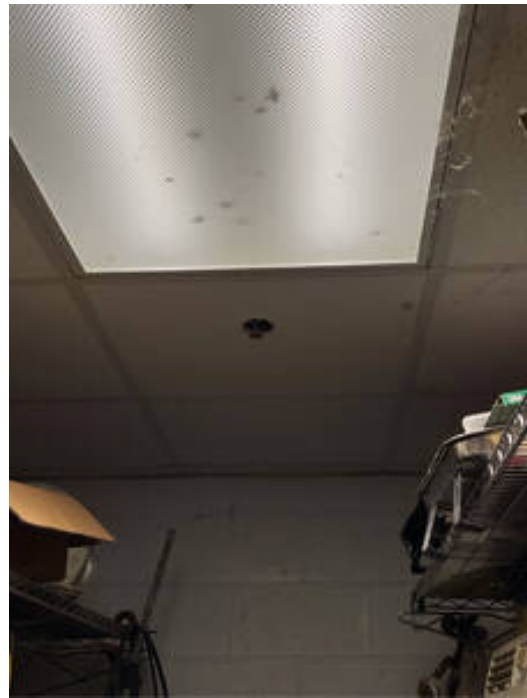
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Deficiency #6 - Photo #3



Date Taken: July 28, 2023

Deficiency #7

Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?: No

Notes: Kitchen - greased heads in kitchen

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Deficiency #7 - Photo #1



Date Taken: July 28, 2023

Deficiency #8

Are visible sprinklers free of foreign materials including paint?: No

Notes: Cafeteria- heads loaded with dust outside

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Deficiency #8 - Photo #1



Date Taken: July 28, 2023

Deficiency #9

Are there spare sprinklers and a sprinkler wrench?: No

Notes: B-2 Hall - no wrench , spares or cabinet

Gym - no wrench

H-8 Hall - no wrench

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Deficiency #9 - Photo #1



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Deficiency #9 - Photo #2



Date Taken: July 28, 2023

Deficiency #10

Are there the proper number and type of spare sprinklers?: No

Notes:

Deficiency #11

Are the FDC caps and plugs in place?: No

Notes: Dance - caps broken
Voltech - caps broken

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Deficiency #11 - Photo #1



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Deficiency #11 - Photo #2



Date Taken: July 28, 2023

Deficiency #12

Is the FDC easily accessible?: No

Notes: Dance- bush is in the way

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Deficiency #12 - Photo #1



Date Taken: July 28, 2023

Deficiency #13

Is the FDC identification sign(s) in place?: No

Notes: Dance- sign faded
Voltech - sign faded

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INDUSTRIAL-COMMERCIAL



2023-07-28

Property

Bryant High School
KH

14001 Hurricane Boulevard
Irvington AL 36544

Mario Morrisette

Print Date: 2023-07-28

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc
MS-14326-SC AL-3693 LA-F1173 FL-873651-
0001-2007

1209C Highway 613 South
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Deficiency #13 - Photo #1



Date Taken: July 28, 2023

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Deficiency #13 - Photo #2



Date Taken: July 28, 2023

Deficiency #14

Does visible pipe have no mechanical damage or leaks?: No

Notes: Pump house - (4) 2.5" hose valve leaking by , cannot preform Fire pump test
B-2 Hall - pipe leaking above ceiling (1-1/4 coupling)

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FIRE PROTECTION, INC.

Deficiency #14 - Photo #1



Date Taken: July 28, 2023

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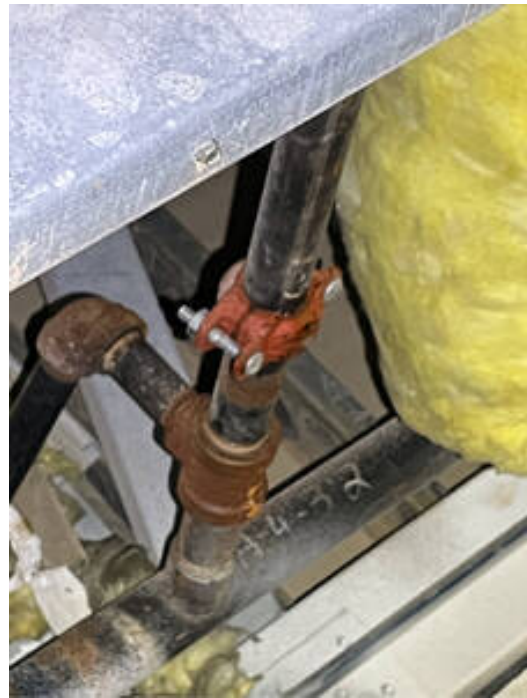
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Deficiency #14 - Photo #2



Date Taken: July 28, 2023

Deficiency #15

Is the visible pipe in good condition with no external corrosion?: No

Notes: Pump house - supply osy valve bolts rusted/corroded (8") needs replacing

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Deficiency #15 - Photo #1



Date Taken: July 28, 2023

Deficiencies - General Wet System Questions

None

Deficiencies - B Hall System

Deficiency #16

Sprinkler Type: Wet
Is flow observed?: No

Notes: Pipe leaking above ceiling , system is shut down

Deficiencies - H Hall System

None

Deficiencies - Dance Hall System

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Deficiency #17

Sprinkler Type: Wet

Are results comparable to previous test: No

Notes:

Deficiency #18

Sprinkler Type: Wet

Is flow observed?: No

Notes: Inaccessible, floors getting waxed

Deficiencies - Field House System

None

Deficiencies - Voltech Bldg Wet System

None

Deficiencies - Gym System

None

Deficiencies - 500 Building System

None

Deficiencies - Fire Pump

None

Deficiencies - South of school by fish tanks fire hydrant

Deficiency #19

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - In front of office fire hydrant

Deficiency #20

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - NE side of gym fire hydrant

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Deficiency #21

Is the hydrant properly painted and is the paint in good condition?: No

Notes: Needs to be painted red

Deficiency #21 - Photo #1



Date Taken: July 28, 2023

Deficiency #22

Does the operating nut turn with no difficulty?: No

Notes: Difficult to open and close

Deficiency #23

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - SE side of gym fire hydrant

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Deficiency #24

Is the hydrant properly painted and is the paint in good condition?: No

Notes: Needs red paint

Deficiency #24 - Photo #1



Date Taken: July 28, 2023

Deficiency #25

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - North of Football field Concession

Deficiency #26

Is the hydrant properly painted and is the paint in good condition?: No

Notes:

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Deficiency #27

Are hydrant caps, stems, outlets, and threads lubricated and in good condition?: No

Notes: 5" cap seized, will not open

Deficiency #28

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiency #29

Have dry barrels drained in at least 1 hour?: No

Notes:

Deficiency #30

Have control valves been operated through complete range??: No

Notes:

Deficiencies - SE of Field House Hydrant

Deficiency #31

Is the hydrant properly painted and is the paint in good condition?: No

Notes:

Deficiency #32

Does the operating nut turn with no difficulty?: No

Notes: Difficult to open

Deficiencies - Front of Dance Studio

Deficiency #33

Is the hydrant properly painted and is the paint in good condition?: No

Notes:

Deficiency #34

Did the hydrant flow until clear (minimum of 1 minute)?: No

Notes:

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Deficiency #35

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiency #36

Have control valves been operated through complete range??: No

Notes: Hydrant needs to be raised

Deficiency #36 - Photo #1



Date Taken: July 28, 2023

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

None

Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

None

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Deficiencies - OS&Y Tamper Switch

None

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

Deficiency #37

Address

Location: Dance Hall

Status: Fail

Equipment Type: Fire Department Connection

QTY: 1

Description: Siamese Connection

Notes:

Deficiency #38

Address

Location: Field House

Status: Fail

Equipment Type: Fire Department Connection

QTY: 1

Description: Siamese Connection

Notes:

Deficiencies - Inspectors Test Connection

Deficiency #39

Location: Girls Locker Room Shower

Description: 1" ITV

Terminates in Smooth Orifice?: No

Easily Accessible?: No

Signs: No

Notes: Locker room is locked , valve is inaccessible. Needs 1x1/2 bushing & orifice
Flowswitch manually tested

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Deficiency #39 - Photo #1



Date Taken: July 28, 2023

Deficiency #40

Location: G Hall Room G8 N.E Corner above Ceiling

Description: 1" ITV

Terminates in Smooth Orifice?: No

Easily Accessible?: No

Notes: Classroom floor getting waxed , could not enter.
Flowswitch manually tested

Deficiencies - Valves

Deficiency #41

Location: Riser Room

Valve Type: butter_fly

Size: 2-1/2

Description: Victaulic control valve

Easily Accessible?: No

Exercised?: No

Notes: Inaccessible, floors getting waxed

Deficiencies - Drain Valves

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FIRE PROTECTION, INC.

Deficiency #42

Location: On Riser

Description: 1-1/4" main Drain

Dry Type: globe_valve

Water Flow Observed?: No

Notes: Coupling leaking

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Recommendations

Fire pump test incomplete

Schools floors are getting waxed, halls & classroom are inaccessible .

Riser are to be kept clear (36") and made accessible

Jockey pump was constantly running upon arrival to test Fire Pump.

Jockey pump was running Hot

Pump - yellow tagged

B-2 - red tagged

H-4- purple

Gym - yellow

500 hall - yellow

Field house -yellow

Voltech - yellow

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Inspector Signature

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

Inspector Name

Bora Yann
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
153252

Signature

A handwritten signature in black ink, appearing to be 'BY', written in a cursive style.

Date Completed

2023-07-28

Report of Inspection / Test

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2023-02-23

Property

Burns Middle School
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6175 Girby Road

Mobile AL 36693

Mario Morrisette

Print Date: 2023-02-23

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
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FIRE PROTECTION, INC.

IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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FIRE PROTECTION, INC.

Is the clapper and automatic drain valve in place and properly operating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
---	---	---	---

SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

VALVE AREA

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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
---	---	---	---

ALARMS

Is the alarm valve free from physical damage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

MAINTENANCE

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<p>Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<p>If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>If sprinklers have been replaced, were they proper replacements?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If conditions were found that required flushing, was flushing of the system conducted?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Was a drain test conducted after opening any closed valve?</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
<p>Operating stem of all OS&Y valves lubricated, completely closed and reopened?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?</p>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

Report of Inspection / Test

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2023-02-23

Property

Burns Middle School
KH

6175 Girby Road
Mobile AL 36693

Mario Morrisette

Print Date: 2023-02-23

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc
MS-14326-SC AL-3693 LA-F1173 FL-873651-
0001-2007

1209C Highway 613 South
Lucaledale MS 39452

INDUSTRIAL-COMMERCIAL



FIRE PROTECTION, INC.

Report of Inspection / Test for Asset - Fire Hydrant #1

Fire Hydrant Information

Hydrant ID	#1
Description	Mueller 5-1/4"
Location	Parking Lot in front of School
Static Hydrant Description	Light Blue W/ Yellow top

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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Are monitor nozzles lubricated?

Yes

No

NA

Hydrant Flow Test

Static Pressure

N/A

Residual Pressure

N/A

Pitot Pressure

N/A

Orifice Size

N/A

Orifice Coefficient

N/A

Flow

N/A

Static Hydrant

Static Pressure

N/A

Residual Pressure

N/A

Final Hydrant Flow Test

Flow at 20 psi residual pressure:

N/A

Total Flow

N/A

Report of Inspection / Test for Asset - Fire Hydrant #2

Fire Hydrant Information

Hydrant ID

#2

Description

Mueller 5-1/4"

Location

Gym Parking Lot

Static Hydrant Description

Light Blue w/ Yellow top

QUESTIONS

Is there a hydrant wrench that is available and accessible?

Yes

No

NA

Is the hydrant free from cracks or leaks at outlets and on the top?

Yes

No

NA

Are pumper and nozzle caps tight?

Yes

No

NA

Is the hydrant properly painted and is the paint in good condition?

Yes

No

NA

Does the operating nut turn with no difficulty?

Yes

No

NA

Did the hydrant flow until clear (minimum of 1 minute)?

Yes

No

NA

Are all dry barrels which require pumping identified?

Yes

No

NA

Does the hydrant completely shut off?

Yes

No

NA

Have the strainers been cleaned (if possible)?

Yes

No

NA

Did monitor nozzle flowed acceptable water?

Yes

No

NA

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Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Fire Hydrant #3

Fire Hydrant Information

Hydrant ID	#3
Description	Mueller 5-1/4"
Location	S.W Corner of School
Static Hydrant Description	Light Blue w/ yellow top

QUESTIONS

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Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
-----------------	-----	-------------------	-----

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FIRE PROTECTION, INC.

Final Hydrant Flow Test

Flow at 20 psi residual pressure:

N/A

Total Flow

N/A

Report of Inspection / Test for Asset - Fire Hydrant #4

Fire Hydrant Information

Hydrant ID

#4

Description

Mueller 5-1/4"

Location

S.E Corner of School

Static Hydrant Description

Grey W/ Yellow top

QUESTIONS

Is there a hydrant wrench that is available and accessible?

Yes
 No
 NA

Is the hydrant free from cracks or leaks at outlets and on the top?

Yes
 No
 NA

Are pumper and nozzle caps tight?

Yes
 No
 NA

Is the hydrant properly painted and is the paint in good condition?

Yes
 No
 NA

Does the operating nut turn with no difficulty?

Yes
 No
 NA

Did the hydrant flow until clear (minimum of 1 minute)?

Yes
 No
 NA

Are all dry barrels which require pumping identified?

Yes
 No
 NA

Does the hydrant completely shut off?

Yes
 No
 NA

Have the strainers been cleaned (if possible)?

Yes
 No
 NA

Did monitor nozzle flow acceptable water?

Yes
 No
 NA

Have backflow devices, if installed, passed full flow test?

Yes
 No
 NA

Is there no ice or water in the barrel?

Yes
 No
 NA

Are hydrant caps, stems, outlets, and threads lubricated and in good condition?

Yes
 No
 NA

Is Exposed piping properly secured and free from leaks or physical damage?

Yes
 No
 NA

Is the Operating nut not worn, twisted or broken?

Yes
 No
 NA

Is the Road box and shutoff valve visible and accessible?

Yes
 No
 NA

Have dry barrels drained in at least 1 hour?

Yes
 No
 NA

Have control valves been operated through complete range??

Yes
 No
 NA

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Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
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Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
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Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
School Wet System	85	57	78	.1	Yes	Yes
Gym Wet System	85	52	78	.1	Yes	Yes
J-Building Wet	85	52	78	.1	Yes	Yes

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
School Wet System	Above Ceiling in Classroom E-102	1" ITV Valve	32	Yes	Yes	No	Yes	Yes
Gym Wet System	Above Ceiling in Coach's Office in Gym	1" Inspectors Test Valve	24	Yes	Yes	No	Yes	Yes
J-Building Wet	East exterior Mech Rm	1" Inspectors Test Valve	33	Yes	Yes	Yes	Yes	Yes

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VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
School Wet System	4" Victaulic Butterfly Tamper Valve	Exterior Cafeteria Mech Rm	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	16
Gym Wet System	4" Victaulic Butterfly Tamper Valve	Exterior Cafeteria Mech Rm	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	16
J-Building Wet	Anvil Butterfly Tamper Valve	Exterior Mechanical J120	Butterfly	2-1/2 "	Monitored	Yes	Yes	Yes	Yes	Yes	10
School Wet System	4" Victaulic Riser Check	@ Riser	Riser Check Valve	4 "	Not Applicable	Yes	Yes	N/A	N/A	N/A	
Gym Wet System	4" Victaulic Riser Check	@ Riser	Riser Check Valve	4 "	Not Applicable	Yes	Yes	N/A	N/A	N/A	
J-Building Wet	Victaulic	South Mech Room	Riser Check Valve	2-1/2 "	Not Applicable	Yes	Yes	N/A	N/A	N/A	

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
J-Building Wet	1-1/4" Main Drain	@ Riser	Angle Valve	Yes	Yes
School Wet System	2" Main Drain	@ Riser	Angle Valve	Yes	Yes
Gym Wet System	2" Main Drain	@ Riser	Angle Valve	Yes	Yes

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FIRE PROTECTION, INC.

Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
School System #1	Cafeteria Exterior mechanical rm	1	Potter	Water Flow Switch		Manually tripped tested	Pass
Gym System #2	Cafeteria Exterior mechanical rm	1	Potter	Water Flow Switch		Manually tripped tested	Pass
J-Building	New Building	1	Potter	Water Flow Switch			Pass
J-Building	East exterior Mech rm	1	Anvil	Butterfly Tamper Switch			Pass
J- Building	South wall	2	FDC	Fire Department Connection			Pass
School System #1	Cafeteria Exterior mechanical rm	1	Victaulic	Butterfly Tamper Switch			Pass
Gym System #2	Cafeteria Exterior mechanical rm	1	Victaulic	Butterfly Tamper Switch			Pass

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Deficiencies - General Questions

Deficiency #1

Are visible sprinklers free of corrosion and physical damage?: No

Notes:

Deficiency #2

Are visible sprinklers free of foreign materials including paint?: No

Notes: Loaded heads throughout building

Deficiency #2 - Photo #1



Date Taken: February 23, 2023

Deficiency #3

Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?: No

Notes: Corroded / greased 1/2 chrome pendent heads in kitchen (20)

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Deficiency #3 - Photo #1



Date Taken: February 23, 2023

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Deficiency #3 - Photo #2



Date Taken: February 23, 2023

Deficiency #4

Are all escutcheon plates installed on sprinkler heads?: No

Notes: Missing Esc throughout

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Deficiency #4 - Photo #1



Date Taken: February 23, 2023

Deficiencies - General Wet System Questions

None

Deficiencies - School Wet System

None

Deficiencies - Gym Wet System

None

Deficiencies - J-Building Wet

None

Deficiencies - Fire Hydrant #1

None

Deficiencies - Fire Hydrant #2

None

Deficiencies - Fire Hydrant #3

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None

Deficiencies - Fire Hydrant #4

Deficiency #5

Did the hydrant flow until clear (minimum of 1 minute)?: No

Notes:

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

None

Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

None

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

None

Deficiencies - Inspectors Test Connection

Deficiency #6

Location: Above Ceiling in Classroom E-102

Description: 1" ITV Valve

Easily Accessible?: No

Notes:

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Deficiency #7

Location: Above Ceiling in Coach's Office in Gym

Description: 1" Inspectors Test Valve

Easily Accessible?: No

Notes:

Deficiencies - Valves

None

Deficiencies - Drain Valves

None

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FIRE PROTECTION, INC.

Recommendations

J- bldg - green tagged

School- yellow tagged

Gym - yellow tagged

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Inspector Signature

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

Inspector Name

Bora Yann
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
153252

Signature

A handwritten signature in black ink, appearing to read 'Bora Yann', is written over a large, faint, light-colored watermark of the same signature.

Date Completed

2023-02-23

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2023-02-23

Property

Burroughs Elementary
KPH

6875 Burroughs Ln
Theodore AL 36582

Mario Morrisette

Print Date: 2023-04-12

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc
MS-14326-SC AL-3693 LA-F1173 FL-873651-
0001-2007

1209C Highway 613 South
Lucaledale MS 39452

IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Property

Burroughs Elementary
KPH

6875 Burroughs Ln
Theodore AL 36582

Mario Morrisette

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Is the clapper and automatic drain valve in place and properly operating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
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SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

VALVE AREA

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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
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ALARMS

Is the alarm valve free from physical damage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

MAINTENANCE

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<p>Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>If sprinklers have been replaced, were they proper replacements?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If conditions were found that required flushing, was flushing of the system conducted?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Was a drain test conducted after opening any closed valve?</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
<p>Operating stem of all OS&Y valves lubricated, completely closed and reopened?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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Report of Inspection / Test for Asset - Fire Hydrant #2 @ System #2 Backflow

Fire Hydrant Information

Hydrant ID	#2
Description	Mueller 5-1/4" 584N
Location	By the Street @ System #2 Backflow

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

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Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Fire Hydrant #1 @ System #1 Backflow

Fire Hydrant Information

Hydrant ID	#1
Description	Mueller 5-1/4" 584N
Location	East End of Buildings @ System #1 Backflow
Static Hydrant Description	Red Hydrant

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
Northside Building	95	80	95	.1	Yes	Yes
Gym	120	60	110	.1	Yes	Yes

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
Gym	Gym Riser Room / Equipment Room	1" Inspectors Test Valve	32	Yes	Yes	Yes	Yes	Yes

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INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
Northside Building	@ Riser East End of Building/ Exterior Riser Room	1" Inspectors Test / Drain Valve	36	Yes	Yes	Yes	Yes	Yes

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
Northside Building	Milwaukee Butterfly Tamper Valve	East End of Building/ Exterior Riser Room	Butterfly	2 "	Monitored	Yes	Yes	Yes	Yes	Yes	6
Gym	Gruvlok Butterfly Tamper Valve	Gym Riser Room / Equipment Room	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	10
Gym	Mod-CV-1F	Gym Riser Room / Equipment Room	Check Valve	4 "	Not Applicable	Yes	Yes	N/A	N/A	N/A	

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
Northside Building	1" Inspectors Test / Main Drain Valve	System#1	Test And Drain	Yes	Yes
Gym	2" Main Drain	System #2	Angle Valve	Yes	Yes

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FIRE PROTECTION, INC.

Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
	Northside Building	1	Potter	Water Flow Switch			Pass
	Gym	1	Potter	Water Flow Switch	Noncritical		Pass
	Northside Building	1	Milwaukee	Butterfly Tamper Switch			Pass
	Gym	1	Anvil	Butterfly Tamper Switch			Pass
	Northside Building	1	FDC	Fire Department Connection			Pass
	Gym	1	FDC	Fire Department Connection			Pass

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Deficiencies - General Questions

Deficiency #1

Is the information sign attached and legible?: No

Notes:

Deficiencies - General Wet System Questions

None

Deficiencies - Northside Building

None

Deficiencies - Gym

None

Deficiencies - Fire Hydrant #2 @ System #2 Backflow

None

Deficiencies - Fire Hydrant #1 @ System #1 Backflow

None

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

None

Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

None

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

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FIRE PROTECTION, INC.

None

Deficiencies - Fire Department Connection

None

Deficiencies - Alarm Pressure Switch

None

Deficiencies - PIV Tamper Switch

None

Deficiencies - Inspectors Test Connection

None

Deficiencies - Valves

None

Deficiencies - Drain Valves

None

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Recommendations

Northside - green tagged

Gym - green tagged

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Theodore AL 36582

Mario Morrisette

Print Date: 2023-04-12

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc
MS-14326-SC AL-3693 LA-F1173 FL-873651-
0001-2007

1209C Highway 613 South
Lucedale MS 39452

Inspector Signature

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

Inspector Name

Bora Yann
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
153252

Signature

A handwritten signature in black ink, appearing to be 'BY', written in a cursive style.

Date Completed

2023-02-23

Report of Inspection / Test

Annual NFPA 25

INDUSTRIAL-COMMERCIAL



2023-04-20

Property

Calcedavear Elementary School

KH

20500 Patillo Road

Mt. Vernona AL 36560

Mario Morrisette

Print Date: 2023-04-20

Conducted by: Tony Kittrell

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 127557

FL Fire Sprinkler Inspector FP118-000244

LA Fire Sprinkler Inspector E22293

Industrial Commercial Fire Protection, Inc

MS-14326-SC AL-3693 LA-F1173 FL-873651-

0001-2007

IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Is the clapper and automatic drain valve in place and properly operating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
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SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

VALVE AREA

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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
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ALARMS

Is the alarm valve free from physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

MAINTENANCE

Report of Inspection / Test

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FIRE PROTECTION, INC.

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<p>Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>If sprinklers have been replaced, were they proper replacements?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If conditions were found that required flushing, was flushing of the system conducted?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Was a drain test conducted after opening any closed valve?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Operating stem of all OS&Y valves lubricated, completely closed and reopened?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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Report of Inspection / Test for Asset - Fire Hydrant #1

Fire Hydrant Information

Hydrant ID	#1
Description	MH Anniston
Location	North corner

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

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Water-Based Systems # 127557
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Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Fire Hydrant #2

Fire Hydrant Information

Hydrant ID	#2
Description	MH Anniston
Location	Drop off

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Water-Based Systems # 127557
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Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Fire Hydrant #3

Fire Hydrant Information

Hydrant ID	#3
Description	MH Anniston
Location	South exit

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Fire Hydrant #4

Fire Hydrant Information

Hydrant ID	#4
Description	MH Anniston

Report of Inspection / Test

Annual NFPA 25

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2023-04-20

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MS-14326-SC AL-3693 LA-F1173 FL-873651-
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Location

South parking

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flow acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Report of Inspection / Test

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INDUSTRIAL-COMMERCIAL



2023-04-20

Property

Calcedaveer Elementary School
KH
20500 Patillo Road
Mt. Vernona AL 36560
Mario Morrisette
Print Date: 2023-04-20

Conducted by: Tony Kittrell
NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 127557
FL Fire Sprinkler Inspector FP118-000244
LA Fire Sprinkler Inspector E22293

Industrial Commercial Fire Protection, Inc
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Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Fire Hydrant #5

Fire Hydrant Information

Hydrant ID	#5
Description	MH Anniston
Location	South parking lot

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 127557
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Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
System #1	65	40	65	4	Yes	Yes
System #2	65	40	65	4	Yes	Yes

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
System #1	Riser	1" ITV	51	Yes	Yes	Yes	Yes	Yes
System #2	Riser	1" ITV	32	Yes	Yes	Yes	Yes	Yes

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
System #1	Anvil control valve	Riser room	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	N/A	10
System #2	Anvil control valve	Riser room	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	N/A	10

DRAIN VALVES

Report of Inspection / Test

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Property

Calcedaveaver Elementary School

KH

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Mt. Vernona AL 36560

Mario Morrisette

Print Date: 2023-04-20

Conducted by: Tony Kittrell

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 127557

FL Fire Sprinkler Inspector FP118-000244

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FIRE PROTECTION, INC.

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
System #1	2" main Drain	Riser	Globe Valve	Yes	Yes
System #2	2" main Drain	Riser	Globe Valve	Yes	Yes

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Calcedaveer Elementary School
KH
20500 Patillo Road
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FIRE PROTECTION, INC.

Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
	System #1	1	Potter	Water Flow Switch			Pass
	System #2	1	Potter	Water Flow Switch			Pass
	System #1	1		Butterfly Tamper Switch			Pass
	System #2	1		Butterfly Tamper Switch			Pass
	Exterior of bldg.	1	FDC	Fire Department Connection			Pass

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2023-04-20

Property

Calcedeaver Elementary School
 KH
 20500 Patillo Road
 Mt. Vernona AL 36560
 Mario Morrisette
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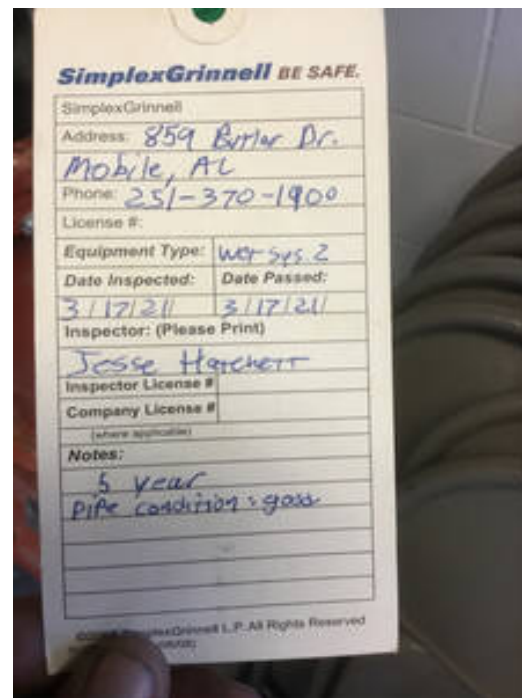
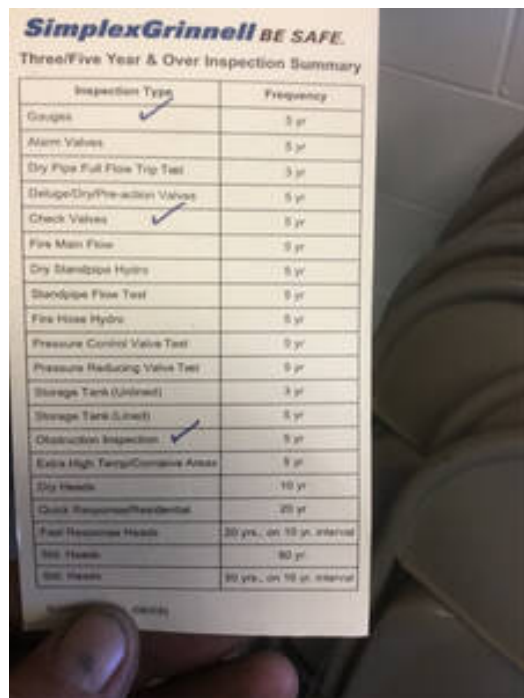
Conducted by: Tony Kittrell
 NICET LEVEL II - Inspection & Testing of
 Water-Based Systems # 127557
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Questions with Photos and Notes

- Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation) Yes

Notes:



- Is the FDC plainly visible? Yes

Notes:

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Property

Calcedaveaver Elementary School

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FL Fire Sprinkler Inspector FP118-000244

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ICFP

FIRE PROTECTION, INC.



System #1 - Record initial static pressure

65

Notes:

Main drain done on sys. #2, end of header.

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Deficiencies - General Questions

Deficiency #1

Are there spare sprinklers and a sprinkler wrench?: No

Notes:

Deficiency #1 - Photo #1



Date Taken: April 18, 2023

Comments: Need CSC concealed head wrench.

Deficiency #2

Is the information sign attached and legible?: No

Notes:

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Deficiency #2 - Photo #1



Date Taken: April 18, 2023

Deficiencies - General Wet System Questions

None

Deficiencies - System #1

None

Deficiencies - System #2

None

Deficiencies - Fire Hydrant #1

Deficiency #3

Is there a hydrant wrench that is available and accessible?: No

Notes:

Deficiencies - Fire Hydrant #2

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Water-Based Systems # 127557
FL Fire Sprinkler Inspector FP118-000244
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Industrial Commercial Fire Protection, Inc
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Deficiency #4

Is there a hydrant wrench that is available and accessible?: No

Notes:

Deficiencies - Fire Hydrant #3

Deficiency #5

Is there a hydrant wrench that is available and accessible?: No

Notes:

Deficiencies - Fire Hydrant #4

Deficiency #6

Is there a hydrant wrench that is available and accessible?: No

Notes:

Deficiencies - Fire Hydrant #5

Deficiency #7

Is there a hydrant wrench that is available and accessible?: No

Notes:

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

None

Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

None

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

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2023-04-20

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Calcedavever Elementary School

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Print Date: 2023-04-20

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NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 127557

FL Fire Sprinkler Inspector FP118-000244

LA Fire Sprinkler Inspector E22293

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FIRE PROTECTION, INC.

None

Deficiencies - Fire Department Connection

None

Deficiencies - Inspectors Test Connection

None

Deficiencies - Valves

None

Deficiencies - Drain Valves

None

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Calcedavear Elementary School
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NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 127557
FL Fire Sprinkler Inspector FP118-000244
LA Fire Sprinkler Inspector E22293

Industrial Commercial Fire Protection, Inc
MS-14326-SC AL-3693 LA-F1173 FL-873651-
0001-2007

Inspector Signature

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

Inspector Name

Tony Kittrell
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
127557
FL Fire Sprinkler
Inspector FP118-000244
LA Fire Sprinkler
Inspector E22293

Signature

A handwritten signature in black ink, appearing to read 'Tony Kittrell', is written across the signature field.

Date Completed

2023-04-20

Report of Inspection / Test

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INDUSTRIAL-COMMERCIAL



2023-08-02

Property

Calloway-Smith Middle School
KH

350 Lawrence Street

Mobile AL 36603

Mario Morrisette

Print Date: 2023-08-03

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc

MS-14326-SC AL-3693 LA-F1173 FL-873651-

0001-2007

1209C Highway 613 South

Lucaledale MS 39452

IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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2023-08-02

Property

Calloway-Smith Middle School
KH

350 Lawrence Street

Mobile AL 36603

Mario Morrisette

Print Date: 2023-08-03

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc

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1209C Highway 613 South

Lucaledale MS 39452

Is the clapper and automatic drain valve in place and properly operating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
---	---	---	---

SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

VALVE AREA

Report of Inspection / Test

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2023-08-02

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Print Date: 2023-08-03

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NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

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1209C Highway 613 South

Lucedale MS 39452

Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
---	---	---	---

ALARMS

Is the alarm valve free from physical damage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

MAINTENANCE

Report of Inspection / Test

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INDUSTRIAL-COMMERCIAL



2023-08-02

Property

Calloway-Smith Middle School
KH

350 Lawrence Street
Mobile AL 36603

Mario Morrisette

Print Date: 2023-08-03

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc
MS-14326-SC AL-3693 LA-F1173 FL-873651-
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<p>Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<p>If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>If sprinklers have been replaced, were they proper replacements?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If conditions were found that required flushing, was flushing of the system conducted?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Was a drain test conducted after opening any closed valve?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Operating stem of all OS&Y valves lubricated, completely closed and reopened?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?</p>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

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FIRE PROTECTION, INC.

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Report of Inspection / Test for Asset - Fire Hydrant #1

Fire Hydrant Information

Hydrant ID	#1
Description	Eclipse
Location	Outside cafeteria
Static Hydrant ID	Red

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flow acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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Calloway-Smith Middle School
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350 Lawrence Street
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Mario Morrisette

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NICET LEVEL II - Inspection & Testing of
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Are monitor nozzles lubricated?	<input type="checkbox"/> Yes
	<input type="checkbox"/> No
	<input checked="" type="checkbox"/> NA

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	75	Residual Pressure	55
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Fire Hydrant #2

Fire Hydrant Information

Hydrant ID	#2
Description	Red AVK
Location	West Teacher Parking lot

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	75	Residual Pressure	55
-----------------	----	-------------------	----

Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
-----------------------------------	-----	------------	-----

MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
System #1	85	55	75	10	Yes	Yes
System #2	85	55	75	10	Yes	Yes

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
System #1	West Exterior Riser room	(Main Bldg) Test & drain assembly	30	Yes	Yes	Yes	Yes	Yes

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INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
System #2	West Exterior Riser Room	(Gym) Test & drain assembly	19	Yes	Yes	Yes	Yes	Yes

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
System #1	(Main Bldg) Victaulic control	West Exterior Riser room	Butterfly	2-1/2 "	Monitored	Yes	Yes	Yes	Yes	Yes	16
System #2	(Gym) Victaulic control	West Exterior Riser Room	Butterfly	2-1/2 "	Monitored	Yes	Yes	Yes	Yes	Yes	16

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
System #1	1-1/4" main Drain	Riser	Ball Valve	Yes	Yes
System #2	1-1/4" main Drain	Riser	Ball Valve	Yes	Yes

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FIRE PROTECTION, INC.

Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
System 1 & 2	West Exterior Riser Room	2	Potter	Water Flow Switch			Pass
System 1 & 2	West Exterior Riser Room	2	Victaulic	Butterfly Tamper Switch			Pass
	West Exterior Riser Room Wall.	1	FDC	Fire Department Connection		Needs sign above FDC	Pass

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Deficiencies - General Questions

Deficiency #1

Is the FDC plainly visible?: No

Notes:

Deficiency #2

Is the FDC identification sign(s) in place?: No

Notes: Needs sign

Deficiency #3

Are visible sprinklers free of corrosion and physical damage?: No

Notes: Corroded heads in kitchen

Deficiency #3 - Photo #1



Date Taken: August 02, 2023

Report of Inspection / Test

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FIRE PROTECTION, INC.

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Property

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Deficiency #3 - Photo #2



Date Taken: August 02, 2023

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Deficiency #3 - Photo #3



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Deficiency #3 - Photo #4



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Deficiency #3 - Photo #5



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FIRE PROTECTION, INC.

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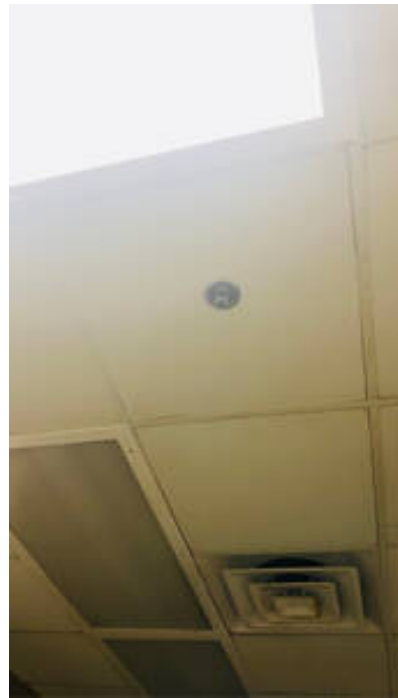
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Deficiency #3 - Photo #6



Date Taken: August 02, 2023

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Deficiency #3 - Photo #7



Date Taken: August 02, 2023

Deficiency #4

Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?: No

Notes: (6) corroded / greased in kitchen (20) total in area

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Deficiency #4 - Photo #1



Date Taken: August 02, 2023

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Deficiency #4 - Photo #2



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Deficiency #4 - Photo #3



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Deficiency #4 - Photo #4



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Deficiency #4 - Photo #5



Date Taken: August 02, 2023

Deficiency #5

Are all escutcheon plates installed on sprinkler heads?: No

Notes: Entrance

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Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc

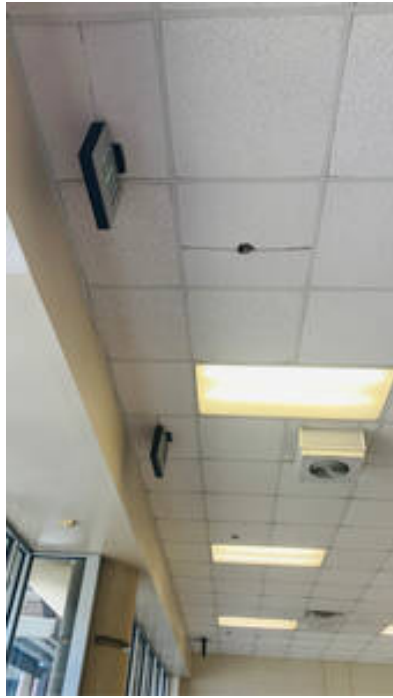
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Deficiency #5 - Photo #1



Date Taken: August 02, 2023

Deficiencies - General Wet System Questions

None

Deficiencies - System #1

None

Deficiencies - System #2

None

Deficiencies - Fire Hydrant #1

None

Deficiencies - Fire Hydrant #2

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Deficiency #6

Is the hydrant properly painted and is the paint in good condition?: No

Notes: Needs red paint

Deficiency #7

Does the operating nut turn with no difficulty?: No

Notes: Difficult to open and close

Deficiency #8

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

None

Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

None

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

None

Deficiencies - Inspectors Test Connection

None

Deficiencies - Valves

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The logo for Industrial-Commercial Fire Protection, Inc. features the letters 'ICFP' in a large, bold, yellow font with a red-to-orange gradient. The letters are outlined in black and set against a white background with a thin red horizontal line above and below them.

FIRE PROTECTION, INC.

None

Deficiencies - Drain Valves

None

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Inspector Signature

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

Inspector Name

Bora Yann
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
153252

Signature

A handwritten signature in black ink, appearing to be 'Bora Yann', written in a cursive style.

Date Completed

2023-08-02

Report of Inspection / Test

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INDUSTRIAL-COMMERCIAL



2023-02-20

Property

Causey Middle School
KH

2205 McFarland Road

Mobile AL 36695

Mario Morrisette

Print Date: 2023-02-21

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc

MS-14326-SC AL-3693 LA-F1173 FL-873651-

0001-2007

1209C Highway 613 South

Lucaledale MS 39452

IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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2023-02-20

Property

Causey Middle School
KH

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Mobile AL 36695

Mario Morrisette

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Is the clapper and automatic drain valve in place and properly operating?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
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SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

VALVE AREA

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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
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ALARMS

Is the alarm valve free from physical damage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

MAINTENANCE

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FIRE PROTECTION, INC.

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<p>Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>If sprinklers have been replaced, were they proper replacements?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If conditions were found that required flushing, was flushing of the system conducted?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Was a drain test conducted after opening any closed valve?</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
<p>Operating stem of all OS&Y valves lubricated, completely closed and reopened?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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FIRE PROTECTION, INC.

Report of Inspection / Test for Asset - Fire Hydrant #1

Fire Hydrant Information

Hydrant ID	#1
Description	American Darling
Location	South End of Building behind Fence
Static Hydrant Description	Grey body w/ yellow top

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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Are monitor nozzles lubricated?	<input type="checkbox"/> Yes
	<input type="checkbox"/> No
	<input checked="" type="checkbox"/> NA

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Fire Hydrant #2

Fire Hydrant Information

Hydrant ID	#2
Description	American Darling
Location	Front Entrance
Static Hydrant Description	Yellow Body w/ light blue top

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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Have backflow devices, if installed, passed full flow test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Fire Hydrant #3

Fire Hydrant Information

Hydrant ID	#3
Description	American Darling
Location	North End by Baseball Field
Static Hydrant Description	Yellow body w/ blue top

QUESTIONS

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Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:

N/A

Total Flow

N/A

Report of Inspection / Test for Asset - Fire Hydrant #4

Fire Hydrant Information

Hydrant ID

#4

Description

American Darling

Location

Near Backflow

Static Hydrant Description

Yellow w/ light blue top

QUESTIONS

Is there a hydrant wrench that is available and accessible?

- Yes
 No
 NA

Is the hydrant free from cracks or leaks at outlets and on the top?

- Yes
 No
 NA

Are pumper and nozzle caps tight?

- Yes
 No
 NA

Is the hydrant properly painted and is the paint in good condition?

- Yes
 No
 NA

Does the operating nut turn with no difficulty?

- Yes
 No
 NA

Did the hydrant flow until clear (minimum of 1 minute)?

- Yes
 No
 NA

Are all dry barrels which require pumping identified?

- Yes
 No
 NA

Does the hydrant completely shut off?

- Yes
 No
 NA

Have the strainers been cleaned (if possible)?

- Yes
 No
 NA

Did monitor nozzle flow acceptable water?

- Yes
 No
 NA

Have backflow devices, if installed, passed full flow test?

- Yes
 No
 NA

Is there no ice or water in the barrel?

- Yes
 No
 NA

Are hydrant caps, stems, outlets, and threads lubricated and in good condition?

- Yes
 No
 NA

Is Exposed piping properly secured and free from leaks or physical damage?

- Yes
 No
 NA

Is the Operating nut not worn, twisted or broken?

- Yes
 No
 NA

Is the Road box and shutoff valve visible and accessible?

- Yes
 No
 NA

Have dry barrels drained in at least 1 hour?

- Yes
 No
 NA

Have control valves been operated through complete range??

- Yes
 No
 NA

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Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
---	---	--	---

Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
---------------------------------	---

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Fire Hydrant #5

Fire Hydrant Information

Description	5 1/4 American Darling
Location	Behind school near portables
Static Hydrant Description	Grey body w/yellow top

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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INDUSTRIAL-COMMERCIAL



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Property

Causey Middle School
KH

2205 McFarland Road

Mobile AL 36695

Mario Morrisette

Print Date: 2023-02-21

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
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Have backflow devices, if installed, passed full flow test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
-----------------	-----	-------------------	-----

Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
System #1	115	100	115	.1	Yes	Yes
System #2	115	100	115	.1	Yes	Yes
System #3	115	100	115	.1	Yes	Yes

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FIRE PROTECTION, INC.

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
System #1	@ Riser	2" Inspectors Test Valve	38	Yes	Yes	Yes	Yes	Yes
System #2	@ Riser	2" Inspectors Test Valve	14	Yes	Yes	Yes	Yes	Yes
System #3	@ Riser	2" Inspectors Test Valve	18	Yes	Yes	Yes	Yes	Yes

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
System #1	System #1 Control Valve	Riser Room backside of Laundry	Butterfly	3 "	Monitored	Yes	Yes	Yes	Yes	Yes	8
System #2	System #2 Control Valve	Riser Room backside of Laundry	Butterfly	3 "	Monitored	Yes	Yes	Yes	Yes	Yes	8
System #3	System #3 Control Valve	Riser Room backside of Laundry	Butterfly	3 "	Monitored	Yes	Yes	Yes	Yes	Yes	8
	Fire Pump Dead Head	Riser Room	Butterfly	3 "	Monitored	Yes	Yes	Yes	Yes	Yes	8
	Test Header Control Valve	Riser Room	Butterfly	3 "	Monitored	N/A	Yes	Yes	Yes	Yes	8
	Jockey Pump Suction Valve	Riser Room	Butterball	1-1/4 "	Monitored	Yes	Yes	Yes	Yes	Yes	
	Jockey Pump Discharge Valve	Riser Room	Butterball	1-1/4 "	Monitored	Yes	Yes	Yes	Yes	Yes	
	City By-Pass Valve x2	Riser Room	Butterfly	3 "	Monitored	Yes	Yes	Yes	Yes	Yes	8
	System Isolation Valve	Riser Room	OS&Y	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
System #1	2" Main Drain	@ Riser	Globe Valve	Yes	Yes
System #2	2" Main Drain	@ Riser	Globe Valve	Yes	Yes
System #3	2" Main Drain	@ Riser	Globe Valve	Yes	Yes

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FIRE PROTECTION, INC.

Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
	System #1	1	Potter	Water Flow Switch			Pass
	System #2	1	Potter	Water Flow Switch			Pass
	System #3	1	Potter	Water Flow Switch			Pass
	Pump rm. Fire pump suction valve.	1	Potter	Os&Y Tamper Switch			Pass
	System #1	1	Central	Butterfly Tamper Switch			Pass
	System #2	1	Central	Butterfly Tamper Switch			Pass
	System #3	1	Central	Butterfly Tamper Switch			Pass
	@ Backflow	1	FDC	Fire Department Connection		Needs lubrication	N/A

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Deficiencies - General Questions

Deficiency #1

Is the FDC swivels and couplings not damaged?: No

Notes: Swivels need lubricant

Deficiency #1 - Photo #1



Date Taken: February 20, 2023

Deficiency #2

Is the FDC identification sign(s) in place?: No

Notes: Street- missing FDC sign

School- Sign is faded on bldg. Need multiple signs / arrows , not visible

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Deficiency #2 - Photo #1



Date Taken: February 20, 2023

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Deficiency #2 - Photo #2



Date Taken: February 20, 2023

Deficiency #3

Are visible sprinklers in the proper position: upright, pendent, sidewall?: No

Notes: Pendent heads in boiler room too low from ceiling deck

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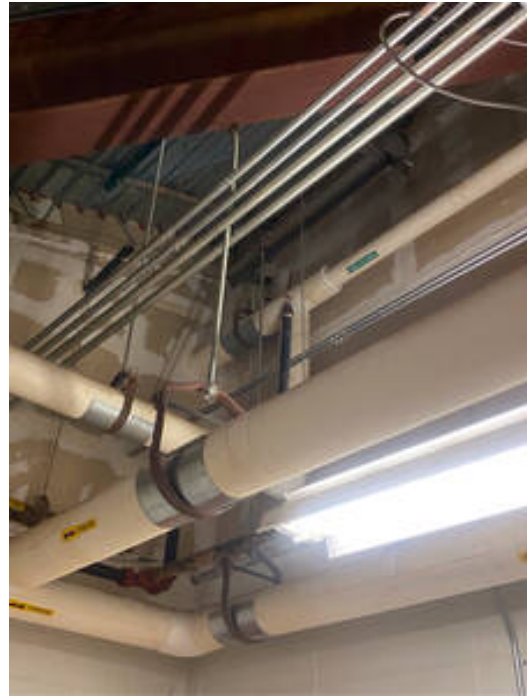
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FIRE PROTECTION, INC.

Deficiency #3 - Photo #1



Date Taken: February 20, 2023

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Deficiency #3 - Photo #2



Date Taken: February 20, 2023

Deficiency #4

Are visible sprinklers free of foreign materials including paint?: No

Notes: Heads are greased in hallway outside boiler rm /janitors room

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FIRE PROTECTION, INC.

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Deficiency #4 - Photo #1



Date Taken: February 20, 2023

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Deficiency #4 - Photo #2



Date Taken: February 20, 2023

Deficiency #5

Is the information sign attached and legible?: No

Notes:

Deficiency #6

Are all escutcheon plates installed on sprinkler heads?: No

Notes: Gym high ceiling has broken SR Concealed plates (4)

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Deficiency #6 - Photo #1



Date Taken: February 20, 2023

Deficiencies - General Wet System Questions

None

Deficiencies - System #1

None

Deficiencies - System #2

None

Deficiencies - System #3

None

Deficiencies - Fire Hydrant #1

None

Deficiencies - Fire Hydrant #2

None

Deficiencies - Fire Hydrant #3

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Deficiency #7

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - Fire Hydrant #4

None

Deficiencies - Fire Hydrant #5

Deficiency #8

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

None

Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

None

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

None

Deficiencies - Alarm Pressure Switch

None

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FIRE PROTECTION, INC.

Deficiencies - PIV Tamper Switch

None

Deficiencies - Inspectors Test Connection

None

Deficiencies - Valves

None

Deficiencies - Drain Valves

None

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Inspector Signature

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

Inspector Name

Bora Yann
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
153252

Signature

A handwritten signature in black ink, appearing to read 'Bora Yann', is written over a large, faint, light-colored watermark of the letters 'ICFP'.

Date Completed

2023-02-20

Report of Inspection / Test

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2023-09-12

Property

Central Office
KH

1 Magnum Pass

Mobile AL 36618

Mario Morrisette

Print Date: 2023-09-12

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
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IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Building Occupancy?	Warehouse
Are all Identification Signs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Is the clapper and automatic drain valve in place and properly operating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
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SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

VALVE AREA

Report of Inspection / Test

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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
---	---	---	---

ALARMS

Is the alarm valve free from physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

MAINTENANCE

Report of Inspection / Test

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NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc
MS-14326-SC AL-3693 LA-F1173 FL-873651-
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<p>Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>If sprinklers have been replaced, were they proper replacements?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If conditions were found that required flushing, was flushing of the system conducted?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Was a drain test conducted after opening any closed valve?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Operating stem of all OS&Y valves lubricated, completely closed and reopened?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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Report of Inspection / Test for Asset - Hydrant #1

Fire Hydrant Information

Description	M & H
Location	SW corner of building F
Static Hydrant Description	Light blue top with Yellow body

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

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Hydrant Flow Test

Static Pressure	70	Residual Pressure	N/A
Pitot Pressure	45	Orifice Size	2.5
Orifice Coefficient	1.0	Flow	1125

Static Hydrant

Static Pressure	70	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	750
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Report of Inspection / Test for Asset - Hydrant #2

Fire Hydrant Information

Description	M &H
Location	North corner Building F
Static Hydrant Description	Red Body W/ White Top

QUESTIONS

Is there a hydrant wrench that is available and accessible? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flow acceptable water? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	70	Residual Pressure	N/A
Pitot Pressure	45	Orifice Size	2.5
Orifice Coefficient	1.0	Flow	1125

Static Hydrant

Static Pressure	70	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	750
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Report of Inspection / Test for Asset - Hydrant #3

Fire Hydrant Information

Description	M&H
Location	SE Building G
Static Hydrant Description	Red body W/ white top

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	70	Residual Pressure	N/A
Pitot Pressure	45	Orifice Size	2.5
Orifice Coefficient	1.0	Flow	1125

Static Hydrant

Static Pressure	70	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	750
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Report of Inspection / Test for Asset - Hydrant #4

Fire Hydrant Information

Description	M &H
Location	Behind Building B

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Static Hydrant Description

Red body with W/ Top

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flow acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	70	Residual Pressure	N/A
Pitot Pressure	45	Orifice Size	2.5
Orifice Coefficient	1.0	Flow	1125

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Static Hydrant

Static Pressure	70	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	750
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Report of Inspection / Test for Asset - Hydrant #5

Fire Hydrant Information

Description	CLOW
Location	A Building Parking lot
Static Hydrant Description	Red body W/ white top

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
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Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
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Hydrant Flow Test

Static Pressure	70	Residual Pressure	N/A
Pitot Pressure	45	Orifice Size	2.5
Orifice Coefficient	1.0	Flow	1125

Static Hydrant

Static Pressure	70	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	750
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MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
System #1	70	55	70	3	Yes	Yes
System #2	70	55	70	3	Yes	Yes
System #3	70	55	70	3	Yes	Yes

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
System #2	NE Warehouse C low ceiling	1" Globe valve	15	Yes	Yes	Yes	Yes	Yes

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
System #1	Control Valve	SE Warehouse C	Butterfly	6 "	Monitored	Yes	Yes	Yes	Yes	Yes	8
System #2	Control valve	System #2	Butterfly	6 "	Monitored	Yes	Yes	Yes	Yes	Yes	8
System #3	Control valve	System#3	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	10

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DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
System #2	1" Auv	Warehouse C NE low ceiling	Globe Valve	N/A	Yes
System #2	1" Aux	Warehouse C Engineering office	Globe Valve	N/A	Yes
System #1	2" main Drain	Riser	Globe Valve	N/A	Yes
System #2	2" main Drain	Riser	Globe Valve	N/A	Yes
System #3	2" main Drain	Riser	Globe Valve	N/A	Yes

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FIRE PROTECTION, INC.

Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
SE Warehouse B	System #1	1	Potter	Water Flow Switch		43 sec , manually tested	Pass
SE Warehouse B	System #2	1	Potter	Water Flow Switch		15 sec, manually tested	Pass
SE Warehouse B	System #3	1	Potter	Water Flow Switch		64 sec manually tested	Pass
SE Warehouse B	System #1	1		Butterfly Tamper Switch			Pass
SE Warehouse B	System #2	1		Butterfly Tamper Switch			Pass
SE Warehouse B	System #3	1		Butterfly Tamper Switch			Pass
	SE Warehouse B	1	FDC	Fire Department Connection			Pass
	Building I - academic affairs	1	Potter	High Pressure Switch	Noncritical		
	Main entrance	1	Potter	Os&Y Tamper Switch	Noncritical		

Report of Inspection / Test

Annual NFPA 25

INDUSTRIAL-COMMERCIAL



2023-09-12

Property

Central Office
KH

1 Magnum Pass
Mobile AL 36618

Mario Morrisette

Print Date: 2023-09-12

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc
MS-14326-SC AL-3693 LA-F1173 FL-873651-
0001-2007

1209C Highway 613 South
Lucaledale MS 39452

Deficiencies - General Questions

Deficiency #1

Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?: No

Notes:

Deficiency #2

Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?: No

Notes: Mechanical bell did not operate

Deficiency #3

Is the visible pipe in good condition with no external corrosion?: No

Notes: 2" Pipe corroded feeding hose valve

Deficiency #3 - Photo #1



Date Taken: September 12, 2023

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FIRE PROTECTION, INC.

2023-09-12

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Deficiency #4

Are there spare sprinklers and a sprinkler wrench?: No

Notes:

Deficiency #5

Is the building fully protected by sprinklers?: No

Notes: Only C Bldg

Deficiencies - General Wet System Questions

None

Deficiencies - System #1

None

Deficiencies - System #2

None

Deficiencies - System #3

None

Deficiencies - Hydrant #1

Deficiency #6

Is the hydrant properly painted and is the paint in good condition?: No

Notes: Needs painting

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Deficiency #6 - Photo #1



Date Taken: September 12, 2023

Deficiencies - Hydrant #2

Deficiency #7

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - Hydrant #3

Deficiency #8

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - Hydrant #4

None

Deficiencies - Hydrant #5

None

Deficiencies - Air Compressor

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FIRE PROTECTION, INC.

None

Deficiencies - Water Flow Switch

None

Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

None

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

None

Deficiencies - Inspectors Test Connection

None

Deficiencies - Valves

None

Deficiencies - Drain Valves

None

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Inspector Signature

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

Inspector Name

Bora Yann
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
153252

Signature

A handwritten signature in black ink, appearing to be 'Bora Yann', written in a cursive style.

Date Completed

2023-09-12

Report of Inspection / Test

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Property

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2800 Berkley Ave.
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Mario Morrisette
Print Date: 2023-08-31

Conducted by: Bora Yann
NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

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IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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NICET LEVEL II - Inspection & Testing of
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Industrial Commercial Fire Protection, Inc
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Is the clapper and automatic drain valve in place and properly operating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
---	---	---	---

SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

VALVE AREA

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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
---	---	---	---

ALARMS

Is the alarm valve free from physical damage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

MAINTENANCE

Report of Inspection / Test

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FIRE PROTECTION, INC.

2023-08-31

Property

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<p>Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>If sprinklers have been replaced, were they proper replacements?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If conditions were found that required flushing, was flushing of the system conducted?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Was a drain test conducted after opening any closed valve?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Operating stem of all OS&Y valves lubricated, completely closed and reopened?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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FIRE PROTECTION, INC.

Report of Inspection / Test for Asset - Fire hydrant

Fire Hydrant Information

Description MH

Location Main Bldg from interstate

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

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Static Pressure	50	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	2.5
Orifice Coefficient	0.88	Flow	N/A

Static Hydrant

Static Pressure	50	Residual Pressure	45
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
Wet System #1	50	45	50	5	Yes	Yes
Wet System #2	50	45	50	5	Yes	Yes

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
Wet System #1	@ Riser	1" ITV	36	Yes	Yes	Yes	Yes	Yes
Wet System #2	@ Riser	1" ITV	32	Yes	Yes	Yes	Yes	Yes

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
Wet System #1	Victaulic Control Valve	Mech Room B112	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	7
Wet System #2	Victaulic Control Valve	Mech Room B112	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	7

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
Wet System #1	2" Main Drain	@ Riser	Globe Valve	Yes	Yes
Wet System #2	2" Main Drain	@ Riser	Globe Valve	Yes	Yes

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FIRE PROTECTION, INC.

Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
	B112	1	Victaulic	Butterfly Tamper Switch			Pass
	B112	1	Victaulic	Butterfly Tamper Switch			Pass
	B112	1	Potter	Water Flow Switch			Pass
	B112	1	Potter	Water Flow Switch			Pass
	@ Backflow	1	FDC	Fire Department Connection			Pass

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FIRE PROTECTION, INC.

Questions with Photos and Notes

Fire hydrant - Pitot Pressure

N/A

Notes:

*Not enough water pressure to register.
Lacking water*

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Deficiencies - General Questions

Deficiency #1

Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years?
(If no conduct investigation): No

Notes:

Deficiency #2

Are there spare sprinklers and a sprinkler wrench?: No

Notes: Needs concealed head wrench

Deficiency #3

Are all escutcheon plates installed on sprinkler heads?: No

Notes: Cafeteria- missing concealed plate @ serving line

Deficiencies - General Wet System Questions

None

Deficiencies - Wet System #1

None

Deficiencies - Wet System #2

None

Deficiencies - Fire hydrant

Deficiency #4

Did the hydrant flow until clear (minimum of 1 minute)?: No

Notes: Lacking water pressure

Deficiency #5

Is the Operating nut not worn, twisted or broken?: No

Notes:

Report of Inspection / Test

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FIRE PROTECTION, INC.

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Chastang Middle
2800 Berkley Ave.

Mobile AL 36617

Mario Morrisette

Print Date: 2023-08-31

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc
MS-14326-SC AL-3693 LA-F1173 FL-873651-
0001-2007

1209C Highway 613 South
Lucedale MS 39452

Deficiency #6

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

None

Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

None

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

None

Deficiencies - Alarm Pressure Switch

None

Deficiencies - PIV Tamper Switch

None

Deficiencies - Ball Valve Tamper

None

Deficiencies - Inspectors Test Connection

None

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Property

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FIRE PROTECTION, INC.

Deficiencies - Valves

None

Deficiencies - Drain Valves

None

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FIRE PROTECTION, INC.

Recommendations

(1) yellow Tag

(1' green tag

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Inspector Signature

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

Inspector Name

Bora Yann
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
153252

Signature

A handwritten signature in black ink, appearing to read 'Bora Yann', is written over a white background within the signature field.

Date Completed

2023-08-31

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2023-09-06

Property

Collier Elementary School
601 Snow Road North
Mobile AL 36608
Mario Morrisette
Print Date: 2023-09-07

Conducted by: Bora Yann
NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

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IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Is the clapper and automatic drain valve in place and properly operating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
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SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

VALVE AREA

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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
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ALARMS

Is the alarm valve free from physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

MAINTENANCE

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FIRE PROTECTION, INC.

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<p>Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>If sprinklers have been replaced, were they proper replacements?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If conditions were found that required flushing, was flushing of the system conducted?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Was a drain test conducted after opening any closed valve?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Operating stem of all OS&Y valves lubricated, completely closed and reopened?</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<p>Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Report of Inspection / Test for Asset - Fire Hydrant #1 -S.W

Fire Hydrant Information

Hydrant ID	#1
Description	Mueller 5-1/4" 584N
Location	S.W Corner of School

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

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Water-Based Systems # 153252

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Hydrant Flow Test

Static Pressure	100	Residual Pressure	N/A
Pitot Pressure	65	Orifice Size	2.5
Orifice Coefficient	.77	Flow	1039.5

Static Hydrant

Static Pressure	100	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	577.5
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Report of Inspection / Test for Asset - Fire Hydrant #2 - S.E

Fire Hydrant Information

Hydrant ID	#2
Description	Mueller 5-1/4" 584N
Location	S.E Corner of School

QUESTIONS

Is there a hydrant wrench that is available and accessible? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flow acceptable water? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	100	Residual Pressure	N/A
Pitot Pressure	65	Orifice Size	2.5
Orifice Coefficient	.77	Flow	1039.5

Static Hydrant

Static Pressure	100	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	577.5
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Report of Inspection / Test for Asset - Fire Hydrant #3 - N.E

Fire Hydrant Information

Hydrant ID	#3
Description	Mueller 5-1/4" 584N
Location	N.E Corner of School

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	100	Residual Pressure	N/A
Pitot Pressure	65	Orifice Size	2.5
Orifice Coefficient	.77	Flow	1039.5

Static Hydrant

Static Pressure	100	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	577.5
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Report of Inspection / Test for Asset - Fire Hydrant #4 - N.W

Fire Hydrant Information

Hydrant ID	#4
Description	Mueller 5-1/4" 584N

Report of Inspection / Test

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2023-09-06

Property

Collier Elementary School
601 Snow Road North
Mobile AL 36608
Mario Morrisette
Print Date: 2023-09-07

Conducted by: Bora Yann
NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc
MS-14326-SC AL-3693 LA-F1173 FL-873651-
0001-2007
1209C Highway 613 South
Lucaledale MS 39452

Location N.W Corner of School

Static Hydrant Description Red

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	100	Residual Pressure	N/A
Pitot Pressure	65	Orifice Size	2.5

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Orifice Coefficient	.77	Flow	1039.5
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Static Hydrant

Static Pressure	100	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	577.5
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MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
System #1 / North Wing	100	70	100	3	Yes	Yes
System #2 / South Wing	100	70	100	3	Yes	Yes

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
System #2 / South Wing	Cafeteria dish wash area	1" Inspectors Test Valve	30	Yes	Yes	Yes	Yes	Yes

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
System #1 / North Wing	Control Valve	S. Interior / Exterior Mech Rm.	OS&Y	6 "	Monitored	Yes	Yes	Yes	Yes	Yes	20
System #2 / South Wing	Control Valve	S. Interior / Exterior Mech Rm.	OS&Y	6 "	Monitored	Yes	Yes	Yes	Yes	Yes	20

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
System #1 / North Wing	2" Main Drain	S. Interior / Exterior Mech Rm.	Angle Valve	N/A	Yes
System #2 / South Wing	2" Main Drain	S. Interior / Exterior Mech Rm.	Angle Valve	N/A	Yes

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Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
S. Interior / Exterior Mech Rm.	#1 N. Wing	1	Potter	Os&Y Tamper Switch			Pass
S. Interior / Exterior Mech Rm.	#2 S. Wing	1	Potter	Os&Y Tamper Switch		Needs adjusting, manually tested	Pass
S. Interior / Exterior Mech Rm.	#1 N. Wing	1	Potter	Water Flow Switch		15 sec,Manually tested	Pass
S. Interior / Exterior Mech Rm.	#2 S. Wing	1	Potter	Water Flow Switch			Pass
S. Interior/ Exterior Mech Rm.	@ Risers	2	Automatic Sprinkler	Mechanical Water Motor Bell	Critical		Pass
S. Interior / Exterior Mech Rm.	Exterior of Riser Room	1	4" FDC	Fire Department Connection			Pass

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Deficiencies - General Questions

Deficiency #1

Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?: No

Notes: Can not open or close valve , seized

Deficiency #2

Are control valves properly sealed and/or supervised?: No

Notes: PIV are not secured

Deficiency #3

Is the building fully protected by sprinklers?: No

Notes: Office storage is not sprinkled

Deficiencies - General Wet System Questions

None

Deficiencies - System #1 / North Wing

None

Deficiencies - System #2 / South Wing

None

Deficiencies - Fire Hydrant #1 -S.W

Deficiency #4

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - Fire Hydrant #2 - S.E

Deficiency #5

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - Fire Hydrant #3 - N.E

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Deficiency #6

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - Fire. Hydrant #4 - N.W

Deficiency #7

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

None

Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

None

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

None

Deficiencies - Inspectors Test Connection

None

Deficiencies - Valves

None

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FIRE PROTECTION, INC.

Deficiencies - Drain Valves

None

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Inspector Signature

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

Inspector Name

Bora Yann
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
153252

Signature

A handwritten signature consisting of the letters 'B' and 'Y' in a cursive, black ink style.

Date Completed

2023-09-06

Report of Inspection / Test

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Collins-Rhodes Elementary School
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5110 St. Stephens Road

Eight Mile AL 36613

Mario Morrisette

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FIRE PROTECTION, INC.

IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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5110 St. Stephens Road

Eight Mile AL 36613

Mario Morrisette

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Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc

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Is the clapper and automatic drain valve in place and properly operating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
---	---	---	---

SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

VALVE AREA

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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
---	---	---	---

ALARMS

Is the alarm valve free from physical damage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

MAINTENANCE

Report of Inspection / Test

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<p>Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>If sprinklers have been replaced, were they proper replacements?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If conditions were found that required flushing, was flushing of the system conducted?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Was a drain test conducted after opening any closed valve?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Operating stem of all OS&Y valves lubricated, completely closed and reopened?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?</p>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

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Report of Inspection / Test for Asset - Hydrant #1

Fire Hydrant Information

Hydrant ID	Red Hydrant
Description	5 1/4 Mueller
Location	SE Parking

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

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Property

Collins-Rhodes Elementary School
KH

5110 St. Stephens Road

Eight Mile AL 36613

Mario Morrisette

Print Date: 2023-08-31

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc

MS-14326-SC AL-3693 LA-F1173 FL-873651-

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1209C Highway 613 South

Luedale MS 39452

INDUSTRIAL-COMMERCIAL



FIRE PROTECTION, INC.

Hydrant Flow Test

Static Pressure	115	Residual Pressure	90
Pitot Pressure	22	Orifice Size	2.5
Orifice Coefficient	1.0	Flow	790

Static Hydrant

Static Pressure	115	Residual Pressure	90
-----------------	-----	-------------------	----

Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	750
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Report of Inspection / Test for Asset - Hydrant #2

Fire Hydrant Information

Hydrant ID	Red Hydrant
Description	5 1/4 Mueller
Location	NE parking lot

QUESTIONS

Is there a hydrant wrench that is available and accessible? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does the hydrant completely shut off? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	115	Residual Pressure	90
Pitot Pressure	22	Orifice Size	2.5
Orifice Coefficient	1.0	Flow	790

Static Hydrant

Static Pressure	115	Residual Pressure	90
-----------------	-----	-------------------	----

Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	750
-----------------------------------	-----	------------	-----

MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
Hall 100 Wet	115	70	120	3	Yes	Yes
Hall 300 Wet	115	90	115	3	Yes	Yes

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
Hall 100 Wet	Cafeteria exterior mechanical room	1" ball valve	36	Yes	Yes	Yes	Yes	Yes
Hall 300 Wet	Hall 200 exterior mechanical rm	1" ITV	24	Yes	Yes	Yes	Yes	Yes

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FIRE PROTECTION, INC.

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
Hall 100 Wet	(14) Mueller control valve	Hall 100 exterior mechanical rm	OS&Y	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	14
Hall 300 Wet	(11) Mueller control valve	Southend Hallway 300 exterior mechanical room	OS&Y	2-1/2 "	Monitored	Yes	Yes	Yes	Yes	Yes	11

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
Hall 300 Wet	1-1/4" main Drain	Riser	Globe Valve	Yes	Yes
Hall 100 Wet	2" main Dran	Riser	Globe Valve	Yes	Yes

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Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
South exterior mechanical	Hall 300	1	Potter	Water Flow Switch			Pass
East Exterior mechanical	Hall 100	1	Potter	Water Flow Switch			Pass
South Exterior Mechanical	Hall 300	1	Potter	Os&Y Tamper Switch		Needs adjusting; manually tripped tested	Pass
East exterior mechanical	Hall 100	1	Potter	Os&Y Tamper Switch		Needs adjusting; manually tripped tested	
Backflow	Front of School	1	FDC	Fire Department Connection			Pass

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Deficiencies - General Questions

Deficiency #1

Do valve supervisory switches indicate movement?: No

Notes: (2) tamers on osy valves needs adjusting. Does not report to F/A panel when opening/ Closing valves

Deficiency #2

Are visible sprinklers free of foreign materials including paint?: No

Notes: Cafeteria- 4 loaded 3/4 white pendent

Office - loaded heads

Deficiency #2 - Photo #1



Date Taken: August 30, 2023

Deficiency #3

Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?: No

Notes: Kitchen -8 greased white 155 pendants around hood

Wash room - 2 around wash hood

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FIRE PROTECTION, INC.

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Deficiency #3 - Photo #1



Date Taken: August 30, 2023

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Deficiency #3 - Photo #2



Date Taken: August 30, 2023

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FIRE PROTECTION, INC.

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Deficiency #3 - Photo #3



Date Taken: August 30, 2023

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Deficiency #3 - Photo #4



Date Taken: August 30, 2023

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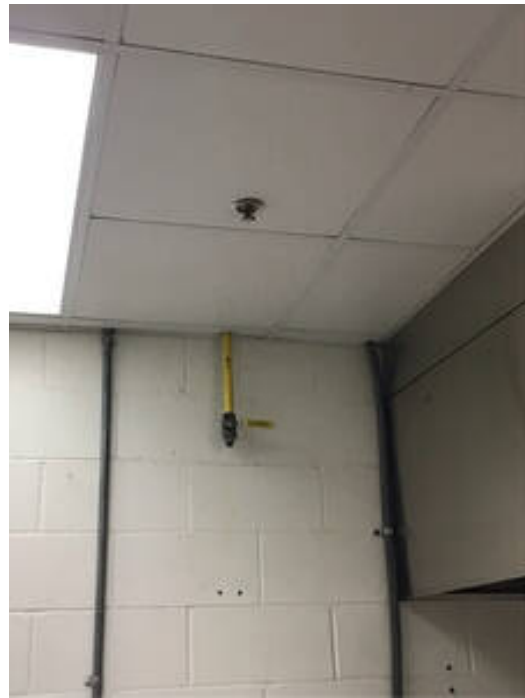
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Deficiency #3 - Photo #5



Date Taken: August 30, 2023

Deficiencies - General Wet System Questions

None

Deficiencies - Hall 100 Wet

None

Deficiencies - Hall 300 Wet

None

Deficiencies - Hydrant #1

Deficiency #4

Does the operating nut turn with no difficulty?: No

Notes: Difficult to open

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Deficiency #5

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - Hydrant #2

Deficiency #6

Does the operating nut turn with no difficulty?: No

Notes: Difficult to open

Deficiency #7

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

None

Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

None

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

None

Deficiencies - Inspectors Test Connection

None

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FIRE PROTECTION, INC.

Deficiencies - Valves

None

Deficiencies - Drain Valves

None

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INDUSTRIAL-COMMERCIAL

The logo for Industrial-Commercial Fire Protection, Inc. features the letters 'ICFP' in a large, bold, serif font. The letters are filled with a gradient of yellow and orange, giving them a three-dimensional appearance. The logo is centered between two horizontal lines.

FIRE PROTECTION, INC.

Recommendations

Hall 100- purple hugged

Hall300 - yellow tagged

Report of Inspection / Test

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Inspector Signature

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

Inspector Name

Bora Yann
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
153252

Signature

A handwritten signature in black ink, appearing to be "Bora Yann", written in a cursive style.

Date Completed

2023-08-30

Report of Inspection / Test

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INDUSTRIAL-COMMERCIAL



2023-08-04

Property

Continuous Learning Center/ Point Academy
KH

1870 Pleasant Avenue

Mobile AL 36617

Mario Morrisette

Print Date: 2023-08-04

WO #: 119-316

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
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IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Continuous Learning Center/ Point Academy
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Is the clapper and automatic drain valve in place and properly operating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
---	---	---	---

SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

VALVE AREA

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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
---	---	---	---

ALARMS

Is the alarm valve free from physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

MAINTENANCE

Report of Inspection / Test

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2023-08-04

Property

Continuous Learning Center/ Point Academy
KH

1870 Pleasant Avenue
Mobile AL 36617

Mario Morrisette

Print Date: 2023-08-04

WO #: 119-316

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc
MS-14326-SC AL-3693 LA-F1173 FL-873651-
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<p>Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>If sprinklers have been replaced, were they proper replacements?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If conditions were found that required flushing, was flushing of the system conducted?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Was a drain test conducted after opening any closed valve?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Operating stem of all OS&Y valves lubricated, completely closed and reopened?</p>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	<p>Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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Report of Inspection / Test for Asset - Fire Hydrant #1

Fire Hydrant Information

Hydrant ID	#1
Description	American Darling
Location	NW in parking lot

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

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Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	65	Residual Pressure	45
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Delete

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does the hydrant completely shut off?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did monitor nozzle flow acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there no ice or water in the barrel?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
-----------------------------------	-----	------------	-----

MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
Cafeteria Wet # 1	75	50	75	3	Yes	Yes
A-Hall Wet # 2	75	45	65	3	Yes	Yes

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
Cafeteria Wet # 1	N. End of C - Hall (wood shop)	1" ITV	30	Yes	Yes	Yes	No	Yes
A-Hall Wet # 2	A-13 Flowswitch	Unknown	54	Yes	No	No	No	Yes

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
Cafeteria Wet # 1	Muller control valve	NW Exterior Mech Room (ConstaridesSt.)	OS&Y	4"	Monitored	Yes	Yes	Yes	Yes	Yes	14

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VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
Cafeteria Wet # 1	6" Backflow control valve	(Constarides St.)	OS&Y	6 "	Padlock	Yes	Yes	N/A	N/A	N/A	
Cafeteria Wet # 1	6" Backflow control valve	(Constarides St.)	OS&Y	6 "	Padlock	Yes	Yes	N/A	N/A	N/A	
A-Hall Wet # 2	Nibco control valve	Rm. A-13 Closet	OS&Y	4 "	Monitored	Yes	Yes	Yes	Yes	No	9
A-Hall Wet # 2	Guardian Check	Rm. A-13 closet	Riser Check Valve	4 "	Not Applicable	Yes	Yes	N/A	N/A	N/A	
A-Hall Wet # 2	6" OS&Y Backflow	NW in Parking lot	OS&Y	6 "	Not Secured	Yes	Yes	N/A	N/A	N/A	
A-Hall Wet # 2	6" OS&Y. Backflow	NW in Parking lot	OS&Y	6 "	Not Secured	Yes	Yes	N/A	N/A	N/A	

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
Cafeteria Wet # 1	2" main Drain	North Mech Room	Globe Valve	Yes	Yes
A-Hall Wet # 2	2" main Drain	Room A-15	Globe Valve	Yes	Yes

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FIRE PROTECTION, INC.

Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
	Room A-15 System #2	1	Potter	Water Flow Switch			
	North Mech Room. System #1	1	Potter	Water Flow Switch			
	North Mech Room	1		Butterfly Tamper Switch			
	Room A-15. System #2	1		Os&Y Tamper Switch			
	Outside north Mech Room	1	FDC	Fire Department Connection			
	North side of bldg	1	FDC	Fire Department Connection			

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Questions with Photos and Notes

Valve - 6" OS&Y Backflow NW in Parking lot

Notes:

Valves are not secured



Valve - 6" OS&Y. Backflow NW in Parking lot

Notes:

Valves are not secured

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Deficiencies - General Questions

Deficiency #1

The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?: No

Notes: System #2 does not have a ITV, flowswitch was manually tested

Deficiency #2

Is the FDC easily accessible?: No

Notes: Behind locked gates

Deficiency #2 - Photo #1



Date Taken: August 04, 2023

Deficiency #3

Is the FDC swivels and couplings not damaged?: No

Notes: West FDC swivels are seized

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Deficiency #3 - Photo #1



Date Taken: August 04, 2023

Deficiency #4

Are visible sprinklers in the proper position: upright, pendent, sidewall?: No

Notes: A-41 , kitchen - heads needs lowering

Deficiency #5

Are visible sprinklers free of corrosion and physical damage?: No

Notes: Corroded head in kitchen , kitchen bathrooms

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Deficiency #5 - Photo #1



Date Taken: August 04, 2023

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Deficiency #5 - Photo #2



Date Taken: August 04, 2023

Deficiency #6

Are there spare sprinklers and a sprinkler wrench?: No

Notes: A-13 - no head wrench

Deficiency #7

Operating stem of all OS&Y valves lubricated, completely closed and reopened?: No

Notes: Osy valve needs lubrication

Deficiency #8

Are all escutcheon plates installed on sprinkler heads?: No

Notes: Missing A-55 , A-22

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Deficiency #8 - Photo #1



Date Taken: August 04, 2023

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Deficiency #8 - Photo #2



Date Taken: August 04, 2023

Deficiencies - General Wet System Questions

None

Deficiencies - Cafeteria Wet # 1

None

Deficiencies - A-Hall Wet # 2

None

Deficiencies - Fire Hydrant #1

Deficiency #9

Is the hydrant properly painted and is the paint in good condition?: No

Notes: Faded , needs grey w/ red top paint

Deficiencies - Delete

None

Deficiencies - Air Compressor

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None

Deficiencies - Water Flow Switch

None

Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

None

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

None

Deficiencies - Inspectors Test Connection

Deficiency #10

Location: N. End of C - Hall (wood shop)

Description: 1" ITV

Signs: No

Notes: No sign

Deficiency #11

Location: A-13 Flowswitch

Description: Unknown

Terminates in Smooth Orifice?: No

Easily Accessible?: No

Signs: No

Notes: Manually tested flowswitch, System does not have an ITV

Deficiencies - Valves

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Deficiency #12

Location: Rm. A-13 Closet

Valve Type: o_s_y

Size: 4

Description: Nibco control valve

Stems Lubricated?: No

Notes: Valve is hard to exercise, needs lubrication

Deficiencies - Drain Valves

None

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The logo for Industrial-Commercial Fire Protection, Inc. features the letters 'ICFP' in a large, bold, yellow font with a red-to-orange gradient. The letters are outlined in blue and set against a white background with a thin blue border.

FIRE PROTECTION, INC.

Recommendations

Cafeteria- yellow

A-Hall - yellow

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Inspector Signature

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

Inspector Name

Bora Yann
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
153252

Signature

A handwritten signature in black ink, appearing to be 'Bora Yann', written in a cursive style.

Date Completed

2023-08-04

Report of Inspection / Test

Annual NFPA 25

INDUSTRIAL-COMMERCIAL



2023-09-21

Property

Council Traditional Magnet
KH

751 Wilkinson Street

Mobile AL 36603

Mario Morrisette

Print Date: 2023-09-21

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc

MS-14326-SC AL-3693 LA-F1173 FL-873651-

0001-2007

1209C Highway 613 South

Lucaledale MS 39452

IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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FIRE PROTECTION, INC.

Is the clapper and automatic drain valve in place and properly operating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
---	---	---	---

SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

VALVE AREA

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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
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ALARMS

Is the alarm valve free from physical damage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

MAINTENANCE

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<p>Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>If sprinklers have been replaced, were they proper replacements?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If conditions were found that required flushing, was flushing of the system conducted?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Was a drain test conducted after opening any closed valve?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Operating stem of all OS&Y valves lubricated, completely closed and reopened?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?</p>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

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MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
Main School System	90	65	70	3	Yes	Yes
Gym System	90	65	72	3	Yes	Yes

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
Main School System	Riser	Test & Drain	45	Yes	Yes	Yes	Yes	Yes
Gym System	On Riser	1" ITV	35	Yes	Yes	Yes	Yes	Yes

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
Main School System	School system	E. Exterior Mech rm.	Butterfly	2-1/2 "	Monitored	Yes	Yes	Yes	Yes	Yes	16
Gym System	Gym System	N. Exterior Mech Rm.	Butterfly	3 "	Monitored	Yes	Yes	Yes	Yes	Yes	17

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
Main School System	1-1/4" main Drain	Riser	Globe Valve	Yes	Yes
Gym System	1-1/4" main Drain	Riser	Globe Valve	Yes	Yes

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FIRE PROTECTION, INC.

Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
	@ Wet Risers	2	Potter	Water Flow Switch			Pass
	@ System Controle valves	2	Built in	Butterfly Tamper Switch			Pass
	@ Maryland St. & @ S. Warren St	2	FDC	Fire Department Connection			Pass

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Deficiencies - General Questions

Deficiency #1

Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?: No

Notes: Gym missing Data plaque

Deficiency #2

Is the FDC identification sign(s) in place?: No

Notes: Both FDC needs signs

Deficiency #2 - Photo #1



Council Traditional gym -
Missing FDC sign

Date Taken: September 21, 2023

Deficiency #3

Are visible sprinklers in the proper position: upright, pendent, sidewall?: No

Notes: Pendent needs to be upright

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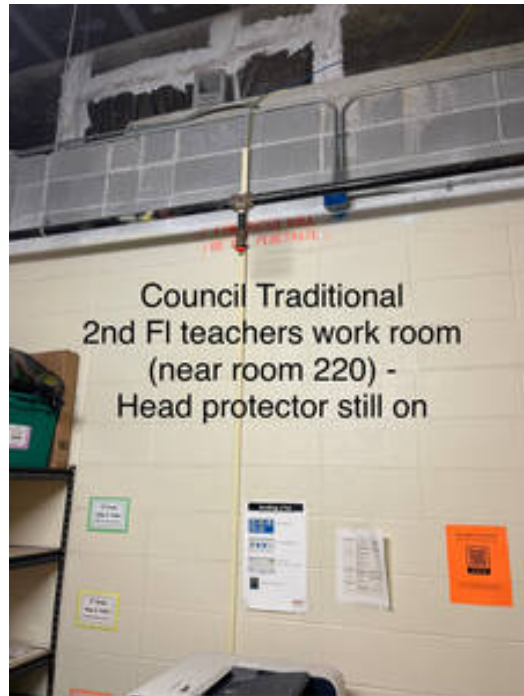
MS-14326-SC AL-3693 LA-F1173 FL-873651-

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Deficiency #3 - Photo #1



Date Taken: September 21, 2023

Deficiency #4

Are visible sprinklers free of corrosion and physical damage?: No

Notes: Kitchen (11)1/2" (1) 3/4 pendent corroded in kitchen

Deficiency #5

Are visible sprinklers free of foreign materials including paint?: No

Notes: 2nd floor teacher work Rm. Head protector still on

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Deficiency #5 - Photo #1



Date Taken: September 21, 2023

Deficiency #6

Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?: No

Notes:

Deficiencies - General Wet System Questions

None

Deficiencies - Main School System

None

Deficiencies - Gym System

None

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

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None

Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

None

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

None

Deficiencies - Alarm Pressure Switch

None

Deficiencies - PIV Tamper Switch

None

Deficiencies - Inspectors Test Connection

None

Deficiencies - Valves

None

Deficiencies - Drain Valves

None

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Inspector Signature

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

Inspector Name

Bora Yann
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
153252

Signature

A handwritten signature in black ink, appearing to be 'Bora Yann', written in a cursive style.

Date Completed

2023-09-21

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2023-07-10

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Craighead Elementary School
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1000 South Ann Street

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Print Date: 2023-07-11

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OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
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Are all Identification Signs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Is the clapper and automatic drain valve in place and properly operating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
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SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

VALVE AREA

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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
---	---	---	---

ALARMS

Is the alarm valve free from physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

MAINTENANCE

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<p>Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>If sprinklers have been replaced, were they proper replacements?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If conditions were found that required flushing, was flushing of the system conducted?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Was a drain test conducted after opening any closed valve?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Operating stem of all OS&Y valves lubricated, completely closed and reopened?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?</p>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

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Report of Inspection / Test for Asset - Fire Hydrant #1

Fire Hydrant Information

Hydrant ID	#1
Description	MH Anniston
Location	Back of school

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

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Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	70	Residual Pressure	60
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
System #1	70	60	70	.1	Yes	Yes
System #2	70	60	70	3	Yes	Yes

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
System #1	Riser	1" ITV		N/A	N/A	No	N/A	No
System #2	Riser	1" ITV		N/A	N/A	No	N/A	No

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
System #1	Victaulic control valve	West Exterior Mech/ Bus drop off	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	14
System #2	Victaulic control valve	West Exterior Mech / Bus drop off	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	14

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
	1" Aux	Gym storage	Globe Valve	No	No
System #1	2" main Drain	Riser	Globe Valve	Yes	Yes

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System #2	2" main Drain	Riser	Globe Valve	Yes	Yes
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Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
	System #1	1	Potter	Water Flow Switch		26 sec ; manually tested	Pass
	System #2	1	Potter	Water Flow Switch		26 sec ; manually tested	
	System #1	1		Butterfly Tamper Switch			Pass
	System #2	1		Butterfly Tamper Switch			Pass
	Exterior of bldg	1	FDC	Fire Department Connection			Pass

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Deficiencies - General Questions

Deficiency #1

Are visible sprinklers free of corrosion and physical damage?: No

Notes: Cafeteria/ kitchen

Deficiency #1 - Photo #1



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Deficiency #1 - Photo #2



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Deficiency #1 - Photo #3



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Deficiency #1 - Photo #4



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Deficiency #1 - Photo #5



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Deficiency #1 - Photo #6



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Deficiency #1 - Photo #7



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Deficiency #2

Are visible sprinklers free of foreign materials including paint?: No

Notes: Cafeteria- greased heads throughout 30-40

School- dusty heads throughout

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Deficiency #2 - Photo #1



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Deficiency #2 - Photo #2



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Deficiency #2 - Photo #3



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Deficiency #2 - Photo #4



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Deficiency #3

Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?: No

Notes: Kitchen. - 20 greased pendants

Deficiency #4

Are all escutcheon plates installed on sprinkler heads?: No

Notes:

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Deficiency #4 - Photo #1



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Deficiency #4 - Photo #2



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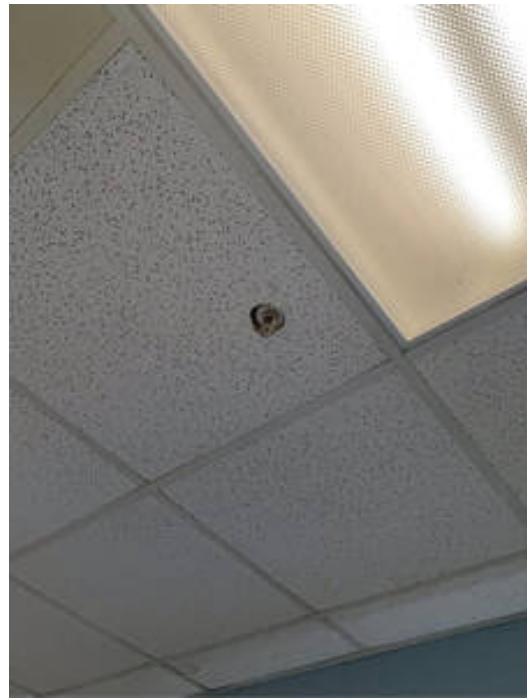
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Deficiency #4 - Photo #3



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Deficiency #4 - Photo #5



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Deficiency #4 - Photo #6



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Deficiencies - General Wet System Questions

None

Deficiencies - System #1

None

Deficiencies - System #2

None

Deficiencies - Fire Hydrant #1

Deficiency #5

Are hydrant caps, stems, outlets, and threads lubricated and in good condition?: No

Notes: 5" cap seized

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Deficiency #6

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

None

Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

None

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

None

Deficiencies - Alarm Pressure Switch

None

Deficiencies - PIV Tamper Switch

None

Deficiencies - Inspectors Test Connection

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Deficiency #7

Location: Riser
Description: 1" ITV
Pass?: No
Easily Accessible?: No

Notes: Location unknown

Deficiency #8

Location: Riser
Description: 1" ITV
Pass?: No
Easily Accessible?: No

Notes: Location unknown

Deficiencies - Valves

None

Deficiencies - Drain Valves

Deficiency #9

Location: Gym storage
Description: 1" Aux
Dry Type: globe_valve
Aux Drain Drained?: No
Water Flow Observed?: No

Notes: Inaccessible ; serving system unknown

Report of Inspection / Test

Annual NFPA 25

INDUSTRIAL-COMMERCIAL



2023-07-10

Property

Craighead Elementary School
KH

1000 South Ann Street
Mobile AL 36605
Mario Morrisette
Print Date: 2023-07-11

Conducted by: Bora Yann
NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc
MS-14326-SC AL-3693 LA-F1173 FL-873651-
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Lucaledale MS 39452

Deficiency #9 - Photo #1



Date Taken: July 10, 2023

Report of Inspection / Test

Annual NFPA 25

2023-07-10

Property

Craighead Elementary School
KH

1000 South Ann Street

Mobile AL 36605

Mario Morrisette

Print Date: 2023-07-11

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
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Industrial Commercial Fire Protection, Inc

MS-14326-SC AL-3693 LA-F1173 FL-873651-

0001-2007

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FIRE PROTECTION, INC.

Recommendations

Systems purple tagged

Report of Inspection / Test

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2023-07-10

Property

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Industrial Commercial Fire Protection, Inc

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0001-2007

1209C Highway 613 South

Lucedale MS 39452

Inspector Signature

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

Inspector Name

Bora Yann
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
153252

Signature

A handwritten signature in black ink, appearing to be 'BY', written in a cursive style.

Date Completed

2023-07-10

Report of Inspection / Test

Annual NFPA 25

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FIRE PROTECTION, INC.

2023-09-25

Property

Dauphin Island Elem School
1501 Bienville Blvd.
Dauphin Island AL 36528
Mario Morrisette
Print Date: 2023-09-25

Conducted by: Ryan Curtis

Industrial Commercial Fire Protection, Inc
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IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

Report of Inspection / Test

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FIRE PROTECTION, INC.

2023-09-25

Property

Dauphin Island Elem School
 1501 Bienville Blvd.
 Dauphin Island AL 36528
 Mario Morrisette
 Print Date: 2023-09-25

Conducted by: Ryan Curtis

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Is the clapper and automatic drain valve in place and properly operating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
---	---	---	---

SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

VALVE AREA

Report of Inspection / Test

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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
---	---	---	---

ALARMS

Is the alarm valve free from physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

MAINTENANCE

Report of Inspection / Test

Annual NFPA 25

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FIRE PROTECTION, INC.

2023-09-25

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Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
If sprinklers have been replaced, were they proper replacements?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	If conditions were found that required flushing, was flushing of the system conducted?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Was a drain test conducted after opening any closed valve?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Operating stem of all OS&Y valves lubricated, completely closed and reopened?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

Report of Inspection / Test

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FIRE PROTECTION, INC.

Report of Inspection / Test for Asset - Fire Hydrant #1

Fire Hydrant Information

Hydrant ID	#1
Description	Mueller
Location	Front of school

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does the hydrant completely shut off?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did monitor nozzle flow acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there no ice or water in the barrel?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

Report of Inspection / Test

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FIRE PROTECTION, INC.

2023-09-25

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Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
Wet System # 1 Building A	35	15	35	1	Yes	Yes
Wet System # 2 Building B	40	20	45	1	Yes	Yes

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
Wet System # 1 Building A	Nurse room closet	1"ITV	30	Yes	Yes	Yes	Yes	Yes
Wet System # 2 Building B	Counseling and Pace storage closet	1"ITV	18	Yes	Yes	Yes	Yes	Yes

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
Wet System # 1 Building A	G-1	Riser room	Check Valve	4 "	Not Applicable	Yes	Yes	Yes	Yes	Yes	
Wet System # 2 Building B	2-1/2	Riser room	OS&Y	2-1/2 "	Monitored	Yes	Yes	Yes	Yes	Yes	12
Wet System # 1 Building A	Kennedy Butterfly Tamper Valve	Riser Room	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	10
Wet System # 2 Building B	Central Alarm Valve	Riser Room	Alarm Valve	2-1/2 "	Not Applicable	Yes	Yes	Yes	Yes	Yes	

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DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
Wet System # 2 Building B	1-1/2. Ball valve	Building B	Ball Valve	Yes	Yes
Wet System # 1 Building A	2" ball valve	Riser	Ball Valve	Yes	Yes

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FIRE PROTECTION, INC.

Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
	Riser Room System #1	1		Butterfly Tamper Switch			
	Riser Room System #1	1	Potter	Water Flow Switch			
	Riser Room System #2	1		Os&Y Tamper Switch			
	Riser Room System #2	1	Potter	Water Flow Switch		Cover hanging	
	Riser Room System #2	1		Mechanical Water Motor Bell		Valves shut off	
	Remote Outside by Backflow @ Entrance Gate	1	FDC	Fire Department Connection			

Report of Inspection / Test

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Deficiencies - General Questions

Deficiency #1

Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?: No

Notes:

Deficiency #2

Are visible sprinklers free of corrosion and physical damage?: No

Notes:

Deficiency #3

Are all escutcheon plates installed on sprinkler heads?: No

Notes:

Deficiencies - General Wet System Questions

None

Deficiencies - Wet System # 1 Building A

None

Deficiencies - Wet System # 2 Building B

None

Deficiencies - Fire Hydrant #1

None

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

None

Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

Report of Inspection / Test

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None

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

None

Deficiencies - Alarm Pressure Switch

None

Deficiencies - PIV Tamper Switch

None

Deficiencies - Inspectors Test Connection

None

Deficiencies - Valves

None

Deficiencies - Drain Valves

None

Report of Inspection / Test

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Inspector Signature

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

Inspector Name

Ryan Curtis

Signature

A handwritten signature in black ink, appearing to read 'Ryan Curtis', is written over a large, faint, stylized watermark of the letters 'ICFP'.

Date Completed

2023-09-25

Report of Inspection / Test

Annual NFPA 25

2023-04-17

Property

Davidson High School
3900 Pleasant Valley Road
Mobile AL 36609
Mario Morrisette
Print Date: 2023-04-17

Conducted by: Bora Yann
NICET LEVEL II - Inspection & Testing of
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IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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2023-04-17

Property

Davidson High School
3900 Pleasant Valley Road
Mobile AL 36609
Mario Morrisette
Print Date: 2023-04-17

Conducted by: Bora Yann
NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc
MS-14326-SC AL-3693 LA-F1173 FL-873651-
0001-2007
1209C Highway 613 South
Lucaledale MS 39452

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Is the clapper and automatic drain valve in place and properly operating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
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SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

VALVE AREA

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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
---	---	---	---

ALARMS

Is the alarm valve free from physical damage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

MAINTENANCE

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<p>Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>If sprinklers have been replaced, were they proper replacements?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If conditions were found that required flushing, was flushing of the system conducted?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Was a drain test conducted after opening any closed valve?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Operating stem of all OS&Y valves lubricated, completely closed and reopened?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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Report of Inspection / Test for Asset - Hydrant #1 / Band Room

Fire Hydrant Information

Hydrant ID	#2
Description	Grey body/ Yellow top. American Darling 5-1/4" B84B
Location	Walkway near Band Room

QUESTIONS

Is there a hydrant wrench that is available and accessible? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range?? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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Are monitor nozzles lubricated?	<input type="checkbox"/> Yes
	<input type="checkbox"/> No
	<input checked="" type="checkbox"/> NA

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	95	Residual Pressure	80
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Hydrant #2 / South of Auditorium

Fire Hydrant Information

Hydrant ID	#1
Description	Grey body / Yellow top - AWWA
Location	Auditorium

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	95	Residual Pressure	'0
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
Engineer Office East System	92	85	95	.1	Yes	Yes
Main Bldg West System	92	85	95	.1	Yes	Yes
Gym Wet System	99	70	104	.1	Yes	Yes
Auditorium Wet System	95	80	95	.1	Yes	Yes
Cafeteria Wet System	100	75	100	.1	Yes	Yes
Band room	110	85	100	.1	Yes	Yes

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INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
Engineer Office East System	East System Riser	1-1/4" Inspectors Test / Main Drain	42	Yes	Yes	Yes	Yes	Yes
Main Bldg West System	@ Riser	1" Inspectors Test / Main Drain	1:10	Yes	Yes	Yes	Yes	Yes
Auditorium Wet System	@ Riser	1" Inspectors Test Valve	33	Yes	Yes	Yes	Yes	Yes
Cafeteria Wet System	@ Riser	1-1/4" Inspectors Test Valve	52	Yes	Yes	Yes	Yes	Yes
Gym Wet System	Room 123	1" Inspectors Test Valve	3	Yes	No	No	No	Yes
Band room	Above Ceiling in Football Jersey Office	1" Inspectors Test Valve	3	Yes	No	No	Yes	Yes

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
Engineer Office East System	East System Control Valve	Engineering Office	Butterfly	3 "	Monitored	Yes	Yes	Yes	Yes	Yes	7.5
Main Bldg West System	Tamper Control Valve	Engineering Office	Butterfly	2 "	Monitored	Yes	Yes	Yes	Yes	Yes	6.5
Gym Wet System	Tamper Control Valve	Riser Room / Mechanical Room	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	16
Auditorium Wet System	Tamper Control Valve	Riser Room inside Men Restroom	Butterfly	6 "	Monitored	Yes	Yes	Yes	Yes	Yes	12
Cafeteria Wet System	Tamper Control Valve	Cafeteria Riser Room / Mechanical Room	Butterfly	3 "	Monitored	Yes	No	Yes	Yes	Yes	8
Band room	Tamper Control Valve	Uniform Storage / Riser Room	Butterfly	2-1/2 "	Monitored	Yes	Yes	Yes	Yes	Yes	10

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
Cafeteria Wet System	1-1/4" Main Drain / Inspectors Test	@ Riser	Test And Drain	Yes	Yes
Band room	1-2" Main Drain	@ Riser	Angle Valve	Yes	Yes
Engineer Office East System	1-1/4" Main Drain / Inspectors Test	@ Riser	Test And Drain	Yes	Yes
Main Bldg West System	1" Main Drain / Inspectors Test	@ Riser	Test And Drain	Yes	Yes

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Gym Wet System	2" Main Drain	@ Riser	Angle Valve	Yes	Yes
Auditorium Wet System	2" Main Drain	@ Riser	Angle Valve	Yes	Yes

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Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
	Engineering office/ East System	1	Potter	Water Flow Switch			Pass
	Engineering office / West System	1	Potter	Water Flow Switch			Pass
	Gym Riser Room	1	System Sensor	Water Flow Switch		Manually tested 3sec	Pass
	Auditorium Riser Room	1	Potter	Water Flow Switch			Pass
	Cafeteria Riser Room	1	Potter	Water Flow Switch			Pass
	Uniform closet	1	System Sensor	Water Flow Switch	Noncritical	Manually tested 3 sec	Pass

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Questions with Photos and Notes

- Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation) Yes

Notes:



- Are all fire protection systems in service? Yes

Notes:

*Bandroom - supervisory report to FP as fitness room
Cafeteria, office & engineering- Alarms & supervisory does not show locations except alarm & supervisory led lights - will activate F/A*

- Is the hydraulic name plate (calculated systems) attached securely to the riser and legible? Yes

Notes:

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Visit Photos

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Annual NFPA 25

2023-04-17

Property

Davidson High School
3900 Pleasant Valley Road
Mobile AL 36609
Mario Morrisette
Print Date: 2023-04-17

Conducted by: Bora Yann
NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc
MS-14326-SC AL-3693 LA-F1173 FL-873651-
0001-2007
1209C Highway 613 South
Lucedale MS 39452

INDUSTRIAL-COMMERCIAL

ICFP

FIRE PROTECTION, INC.

Auditorium- Yellow Tagged



Band room

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INDUSTRIAL-COMMERCIAL



FIRE PROTECTION, INC.

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Office- Yellow tag
Engineering office - Purple tag



Gym - Yellow tag

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FIRE PROTECTION, INC.



Cafeteria- Yellow tag



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Deficiencies - General Questions

Deficiency #1

Are the gauges on system in good condition and showing normal water supply pressure?: No

Notes: Cafeteria- gauge dated 2016
Gym - gauge dated 2016

Deficiency #1 - Photo #1



Date Taken: April 17, 2023

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Deficiency #1 - Photo #2



Date Taken: April 17, 2023

Deficiency #2

The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?: No

Notes: Gym - could not locate ITV listed
Band Room - ITV inaccessible

Deficiency #3

Are visible sprinklers in the proper position: upright, pendent, sidewall?: No

Notes: Woodwork -Concealed head needs to be changed to upright head , no ceiling
Gym- concealed heads hanging too low

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FIRE PROTECTION, INC.

Deficiency #3 - Photo #1



Date Taken: April 17, 2023

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Annual NFPA 25

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FIRE PROTECTION, INC.

2023-04-17

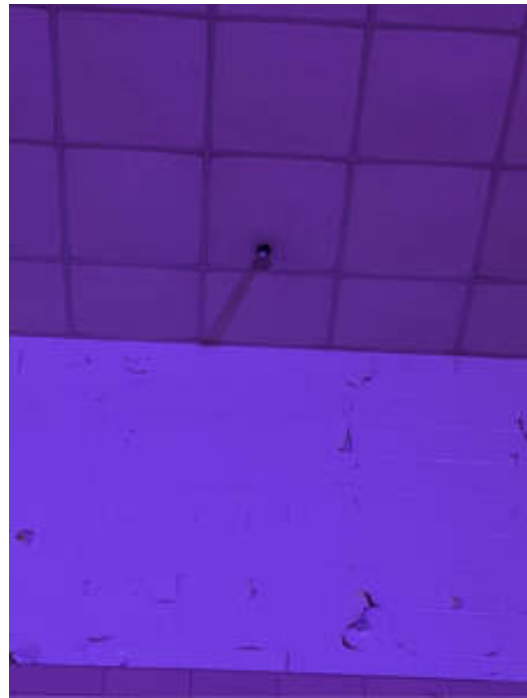
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Deficiency #3 - Photo #2



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Deficiency #3 - Photo #3



Date Taken: April 17, 2023

Deficiency #4

Is there proper clearance below the sprinklers?: No

Notes: Office storage /Break room- boxes on top shelves are too close to sprinkler head

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2023-04-17

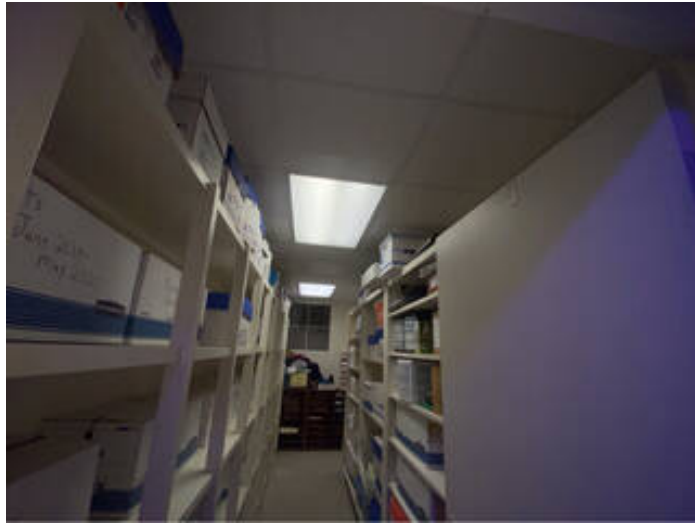
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Deficiency #4 - Photo #1



Date Taken: April 17, 2023

Deficiency #4 - Photo #2



Date Taken: April 17, 2023

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Deficiency #5

Are visible sprinklers free of foreign materials including paint?: No

Notes: Outside engineering office - concealed plates caulked

Deficiency #5 - Photo #1



Date Taken: April 17, 2023

Deficiency #6

Are there spare sprinklers and a sprinkler wrench?: No

Notes: Auditorium- missing conceal head socket
Band room - short on spares / no wrench /socket
Cafeteria- short on spares , no wrench
Engineering- short on spares no wrench
Gym - short on spares

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FIRE PROTECTION, INC.

Deficiency #6 - Photo #1



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Deficiency #6 - Photo #2



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Deficiency #6 - Photo #3



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Deficiency #6 - Photo #4



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FIRE PROTECTION, INC.

Deficiency #6 - Photo #5



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Deficiency #6 - Photo #6



Date Taken: April 17, 2023

Deficiency #7

Are all escutcheon plates installed on sprinkler heads?: No

Notes: Auditorium- broken concealed plate at Riser
Office storage / Breakroom - broken concealed plate above shelves
Gym High Ceiling -missing conceal plates ; broken plates
Outside engineering - broken concealed plate

Report of Inspection / Test

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INDUSTRIAL-COMMERCIAL



2023-04-17

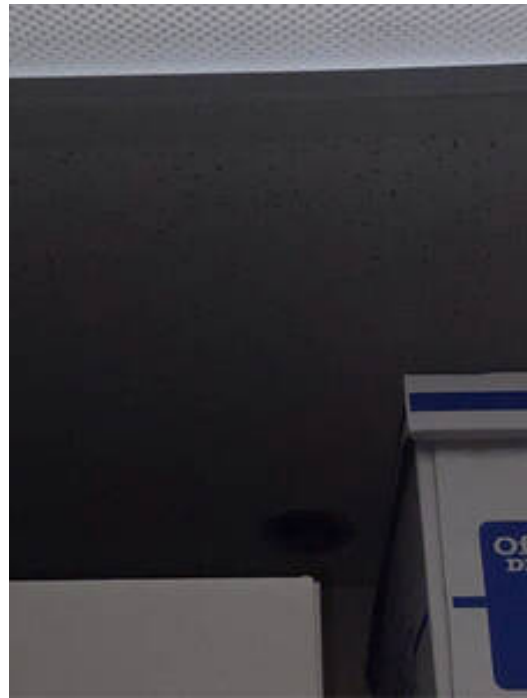
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Deficiency #7 - Photo #1



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Deficiency #7 - Photo #2



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Deficiency #7 - Photo #3



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Deficiency #7 - Photo #4



Date Taken: April 17, 2023

Deficiencies - General Wet System Questions

None

Deficiencies - Engineer Office East System

None

Deficiencies - Main Bldg West System

None

Deficiencies - Gym Wet System

None

Deficiencies - Auditorium Wet System

None

Deficiencies - Cafeteria Wet System

None

Deficiencies - Band room

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None

Deficiencies - Hydrant #1 / Band Room

None

Deficiencies - Hydrant #2 / South of Auditorium

None

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

None

Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

None

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

None

Deficiencies - Alarm Pressure Switch

None

Deficiencies - PIV Tamper Switch

None

Deficiencies - Inspectors Test Connection

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Deficiency #8

Location: Room 123
Description: 1" Inspectors Test Valve
Terminates in Smooth Orifice?: No
Easily Accessible?: No
Signs: No

Notes: Could not locate ITV

Deficiency #9

Location: Above Ceiling in Football Jersey Office
Description: 1" Inspectors Test Valve
Terminates in Smooth Orifice?: No
Easily Accessible?: No

Notes: Valve inaccessible. Manually tested Waterflow switch

Deficiencies - Valves

Deficiency #10

Location: Cafeteria Riser Room / Mechanical Room
Valve Type: butter_fly
Size: 3
Description: Tamper Control Valve
Easily Accessible?: No

Notes:

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Deficiency #10 - Photo #1



Date Taken: April 17, 2023

Deficiencies - Drain Valves

None

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Inspector Signature

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

Inspector Name

Bora Yann
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
153252

Signature

A handwritten signature in black ink, appearing to be "Bora Yann", written in a cursive style.

Date Completed

2023-04-17

Report of Inspection / Test

Annual NFPA 25

INDUSTRIAL-COMMERCIAL



2023-02-23

Property

Davis Elementary School
KH

6900 Nan Gray Davis

Mobile AL 36582

Mario Morrisette

Print Date: 2023-02-24

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
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IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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FIRE PROTECTION, INC.

Is the clapper and automatic drain valve in place and properly operating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
---	---	---	---

SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

VALVE AREA

Report of Inspection / Test

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INDUSTRIAL-COMMERCIAL



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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
---	---	---	---

ALARMS

Is the alarm valve free from physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

MAINTENANCE

Report of Inspection / Test

Annual NFPA 25

INDUSTRIAL-COMMERCIAL



2023-02-23

Property

Davis Elementary School
KH

6900 Nan Gray Davis
Mobile AL 36582

Mario Morrisette

Print Date: 2023-02-24

Conducted by: Bora Yann
NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc
MS-14326-SC AL-3693 LA-F1173 FL-873651-
0001-2007
1209C Highway 613 South
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<p>Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>If sprinklers have been replaced, were they proper replacements?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If conditions were found that required flushing, was flushing of the system conducted?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Was a drain test conducted after opening any closed valve?</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
<p>Operating stem of all OS&Y valves lubricated, completely closed and reopened?</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<p>Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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FIRE PROTECTION, INC.

MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
System# 1 / Gym	65	55	60	.1	Yes	Yes
System #2 / Building #2	90	54	66	.1	Yes	Yes

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
System# 1 / Gym	SW Exterior Air Handler Room / Left Rear of Building	1" Inspectors Test Valve	45	Yes	Yes	Yes	Yes	Yes
System #2 / Building #2	Room 36 Closet	1" Inspectors Test Valve	1:02	Yes	Yes	Yes	Yes	Yes

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
System# 1 / Gym	Muller Control Valve	Janitorial closet	OS&Y	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	
System #2 / Building #2	Kennedy Butterfly Tamper Valve	Exterior Mechanical Room / Riser Room	Butterfly	2-1/2 "	Monitored	Yes	Yes	Yes	Yes	Yes	10.5
	Mueller OS&Y	Backflow	OS&Y	4 "	Locked	Yes	Yes	Yes	Yes	Yes	
	Mueller OS&Y	Backflow	OS&Y	4 "	Locked	Yes	Yes	Yes	Yes	Yes	

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
System #2 / Building #2	1-1/4 Main Drain	System #2 Building #2	Angle Valve	Yes	Yes
System# 1 / Gym	2" Main Drain	System#1 Gym	Ball Valve	Yes	Yes

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FIRE PROTECTION, INC.

Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
	System#1 Gym	1	Potter	Water Flow Switch			Pass
	System#1 Gym	1	Potter	Os&Y Tamper Switch			Pass
	@ Backflow by the Street	1	FDC	Fire Department Connection			Pass
	System #2 Building #2	1	Kennedy	Butterfly Tamper Switch			Pass
	System #2 Building #2	1	Potter	Water Flow Switch	Critical		Pass
	System #2 Building #2	1	Viking	Mechanical Water Motor Bell	Improper Funtion	Needs cleaning	N/A

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Deficiencies - General Questions

Deficiency #1

Is the information sign attached and legible?: No

Notes:

Deficiencies - General Wet System Questions

None

Deficiencies - System# 1 / Gym

None

Deficiencies - System #2 / Building #2

None

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

None

Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

None

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

None

Deficiencies - Alarm Pressure Switch

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FIRE PROTECTION, INC.

None

Deficiencies - PIV Tamper Switch

None

Deficiencies - Inspectors Test Connection

None

Deficiencies - Valves

None

Deficiencies - Drain Valves

None

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The logo for Industrial-Commercial Fire Protection, Inc. features the letters 'ICFP' in a large, bold, yellow font with a red-to-orange gradient. The letters are outlined in black and set against a white background with a thin red horizontal line above and below them.

FIRE PROTECTION, INC.

Recommendations

New wing - green

Gym - green

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Inspector Signature

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

Inspector Name

Bora Yann
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
153252

Signature

A handwritten signature in black ink, appearing to be 'Bora Yann', written in a cursive style.

Date Completed

2023-02-23

Report of Inspection / Test

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FIRE PROTECTION, INC.

IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Is the clapper and automatic drain valve in place and properly operating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
---	---	---	---

SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

VALVE AREA

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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
---	---	---	---

ALARMS

Is the alarm valve free from physical damage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

MAINTENANCE

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<p>Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>If sprinklers have been replaced, were they proper replacements?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If conditions were found that required flushing, was flushing of the system conducted?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Was a drain test conducted after opening any closed valve?</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
<p>Operating stem of all OS&Y valves lubricated, completely closed and reopened?</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<p>Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Report of Inspection / Test for Asset - Fire Hydrant #1

Fire Hydrant Information

Hydrant ID	#1
Description	M&H
Location	Rear of West Parking Lot
Static Hydrant Description	Red Hydrant

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

Report of Inspection / Test

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INDUSTRIAL-COMMERCIAL



2023-02-20

Property

Dawes Intermediate School
KH

10451 West Lake Road

Mobile AL 36695

Mario Morrisette

Print Date: 2023-02-20

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc

MS-14326-SC AL-3693 LA-F1173 FL-873651-

0001-2007

1209C Highway 613 South

Lucaledale MS 39452

Are monitor nozzles lubricated? Yes
 No
 NA

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Fire Hydrant #2

Fire Hydrant Information

Hydrant ID	#2
Description	M&H
Location	Right Side of Front Entrance

QUESTIONS

Is there a hydrant wrench that is available and accessible? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there no ice or water in the barrel? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Fire Hydrant #3

Fire Hydrant Information

Hydrant ID	#3
Description	M&H
Location	Left Side of Front Entrance

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there no ice or water in the barrel?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Fire. Hydrant #4

Fire Hydrant Information

Report of Inspection / Test

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Hydrant ID	#4
Description	MH Anniston
Location	Rear of East Parking Lot
Static Hydrant Description	Red Hydrant

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

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Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
System #1 / Main Building	105	60	90	.1	Yes	Yes
System #2 / Gym & Cafeteria	90	60	90	.1	Yes	Yes

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
System #1 / Main Building	@ Riser	1" Inspectors Test Valve	36	Yes	Yes	Yes	Yes	Yes
System #2 / Gym & Cafeteria	@ Riser	1" Inspectors Test Valve	21	Yes	Yes	Yes	Yes	Yes

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
System #1 / Main Building	Control Valve	West Exterior Mechanical / Riser Room	Butterfly	3 "	Monitored	Yes	Yes	Yes	Yes	Yes	6
System #2 / Gym & Cafeteria	Control Valve	West Exterior Mechanical / Riser Room	Butterfly	3 "	Monitored	Yes	Yes	Yes	Yes	Yes	6
	Control Valve	Backflow @ Street	OS&Y	6 "	Monitored And Locked	Yes	Yes	Yes	Yes	Yes	

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
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Mario Morrisette

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FIRE PROTECTION, INC.

System #1 / Main Building	1-1/4" Main Drain	@ Riser	Ball Valve	Yes	Yes
System #2 / Gym & Cafeteria	1-1/4" Main Drain	@ Riser	Ball Valve	Yes	Yes

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FIRE PROTECTION, INC.

Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
	System #1 / Main Building	1	Potter	Water Flow Switch		38sec	Pass
	System #2 / Gym & Cafeteria	1	Potter	Water Flow Switch		21sec	Pass
	Backflow	2	Potter	Os&Y Tamper Switch			Pass
	System #1 / Main Building	1	Nibco	Butterfly Tamper Switch			Pass
	System #2 / Gym & Cafeteria	1	Nibco	Butterfly Tamper Switch			
	Remote Exterior West Side of Building	1	FDC	Fire Department Connection			

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ICFP

FIRE PROTECTION, INC.

Visit Photos



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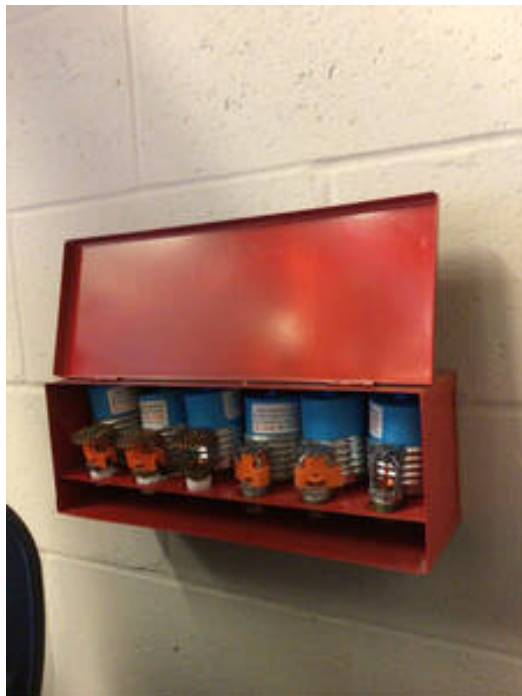
Deficiencies - General Questions

Deficiency #1

Are there spare sprinklers and a sprinkler wrench?: No

Notes: Missing head wrench ; Tyco concealed , semi-recessed

Deficiency #1 - Photo #1



Date Taken: February 20, 2023

Deficiency #2

Is the information sign attached and legible?: No

Notes:

Deficiencies - General Wet System Questions

None

Deficiencies - System #1 / Main Building

None

Deficiencies - System #2 / Gym & Cafeteria

None

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Deficiencies - Fire Hydrant #1

None

Deficiencies - Fire Hydrant #2

None

Deficiencies - Fire Hydrant #3

None

Deficiencies - Fire. Hydrant #4

None

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

None

Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

None

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

None

Deficiencies - Alarm Pressure Switch

None

Deficiencies - PIV Tamper Switch

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FIRE PROTECTION, INC.

None

Deficiencies - Inspectors Test Connection

None

Deficiencies - Valves

None

Deficiencies - Drain Valves

None

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Inspector Signature

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

Inspector Name

Bora Yann
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
153252

Signature

A handwritten signature in black ink, appearing to be 'Bora Yann', written in a cursive style.

Date Completed

2023-02-20

Report of Inspection / Test

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2023-06-08

Property

Denton Middle School
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3800 Pleasant Valley Road

Mobile AL 36609

Mario Morrisette

Print Date: 2023-06-08

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
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IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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2023-06-08

Property

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3800 Pleasant Valley Road

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Is the clapper and automatic drain valve in place and properly operating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
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SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

VALVE AREA

Report of Inspection / Test

Annual NFPA 25

INDUSTRIAL-COMMERCIAL



2023-06-08

Property

Denton Middle School
KH

3800 Pleasant Valley Road

Mobile AL 36609

Mario Morrisette

Print Date: 2023-06-08

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc

MS-14326-SC AL-3693 LA-F1173 FL-873651-

0001-2007

1209C Highway 613 South

Lucedale MS 39452

Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
---	---	---	---

ALARMS

Is the alarm valve free from physical damage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

MAINTENANCE

Report of Inspection / Test

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INDUSTRIAL-COMMERCIAL



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<p>Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>If sprinklers have been replaced, were they proper replacements?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If conditions were found that required flushing, was flushing of the system conducted?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Was a drain test conducted after opening any closed valve?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Operating stem of all OS&Y valves lubricated, completely closed and reopened?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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FIRE PROTECTION, INC.

Report of Inspection / Test for Asset - Fire Hydrant #1

Fire Hydrant Information

Hydrant ID

#1

Description

American Darling 51/4" B84B

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Report of Inspection / Test

Annual NFPA 25

2023-06-08

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FIRE PROTECTION, INC.

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	95	Residual Pressure	65
-----------------	----	-------------------	----

Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
System # 1	95	65	90	1	Yes	Yes
System # 2	95	70	85	1	Yes	Yes

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
System # 1	@ Riser	1" Inspectors Test Valve	53	Yes	Yes	Yes	Yes	Yes
System # 2	@ Riser	1" Inspectors Test Valve	45	Yes	Yes	Yes	Yes	Yes

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
System # 1	Butterfly Tamper Valve	Exterior Mechanical Room by Cafeteria	Butterfly	3 "	Monitored	Yes	Yes	Yes	Yes	Yes	13
System # 2	Butterfly Tamper Valve	Exterior Mechanical Room by Cafeteria	Butterfly	3 "	Monitored	Yes	Yes	Yes	Yes	Yes	13

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
System # 1	1-1/4" main Drain	On Riser	Globe Valve	Yes	Yes
System # 2	1-1/4" main Drain	On Riser	Globe Valve	Yes	Yes

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FIRE PROTECTION, INC.

Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
	@ Risers	2	Potter	Water Flow Switch			Pass
	@ Risers	2	Victaulic	Butterfly Tamper Switch			Pass
	Exterior of Mechanical Room	1	FDC	Fire Department Connection			Pass

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Deficiencies - General Questions

None

Deficiencies - General Wet System Questions

None

Deficiencies - System # 1

None

Deficiencies - System # 2

None

Deficiencies - Fire Hydrant #1

None

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

None

Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

None

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

None

Deficiencies - Alarm Pressure Switch

Report of Inspection / Test

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FIRE PROTECTION, INC.

None

Deficiencies - PIV Tamper Switch

None

Deficiencies - Inspectors Test Connection

None

Deficiencies - Valves

None

Deficiencies - Drain Valves

None

Report of Inspection / Test

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INDUSTRIAL-COMMERCIAL

The logo for Industrial-Commercial Fire Protection, Inc. features the letters 'ICFP' in a large, bold, yellow font with a red-to-orange gradient. The letters are outlined in black and set against a white background with a thin red horizontal line above and below them.

FIRE PROTECTION, INC.

Recommendations

System tagged green

Report of Inspection / Test

Annual NFPA 25

INDUSTRIAL-COMMERCIAL



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Inspector Signature

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

Inspector Name

Bora Yann
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
153252

Signature

A handwritten signature in black ink, appearing to read 'Bora Yann', is written in the signature field.

Date Completed

2023-06-08

Report of Inspection / Test

Annual NFPA 25

2023-02-22

Property

Dixon Elementary School
KH

8650 4 Mile Road
Irvington AL 36544

Mario Morrisette

Print Date: 2023-02-22

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
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IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are all fire protection systems in service?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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FIRE PROTECTION, INC.

Is the clapper and automatic drain valve in place and properly operating?

Yes
 No
 NA

Is the FDC identification sign(s) in place?

Yes
 No
 NA

SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?

Yes
 No
 NA

Are visible sprinklers in the proper position: upright, pendent, sidewall?

Yes
 No
 NA

Are visible sprinklers free of corrosion and physical damage?

Yes
 No
 NA

Is there proper clearance below the sprinklers?

Yes
 No
 NA

Are visible sprinklers free of foreign materials including paint?

Yes
 No
 NA

Is there liquid in all visible glass bulb sprinklers?

Yes
 No
 NA

Are there spare sprinklers and a sprinkler wrench?

Yes
 No
 NA

Is the information sign attached and legible?

Yes
 No
 NA

Are all the sprinklers dated 1920 or later?

Yes
 No
 NA

Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?

Yes
 No
 NA

Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?

Yes
 No
 NA

Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?

Yes
 No
 NA

Dry-type sprinklers replaced or successfully sample tested within last 10 years?

Yes
 No
 NA

Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?

Yes
 No
 NA

Is the building fully protected by sprinklers?

Yes
 No
 NA

PIPES

Is the visible pipe in good condition with no external corrosion?

Yes
 No
 NA

Does visible pipe have no mechanical damage or leaks?

Yes
 No
 NA

Does visible pipe have no external loads?

Yes
 No
 NA

Are visible pipe hangers and seismic braces not damaged or loose?

Yes
 No
 NA

Is the pipe through freezers free if any ice blockage?

Yes
 No
 NA

Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)

Yes
 No
 NA

VALVE AREA

Report of Inspection / Test

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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

DRY VALVE

Are enclosures around valves maintaining a minimum of 40 degrees F?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the gauges on systems without low pressure alarms in good condition and showing normal air and water pressure?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
For freezer systems, gauge near compressor reading the same as gauge near the dry-pipe valve?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are they free from physical damage?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Are trim valves in appropriate (open or closed) position?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is there no leakage in the intermediate chamber?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on systems with low pressure alarms in good condition and showing normal air and water pressure?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Has the dry-pipe valve passed inspection?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Is the priming level correct and has the low air pressure signal passed it's test?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Has the quick opening device passed the test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
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Report of Inspection / Test

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INDUSTRIAL-COMMERCIAL



2023-02-22

Property

Dixon Elementary School
KH

8650 4 Mile Road
Irvington AL 36544

Mario Morrisette

Print Date: 2023-02-22

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

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ALARMS

Is the alarm valve free from physical damage? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the trim in correct (open or closed) position? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are alarms and supervisory devices not damaged? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have low temperature alarms passed test? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

MAINTENANCE

Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
If sprinklers have been replaced, were they proper replacements? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	If conditions were found that required flushing, was flushing of the system conducted? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Was a drain test conducted after opening any closed valve? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Operating stem of all OS&Y valves lubricated, completely closed and reopened? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Are dry-pipe systems kept in dry condition? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Have auxiliary drains been emptied? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

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- Yes
- No
- NA

Is interior of dry-pipe valves cleaned?

- Yes
- No
- NA

Have low points been drained before freezing weather?

- Yes
- No
- NA

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Report of Inspection / Test for System - Main Bldg Dry

Air Compressor Information

Make	Model	Manufacturer	Phase	Description
	Model K	Emglo		
Cut In	Cut Out	HP Size	Voltage	

DRY VALVE

Have automatic air maintenance devices passed test? Yes
 No
 NA

DRY VALVE TRIP TEST

Dry Valve	Size: 4"	Year of Mfr.: 2000	Accelerator	Year of Mfr.: N/A		
Make	Model	Serial no.	Make	Model	Serial no.	
Viking	F-1	00108545	N/A	N/A	N/A	
	Time to Trip thru test pipe	Water Pressure	Air Pressure	Trip point air pressure	Time water reached test outlet	Alarm Operated
Without Accelerator	5:02	52	40	5	osysu tamper needs to be adjusted , supervisory does not indicate movement when operating control valve	Yes
With Accelerator	N/A	N/A	N/A	N/A	N/A	N/A

DRY VALVE TRIP TEST (cont)

Were results comparable to previous test? Yes No NA
Has it passed air leakage test? Yes No NA

Report of Inspection / Test for System - D Bldg Dry

Air Compressor Information

Make	Model	Manufacturer	Phase	Description
		Gast		
Cut In	Cut Out	HP Size	Voltage	

DRY VALVE

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Have automatic air maintenance devices passed test? Yes
 No
 NA

DRY VALVE TRIP TEST

Dry Valve	Size: 4"	Year of Mfr.: 2000	Accelerator	Year of Mfr.: N/A		
Make	Model	Serial no.	Make	Model	Serial no.	
Viking	F-1	00094747	N/A	N/A	N/A	
	Time to Trip thru test pipe	Water Pressure	Air Pressure	Trip point air pressure	Time water reached test outlet	Alarm Operated
Without Accelerator	N/A	65	65	N/A	N/A	No
With Accelerator	N/A	N/A	N/A	N/A	N/A	N/A

DRY VALVE TRIP TEST (cont)

Were results comparable to previous test? Yes
 No
 NA

Has it passed air leakage test? Yes
 No
 NA

Report of Inspection / Test for Asset - Fire Hydrants #1 by School Sign

Fire Hydrant Information

Hydrant ID	#1
Description	MH Anniston
Location	Back of school

QUESTIONS

Is there a hydrant wrench that is available and accessible? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Fire Hydrant #2 by Gym

Fire Hydrant Information

Hydrant ID	#2
Description	CLOW AWWA 5-1/4
Location	Next to gym

QUESTIONS

Report of Inspection / Test

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Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:

N/A

Total Flow

N/A

MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
Gym Wet	65	40	63	.1	Yes	Yes
Main Bldg Dry	52	32	52	.1	Yes	Yes
D Bldg Dry	70	55	65	.1	Yes	Yes
E Bldg Wet	55	38	60	.1	Yes	Yes

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
Gym Wet	NE exterior mechanical room	1" ITV	1:28	Yes	Yes	Yes	Yes	Yes
Main Bldg Dry	Class Room C-4 Closet	1" ITV	5:02	Yes	Yes	Yes	Yes	No
D Bldg Dry	Class Room D-14 Closet	1" ITV	N/A	No	No	Yes	Yes	No
E Bldg Wet	Class Room E-14 above Ceiling	1" ITV	28	Yes	Yes	No	Yes	Yes

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
Gym Wet	Tyco control valve	Janitor Closet	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	8
Main Bldg Dry	Muller control valve	Exterior Riser room	OS&Y	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	14
D Bldg Dry	Muller control valve	Riser room	OS&Y	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	13
E Bldg Wet	Muller control valve	S. Exterior Boiler Rm	OS&Y	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	14
Gym Wet	Tyco Model CV-1F Riser Check	Janitor Closet	Riser Check Valve	4 "	Not Applicable	Yes	Yes	N/A	N/A	N/A	
E Bldg Wet	Victaulic S/751 Alarm Valve	Boiler Room South end of the Building	Alarm Valve	4 "	Not Applicable	Yes	Yes	N/A	N/A	N/A	

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FIRE PROTECTION, INC.

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
Gym Wet	2" main Drain	Riser	Globe Valve	Yes	Yes
Main Bldg Dry	2" main Drain	Riser	Globe Valve	Yes	Yes
D Bldg Dry	2" main Drain	Riser	Globe Valve	Yes	Yes
E Bldg Wet	2" main Drain	Riser	Globe Valve	Yes	Yes
Gym Wet	Aux	Mens RR ceiling access panel	Globe Valve	N/A	N/A

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Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
	Gym System	1	Potter	Water Flow Switch			Pass
	Main bldg.	1	Potter	Water Flow Switch			Pass
	Bldg. E	1	Potter	Water Flow Switch			Pass
	Bldg. D	1	Potter	Water Flow Switch	Critical	Alarm switch is unwired	Fail
	Gym	1		Butterfly Tamper Switch			Pass
	Main Bldg.	1	Potter	Os&Y Tamper Switch			Pass
	Bldg. D	1	Potter	Os&Y Tamper Switch			Pass
	Bldg. E	1	Potter	Os&Y Tamper Switch		Needs adjusting	Pass
	Remote @ Backflow	1	FDC	Fire Department Connection		Swivels seized/. Missing caps	Fail
	Main Bldg.	1	Potter	Low Air Pressure Switch	Critical	Doesn't have one	N/A
	Bldg. D	1	Potter	Low Air Pressure Switch		Not installed	N/A
	Bldg. E	1	FDC	Fire Department Connection		Missing sign	Pass

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Questions with Photos and Notes

Valve - Muller control valve S. Exterior Boiler Rm

Notes:

Valve leaks / needs repacking

Drain Valve - 2" main Drain Riser

Notes:

No sign

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Deficiencies - General Questions

Deficiency #1

Are visible sprinklers free of foreign materials including paint?: No

Notes: Dusty heads throughout school

Deficiency #2

Are visible sprinklers free of corrosion and physical damage?: No

Notes: Kitchen / loading dock - greased & corroded heads

Deficiency #3

Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?: No

Notes:

Deficiency #4

Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?: No

Notes: Corroded heads outside loading dock

Deficiency #5

Is the information sign attached and legible?: No

Notes:

Deficiency #6

Are there spare sprinklers and a sprinkler wrench?: No

Notes: No spare heads ; cabinets or wrenches

Deficiency #7

Are there the proper number and type of spare sprinklers?: No

Notes: No spare heads on site

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Deficiency #8

Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years?
(If no conduct investigation): No

Notes:

Deficiency #9

Are alarms and supervisory devices not damaged?: No

Notes: D Bldg PS 40 is unwired

Deficiency #9 - Photo #1



Date Taken: February 22, 2023

Deficiency #10

The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?: No

Notes: D Bldg - PS10 is unwired

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Deficiency #10 - Photo #1



Date Taken: February 22, 2023

Deficiency #11

Was the system free of actuations of devices or alarms since the last inspection?: No

Notes:

Deficiency #12

Are all Identification Signs in place?: No

Notes:

Deficiency #13

Has the system remained in service without modification since the last inspection?: No

Notes:

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Deficiency #14

Are all fire protection systems in service?: No

Notes: Bldg D - dry valve is tripped out / system is currently wet

Deficiency #15

Does visible pipe have no mechanical damage or leaks?: No

Notes: E Bldg - OSY valve leaking

Deficiency #15 - Photo #1



Date Taken: February 22, 2023

Deficiency #16

Is the FDC swivels and couplings not damaged?: No

Notes: 2 street - needs lubrication

Deficiency #17

Are the FDC caps and plugs in place?: No

Notes: @ street- missing caps

Report of Inspection / Test

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2023-02-22

Property

Dixon Elementary School
KH

8650 4 Mile Road
Irvington AL 36544

Mario Morrisette

Print Date: 2023-02-22

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
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Deficiency #18

Is the FDC identification sign(s) in place?: No

Notes: @ street - no sign

E - bldg - no sign

Deficiency #18 - Photo #1



Date Taken: February 22, 2023

Deficiency #19

Do valve supervisory switches indicate movement?: No

Notes: E Bldg- osysu tamper needs to be adjusted , supervisory does not indicate movement when operating control valve

Main Bldg -osysu tamper needs to be adjusted , supervisory does not indicate movement when operating control valve

Deficiencies - General Wet System Questions

None

Deficiencies - General Dry System Questions

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Deficiency #20

Have low points been drained before freezing weather?: No

Notes:

Deficiency #21

Have auxiliary drains been emptied?: No

Notes:

Deficiency #22

Are dry-pipe systems kept in dry condition?: No

Notes:

Deficiency #23

Is the priming level correct and has the low air pressure signal passed it's
test?: No

Notes:

Deficiency #24

Has the dry-pipe valve passed inspection?: No

Notes: E Bldg - dry valve is tripped out / wet

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Deficiency #24 - Photo #1



Date Taken: February 22, 2023

Deficiency #25

Are the gauges on systems with low pressure alarms in good condition and showing normal air and water pressure?: No

Notes:

Deficiency #26

Is there no leakage in the intermediate chamber?: No

Notes:

Deficiency #27

Are trim valves in appropriate (open or closed) position?: No

Notes:

Deficiency #28

Are they free from physical damage?: No

Notes:

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Deficiency #29

Are the gauges on systems without low pressure alarms in good condition
and showing normal air and water pressure?: No

Notes:

Deficiencies - Gym Wet

None

Deficiencies - Main Bldg Dry

None

Deficiencies - D Bldg Dry

Deficiency #30

Have automatic air maintenance devices passed test?: No

Notes:

Deficiency #31

Without Accelerator: Did alarm operate?: No

Notes: PS10 is disconnected

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Deficiency #31 - Photo #1



Date Taken: February 22, 2023

Deficiencies - E Bldg Wet

None

Deficiencies - Fire Hydrants #1 by School Sign

None

Deficiencies - Fire Hydrant #2 by Gym

None

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

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Deficiency #32

Address

Location: Bldg. D

QTY: 1

Description: PS10

Status: Fail

Notes:

Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

None

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

Deficiency #33

Address

Location: Remote @ Backflow

QTY: 1

Description: Siamese Connection

Status: Fail

Notes:

Deficiencies - Alarm Pressure Switch

None

Deficiencies - PIV Tamper Switch

None

Deficiencies - Inspectors Test Connection

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Deficiency #34

Location: Class Room C-4 Closet

Description: 1" ITV

Pass?: No

Notes:

Deficiency #35

Location: Class Room D-14 Closet

Description: 1" ITV

Pass?: No

Was alarm reported?: No

Terminates in Smooth Orifice?: No

Notes: System is tripped out / missing 1x1/2 fitting ; orifice

Deficiency #35 - Photo #1



Date Taken: February 22, 2023

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Deficiency #36

Location: Class Room E-14 above Ceiling

Description: 1" ITV

Easily Accessible?: No

Notes:

Deficiencies - Valves

None

Deficiencies - Drain Valves

None

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FIRE PROTECTION, INC.

Recommendations

Gym - green tagged

E Bldg - purple tagged

D Bldg - purple tagged

Main Bldg - purple tagged

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Inspector Signature

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

Inspector Name

Bora Yann
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
153252

Signature

A handwritten signature in black ink, appearing to be 'BY', written in a cursive style.

Date Completed

2023-02-22

Report of Inspection / Test

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2023-06-26

Property

Dodge Elementary School
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2615 Longleaf Drive
Mobile AL 36693

Mario Morrisette

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NICET LEVEL II - Inspection & Testing of
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IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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FIRE PROTECTION, INC.

Is the clapper and automatic drain valve in place and properly operating?

Yes
 No
 NA

Is the FDC identification sign(s) in place?

Yes
 No
 NA

SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?

Yes
 No
 NA

Are visible sprinklers in the proper position: upright, pendent, sidewall?

Yes
 No
 NA

Are visible sprinklers free of corrosion and physical damage?

Yes
 No
 NA

Is there proper clearance below the sprinklers?

Yes
 No
 NA

Are visible sprinklers free of foreign materials including paint?

Yes
 No
 NA

Is there liquid in all visible glass bulb sprinklers?

Yes
 No
 NA

Are there spare sprinklers and a sprinkler wrench?

Yes
 No
 NA

Is the information sign attached and legible?

Yes
 No
 NA

Are all the sprinklers dated 1920 or later?

Yes
 No
 NA

Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?

Yes
 No
 NA

Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?

Yes
 No
 NA

Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?

Yes
 No
 NA

Dry-type sprinklers replaced or successfully sample tested within last 10 years?

Yes
 No
 NA

Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?

Yes
 No
 NA

Is the building fully protected by sprinklers?

Yes
 No
 NA

PIPES

Is the visible pipe in good condition with no external corrosion?

Yes
 No
 NA

Does visible pipe have no mechanical damage or leaks?

Yes
 No
 NA

Does visible pipe have no external loads?

Yes
 No
 NA

Are visible pipe hangers and seismic braces not damaged or loose?

Yes
 No
 NA

Is the pipe through freezers free if any ice blockage?

Yes
 No
 NA

Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)

Yes
 No
 NA

VALVE AREA

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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
---	---	---	---

ALARMS

Is the alarm valve free from physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

MAINTENANCE

Report of Inspection / Test

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FIRE PROTECTION, INC.

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<p>Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>If sprinklers have been replaced, were they proper replacements?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If conditions were found that required flushing, was flushing of the system conducted?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Was a drain test conducted after opening any closed valve?</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
<p>Operating stem of all OS&Y valves lubricated, completely closed and reopened?</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<p>Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?</p>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

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FIRE PROTECTION, INC.

Report of Inspection / Test for Asset - Fire Hydrant #1

Fire Hydrant Information

Hydrant ID	#1
Description	American Darling 5-1/4
Location	Front Office by Gym
Static Hydrant Description	Yellow W/ Green top

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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Are monitor nozzles lubricated?	<input type="checkbox"/> Yes
	<input type="checkbox"/> No
	<input checked="" type="checkbox"/> NA

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	86	Residual Pressure	65
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
Cafeteria	70	55	70	1	Yes	Yes
Gym	86	65	77	1	Yes	Yes
Main Building	70	55	75	1	Yes	Yes
400 Hall West System	90	50	71	3	Yes	Yes
300 Hall East System	70	50	70	1	Yes	Yes

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
Cafeteria	SE exterior mechanical room	1" Ball valve	44	Yes	Yes	Yes	Yes	Yes
Gym	Concession Janitor closet	1" Globe Valve	1:18	Yes	Yes	Yes	Yes	Yes
Main Building	W. Interior Storage room C	1" Ball valve	46	Yes	Yes	Yes	No	Yes
400 Hall West System	W. Exterior mechanical room	1" Globe valve	1:26	Yes	Yes	Yes	No	Yes

Report of Inspection / Test

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Property

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KH

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Print Date: 2023-06-27

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
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Industrial Commercial Fire Protection, Inc

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FIRE PROTECTION, INC.

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
300 Hall East System	W. Exterior mechanical room	1" Globe valve	42	Yes	Yes	Yes	No	Yes

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
300 Hall East System	Milwaukee control valve	W. Exterior mechanical room	Butterfly	2 "	Monitored	Yes	Yes	No	Yes	Yes	7
Cafeteria	Victaulic control valve	NE exterior Riser Room	Butterfly	3 "	Monitored	Yes	Yes	Yes	Yes	Yes	14
Gym	Central control valve	Gym Storage Closet	OS&Y	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	14
Main Building	Victaulic control valve	W. Interior Storage room C	Butterfly	6 "	Monitored	Yes	Yes	No	Yes	Yes	16
400 Hall West System	Milwaukee control valve	W. Exterior mechanical room	Butterfly	2 "	Monitored	Yes	Yes	Yes	Yes	Yes	7.5
Main Building	Viking Check	W. Interior Storage Room C	Riser Check Valve	6 "	Not Applicable	Yes	Yes	Yes	N/A	N/A	
Gym	Tyco Check	Gym Storage Closet	Riser Check Valve	4 "	Not Applicable	Yes	Yes	Yes	N/A	N/A	
Cafeteria	Tyco Check	Riser room	Riser Check Valve	3 "	Not Applicable	Yes	Yes	Yes	N/A	N/A	

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
Cafeteria	1-1/4" main Drain	Riser Room	Globe Valve	Yes	Yes
Cafeteria	15' AFF 1" low point	Cafeteria Dining	Ball Valve	N/A	N/A
400 Hall West System	1" main Drain	Riser Room	Globe Valve	Yes	Yes
300 Hall East System	1" main Drain	Riser Room	Globe Valve	Yes	Yes
Gym	2 " main Drain	Riser room	Globe Valve	Yes	Yes
Main Building	2" main Drain	Riser Room	Globe Valve	Yes	Yes

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FIRE PROTECTION, INC.

Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
	Cafeteria	1	Potter	Water Flow Switch			Pass
	Gym	1	Potter	Water Flow Switch			Pass
	Main building	1	Potter	Water Flow Switch			Pass
	400 Hall	1	Potter	Water Flow Switch			Pass
	300 Hall	1	Potter	Water Flow Switch			Pass
@ Longleaf Dr.	@ 300 Hall , 400 Hall , Backflow	1	FDC	Fire Department Connection		Missing cap @ Backflow	Pass
	Gym	1	Potter	Os&Y Tamper Switch		Needs adjusting	Pass
	400-Hall	1	Milwaukee	Butterfly Tamper Switch			Pass
	300 Hall	1	Milwaukee	Butterfly Tamper Switch			Pass
	Cafeteria	1	Victaulic	Butterfly Tamper Switch			Pass
	Main building	1		Butterfly Tamper Switch			Pass

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Deficiencies - General Questions

Deficiency #1

Do valve supervisory switches indicate movement?: No

Notes: Gym - osy tamper needs adjusting

Deficiency #2

Are alarms and supervisory devices not damaged?: No

Notes: Cafeteria- Tamper valve supervisory activates Electric bell

Deficiency #3

Are the FDC caps and plugs in place?: No

Notes: @ Backflow - missing cap

Deficiency #3 - Photo #1



Date Taken: June 26, 2023

Deficiency #4

Is the FDC identification sign(s) in place?: No

Notes: @ Backflow - missing sign

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Deficiency #4 - Photo #1



Date Taken: June 26, 2023

Deficiency #5

Is the visible pipe in good condition with no external corrosion?: No

Notes: Gym - mad nipple corroded / prior signs of leakage

Hall 400 - 2" riser / 1" ITV has corrosion on pipes

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FIRE PROTECTION, INC.

Deficiency #5 - Photo #1



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Deficiency #5 - Photo #2



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Deficiency #5 - Photo #3



Date Taken: June 26, 2023

Deficiency #6

Does visible pipe have no mechanical damage or leaks?: No

Notes: Gym - mad nipple corroded / prior signs of leakage
Hall 400 - 2" riser / 1" ITV has corrosion on pipes

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Deficiency #6 - Photo #1



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Deficiency #6 - Photo #2



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Deficiency #6 - Photo #3



Date Taken: June 26, 2023

Deficiency #7

Are there the proper number and type of spare sprinklers?: No

Notes: Hall 300 & 400 - has 286 degree heads in cabinets; building has 155 installed

Deficiency #8

Is there proper clearance below the sprinklers?: No

Notes: Outside liberty- flags below heads

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Deficiency #8 - Photo #1



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Deficiency #8 - Photo #2



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Deficiency #8 - Photo #3



Date Taken: June 26, 2023

Deficiency #9

Are visible sprinklers free of foreign materials including paint?: No

Notes: Cafeteria-(10) greased 3/4 white pendants

School- dusty heads throughout

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Deficiency #9 - Photo #1



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Deficiency #9 - Photo #2



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Deficiency #9 - Photo #3



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Deficiency #9 - Photo #4



Date Taken: June 26, 2023

Deficiency #10

Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?: No

Notes: Cafeteria- Cafeteria-(10) greased 3/4 white pendants

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Deficiency #10 - Photo #1



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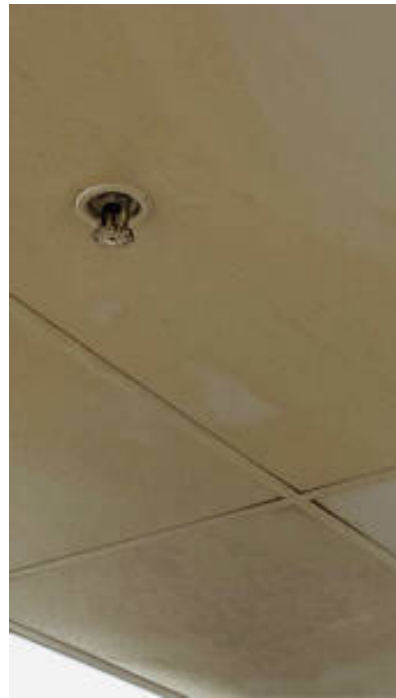
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Deficiency #10 - Photo #2



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Deficiency #10 - Photo #3



Date Taken: June 26, 2023

Deficiency #11

Are all Identification Signs in place?: No

Notes:

Deficiency #12

Are all escutcheon plates installed on sprinkler heads?: No

Notes: Main school

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Deficiency #12 - Photo #1



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Deficiency #12 - Photo #2



Date Taken: June 26, 2023

Deficiencies - General Wet System Questions

None

Deficiencies - Cafeteria

None

Deficiencies - Gym

None

Deficiencies - Main Building

None

Deficiencies - 400 Hall West System

None

Deficiencies - 300 Hall East System

None

Deficiencies - Fire Hydrant #1

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None

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

None

Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

None

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

None

Deficiencies - Alarm Pressure Switch

None

Deficiencies - PIV Tamper Switch

None

Deficiencies - Inspectors Test Connection

Deficiency #13

Location: W. Exterior mechanical room

Description: 1" Globe valve

Signs: No

Notes: Missing ITV sign

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Deficiency #14

Location: W. Exterior mechanical room

Description: 1" Globe valve

Signs: No

Notes: Missing itv sign

Deficiency #15

Location: W. Interior Storage room C

Description: 1" Ball valve

Signs: No

Notes: Missing ITV sign

Deficiencies - Valves

Deficiency #16

Location: W. Exterior mechanical room

Valve Type: butter_fly

Size: 2

Description: Milwaukee control valve

Signs: No

Notes:

Deficiency #17

Location: W. Interior Storage room C

Valve Type: butter_fly

Size: 6

Description: Victaulic control valve

Signs: No

Notes: Missing control valve sign

Deficiencies - Drain Valves

None

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Inspector Signature

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

Inspector Name

Bora Yann
NICET LEVEL II -
Inspection & Testing of
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Signature

A handwritten signature in black ink, appearing to be 'BY', written in a cursive style.

Date Completed

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IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Is the clapper and automatic drain valve in place and properly operating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
---	---	---	---

SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

VALVE AREA

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FIRE PROTECTION, INC.

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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
---	---	---	---

ALARMS

Is the alarm valve free from physical damage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

MAINTENANCE

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<p>Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>If sprinklers have been replaced, were they proper replacements?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If conditions were found that required flushing, was flushing of the system conducted?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Was a drain test conducted after opening any closed valve?</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
<p>Operating stem of all OS&Y valves lubricated, completely closed and reopened?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Report of Inspection / Test for Asset - Hydrant #1

Fire Hydrant Information

Description	American Darling 5 1/4
Location	Behind Cafeteria
Static Hydrant Description	Yellow Hydrant

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

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Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	70	Residual Pressure	60
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
System #1	80	60	68	1	Yes	Yes
System #2	70	60	80	1	Yes	Yes

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
System #1	Riser	1" Globe Valve	41	Yes	Yes	Yes	Yes	Yes
System #2	Riser	1" Globe valve	40	Yes	Yes	Yes	Yes	Yes
Delete system		1"ITV		N/A	N/A	No	N/A	N/A

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
System #1	Victaulic control valve	Riser room	Butterfly	3 "	Monitored	Yes	Yes	Yes	Yes	Yes	14
System #2	Victaulic control valve	Riser room	Butterfly	3 "	Monitored	Yes	Yes	Yes	Yes	Yes	14
Delete system	Mueller	Gym	OS&Y	4 "		N/A	No	N/A	N/A	N/A	
System #1	Firelock S/717	FDC	Check Valve	3 "	Not Applicable	Yes	Yes	Yes	N/A	N/A	
System #1	Central MOD -90	Risers room	Check Valve	3 "	Not Applicable	Yes	Yes	Yes	N/A	N/A	

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DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
System #1	1-1/4" main Drain	Riser	Globe Valve	Yes	Yes
System #2	1-1/4" main Drain	Riser	Globe Valve	Yes	Yes

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Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
	System #1	1	Potter	Water Flow Switch			Pass
	System #2	1	Potter	Water Flow Switch			Pass
	System #1	1	Victaulic	Butterfly Tamper Switch			Pass
	System #2	1	Victaulic	Butterfly Tamper Switch			Pass
	Exterior of bldg	1	FDC	Fire Department Connection			Pass

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Deficiencies - General Questions

Deficiency #1

Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?: No

Notes:

Deficiency #2

Are visible sprinklers in the proper position: upright, pendent, sidewall?: No

Notes: 4th grade teachers bathroom - pendent head too close to light ; needs lowering (401 2P)

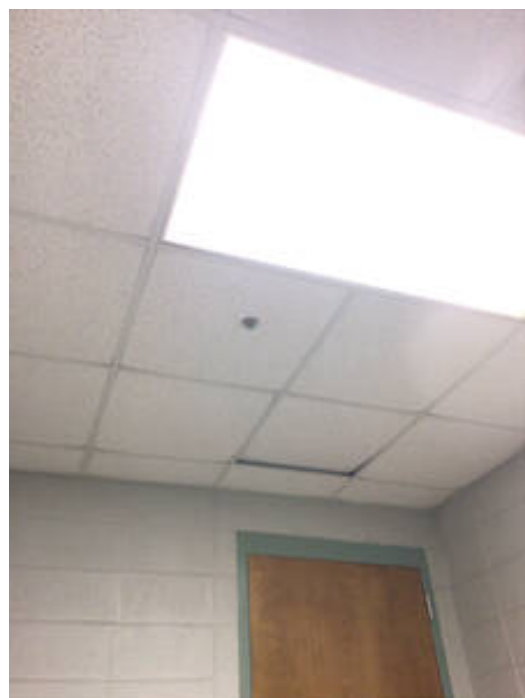
Deficiency #3

Are visible sprinklers free of corrosion and physical damage?: No

Notes: Gym - corroded head @ stage entrance

School entrance- corroded heads

Deficiency #3 - Photo #1



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Deficiency #3 - Photo #2



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Deficiency #3 - Photo #3



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Deficiency #3 - Photo #4



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Deficiency #3 - Photo #5



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Deficiency #4

Are visible sprinklers free of foreign materials including paint?: No

Notes: Greased, dusty heads throughout school
4th grade teachers bathroom.

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Deficiency #4 - Photo #1



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Deficiency #4 - Photo #2



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Deficiency #4 - Photo #3



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Deficiency #4 - Photo #4



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Deficiency #4 - Photo #5



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Deficiency #4 - Photo #6



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Deficiency #4 - Photo #7



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Deficiency #4 - Photo #8



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Deficiency #4 - Photo #9



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Deficiency #4 - Photo #10



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Deficiency #4 - Photo #11

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Print Date: 2023-06-27

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc
MS-14326-SC AL-3693 LA-F1173 FL-873651-
0001-2007

1209C Highway 613 South
Luedale MS 39452

Deficiency #4 - Photo #12



Date Taken: June 27, 2023

Report of Inspection / Test

Annual NFPA 25

INDUSTRIAL-COMMERCIAL



2023-06-27

Property

Eichold-Mertz Elementary School
KH

2815 Government Boulevard
Mobile AL 36606

Mario Morrisette

Print Date: 2023-06-27

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Deficiency #4 - Photo #13



Date Taken: June 27, 2023

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2023-06-27

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Deficiency #4 - Photo #14



Date Taken: June 27, 2023

Deficiency #5

Are all Identification Signs in place?: No

Notes:

Deficiency #6

Are all escutcheon plates installed on sprinkler heads?: No

Notes: Kitchen storage missing esc

Deficiencies - General Wet System Questions

None

Deficiencies - System #1

None

Deficiencies - System #2

None

Deficiencies - Delete system

None

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Deficiencies - Hydrant #1

Deficiency #7

Are hydrant caps, stems, outlets, and threads lubricated and in good condition?: No

Notes: Stem needs lubrication

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

None

Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

None

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

None

Deficiencies - Alarm Pressure Switch

None

Deficiencies - PIV Tamper Switch

None

Deficiencies - Inspectors Test Connection

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Deficiency #8

Location:

Description: 1"ITV

Easily Accessible?: No

Notes: Could not locate

Deficiencies - Valves

Deficiency #9

Location: Gym

Valve Type: o_s_y

Size: 4

Description: Mueller

Easily Accessible?: No

Notes: Could not locate system

Deficiencies - Drain Valves

None

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FIRE PROTECTION, INC.

Recommendations

Systems are tagged purple

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Inspector Signature

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

Inspector Name

Bora Yann
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
153252

Signature

A handwritten signature in black ink, appearing to be 'Bora Yann', written in a cursive style.

Date Completed

2023-06-27

Report of Inspection / Test

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2023-02-23

Property

Enviromental Center
KH

6101 Girby Road

Mobile AL 36693

Mario Morrisette

Print Date: 2023-02-23

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc

MS-14326-SC AL-3693 LA-F1173 FL-873651-

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IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Idenification Signs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Is the clapper and automatic drain valve in place and properly operating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
---	---	---	---

SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

VALVE AREA

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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
---	---	---	---

ALARMS

Is the alarm valve free from physical damage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

MAINTENANCE

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<p>Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>If sprinklers have been replaced, were they proper replacements?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If conditions were found that required flushing, was flushing of the system conducted?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Was a drain test conducted after opening any closed valve?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Operating stem of all OS&Y valves lubricated, completely closed and reopened?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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FIRE PROTECTION, INC.

Report of Inspection / Test for Asset - Fire Hydrant #1

Fire Hydrant Information

Hydrant ID	#1
Description	Mueller 5-1/4"
Location	South of Storage Barn
Static Hydrant Description	Grey body with Red top

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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Are monitor nozzles lubricated?

Yes

No

NA

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
-----------------	-----	-------------------	-----

Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
-----------------------------------	-----	------------	-----

MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
System #1	80	60	85	.1	Yes	Yes

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
System #1	@ riser	1" Inspectors Test Valve	18	Yes	Yes	Yes	Yes	Yes

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
System #1	Victaulic Control Valve	Mechanical Equipment Room	Butterfly	4"	Monitored	Yes	Yes	Yes	Yes	Yes	14

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
System #1	2" Main Drain	@ Riser	Angle Valve	Yes	Yes

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FIRE PROTECTION, INC.

Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
	@ Riser	1	Potter	Water Flow Switch			Pass
	@ Riser	1	Victaulic	Butterfly Tamper Switch			Pass
	Exterior of Riser Room	1	FDC	Fire Department Connection			Pass

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Deficiencies - General Questions

Deficiency #1

Is the information sign attached and legible?: No

Notes:

Deficiency #2

Are all escutcheon plates installed on sprinkler heads?: No

Notes: Missing plate @ garage

Deficiency #2 - Photo #1



Date Taken: February 23, 2023

Deficiencies - General Wet System Questions

None

Deficiencies - System #1

None

Deficiencies - Fire Hydrant #1

None

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Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

None

Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

None

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

None

Deficiencies - Alarm Pressure Switch

None

Deficiencies - PIV Tamper Switch

None

Deficiencies - Inspectors Test Connection

None

Deficiencies - Valves

None

Deficiencies - Drain Valves

None

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Lucedale MS 39452

INDUSTRIAL-COMMERCIAL

The logo for Industrial Commercial Fire Protection, Inc. features the letters 'ICFP' in a large, bold, serif font. The letters are filled with a gradient of yellow and orange, giving them a three-dimensional appearance. The letters are set against a white background with a thin blue horizontal line above and below them.

FIRE PROTECTION, INC.

Recommendations

Yellow tagged

Report of Inspection / Test

Annual NFPA 25

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FIRE PROTECTION, INC.

2023-02-23

Property

Enviromental Center
KH

6101 Girby Road
Mobile AL 36693

Mario Morrisette

Print Date: 2023-02-23

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc

MS-14326-SC AL-3693 LA-F1173 FL-873651-
0001-2007

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Inspector Signature

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

Inspector Name	Signature	Date Completed
Bora Yann NICET LEVEL II - Inspection & Testing of Water-Based Systems # 153252		2023-02-23

Inspector Signature

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

Inspector Name	Signature	Date Completed
Bora Yann NICET LEVEL II - Inspection & Testing of Water-Based Systems # 153252		2023-02-23

Report of Inspection / Test

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2023-06-22

Property

E. R. Dickson Elementary School
KH

4645 Bit & Spur Road

Mobile AL 36608

Mario Morrisette

Print Date: 2023-06-22

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

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IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Is the clapper and automatic drain valve in place and properly operating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
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SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

VALVE AREA

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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
---	---	---	---

ALARMS

Is the alarm valve free from physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

MAINTENANCE

Report of Inspection / Test

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<p>Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>If sprinklers have been replaced, were they proper replacements?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If conditions were found that required flushing, was flushing of the system conducted?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Was a drain test conducted after opening any closed valve?</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
<p>Operating stem of all OS&Y valves lubricated, completely closed and reopened?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?</p>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

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Report of Inspection / Test for Asset - Fire Hydrant #1

Fire Hydrant Information

Hydrant ID	#3
Description	American Darling 5-1/4" B84B
Location	Backside of Gym

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

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FIRE PROTECTION, INC.

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	50	Residual Pressure	40
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Fire Hydrant #2

Fire Hydrant Information

Hydrant ID	#1
Description	American Darling 5-1/4" B84B
Location	Across office Front Entrance

QUESTIONS

Is there a hydrant wrench that is available and accessible? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	50	Residual Pressure	40
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Fire Hydrant #3

Fire Hydrant Information

Hydrant ID	Hydrant #2
Description	American Darling 5-1/4" B84B
Location	Front of cafeteria
Static Hydrant ID	American darling Valve

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	50	Residual Pressure	40
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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FIRE PROTECTION, INC.

MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
Main Bldg Wet System	52	40	50	1	Yes	Yes
Bldg C Wet System	50	40	50	1	Yes	Yes

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
Bldg C Wet System	@ Riser	1" Inspectors Test Valve	36	Yes	Yes	Yes	Yes	Yes
Main Bldg Wet System	Mechanical Room next to Classroom 133	1" Inspectors Test Valve	40	Yes	Yes	Yes	Yes	Yes

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
Main Bldg Wet System	Kennedy OS&Y	Kitchen Washing Machine Room	OS&Y	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	15
Bldg C Wet System	Victaulic Butterfly Valve	Exterior Riser Room East end of Building	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	16
Main Bldg Wet System	Central Alarm Valve	@ Riser	Alarm Valve	4 "	Not Applicable	Yes	Yes	Yes	N/A	N/A	
Bldg C Wet System	Riser Check	@ Riser	Riser Check Valve	4 "	Not Applicable	Yes	Yes	Yes	N/A	N/A	

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
Main Bldg Wet System	1" aux	Mechanical Room next to Classroom 133	Globe Valve	Yes	Yes
Main Bldg Wet System	2" Main Drain	@ Riser	Angle Valve	Yes	Yes
Bldg C Wet System	2" Main Drain	@ Riser	Angle Valve	Yes	Yes

Report of Inspection / Test

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2023-06-22

Property

E. R. Dickson Elementary School
KH

4645 Bit & Spur Road

Mobile AL 36608

Mario Morrisette

Print Date: 2023-06-22

Conducted by: Bora Yann
NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc
MS-14326-SC AL-3693 LA-F1173 FL-873651-
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FIRE PROTECTION, INC.

Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
	Building C	1	Potter	Water Flow Switch			Pass
	Building C	1	Victaulic	Butterfly Tamper Switch			Pass
	Main Building	1	Potter	Water Flow Switch			Pass
	Main Building	1	Potter	Os&Y Tamper Switch			Pass
	Main Building	1	Central	Mechanical Water Motor Bell			Pass
North of Gym	@ Backflow	1	FDC	Fire Department Connection			Pass

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Deficiencies - General Questions

Deficiency #1

Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years?

(If no conduct investigation): No

Notes: Last dated inspect was dated 16"

Deficiency #1 - Photo #1



Date Taken: June 22, 2023

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Deficiency #1 - Photo #2



Date Taken: June 22, 2023

Deficiency #2

Are visible sprinklers free of corrosion and physical damage?: No

Notes:

Deficiency #3

Are visible sprinklers free of foreign materials including paint?: No

Notes: Dusty heads

Deficiency #4

Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?: No

Notes:

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Deficiency #5

Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?: No

Notes: 20 Greased & corroded heads in kitchen

Deficiency #5 - Photo #1



Date Taken: June 22, 2023

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Industrial Commercial Fire Protection, Inc

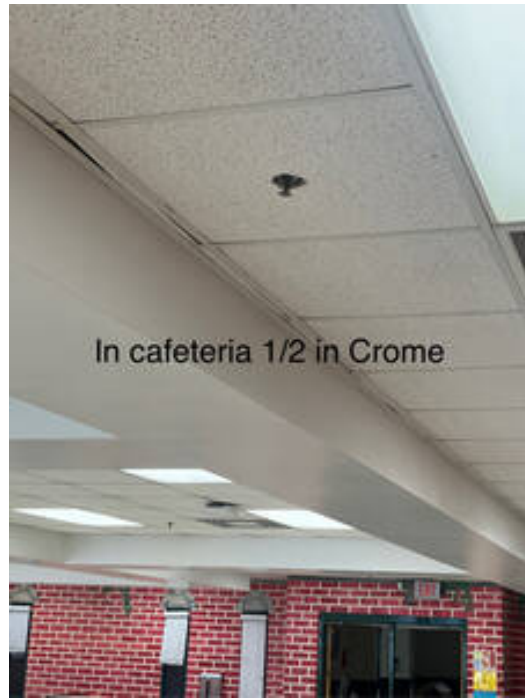
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Deficiency #5 - Photo #2



Date Taken: June 22, 2023

Deficiency #6

Are all escutcheon plates installed on sprinkler heads?: No

Notes: 9 chrome 1/2 sr inkitchen

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Deficiency #6 - Photo #1



Date Taken: June 22, 2023

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Deficiency #6 - Photo #2



Date Taken: June 22, 2023

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Deficiency #6 - Photo #3



Date Taken: June 22, 2023

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Deficiency #6 - Photo #4



Date Taken: June 22, 2023

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FIRE PROTECTION, INC.

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Deficiency #6 - Photo #5



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Deficiency #6 - Photo #6



Date Taken: June 22, 2023

Deficiencies - General Wet System Questions

None

Deficiencies - Main Bldg Wet System

None

Deficiencies - Bldg C Wet System

None

Deficiencies - Fire Hydrant #1

Deficiency #7

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - Fire Hydrant #2

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Deficiency #8

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - Fire Hydrant #3

None

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

None

Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

None

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

None

Deficiencies - Inspectors Test Connection

None

Deficiencies - Valves

None

Deficiencies - Drain Valves

None

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FIRE PROTECTION, INC.

Recommendations

School - purple

Bldg C - Green

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Inspector Signature

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

Inspector Name

Bora Yann
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
153252

Signature

A handwritten signature in black ink, appearing to read 'BY', is written in the signature field.

Date Completed

2023-06-22

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2023-06-08

Property

ESL (Old Kate Shepard Wing)
KH

1176 Azalea Road

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Mario Morrisette

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IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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ESL (Old Kate Shepard Wing)
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FIRE PROTECTION, INC.

Is the clapper and automatic drain valve in place and properly operating?

Yes
 No
 NA

Is the FDC identification sign(s) in place?

Yes
 No
 NA

SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?

Yes
 No
 NA

Are visible sprinklers in the proper position: upright, pendent, sidewall?

Yes
 No
 NA

Are visible sprinklers free of corrosion and physical damage?

Yes
 No
 NA

Is there proper clearance below the sprinklers?

Yes
 No
 NA

Are visible sprinklers free of foreign materials including paint?

Yes
 No
 NA

Is there liquid in all visible glass bulb sprinklers?

Yes
 No
 NA

Are there spare sprinklers and a sprinkler wrench?

Yes
 No
 NA

Is the information sign attached and legible?

Yes
 No
 NA

Are all the sprinklers dated 1920 or later?

Yes
 No
 NA

Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?

Yes
 No
 NA

Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?

Yes
 No
 NA

Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?

Yes
 No
 NA

Dry-type sprinklers replaced or successfully sample tested within last 10 years?

Yes
 No
 NA

Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?

Yes
 No
 NA

Is the building fully protected by sprinklers?

Yes
 No
 NA

PIPES

Is the visible pipe in good condition with no external corrosion?

Yes
 No
 NA

Does visible pipe have no mechanical damage or leaks?

Yes
 No
 NA

Does visible pipe have no external loads?

Yes
 No
 NA

Are visible pipe hangers and seismic braces not damaged or loose?

Yes
 No
 NA

Is the pipe through freezers free if any ice blockage?

Yes
 No
 NA

Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)

Yes
 No
 NA

VALVE AREA

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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
---	---	---	---

ALARMS

Is the alarm valve free from physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

MAINTENANCE

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<p>Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>If sprinklers have been replaced, were they proper replacements?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If conditions were found that required flushing, was flushing of the system conducted?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Was a drain test conducted after opening any closed valve?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Operating stem of all OS&Y valves lubricated, completely closed and reopened?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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FIRE PROTECTION, INC.

MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
Wet System# 1	70	70	75	1	Yes	Yes

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
Wet System# 1	Classroom A-10	1" Globe valve	39	Yes	Yes	Yes	Yes	Yes

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
Wet System# 1	Kennedy	East exterior mechanical room	Butterfly	3 "	Monitored	Yes	Yes	Yes	Yes	Yes	11
	Control valve	Backflow	OS&Y	4 "	Not Secured	Yes	Yes	Yes	Yes	Yes	14
	Control valve	Backflow	OS&Y	4 "	Not Secured	Yes	Yes	Yes	Yes	Yes	14
Wet System# 1	Viking Mod. H-2	Riser room	Check Valve	3 "	Not Applicable	Yes	Yes	Yes	N/A	N/A	

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
Wet System# 1	1-1/4" Right angle	West Mech Room	Globe Valve	Yes	Yes

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Property

ESL (Old Kate Shepard Wing)
KH

1176 Azalea Road
Mobile AL 36693

Mario Morrisette

Print Date: 2023-06-08

Conducted by: Bora Yann
NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc
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0001-2007

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FIRE PROTECTION, INC.

Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
	East exterior mechanical room	1	System Sensor	Water Flow Switch			Pass
On Backflow	South of building	1	FDC	Fire Department Connection			Pass
	East exterior wall	1	Viking	Mechanical Water Motor Bell			Pass

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Deficiencies - General Questions

Deficiency #1

Is the FDC easily accessible?: No

Notes: Behind fencing

Deficiency #2

Are there the proper number and type of spare sprinklers?: No

Notes: Missing concealed heads

Deficiency #3

Are there spare sprinklers and a sprinkler wrench?: No

Notes: Missing concealed wrench

Deficiency #4

Are control valves properly sealed and/or supervised?: No

Notes: Backflow is not secured

Deficiency #5

Is the building fully protected by sprinklers?: No

Notes:

Deficiency #6

Are all escutcheon plates installed on sprinkler heads?: No

Notes: Missing Concealed plates in Rms- A4-8, teachers Restroom , A-8 hallway
Missing chrome SR esc @ teachers Restroom

Viking mirage heads ?

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Deficiency #6 - Photo #1



Date Taken: June 08, 2023

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Deficiency #6 - Photo #2



Date Taken: June 08, 2023

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Deficiency #6 - Photo #3



Date Taken: June 08, 2023

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Deficiency #6 - Photo #4



Date Taken: June 08, 2023

Deficiencies - General Wet System Questions

None

Deficiencies - Wet System# 1

None

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

None

Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

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None

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

None

Deficiencies - Alarm Pressure Switch

None

Deficiencies - PIV Tamper Switch

None

Deficiencies - Ball Valve Tamper

None

Deficiencies - Inspectors Test Connection

None

Deficiencies - Valves

None

Deficiencies - Drain Valves

None

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ICFP

FIRE PROTECTION, INC.

Recommendations

System Yellow tagged

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Inspector Signature

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

Inspector Name

Bora Yann
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
153252

Signature

A handwritten signature in black ink, appearing to be 'BY', is written in the signature field.

Date Completed

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IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Is the clapper and automatic drain valve in place and properly operating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
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SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

VALVE AREA

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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
---	---	---	---

ALARMS

Is the alarm valve free from physical damage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

MAINTENANCE

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FIRE PROTECTION, INC.

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<p>Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>If sprinklers have been replaced, were they proper replacements?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If conditions were found that required flushing, was flushing of the system conducted?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Was a drain test conducted after opening any closed valve?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Operating stem of all OS&Y valves lubricated, completely closed and reopened?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Report of Inspection / Test for Asset - Fire Hydrant #1

Fire Hydrant Information

Hydrant ID	#1
Description	American Darling 5-1/4" B84B
Location	Cafeteria

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

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Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	35	Residual Pressure	20
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Fire Hydrant #2

Fire Hydrant Information

Hydrant ID	#2
Description	American Darling 5-1/4" B84B
Location	Gym

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Conducted by: Bora Yann
NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc
MS-14326-SC AL-3693 LA-F1173 FL-873651-
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Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	35	Residual Pressure	20
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
-----------------------------------	-----	------------	-----

MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
Building A Wet System	40	18	40	5	Yes	Yes
Building D Wet System	55	20	35	5	Yes	Yes
Building C Wet System	35	30	35	5	Yes	Yes
Building B Wet System	50	20	35	5	Yes	Yes

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Property

Fonde Elementary School
KH

3956 Cottage Hill Road

Mobile AL 36609

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INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
Building A Wet System	SW. Classroom M-4 Closet	(Near Gym) 1" Inspectors Test Valve	90	Yes	Yes	Yes	Yes	Yes
Building D Wet System	N. Exterior Mech @ Riser	1" Inspectors Test Valve	90	Yes	Yes	Yes	Yes	Yes
Building C Wet System	W. Interior/Exterior mech	1" Inspectors Test Valve	45	N/A	No	No	Yes	No
Building B Wet System	N. Interior/Exterior Mech room	1" Inspectors Test Valve	1:05	Yes	Yes	Yes	Yes	Yes

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
Building A Wet System	4" Butterfly Tamper Valve	N.E. Exterior Mech in Courtyard	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	16
Building D Wet System	4" Butterfly Tamper Valve	N. Exterior Mech Rm.	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	10
Building C Wet System	3" Butterfly Tamper Valve	E. Speechroom between Class N-8/9	Butterfly	3 "	Monitored	Yes	Yes	Yes	Yes	Yes	16
Building B Wet System	4" Butterfly Tamper Valve	S. Interior room between W-1 & 2	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	10

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
Building C Wet System	1-1/4" Main Drain	@ Riser	Ball Valve	Yes	Yes
Building A Wet System	1" AUX	E. Exterior Kitchen washroom	Globe Valve	Yes	Yes
Building A Wet System	2" Main Drain	@ Riser	Ball Valve	Yes	Yes
Building D Wet System	2" Main Drain	@ Riser	Ball Valve	Yes	Yes
Building B Wet System	2" Main Drain	Riser	Ball Valve	Yes	Yes

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FIRE PROTECTION, INC.

Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
	Building A	1	Potter	Water Flow Switch			Pass
	Building D	1	Potter	Water Flow Switch			Pass
	Building C	1	Potter	Water Flow Switch		45 sec manually tripped	Pass
	Building B	1	Potter	Water Flow Switch			Pass
	Building A	1	Victaulic	Butterfly Tamper Switch			Pass
	Building D	1	SPF	Butterfly Tamper Switch			Pass
	Building C	1	SFP	Butterfly Tamper Switch			Pass
	Building B	1	Victaulic	Butterfly Tamper Switch			Pass
	@ Backflow	1	FDC	Fire Department Connection			Pass

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Deficiencies - General Questions

Deficiency #1

Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?: No

Notes: All bldgs missing Data Plaques

Deficiency #1 - Photo #1



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Deficiency #1 - Photo #2



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Deficiency #1 - Photo #3



Date Taken: July 14, 2023

Deficiency #2

The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?: No

Notes: Bldg C- manually tested flow switch - ITV handle is up against pipe ; can not operate

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Deficiency #2 - Photo #1



Date Taken: July 14, 2023

Deficiency #3

Have backflow devices passed forward flow test?: No

Notes: Water pressure during MD test lower than years past

Deficiency #3 - Photo #1

MAIN DRAIN FLOW TESTS						
System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
Building A Wet System	55	38	45	04	Yes	Yes
Building D Wet System	47	32	40	03	Yes	Yes
Building C Wet System	50	35	50	04	Yes	Yes
Building B Wet System	50	30	40	04	Yes	Yes

Date Taken: July 14, 2023

Deficiency #4

Are there the proper number and type of spare sprinklers?: No

Notes: Bldg C- short on spares ; heads dated 2004 , 2008
Bldg B - none

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Deficiency #4 - Photo #1



Date Taken: July 14, 2023

Deficiency #5

Are visible sprinklers free of corrosion and physical damage?: No

Notes: Kitchen - 20 corroded 1/2 QR chrome pendent heads

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Deficiency #5 - Photo #1



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Deficiency #5 - Photo #2



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Deficiency #5 - Photo #3



Date Taken: July 14, 2023

Deficiency #6

Are visible sprinklers free of foreign materials including paint?: No

Notes: All bldgs - all heads are stained yellow

Bldg A / Office - dusty heads throughout

Deficiency #7

Are there spare sprinklers and a sprinkler wrench?: No

Notes: Bldg B - missing cabinet , wrench and spares

Deficiency #8

Is the building fully protected by sprinklers?: No

Notes: Bldg A-Janitors closet not sprinkled

Bldg D- exterior mech room isn't sprinkled

Gym - not sprinkled

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Deficiency #8 - Photo #1



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Deficiency #8 - Photo #2



Date Taken: July 14, 2023

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Deficiency #9

Are all Identification Signs in place?: No

Notes: Miss Data plaques on all risers

Deficiencies - General Wet System Questions

None

Deficiencies - Building A Wet System

None

Deficiencies - Building D Wet System

None

Deficiencies - Building C Wet System

None

Deficiencies - Building B Wet System

None

Deficiencies - Fire Hydrant #1

None

Deficiencies - Fire Hydrant #2

None

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

None

Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

None

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Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

None

Deficiencies - Inspectors Test Connection

Deficiency #10

Location: W. Interior/Exterior mech
Description: 1" Inspectors Test Valve
Pass?: No
Terminates in Smooth Orifice?: No
Easily Accessible?: No

Notes: Inaccessible; Valve needs relocation, can not turn handle , no orifice

Deficiency #10 - Photo #1



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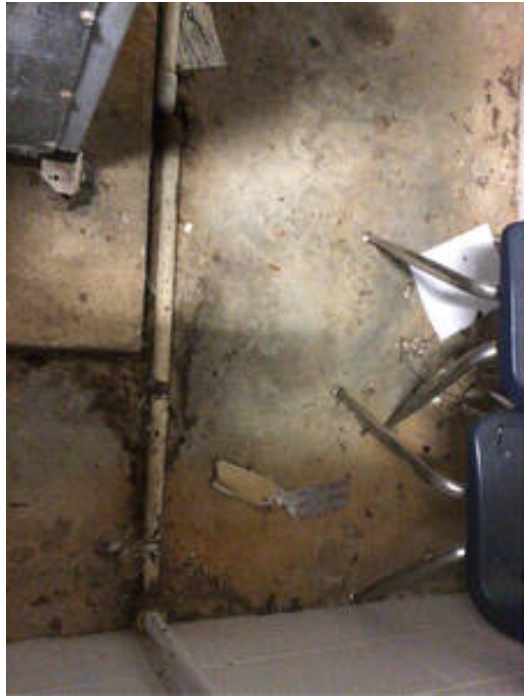
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Deficiency #10 - Photo #2



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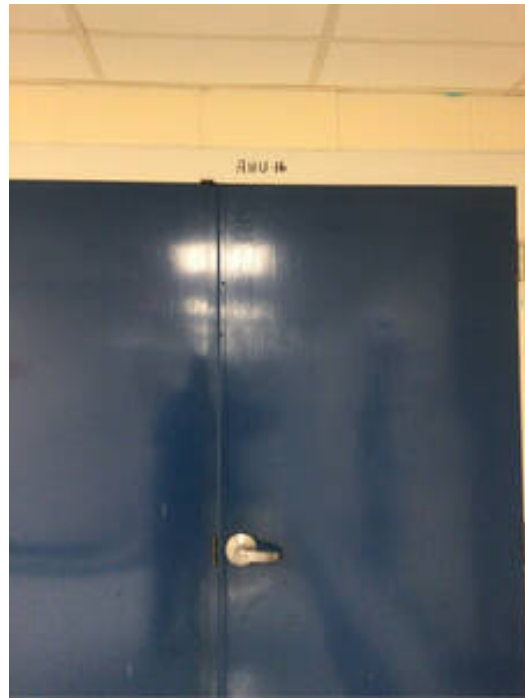
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Deficiency #10 - Photo #3



Date Taken: July 14, 2023

Deficiencies - Valves

None

Deficiencies - Drain Valves

None

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FIRE PROTECTION, INC.

Recommendations

Bldgs A, C & D - Purple tagged

Bldg B - Yellow tagged

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4501 Moffett Road

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IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Is the clapper and automatic drain valve in place and properly operating?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
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SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

VALVE AREA

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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

DRY VALVE

Are enclosures around valves maintaining a minimum of 40 degrees F?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the gauges on systems without low pressure alarms in good condition and showing normal air and water pressure?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
For freezer systems, gauge near compressor reading the same as gauge near the dry-pipe valve?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are they free from physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are trim valves in appropriate (open or closed) position?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is there no leakage in the intermediate chamber?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on systems with low pressure alarms in good condition and showing normal air and water pressure?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has the dry-pipe valve passed inspection?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Is the priming level correct and has the low air pressure signal passed it's test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has the quick opening device passed the test?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
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Report of Inspection / Test

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INDUSTRIAL-COMMERCIAL



FIRE PROTECTION, INC.

2023-06-13

Property

Forest Hill Elementary School
KH

4501 Moffett Road

Mobile AL 36618

Mario Morrisette

Print Date: 2023-06-13

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc

MS-14326-SC AL-3693 LA-F1173 FL-873651-

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ALARMS

Are alarms and supervisory devices not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have low temperature alarms passed test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

MAINTENANCE

If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	If sprinklers have been replaced, were they proper replacements?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
If conditions were found that required flushing, was flushing of the system conducted?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Was a drain test conducted after opening any closed valve?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Operating stem of all OS&Y valves lubricated, completely closed and reopened?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Are dry-pipe systems kept in dry condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have auxiliary drains been emptied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks, a 50% increase in time from the original system acceptance test required for water to reach the inspector's test connection during a full flow test	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is interior of dry-pipe valves cleaned?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have low points been drained before freezing weather?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Report of Inspection / Test for System - Dry System# 1

DRY VALVE

Have automatic air maintenance devices passed test? Yes
 No
 NA

DRY VALVE TRIP TEST

Dry Valve	Size: 4"	Year of Mfr.: 2000	Accelerator	Year of Mfr.: 2000		
Make	Model	Serial no.	Make	Model	Serial no.	
Automatic Sprinkler	GTO	220W2	Automatic Sprinkler	1	85-100	
	Time to Trip thru test pipe	Water Pressure	Air Pressure	Trip point air pressure	Time water reached test outlet	Alarm Operated
Without Accelerator	1:07	92	27	12	1:42	Yes
With Accelerator	N/A	N/A	N/A	N/A	N/A	N/A

DRY VALVE TRIP TEST (cont)

Were results comparable to previous test? Yes
 No
 NA

Has it passed air leakage test? Yes
 No
 NA

Report of Inspection / Test for System - Dry System# 2

DRY VALVE

Have automatic air maintenance devices passed test? Yes
 No
 NA

DRY VALVE TRIP TEST

Dry Valve	Size: 4"	Year of Mfr.: 2000	Accelerator	Year of Mfr.: 2000		
Make	Model	Serial no.	Make	Model	Serial no.	
Automatic Sprinkler	GTO	220W2	Automatic Sprinkler	1	85-100	
	Time to Trip thru test pipe	Water Pressure	Air Pressure	Trip point air pressure	Time water reached test outlet	Alarm Operated
Without Accelerator	1:48	93	33	16	2:34	Yes
With Accelerator	N/A	N/A	N/A	N/A	N/A	N/A

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FIRE PROTECTION, INC.

DRY VALVE TRIP TEST (cont)

Were results comparable to previous test?

Yes

No

NA

Has it passed air leakage test?

Yes

No

NA

Report of Inspection / Test for Asset - Fire Hydrant #2

Fire Hydrant Information

Hydrant ID

#2

Description

American Darling 5-1/4" B84B

Location

East Side of Gym Exterior of Riser Room

QUESTIONS

Is there a hydrant wrench that is available and accessible?

Yes

No

NA

Is the hydrant free from cracks or leaks at outlets and on the top?

Yes

No

NA

Are pumper and nozzle caps tight?

Yes

No

NA

Is the hydrant properly painted and is the paint in good condition?

Yes

No

NA

Does the operating nut turn with no difficulty?

Yes

No

NA

Did the hydrant flow until clear (minimum of 1 minute)?

Yes

No

NA

Are all dry barrels which require pumping identified?

Yes

No

NA

Does the hydrant completely shut off?

Yes

No

NA

Have the strainers been cleaned (if possible)?

Yes

No

NA

Did monitor nozzle flowed acceptable water?

Yes

No

NA

Have backflow devices, if installed, passed full flow test?

Yes

No

NA

Is there no ice or water in the barrel?

Yes

No

NA

Are hydrant caps, stems, outlets, and threads lubricated and in good condition?

Yes

No

NA

Is Exposed piping properly secured and free from leaks or physical damage?

Yes

No

NA

Is the Operating nut not worn, twisted or broken?

Yes

No

NA

Is the Road box and shutoff valve visible and accessible?

Yes

No

NA

Have dry barrels drained in at least 1 hour?

Yes

No

NA

Have control valves been operated through complete range??

Yes

No

NA

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Are strainers, if installed, free from corrosion and not blocked?

Yes
 No
 NA

Did monitor nozzles move through complete range?

Yes
 No
 NA

Are monitor nozzles lubricated?

Yes
 No
 NA

Hydrant Flow Test

Static Pressure

N/A

Residual Pressure

N/A

Pitot Pressure

N/A

Orifice Size

N/A

Orifice Coefficient

N/A

Flow

N/A

Static Hydrant

Static Pressure

95

Residual Pressure

65

Final Hydrant Flow Test

Flow at 20 psi residual pressure:

N/A

Total Flow

N/A

Report of Inspection / Test for Asset - Fire Hydrant #3

Fire Hydrant Information

Hydrant ID

#3

Description

Mueller 5-1/4"

Location

N.W of Rear Parking Lot

QUESTIONS

Is there a hydrant wrench that is available and accessible?

Yes
 No
 NA

Is the hydrant free from cracks or leaks at outlets and on the top?

Yes
 No
 NA

Are pumper and nozzle caps tight?

Yes
 No
 NA

Is the hydrant properly painted and is the paint in good condition?

Yes
 No
 NA

Does the operating nut turn with no difficulty?

Yes
 No
 NA

Did the hydrant flow until clear (minimum of 1 minute)?

Yes
 No
 NA

Are all dry barrels which require pumping identified?

Yes
 No
 NA

Does the hydrant completely shut off?

Yes
 No
 NA

Have the strainers been cleaned (if possible)?

Yes
 No
 NA

Did monitor nozzle flowed acceptable water?

Yes
 No
 NA

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Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	95	Residual Pressure	65
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Fire Hydrant #4

Fire Hydrant Information

Hydrant ID	#4
Description	Mueller 5-1/4"
Location	S.W of Rear Parking Lot

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
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Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	95	Residual Pressure	65
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Fire Hydrant #1

Fire Hydrant Information

Hydrant ID	#1
Description	American Darling 5-1/4" B84B
Location	@ Main Entrance by FDC

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

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Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	95	Residual Pressure	65
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
Dry System# 1	92	65	95	1	Yes	Yes
Dry System# 2	93	65	95	1	Yes	Yes

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
Dry System# 1	S.W Exterior Elec Room	1" Inspectors Test Valve	1:07	Yes	Yes	Yes	No	Yes
Dry System# 2	S.E Exterior Elec Room	1" Inspectors Test Valve	1:48	Yes	Yes	Yes	No	Yes

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
Dry System# 2	2" Main Drain	@ Riser	Angle Valve	Yes	Yes
Dry System# 1	2" Main Drain	@ Riser	Angle Valve	Yes	Yes

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FIRE PROTECTION, INC.

Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
	System #1	1	Potter	Water Flow Switch			Pass
	System #2	1	Potter	Water Flow Switch			Pass
	System #1	1	Potter	Os&Y Tamper Switch			Pass
	System #2	1	Potter	Os&Y Tamper Switch		Needs adjusting	
	Remote @ Street Main Entrance	1	FDC	Fire Department Connection		Sign needs to be raised	Pass
	Gym Interior sprinkler rm.	1	Kobalt	Air Compressor		Motor will not spin	Fail

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Deficiencies - General Questions

Deficiency #1

Do valve supervisory switches indicate movement?: No

Notes: Dry system #2 - osy tamper needs adjusting, only activates when manually testing switch

Deficiency #1 - Photo #1



Date Taken: June 12, 2023

Deficiency #2

Is the FDC identification sign(s) in place?: No

Notes: Sign needs to be raised / in the ground

Deficiency #3

Are visible sprinklers in the proper position: upright, pendent, sidewall?: No

Notes: Heads needs lowering in kitchen , 1/2" & 3/4 pendants

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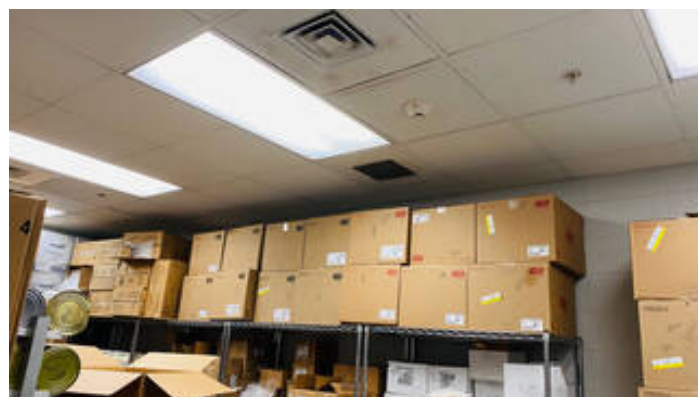
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Deficiency #3 - Photo #1



Date Taken: June 13, 2023

Deficiency #3 - Photo #2



Date Taken: June 13, 2023

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Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc

MS-14326-SC AL-3693 LA-F1173 FL-873651-

0001-2007

1209C Highway 613 South

Lucedale MS 39452

Deficiency #3 - Photo #3



Date Taken: June 13, 2023

Deficiency #4

Are visible sprinklers free of foreign materials including paint?: No

Notes: Dusty heads throughout hallways, cafeteria dining areas , gym stage high ceiling

Report of Inspection / Test

Annual NFPA 25

INDUSTRIAL-COMMERCIAL



2023-06-13

Property

Forest Hill Elementary School
KH

4501 Moffett Road
Mobile AL 36618

Mario Morrisette

Print Date: 2023-06-13

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc

MS-14326-SC AL-3693 LA-F1173 FL-873651-
0001-2007

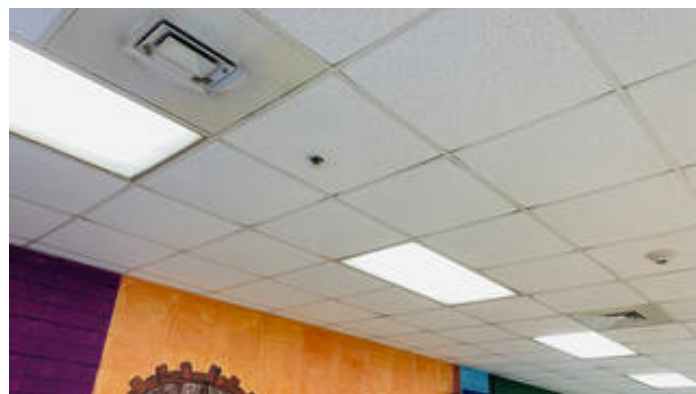
1209C Highway 613 South
Lucaledale MS 39452

Deficiency #4 - Photo #1



Date Taken: June 13, 2023

Deficiency #4 - Photo #2



Date Taken: June 13, 2023

Report of Inspection / Test

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INDUSTRIAL-COMMERCIAL



2023-06-13

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Deficiency #5

Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?: No

Notes: Greased/ dusty heads in kitchen

(4) 3/4 white 155 pendent

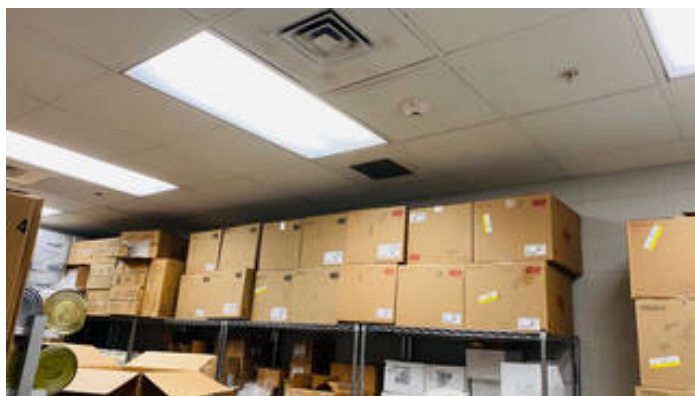
(8-10) white 155 pendent

Deficiency #5 - Photo #1



Date Taken: June 13, 2023

Deficiency #5 - Photo #2



Date Taken: June 13, 2023

Report of Inspection / Test

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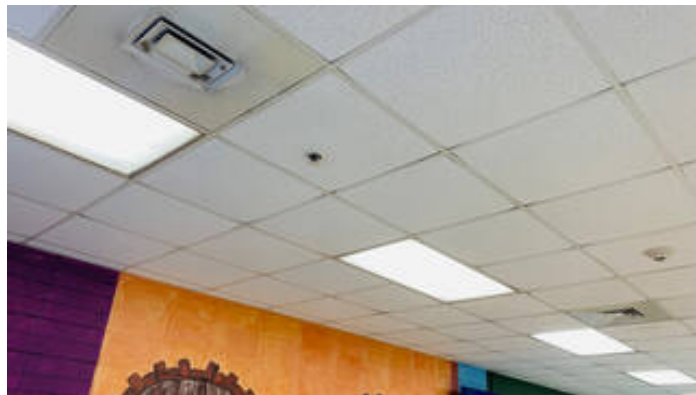
1209C Highway 613 South
Luedale MS 39452

Deficiency #5 - Photo #3



Date Taken: June 13, 2023

Deficiency #5 - Photo #4



Date Taken: June 13, 2023

Deficiency #6

Are all Identification Signs in place?: No

Notes: Missing all Dry Valve / Riser signage

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Deficiency #6 - Photo #1



Date Taken: June 12, 2023

Deficiency #7

Are all escutcheon plates installed on sprinkler heads?: No

Notes: Missing 1/2 & 3/4 White SR esc in kitchen

Deficiency #7 - Photo #1



Date Taken: June 13, 2023

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Deficiency #7 - Photo #2



Date Taken: June 13, 2023

Deficiencies - General Dry System Questions

Deficiency #8

Are trim valves in appropriate (open or closed) position?: No

Notes:

Deficiency #9

Has the dry-pipe valve passed inspection?: No

Notes: Air compressor motor is burnt . Needs replacing

Deficiency #10

Has the quick opening device passed the test?: No

Notes: Accelerator was Valved off / not in service

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Deficiency #10 - Photo #1



Date Taken: June 12, 2023

Deficiencies - Dry System# 1

None

Deficiencies - Dry System# 2

None

Deficiencies - Fire Hydrant #2

None

Deficiencies - Fire Hydrant #3

None

Deficiencies - Fire Hydrant #4

None

Deficiencies - Fire Hydrant #1

None

Deficiencies - Air Compressor

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Deficiency #11

Address

Location: Gym Interior sprinkler rm.

Equipment Type: Air Compressor

QTY: 1

Description: Portable 30gal tank

Status: Fail

Notes:

Deficiencies - Water Flow Switch

None

Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

None

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

None

Deficiencies - Alarm Pressure Switch

None

Deficiencies - PIV Tamper Switch

None

Deficiencies - Inspectors Test Connection

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Deficiency #12

Location: S.E Exterior Elec Room

Description: 1" Inspectors Test Valve

Signs: No

Notes: Missing ITV sign

Deficiency #13

Location: S.W Exterior Elec Room

Description: 1" Inspectors Test Valve

Signs: No

Notes: Missing ITV sign

Deficiencies - Drain Valves

None

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FIRE PROTECTION, INC.

Recommendations

System is converted to Wet. Systems are purple tagged

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Inspector Signature

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

Inspector Name

Bora Yann
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
153252

Signature

A handwritten signature in black ink, appearing to be 'Bora Yann', written in a cursive style.

Date Completed

2023-06-13

Report of Inspection / Test

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INDUSTRIAL-COMMERCIAL



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IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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INDUSTRIAL-COMMERCIAL



FIRE PROTECTION, INC.

2023-07-10

Property

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Is the clapper and automatic drain valve in place and properly operating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
---	---	---	---

SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

VALVE AREA

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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
---	---	---	---

ALARMS

Is the alarm valve free from physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

MAINTENANCE

Report of Inspection / Test

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<p>Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>If sprinklers have been replaced, were they proper replacements?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If conditions were found that required flushing, was flushing of the system conducted?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Was a drain test conducted after opening any closed valve?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Operating stem of all OS&Y valves lubricated, completely closed and reopened?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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FIRE PROTECTION, INC.

MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
Cafe Wet	73	65	74	3	Yes	Yes
Gym Wet	65	60	68	3	Yes	Yes

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
Cafe Wet	SW Stage Storage	1" globe valve	60	Yes	Yes	Yes	Yes	Yes
Gym Wet	@ Riser	1" ball valve	41	Yes	Yes	Yes	Yes	Yes

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
Cafe Wet	Tyco control valve	Cafe Storage @ rear door	Butterfly	3"	Monitored	Yes	Yes	Yes	Yes	Yes	11.5
Gym Wet	Globe Fire Products	Interior Equipment Storage room	Butterfly	3"	Monitored	Yes	Yes	Yes	Yes	Yes	13

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
Cafe Wet	1-1/2" main Drain	Riser	Globe Valve	Yes	Yes
Gym Wet	1-1/4" main Drain	Riser	Globe Valve	Yes	Yes

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FIRE PROTECTION, INC.

Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
	Cafe storage	1	Potter	Water Flow Switch			
	Gym equipment room	1	Potter	Water Flow Switch			Pass
	Cafe storage	1	Tyco	Butterfly Tamper Switch		No sign	
	Gym equipment room	1	Globe Fire Products	Butterfly Tamper Switch			Pass
	North Exterior of Gym	1	FDC	Fire Department Connection			Pass
	North Cafe Exterior wall	1	FDC	Fire Department Connection			

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Questions with Photos and Notes

- Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation) Yes

Notes:

Gym -Last dated tag - 02/17/ 16

Cafeteria- Last dated tag- 05/22/21



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Deficiencies - General Questions

Deficiency #1

Is the building fully protected by sprinklers?: No

Notes: Main school isn't sprinkled

Deficiencies - General Wet System Questions

None

Deficiencies - Cafe Wet

None

Deficiencies - Gym Wet

None

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

None

Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

None

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

None

Deficiencies - Alarm Pressure Switch

Report of Inspection / Test

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2023-07-10

Property

George Hall Elementary School
KH

1108 Antwerp Street

Mobile AL 36605

Mario Morrisette

Print Date: 2023-07-11

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc

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FIRE PROTECTION, INC.

None

Deficiencies - PIV Tamper Switch

None

Deficiencies - Inspectors Test Connection

None

Deficiencies - Valves

None

Deficiencies - Drain Valves

None

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Property

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Inspector Signature

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

Inspector Name

Bora Yann
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
153252

Signature

A handwritten signature in black ink, appearing to be 'Bora Yann', written in a cursive style.

Date Completed

2023-07-10

Report of Inspection / Test

Annual NFPA 25

2023-06-23

Property

Gilliard Elementary School
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2757 Dauphin Island Parkway

Mobile AL 36605

Mario Morrisette

Print Date: 2023-06-23

Conducted by: Bora Yann

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FIRE PROTECTION, INC.

IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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FIRE PROTECTION, INC.

Is the clapper and automatic drain valve in place and properly operating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
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SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

VALVE AREA

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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
---	---	---	---

ALARMS

Is the alarm valve free from physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

MAINTENANCE

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<p>Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>If sprinklers have been replaced, were they proper replacements?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If conditions were found that required flushing, was flushing of the system conducted?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Was a drain test conducted after opening any closed valve?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Operating stem of all OS&Y valves lubricated, completely closed and reopened?</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<p>Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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Report of Inspection / Test for Asset - Fire Hydrant #1 South Parking Lot

Fire Hydrant Information

Hydrant ID	#1
Description	M&H
Location	South Parking Lot

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flow acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

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FIRE PROTECTION, INC.

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	70	Residual Pressure	50
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Fire Hydrant #2 North Parking Lot

Fire Hydrant Information

Hydrant ID	#2
Description	M&H
Location	North Parking Lot

QUESTIONS

Is there a hydrant wrench that is available and accessible? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flow acceptable water? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	70	Residual Pressure	55
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
System #1 / Main Building	70	50	70	1	Yes	Yes
System #2 / Gym	70	50	70	1	Yes	Yes

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
System #1 / Main Building	Handicap Restroom by Classroom 405	1" Inspectors Test Valve	1:04	Yes	Yes	Yes	Yes	Yes
System #2 / Gym	N.W Storage Closet in Gym	1" Inspectors Test Valve	49	Yes	Yes	Yes	Yes	Yes

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VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
System #1 / Main Building	Control Valve	Exterior Mechanical Room backside of Cafeteria	OS&Y	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	16
System #2 / Gym	Control Valve	Exterior Mechanical Room backside of Cafeteria	OS&Y	2-1/2 "	Monitored	Yes	Yes	Yes	Yes	Yes	12

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
System #2 / Gym	1-1/4" Main Drain	@ Riser	Angle Valve	Yes	Yes
System #1 / Main Building	2" Main Drain	@ Riser	Angle Valve	Yes	Yes

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FIRE PROTECTION, INC.

Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
	System #1 / Main Building	1	Potter	Os&Y Tamper Switch			Pass
	System #2 / Gym	1	Potter	Os&Y Tamper Switch			Pass
	System #1 / Main Building	1	System Sensor	Water Flow Switch			Pass
	System #2 / Gym	1	Potter	Water Flow Switch			Pass
	System #1 / Main Building	1	Tyco	Mechanical Water Motor Bell			Pass
	System #2 / Gym	1	Tyco	Mechanical Water Motor Bell			Pass
	By Street @ Backflow	1	FDC	Fire Department Connection			Pass

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Deficiencies - General Questions

Deficiency #1

Are all escutcheon plates installed on sprinkler heads?: No

Notes: School - issuing concealed plates & SR esc

Deficiency #1 - Photo #1



Date Taken: June 23, 2023

Report of Inspection / Test

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INDUSTRIAL-COMMERCIAL



FIRE PROTECTION, INC.

2023-06-23

Property

Gilliard Elementary School
KH

2757 Dauphin Island Parkway
Mobile AL 36605

Mario Morrisette

Print Date: 2023-06-23

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc
MS-14326-SC AL-3693 LA-F1173 FL-873651-
0001-2007

1209C Highway 613 South
Luedale MS 39452

Deficiency #1 - Photo #2



Date Taken: June 23, 2023

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Deficiency #1 - Photo #3



Date Taken: June 23, 2023

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Deficiency #1 - Photo #4



Date Taken: June 23, 2023

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MS-14326-SC AL-3693 LA-F1173 FL-873651-
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Deficiency #1 - Photo #5



Date Taken: June 23, 2023

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Deficiency #1 - Photo #6



Date Taken: June 23, 2023

Deficiencies - General Wet System Questions

None

Deficiencies - System #1 / Main Building

None

Deficiencies - System #2 / Gym

None

Deficiencies - Fire Hydrant #1 South Parking Lot

None

Deficiencies - Fire Hydrant #2 North Parking Lot

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Deficiency #2

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

None

Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

None

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

None

Deficiencies - Alarm Pressure Switch

None

Deficiencies - PIV Tamper Switch

None

Deficiencies - Inspectors Test Connection

None

Deficiencies - Valves

None

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FIRE PROTECTION, INC.

Deficiencies - Drain Valves

None

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The logo for Industrial-Commercial Fire Protection, Inc. features the letters 'ICFP' in a large, bold, serif font. The letters are filled with a gradient from yellow to orange, with a dark outline. The logo is centered between two horizontal lines.

FIRE PROTECTION, INC.

Recommendations

Gym - green

School - yellow

Report of Inspection / Test

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Inspector Signature

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

Inspector Name

Bora Yann
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
153252

Signature

A handwritten signature in black ink, appearing to be 'Bora Yann', written in a cursive style.

Date Completed

2023-06-23

Report of Inspection / Test

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INDUSTRIAL-COMMERCIAL



2023-02-24

Property

Grand Bay Middle School
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12800 Cunningham Road

Grand Bay AL 36541

Mario Morrisette

Print Date: 2023-02-27

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NICET LEVEL II - Inspection & Testing of
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IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Is the clapper and automatic drain valve in place and properly operating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
---	---	---	---

SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

VALVE AREA

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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
---	---	---	---

ALARMS

Is the alarm valve free from physical damage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

MAINTENANCE

Report of Inspection / Test

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<p>Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>If sprinklers have been replaced, were they proper replacements?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If conditions were found that required flushing, was flushing of the system conducted?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Was a drain test conducted after opening any closed valve?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Operating stem of all OS&Y valves lubricated, completely closed and reopened?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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FIRE PROTECTION, INC.

Report of Inspection / Test for Asset - Fire Hydrant #1

Fire Hydrant Information

Hydrant ID	#1
Description	Mueller 5-1/4" 584N
Location	@ Backflow by the Street
Static Hydrant Description	Red body with White top
Static Hydrant Location	@ Street

QUESTIONS

Is there a hydrant wrench that is available and accessible? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there no ice or water in the barrel? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range?? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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Are monitor nozzles lubricated?	<input type="checkbox"/> Yes
	<input type="checkbox"/> No
	<input checked="" type="checkbox"/> NA

Hydrant Flow Test

Static Pressure	68	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Fire Hydrant #2

Fire Hydrant Information

Hydrant ID	#2
Description	Mueller 5-1/4" 584N
Location	North of 8th Grade Building
Static Hydrant Description	Red body
Static Hydrant Location	Rear of school

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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Have backflow devices, if installed, passed full flow test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	60	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
6th Grade / Cafeteria wet	60	40	55	.1	Yes	Yes
8th Grade Wet	80	50	68	.1	Yes	Yes

Report of Inspection / Test

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INDUSTRIAL-COMMERCIAL



2023-02-24

Property

Grand Bay Middle School
KH

12800 Cunningham Road
Grand Bay AL 36541

Mario Morrisette

Print Date: 2023-02-27

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc
MS-14326-SC AL-3693 LA-F1173 FL-873651-
0001-2007

1209C Highway 613 South
Lucaledale MS 39452

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
6th Grade / Cafeteria wet	Riser room	1" ITV	36	Yes	Yes	Yes	Yes	Yes
8th Grade Wet	Riser Room	1" Ball valve	43	Yes	Yes	Yes	Yes	N/A

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
6th Grade / Cafeteria wet	Anvil Control Valve	Closet outside computer rm-118	Butterfly	2-1/2 "	Monitored	Yes	Yes	Yes	Yes	Yes	10
8th Grade Wet	Muller Control Valve	Riser Room	OS&Y	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	16
6th Grade / Cafeteria wet	Tyco Riser Check	Closet outside computer rm-118	Riser Check Valve	2-1/2 "	Not Applicable	Yes	Yes	N/A	N/A	N/A	
8th Grade Wet	Tyco Check	Riser Room	Riser Check Valve	4 "	Not Applicable	Yes	Yes	N/A	N/A	N/A	
	Mueller OS&Y	Backflow	OS&Y	6 "	Locked	Yes	Yes	N/A	N/A	N/A	
	Mueller OS&Y	Backflow	OS&Y	6 "	Locked	Yes	Yes	N/A	N/A	N/A	

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
6th Grade / Cafeteria wet	1-1/4" MainDrain	Riser Room next to Computer Room 118	Angle Valve	Yes	Yes
8th Grade Wet	2" Main Drain	Riser Room	Angle Valve	Yes	Yes

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FIRE PROTECTION, INC.

Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
	6th grade / Cafeteria	1	Potter	Water Flow Switch		36 sec	
	8th Grade Building	1	System Sensor	Water Flow Switch			Pass
	6th Grade / Cafeteria	1	Anvil	Butterfly Tamper Switch			Pass
	8th Grade Building	1	Potter	Os&Y Tamper Switch			Pass
	8th Grade Building Mech	1	FDC	Fire Department Connection		Will not swivel	Fail
	By Street @ Backflow	1	FDC	Fire Department Connection		Will not swivel	

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Deficiencies - General Questions

Deficiency #1

Is the FDC swivels and couplings not damaged?: No

Notes: 8th grade - FDC swivels seized

Deficiencies - General Wet System Questions

None

Deficiencies - 6th Grade / Cafeteria wet

None

Deficiencies - 8th Grade Wet

None

Deficiencies - Fire Hydrant #1

None

Deficiencies - Fire Hydrant #2

None

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

None

Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

None

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

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None

Deficiencies - Fire Department Connection

Deficiency #2

Address

Status: Fail

Location: 8th Grade Building Mech

QTY: 1

Description: Siamese Connection

Notes:

Deficiencies - Alarm Pressure Switch

None

Deficiencies - PIV Tamper Switch

None

Deficiencies - Inspectors Test Connection

None

Deficiencies - Valves

None

Deficiencies - Drain Valves

None

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Inspector Signature

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

Inspector Name

Bora Yann
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
153252

Signature

A handwritten signature in black ink, appearing to read 'Bora Yann', is written over a large, faint watermark of the letters 'ICFP'.

Date Completed

2023-02-24

Report of Inspection / Test

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Property

Grant Elementary School
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535 Easterling Street
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Mario Morrisette

Print Date: 2023-08-03

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc
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IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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FIRE PROTECTION, INC.

Is the clapper and automatic drain valve in place and properly operating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
---	---	---	---

SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

VALVE AREA

Report of Inspection / Test

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NICET LEVEL II - Inspection & Testing of
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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
---	---	---	---

ALARMS

Is the alarm valve free from physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

MAINTENANCE

Report of Inspection / Test

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Water-Based Systems # 153252

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<p>Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>If sprinklers have been replaced, were they proper replacements?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If conditions were found that required flushing, was flushing of the system conducted?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Was a drain test conducted after opening any closed valve?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Operating stem of all OS&Y valves lubricated, completely closed and reopened?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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Report of Inspection / Test for Asset - Fire Hydrant #1

Fire Hydrant Information

Hydrant ID	#1
Description	Red M&H 5-1/4"
Location	Front of gym

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

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Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
-----------------	-----	-------------------	-----

Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - City Hydrant

Fire Hydrant Information

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does the hydrant completely shut off?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did monitor nozzle flow acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there no ice or water in the barrel?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Property

Grant Elementary School
KH

535 Easterling Street
Prichard AL 36610

Mario Morrisette

Print Date: 2023-08-03

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
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Have dry barrels drained in at least 1 hour?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
-----------------------------------	-----	------------	-----

MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
West Wing Wet # 1	70	45	65	3	Yes	Yes
East Wing Wet #2	60	40	60	1	Yes	Yes
Gym Wet	N/A	N/A	N/A	N/A	No	N/A

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
West Wing Wet # 1	Kindergarten Hall Exterior Mech	1" Inspectors Test Valve	N/A	No	No	Yes	Yes	No
East Wing Wet #2	(Left) E-6 exterior riser room	1" Globe Valve	41	Yes	Yes	Yes	Yes	Yes
Gym Wet	Janitorial closet	1" Inspectors Test Valve		Yes	Yes	Yes	Yes	Yes

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VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
West Wing Wet # 1	Kennedy Tamper Valve	E-6 exterior Riser room	Butterfly	4 "	Monitored And Locked	Yes	Yes	Yes	Yes	Yes	11
East Wing Wet #2	Butterfly Tamper Valve	E-6 exterior riser room	Butterfly	4 "	Monitored And Locked	Yes	Yes	Yes	Yes	Yes	12
Gym Wet	4" Butterfly Tamper Valve	Janitor Closet / Riser Room	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	
Gym Wet	6" Butterfly Tamper Valve	Gym @ Backflow	Butterfly	6 "	Padlock	Yes	Yes	N/A	N/A	N/A	
Gym Wet	6" Butterfly Tamper Valve	Gym @ Backflow	Butterfly	6 "	Padlock	Yes	Yes	N/A	N/A	N/A	

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
East Wing Wet #2	1-1/4" Main Drain	@ Riser	Ball Valve	Yes	Yes
Gym Wet	2" Main Drain	@ Riser	Ball Valve	Yes	Yes
West Wing Wet # 1	2" Main Drain	@ Riser	Ball Valve	Yes	Yes

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FIRE PROTECTION, INC.

Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
East wing	System #1	1	Potter	Water Flow Switch		Did not activate F/A	Fail
West wing	System #2	1	Potter	Water Flow Switch			Pass
	Gym	1	Potter	Water Flow Switch			N/A
East wing	System #1	1	Kennedy	Butterfly Tamper Switch			Pass
West wing	System #2	1	Central	Butterfly Tamper Switch			Pass
	GYM	1	Global Safety	Butterfly Tamper Switch			N/A
Front of Gym	@ Backflow	1	FDC	Fire Department Connection			Pass
E-6 west wing	Exterior of Riser Room	1	FDC	Fire Department Connection			Pass

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Deficiencies - General Questions

Deficiency #1

Are all fire protection systems in service?: No

Notes: System #1 - Waterflow did not activate F/A

Deficiency #2

Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?: No

Notes: No data plaque

Deficiency #3

The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?: No

Notes: System #1 - Waterflow did not activate F/A

Deficiency #4

Are alarms and supervisory devices not damaged?: No

Notes: System #1 - Waterflow did not activate F/A

Deficiency #5

Are visible sprinklers in the proper position: upright, pendent, sidewall?: No

Notes: Head's needs adjusting

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Deficiency #5 - Photo #1



Date Taken: August 02, 2023

Deficiency #6

Are all Identification Signs in place?: No

Notes:

Deficiency #7

Are all escutcheon plates installed on sprinkler heads?: No

Notes: Office RR.
D-Hall

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Deficiency #7 - Photo #1



Date Taken: August 02, 2023

Deficiencies - General Wet System Questions

None

Deficiencies - West Wing Wet # 1

None

Deficiencies - East Wing Wet #2

None

Deficiencies - Gym Wet

Deficiency #8

Sprinkler Type: Wet
Is flow observed?: No

Notes: Could not enter , floor being waxed

Deficiencies - Fire Hydrant #1

None

Deficiencies - City Hydrant

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None

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

Deficiency #9

Address: East wing

Location: System #1

Equipment Type: Water Flow Switch

QTY: 1

Description: VSR

Status: Fail

Notes:

Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

None

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

None

Deficiencies - Alarm Pressure Switch

None

Deficiencies - PIV Tamper Switch

None

Deficiencies - Inspectors Test Connection

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Deficiency #10

Location: Kindergarten Hall Exterior Mech

Description: 1" Inspectors Test Valve

Pass?: No

Was alarm reported?: No

Terminates in Smooth Orifice?: No

Notes: Did not activate F/A , no orifice

Deficiencies - Valves

None

Deficiencies - Drain Valves

None

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FIRE PROTECTION, INC.

Recommendations

System #1 - purple

System #2 - yellow

Gym - Could not enter , floor being waxed

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Inspector Signature

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

Inspector Name

Bora Yann
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
153252

Signature

A handwritten signature in black ink, consisting of the letters 'B' and 'Y' written in a stylized, cursive-like font.

Date Completed

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IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Is the clapper and automatic drain valve in place and properly operating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
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SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

VALVE AREA

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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
---	---	---	---

ALARMS

Is the alarm valve free from physical damage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

MAINTENANCE

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<p>Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>If sprinklers have been replaced, were they proper replacements?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If conditions were found that required flushing, was flushing of the system conducted?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Was a drain test conducted after opening any closed valve?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Operating stem of all OS&Y valves lubricated, completely closed and reopened?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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Report of Inspection / Test for Asset - Hydrant #1

Fire Hydrant Information

Description	Mueller 5-1/2
Location	Three Knotch & Carol Plantation
Static Hydrant Description	Red body W/ White Top

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

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2023-02-23

Property

Griggs Elementary School
KH

6001 Three Notch Road
Mobile AL 36619
Mario Morrisette
Print Date: 2023-02-23

Conducted by: Bora Yann
NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc
MS-14326-SC AL-3693 LA-F1173 FL-873651-
0001-2007
1209C Highway 613 South
Luedale MS 39452

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
-----------------------------------	-----	------------	-----

MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
System #1 / B Hall	65	55	58	.1	Yes	Yes
System #2 / D Hall	65	55	60	.1	Yes	Yes
System #3 / E Hall	65	55	58	.1	Yes	Yes

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
System #1 / B Hall	Maintenance Room / Riser Room	1" Inspectors Test Valve	N/A	No	Yes	Yes	Yes	N/A
System #2 / D Hall	Exterior Boiler Room / Riser Room	1" Inspectors Test Valve	35	Yes	Yes	Yes	No	Yes
System #3 / E Hall	Classroom E-113 / Riser Closet	1" Inspectors Test Valve	33	Yes	Yes	Yes	No	Yes

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
System #1 / B Hall	2-1/2" Kennedy OS&Y Control Valve	Maintenance Room / Riser Room	OS&Y	2-1/2 "	Monitored	Yes	Yes	Yes	Yes	Yes	10
System #2 / D Hall	2" Milwaukee Butterfly Tamper Valve	Exterior Boiler Room / Riser Room	Butterfly	2 "	Monitored	Yes	Yes	No	Yes	Yes	7

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VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
System #3 / E Hall	2" Milwaukee Butterfly Tamper Valve	Classroom E-113 / Riser Closet	Butterfly	2 "	Monitored	Yes	Yes	No	Yes	Yes	7

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
System #1 / B Hall	1-1/4" Main Drain	Maintenance Room/ Riser Room	Angle Valve	Yes	Yes
System #2 / D Hall	1" Main Drain	Exterior Boiler Room / Riser Room	Angle Valve	Yes	Yes
System #3 / E Hall	1" Main Drain	Classroom E-113 / Riser Closet	Angle Valve	Yes	Yes

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Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
	System #1 B Hall	1	Potter	Water Flow Switch		Couldn't verify	N/A
	System #2 D Hall	1	Potter	Water Flow Switch			Pass
	System #3 E Hall	1	Potter	Water Flow Switch			Pass
	System #1 B Hall	1	Potter	Os&Y Tamper Switch			Pass
	System #2 D Hall	1	Milwaukee	Butterfly Tamper Switch		Missing sign	Pass
	System #3 E Hall	1	Milwaukee	Butterfly Tamper Switch		Missing sign	Pass
	@ Backflow	1	FDC	Fire Department Connection			Pass
	System #3 E Hall	1	Fdc	Fire Department Connection			Pass

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Deficiencies - General Questions

Deficiency #1

Are alarms and supervisory devices not damaged?: No

Notes: Fire panel was disabled when testing bldg B - could not verify supervisory or Waterflow alarms

Deficiency #1 - Photo #1



Date Taken: February 23, 2023

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Deficiency #1 - Photo #2



Date Taken: February 23, 2023

Deficiency #2

Are visible pipe hangers and seismic braces not damaged or loose?: No

Notes: B Bldg - Lacking support on 1" drain @ riser

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Deficiency #2 - Photo #1



Date Taken: February 23, 2023

Deficiency #3

Is the information sign attached and legible?: No

Notes:

Deficiency #4

Are all Identification Signs in place?: No

Notes:

Deficiencies - General Wet System Questions

None

Deficiencies - System #1 / B Hall

None

Deficiencies - System #2 / D Hall

None

Deficiencies - System #3 / E Hall

None

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Deficiencies - Hydrant #1

None

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

None

Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

None

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

None

Deficiencies - Alarm Pressure Switch

None

Deficiencies - PIV Tamper Switch

None

Deficiencies - Inspectors Test Connection

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Deficiency #5

Location: Maintenance Room / Riser Room

Description: 1" Inspectors Test Valve

Was alarm reported?: No

Notes: Fire panel was disabled by another contractor; could not verify Waterflow alarm

Deficiency #6

Location: Exterior Boiler Room / Riser Room

Description: 1" Inspectors Test Valve

Signs: No

Notes:

Deficiency #7

Location: Classroom E-113 / Riser Closet

Description: 1" Inspectors Test Valve

Signs: No

Notes:

Deficiencies - Valves

Deficiency #8

Location: Exterior Boiler Room / Riser Room

Description: 2" Milwaukee Butterfly Tamper Valve

Signs: No

Notes:

Deficiency #9

Location: Classroom E-113 / Riser Closet

Description: 2" Milwaukee Butterfly Tamper Valve

Signs: No

Notes:

Deficiencies - Drain Valves

None

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FIRE PROTECTION, INC.

Recommendations

B Bldg - yellow

D bldg - green

E Bldg - green

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Inspector Signature

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

Inspector Name

Bora Yann
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
153252

Signature

A handwritten signature in black ink, appearing to be 'BY', is written in the signature field.

Date Completed

2023-02-23

Report of Inspection / Test

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2023-02-24

Property

Hankins Middle School
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5750 Katherine Hankins Drive
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IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Is the clapper and automatic drain valve in place and properly operating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
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SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

VALVE AREA

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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

DRY VALVE

Are enclosures around valves maintaining a minimum of 40 degrees F?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the gauges on systems without low pressure alarms in good condition and showing normal air and water pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
For freezer systems, gauge near compressor reading the same as gauge near the dry-pipe valve?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are they free from physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are trim valves in appropriate (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there no leakage in the intermediate chamber?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on systems with low pressure alarms in good condition and showing normal air and water pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the dry-pipe valve passed inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the priming level correct and has the low air pressure signal passed it's test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the quick opening device passed the test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
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ALARMS

Is the alarm valve free from physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have low temperature alarms passed test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

MAINTENANCE

Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
If sprinklers have been replaced, were they proper replacements?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	If conditions were found that required flushing, was flushing of the system conducted?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Was a drain test conducted after opening any closed valve?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Operating stem of all OS&Y valves lubricated, completely closed and reopened?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are dry-pipe systems kept in dry condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have auxiliary drains been emptied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

Report of Inspection / Test

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2023-02-24

Property

Hankins Middle School
KH

5750 Katherine Hankins Drive
Theodore AL 36582

Mario Morrisette

Print Date: 2023-02-27

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc
MS-14326-SC AL-3693 LA-F1173 FL-873651-
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Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks, a 50% increase in time from the original system acceptance test required for water to reach the inspector's test connection during a full flow test

- Yes
- No
- NA

Is interior of dry-pipe valves cleaned?

- Yes
- No
- NA

Have low points been drained before freezing weather?

- Yes
- No
- NA

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Report of Inspection / Test for System - Office Dry System

DRY VALVE

Have automatic air maintenance devices passed test? Yes
 No
 NA

DRY VALVE TRIP TEST

Dry Valve	Size: 4"	Year of Mfr.: 2019	Accelerator	Year of Mfr.: N/A		
Make	Model	Serial no.	Make	Model	Serial no.	
Tyco	DPV-1	R-05-2019 #0056	N/A	N/A	N/A	
	Time to Trip thru test pipe	Water Pressure	Air Pressure	Trip point air pressure	Time water reached test outlet	Alarm Operated
Without Accelerator	N/A	85	32	12	N/A	Yes
With Accelerator	N/A	N/A	N/A	N/A	N/A	N/A

DRY VALVE TRIP TEST (cont)

Were results comparable to previous test? Yes No NA
Has it passed air leakage test? Yes No NA

Report of Inspection / Test for Asset - Fire Hydrant #1

Fire Hydrant Information

Hydrant ID	#1
Description	American Darling 5-1/4" B84B-5
Location	Front of Main Building
Static Hydrant Description	Red Body W/ White top

QUESTIONS

Is there a hydrant wrench that is available and accessible? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	85	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	85	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Fire Hydrant #2

Fire Hydrant Information

Report of Inspection / Test

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Property

Hankins Middle School
KH

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Mario Morrisette

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Hydrant ID	#2
Description	Mueller 5-1/4" 584N
Location	Rear Parking Lot behind F- Building
Static Hydrant Description	Red body with white top

QUESTIONS

Is there a hydrant wrench that is available and accessible? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there no ice or water in the barrel? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range?? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	

Hydrant Flow Test

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Conducted by: Bora Yann

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Static Pressure	90	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	90	Residual Pressure	N/A
-----------------	----	-------------------	-----

Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
-----------------------------------	-----	------------	-----

MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
Office Dry System	85	70	80	.1	Yes	Yes
F Building Wet	90	55	85	.1	Yes	Yes

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
Office Dry System	Classroom A110	1" Inspectors Test Valve	N/A	Yes	Yes	Yes	Yes	Yes
F Building Wet	F Building exterior mechanical	1" Inspectors Test Valve	15	Yes	Yes	Yes	Yes	Yes

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
Office Dry System	Tyco Butterfly Tamper Valve	System#1 Riser Room	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	8.5
F Building Wet	4" Kennedy Butterfly Tamper Valve	F Building exterior Mechanical room	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	10.5
Office Dry System	GEM	Office drop off	Post Indicator	4 "	Not Secured	Yes	Yes	Yes	No	N/A	
F Building Wet	4" Central Alarm Valve	F Building Exterior mechanical room	Alarm Valve	4 "	Not Applicable	Yes	Yes	Yes	N/A	N/A	

DRAIN VALVES

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FIRE PROTECTION, INC.

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
F Building Wet	"2 Main Drain	System#2 Exterior Mechanical Room	Ball Valve	Yes	Yes
Office Dry System	2" Main Drain	System#1 Riser Room	Angle Valve	Yes	Yes

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FIRE PROTECTION, INC.

Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
White main building	System #1 Riser Room	1	Potter	Water Flow Switch			Pass
White main building	System #1 Riser Room	1	Tyco	Os&Y Tamper Switch		Needs control sign	
White main building	System #1 Riser Room	1	Potter	Low Air Pressure Switch			Pass
White main building	Exterior of Riser Room	1	FDC	Fire Department Connection			Pass
F-Building	System #2 Exterior Mechanical Room	1	Kennedy	Butterfly Tamper Switch		Corrosion on flange	Pass
F-Building	System #2 Exterior Mechanical Room	1	Potter	Water Flow Switch			Pass
F-Building	System #2 Exterior Mechanical Room	1	Central	Mechanical Water Motor Bell		Did not ring	Fail
F-Building	System #2 Rear Entrance of Building	1	FDC	Fire Department Connection		broken caps	Fail

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Deficiencies - General Questions

Deficiency #1

Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?: No

Notes: Bldg F - mechanical bell does not operate ; leaks water out the back of the motor

Deficiency #2

Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?: No

Notes: Main Bldg - PIV will not close

Deficiency #3

Are there spare sprinklers and a sprinkler wrench?: No

Notes: No wrench

Deficiency #4

Is the information sign attached and legible?: No

Notes:

Deficiency #5

Is the building fully protected by sprinklers?: No

Notes: Main Bldg riser room isn't sprinkled

Deficiency #6

Are all Identification Signs in place?: No

Notes: Main Bldg - no riser signs

Deficiency #7

Are all escutcheon plates installed on sprinkler heads?: No

Notes: Bldg F - missing esc

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Deficiency #7 - Photo #1



Date Taken: February 24, 2023

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Deficiency #7 - Photo #2



Date Taken: February 24, 2023

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FIRE PROTECTION, INC.

2023-02-24

Property

Hankins Middle School
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5750 Katherine Hankins Drive
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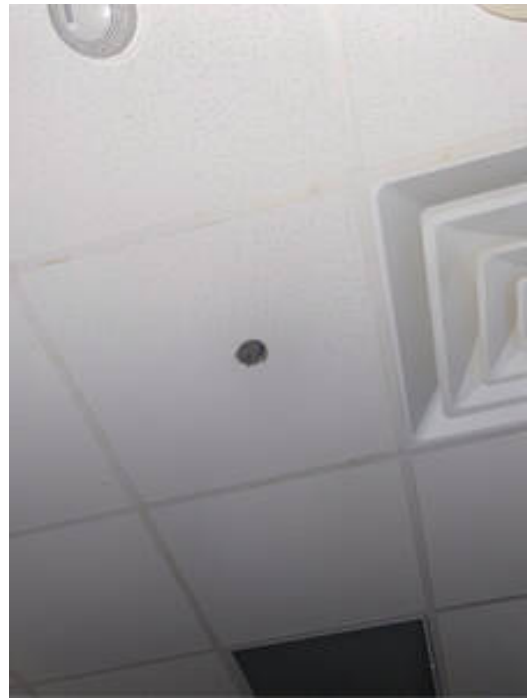
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Deficiency #7 - Photo #3



Date Taken: February 24, 2023

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Deficiency #7 - Photo #4



Date Taken: February 24, 2023

Deficiencies - General Wet System Questions

None

Deficiencies - General Dry System Questions

None

Deficiencies - Office Dry System

None

Deficiencies - F Building Wet

None

Deficiencies - Fire Hydrant #1

None

Deficiencies - Fire Hydrant #2

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Deficiency #8

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

None

Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

None

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

Deficiency #9

Address: F-Building

Location: System #2 Exterior Mechanical Room

QTY: 1

Description: Water Motor Gong

Status: Fail

Notes:

Deficiencies - Fire Department Connection

Deficiency #10

Address: F-Building

Location: System #2 Rear Entrance of Building

QTY: 1

Description: Siamese Connection

Status: Fail

Notes:

Deficiencies - Alarm Pressure Switch

None

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Deficiencies - PIV Tamper Switch

None

Deficiencies - Inspectors Test Connection

None

Deficiencies - Valves

Deficiency #11

Location: Office drop off
Description: GEM
Exercised?: No

Notes:

Deficiencies - Drain Valves

None

Report of Inspection / Test

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FIRE PROTECTION, INC.

Recommendations

Main Bldg - purple

F bldg - yellow

Report of Inspection / Test

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Inspector Signature

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

Inspector Name

Bora Yann
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
153252

Signature

A handwritten signature in black ink, appearing to be "Bora Yann", written in a cursive style.

Date Completed

2023-02-24

Report of Inspection / Test

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2023-03-01

Property

Hollinger's Island Elementary School
KH

2400 Hammock Road

Mobile AL 36605

Mario Morrisette

Print Date: 2023-03-02

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
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IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Is the clapper and automatic drain valve in place and properly operating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
---	---	---	---

SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

VALVE AREA

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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
---	---	---	---

ALARMS

Is the alarm valve free from physical damage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

MAINTENANCE

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<p>Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>If sprinklers have been replaced, were they proper replacements?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If conditions were found that required flushing, was flushing of the system conducted?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Was a drain test conducted after opening any closed valve?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Operating stem of all OS&Y valves lubricated, completely closed and reopened?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?</p>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

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FIRE PROTECTION, INC.

Report of Inspection / Test for Asset - Fire Hydrant #1 @ Building B

Fire Hydrant Information

Hydrant ID	#1
Description	Mueller 5-1/4" 584 N
Location	Front of Building B
Static Hydrant Description	Red Hydrant

QUESTIONS

Is there a hydrant wrench that is available and accessible? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flow acceptable water? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there no ice or water in the barrel? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range?? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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Are monitor nozzles lubricated?	<input type="checkbox"/> Yes
	<input type="checkbox"/> No
	<input checked="" type="checkbox"/> NA

Hydrant Flow Test

Static Pressure	80	Residual Pressure	60
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Fire Hydrant #2 @ Gym

Fire Hydrant Information

Hydrant ID	#2
Description	American Darling 5-1/4" B84B
Location	Front of Gym

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	75	Residual Pressure	60
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
Main Building Wet	80	70	80	.1	Yes	Yes
Building B Wet	75	60	75	.1	Yes	Yes
Building C Wet	76	60	75	.1	Yes	Yes

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INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
Main Building Wet	Kitchen Food Storage Room	1" Inspectors Test Valve	1:05	Yes	Yes	Yes	No	Yes
Building B Wet	Above Ceiling in Classroom 114	1" Inspectors Test Valve	48	Yes	Yes	Yes	No	Yes
Building C Wet	SW Exterior Mech Room	1" Inspectors Test Valve	28	Yes	Yes	Yes	No	Yes

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
Main Building Wet	4" OS&Y Control Valve	Office Workroom	OS&Y	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	17
Building B Wet	OS&Y Control Valve	Exterior Mechanical Room	OS&Y	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	11
Building C Wet	6" Butterfly Tamper Valve	Exterior Mechanical Room	Butterfly	6 "	Monitored	Yes	Yes	No	Yes	Yes	16
	6" Backflow OS&Y	@ Backflow by the Street	OS&Y	6 "	Locked	Yes	Yes	Yes	Yes	Yes	
Main Building Wet	6" Backflow OS&Y	@ Backflow by the Street	OS&Y	6 "	Locked	Yes	Yes	N/A	N/A	N/A	

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
Main Building Wet	2" Main Drain	System #1 Main Building @ Riser	Angle Valve	Yes	Yes
Building B Wet	2" Main Drain	System #2 Building B @ Riser	Angle Valve	Yes	Yes
Building C Wet	2" Main Drain	System #3 Building C @ Riser	Angle Valve	Yes	Yes

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FIRE PROTECTION, INC.

Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
Main Building	Office WorkRoom	1	Potter	Os&Y Tamper Switch			Pass
Main Building	Office Workroom	1	Potter	Water Flow Switch		Manually tripped tested	Pass
Building C	Exterior Mech Room	1	Victaulic	Butterfly Tamper Switch			Pass
Building C	Exterior Mech Room	1	Potter	Water Flow Switch			Pass
Building B	Exterior mechanical room	1	Potter	Os&Y Tamper Switch			Pass
Building B	Exterior Mechanical Room	1	Potter	Water Flow Switch			Pass
Building B	Fenced in Exterior Wall	1	FDC	Fire Department Connection		Behind locked gate	Pass
Main Building	@ Backflow by the Street	1	FDC	Fire Department Connection		Left swivel seized	Fail

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Deficiencies - General Questions

Deficiency #1

Is the FDC easily accessible?: No

Notes: Behind locked fence

Deficiency #2

Is the FDC swivels and couplings not damaged?: No

Notes: @ street

Deficiency #3

Are visible sprinklers free of foreign materials including paint?: No

Notes:

Deficiency #4

Is the information sign attached and legible?: No

Notes:

Deficiency #5

Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?: No

Notes: Loaded with dust

Deficiency #6

Are all Identification Signs in place?: No

Notes:

Deficiencies - General Wet System Questions

None

Deficiencies - Main Building Wet

None

Deficiencies - Building B Wet

None

Deficiencies - Building C Wet

None

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Deficiencies - Delete

None

Deficiencies - Fire Hydrant #1 @ Building B

Deficiency #7

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - Fire Hydrant #2 @ Gym

Deficiency #8

Are pumper and nozzle caps tight?: No

Notes: Missing 2.5 cap

Deficiency #9

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

None

Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

None

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

None

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Deficiencies - Fire Department Connection

Deficiency #10

Address: Main Building

Location: @ Backflow by the Street

QTY: 1

Description: Siamese Connection

Status: Fail

Notes:

Deficiencies - Alarm Pressure Switch

None

Deficiencies - PIV Tamper Switch

None

Deficiencies - Inspectors Test Connection

Deficiency #11

Location: SW Exterior Mech Room

Description: 1" Inspectors Test Valve

Signs: No

Notes:

Deficiency #12

Location: Above Ceiling in Classroom 114

Description: 1" Inspectors Test Valve

Signs: No

Notes:

Deficiency #13

Location: Kitchen Food Storage Room

Description: 1" Inspectors Test Valve

Signs: No

Notes:

Deficiencies - Valves

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Lucedale MS 39452

Deficiency #14

Location: Exterior Mechanical Room

Description: 6" Butterfly Tamper Valve

Signs: No

Notes:

Deficiencies - Drain Valves

None

Report of Inspection / Test

Annual NFPA 25

INDUSTRIAL-COMMERCIAL



2023-03-01

Property

Hollinger's Island Elementary School
KH

2400 Hammock Road

Mobile AL 36605

Mario Morrisette

Print Date: 2023-03-02

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc

MS-14326-SC AL-3693 LA-F1173 FL-873651-

0001-2007

1209C Highway 613 South

Lucedale MS 39452

Inspector Signature

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

Inspector Name

Bora Yann
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
153252

Signature

A handwritten signature in black ink, appearing to read 'Bora Yann', is written in a cursive style within the signature box.

Date Completed

2023-03-01

Report of Inspection / Test

Annual NFPA 25

INDUSTRIAL-COMMERCIAL



2023-08-31

Property

Holloway Elementary School
KH

625 Stanton Road

Mobile AL 36617

Mario Morrisette

Print Date: 2023-08-31

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc

MS-14326-SC AL-3693 LA-F1173 FL-873651-

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IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

Report of Inspection / Test

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INDUSTRIAL-COMMERCIAL



2023-08-31

Property

Holloway Elementary School
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Mario Morrisette

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Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
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Industrial Commercial Fire Protection, Inc
MS-14326-SC AL-3693 LA-F1173 FL-873651-
0001-2007

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Lucaledale MS 39452

Is the clapper and automatic drain valve in place and properly operating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
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SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

VALVE AREA

Report of Inspection / Test

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INDUSTRIAL-COMMERCIAL



FIRE PROTECTION, INC.

2023-08-31

Property

Holloway Elementary School
KH

625 Stanton Road

Mobile AL 36617

Mario Morrisette

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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
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ALARMS

Is the alarm valve free from physical damage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

MAINTENANCE

Report of Inspection / Test

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INDUSTRIAL-COMMERCIAL



2023-08-31

Property

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NICET LEVEL II - Inspection & Testing of
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MS-14326-SC AL-3693 LA-F1173 FL-873651-
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<p>Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>If sprinklers have been replaced, were they proper replacements?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If conditions were found that required flushing, was flushing of the system conducted?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Was a drain test conducted after opening any closed valve?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Operating stem of all OS&Y valves lubricated, completely closed and reopened?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

Report of Inspection / Test

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Water-Based Systems # 153252

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Lucedale MS 39452

Report of Inspection / Test for Asset - Fire Hydrant #1

Fire Hydrant Information

Hydrant ID	#1
Description	Red Mueller 5 1/4
Location	Back of school entrance

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Report of Inspection / Test

Annual NFPA 25

INDUSTRIAL-COMMERCIAL



2023-08-31

Property

Holloway Elementary School
KH

625 Stanton Road

Mobile AL 36617

Mario Morrisette

Print Date: 2023-08-31

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc

MS-14326-SC AL-3693 LA-F1173 FL-873651-

0001-2007

1209C Highway 613 South

Luedale MS 39452

Hydrant Flow Test

Static Pressure	85	Residual Pressure	N/A
Pitot Pressure	50	Orifice Size	2.5
Orifice Coefficient	1.0	Flow	1190

Static Hydrant

Static Pressure	85	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	750
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Report of Inspection / Test for Asset - Fire Hydrant #2

Fire Hydrant Information

Description	Green/grey Mueller 5 1/4"
Location	Back side of cafeteria

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

Report of Inspection / Test

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Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	85	Residual Pressure	N/A
Pitot Pressure	50	Orifice Size	2.5
Orifice Coefficient	1.0	Flow	1190

Static Hydrant

Static Pressure	85	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	750
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Report of Inspection / Test for Asset - South of front entrance

Fire Hydrant Information

Description	Red Mueller 5 1/4"
Location	front entrance @ Staton Rd

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	85	Residual Pressure	N/A
Pitot Pressure	50	Orifice Size	2.5
Orifice Coefficient	1.0	Flow	1190

Static Hydrant

Static Pressure	85	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	750
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MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
Bldg D wet system	65	55	85	3	Yes	Yes

Report of Inspection / Test

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FIRE PROTECTION, INC.

MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
Bldg E wet system	65	50	85	3	Yes	Yes

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
Bldg D wet system	Classroom D10 above ceiling	ITV	37	Yes	Yes	Yes	Yes	Yes
Bldg E wet system	Classroom E7 above ceiling	ITV	46	Yes	Yes	Yes	Yes	Yes

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
Bldg D wet system	Control valve mueller 250w	Boiler room East side of D building	OS&Y	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	15
Bldg E wet system	Control valve mueller 250w	Boiler room west side of E building	OS&Y	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	15

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
Bldg D wet system	2" Main drain valve	Boiler room east side of D building	Ball Valve	Yes	Yes
Bldg E wet system	2" Main drain valve	Boiler room west side of building	Ball Valve	Yes	Yes

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Property

Holloway Elementary School
KH

625 Stanton Road
Mobile AL 36617

Mario Morrisette

Print Date: 2023-08-31

Conducted by: Bora Yann
NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc
MS-14326-SC AL-3693 LA-F1173 FL-873651-
0001-2007

1209C Highway 613 South
Luedale MS 39452

INDUSTRIAL-COMMERCIAL



FIRE PROTECTION, INC.

Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
	Boiler room west side of E building	1	Control valve E Building	Os&Y Tamper Switch		Manually tested , needs adjusting	Pass
	Boiler room west side of E building	1	Flow switch	Water Flow Switch		Reports as bldg A	Pass
	Boiler room east side of D building	1	Control valve D building	Os&Y Tamper Switch			Pass
	Boiler room East side of D building	1	Potter vsr-F	Water Flow Switch		Reports as bldg B	Pass
	Exterior of bldg.	1	FDC	Fire Department Connection			Pass

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Questions with Photos and Notes

ITV - ITV Classroom D10 above ceiling

Notes:

Bldg reports to F/A panel as bldg B

ITV - ITV Classroom E7 above ceiling

Notes:

Reports to F/A panel as Bldg A.

Manually tested switch , school is in session



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Deficiencies - General Questions

Deficiency #1

Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?: No

Notes: Bldg E

Deficiency #2

Do valve supervisory switches indicate movement?: No

Notes: Bldg E- tamper doesn't activate closing valve only manually testing

Deficiency #3

Are alarms and supervisory devices not damaged?: No

Notes: Bldg D & E reports to F/A panel as Bldg A & B

Deficiency #4

Are there spare sprinklers and a sprinkler wrench?: No

Notes: Needs head wrench on both bldgs 1/2" 3/4"

Deficiency #5

Is the building fully protected by sprinklers?: No

Notes: Only bldg D & E are sprinkled

Deficiency #6

Are all Identification Signs in place?: No

Notes: Bldg E- no MD sign

Deficiencies - General Wet System Questions

None

Deficiencies - Bldg D wet system

None

Deficiencies - Bldg E wet system

None

Deficiencies - Delete

None

Deficiencies - Fire Hydrant #1

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Deficiency #7

Is the hydrant properly painted and is the paint in good condition?: No

Notes: Needs Red paint

Deficiencies - Fire Hydrant #2

Deficiency #8

Is the hydrant properly painted and is the paint in good condition?: No

Notes: Needs green / grey paint

Deficiency #9

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - South of front entrance

Deficiency #10

Is the hydrant properly painted and is the paint in good condition?: No

Notes: Needs red paint

Deficiency #11

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

None

Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

None

Deficiencies - Butterfly Tamper Switch

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None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

None

Deficiencies - Alarm Pressure Switch

None

Deficiencies - PIV Tamper Switch

None

Deficiencies - Inspectors Test Connection

None

Deficiencies - Valves

None

Deficiencies - Drain Valves

None

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Inspector Signature

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

Inspector Name

Bora Yann
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
153252

Signature

A handwritten signature in black ink, consisting of the letters 'B' and 'y' written in a cursive, stylized font.

Date Completed

2023-08-31

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IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Is the clapper and automatic drain valve in place and properly operating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
---	---	---	---

SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

VALVE AREA

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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
---	---	---	---

ALARMS

Is the alarm valve free from physical damage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

MAINTENANCE

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<p>Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>If sprinklers have been replaced, were they proper replacements?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If conditions were found that required flushing, was flushing of the system conducted?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Was a drain test conducted after opening any closed valve?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Operating stem of all OS&Y valves lubricated, completely closed and reopened?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?</p>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

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MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
Main Bldg Wet #1	85	70	85	5	Yes	Yes
Main Bldg Wet #2	85	70	85	5	Yes	Yes
Pathway K-5 Bldg Wet #3	75	45	75	3	Yes	Yes

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
Main Bldg Wet #1	Multi- purpose Storage Rm	Above ceiling ITV	33	Yes	No	No	No	Yes
Main Bldg Wet #2	Rm. E-1 NW. Ceiling	1" ITV	25	Yes	No	No	No	Yes
Pathway K-5 Bldg Wet #3	N. Exterior Mech. Rm.	1" ITV @ riser	26	Yes	Yes	Yes	Yes	Yes

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
Main Bldg Wet #1	Victaulic control valve	SE. Exterior Mechanical Rm.	Butterfly	4 "	Monitored	Yes	Yes	No	Yes	Yes	16
Main Bldg Wet #2	Victaulic control valve	SE. Exterior Mechanical Rm.	Butterfly	4 "	Monitored	Yes	Yes	No	Yes	Yes	16
Pathway K-5 Bldg Wet #3	Muller control valve	N. Exterior Mechanical Room	OS&Y	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	16

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
Main Bldg Wet #1	2" main Drain	Riser	Globe Valve	Yes	Yes
Main Bldg Wet #2	2" main Drain	Riser	Globe Valve	Yes	Yes
Pathway K-5 Bldg Wet #3	2" main Drain	Riser	Globe Valve	Yes	Yes

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Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
Main Bldg #1	SE. Mechanical Room	1	Potter	Water Flow Switch			Pass
Main Bldg #2	SE. Mechanical Room	1	Potter	Water Flow Switch		Manually tested	Pass
K-5 Bldg	N. Exterior Mechanical Room	1	Potter	Water Flow Switch			Pass
Main Bldg #1	SE. Mechanical Room	1	victaulic	Butterfly Tamper Switch			Pass
Main Bldg #2	SE. Mechanical Room	1	Victaulic	Butterfly Tamper Switch			
K-5 Bldg	N. Exterior Mechanical Room	1	Potter	Os&Y Tamper Switch			Pass
Outside SE. Mech Rm.	Exterior of bldg.	1	FDC	Fire Department Connection			Pass
Gym Wet	Janitors Closet Ceiling	1	Potter	Water Flow Switch			Pass
Gym Wet	Janitors Closet Ceiling	1	Nibco	Butterfly Tamper Switch		Above ceiling, inaccessible	N/A

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Questions with Photos and Notes

- Does visible pipe have no mechanical damage or leaks?

Yes

Notes:

*K-5 riser has prior signs of leaks
Main Bldg riser*



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FIRE PROTECTION, INC.



Gym Wet - Janitors Closet Ceiling - Nibco - Butterfly Tamper Switch

Notes:

Inaccessible, did not operate

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Deficiencies - General Questions

Deficiency #1

The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?: No

Notes: Could not access ITV for System #2 , could not access ITV for System #1
Both Waterflow switches were manually tested

Deficiency #2

All control valves operated through full range and returned to normal position?: No

Notes: Gym - inaccessible

Deficiency #3

Is the visible pipe in good condition with no external corrosion?: No

Notes: K-5 drain pipe corroded

Deficiency #3 - Photo #1



Date Taken: August 04, 2023

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MS-14326-SC AL-3693 LA-F1173 FL-873651-
0001-2007
1209C Highway 613 South
Luedale MS 39452

Deficiency #3 - Photo #2



Date Taken: August 04, 2023

Deficiency #4

Are visible pipe hangers and seismic braces not damaged or loose?: No

Notes: SE. Mechanical Room sprig-ups needs bracing , pipes are over 4' long

Report of Inspection / Test

Annual NFPA 25

INDUSTRIAL-COMMERCIAL



FIRE PROTECTION, INC.

2023-08-04

Property

Howard Elementary School
KH

957 Dr. Martin Luther King Drive
Prichard AL 36603

Mario Morrisette

Print Date: 2023-08-04

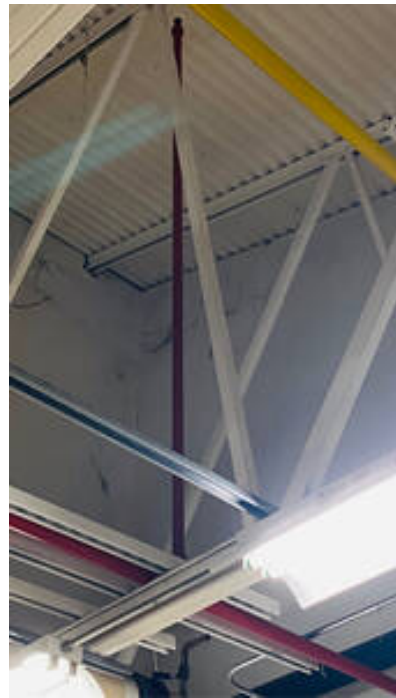
Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc
MS-14326-SC AL-3693 LA-F1173 FL-873651-
0001-2007

1209C Highway 613 South
Luedale MS 39452

Deficiency #4 - Photo #1



Date Taken: August 04, 2023

Report of Inspection / Test

Annual NFPA 25

INDUSTRIAL-COMMERCIAL



2023-08-04

Property

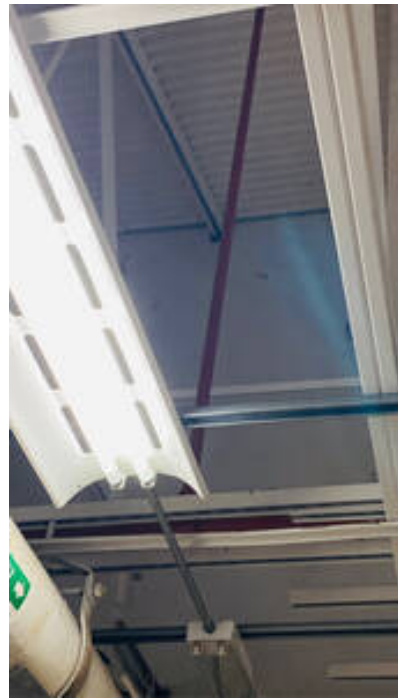
Howard Elementary School
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Mario Morrisette
Print Date: 2023-08-04

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NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

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Deficiency #4 - Photo #2



Date Taken: August 04, 2023

Report of Inspection / Test

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2023-08-04

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Howard Elementary School
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Lucedale MS 39452

Deficiency #4 - Photo #3



Date Taken: August 04, 2023

Deficiency #5

Are visible sprinklers free of corrosion and physical damage?: No

Notes: Kitchen - 20 greased / corroded chrome pendent head
K-5 - corroded dry pendants

Report of Inspection / Test

Annual NFPA 25

INDUSTRIAL-COMMERCIAL



2023-08-04

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Howard Elementary School
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957 Dr. Martin Luther King Drive
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Deficiency #5 - Photo #1



Date Taken: August 04, 2023

Report of Inspection / Test

Annual NFPA 25

INDUSTRIAL-COMMERCIAL



2023-08-04

Property

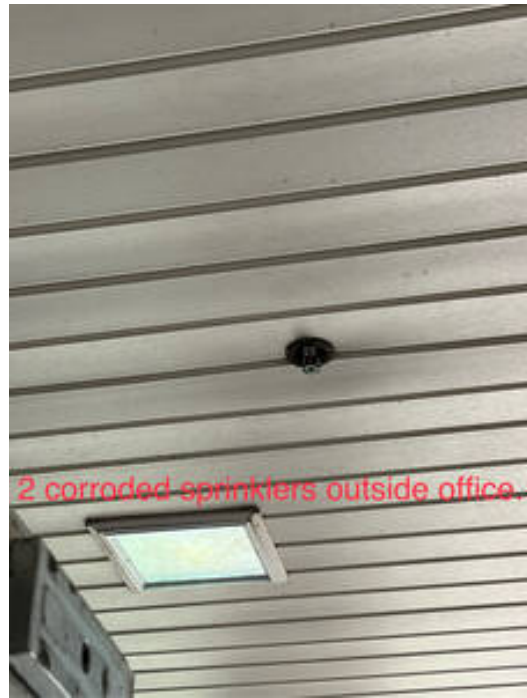
Howard Elementary School
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Deficiency #5 - Photo #2



Date Taken: August 04, 2023

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Annual NFPA 25

INDUSTRIAL-COMMERCIAL



2023-08-04

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Deficiency #5 - Photo #3



Date Taken: August 04, 2023

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Howard Elementary School
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957 Dr. Martin Luther King Drive
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NICET LEVEL II - Inspection & Testing of
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MS-14326-SC AL-3693 LA-F1173 FL-873651-
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Luedale MS 39452

Deficiency #5 - Photo #4



Date Taken: August 04, 2023

Report of Inspection / Test

Annual NFPA 25

INDUSTRIAL-COMMERCIAL



FIRE PROTECTION, INC.

2023-08-04

Property

Howard Elementary School
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NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc
MS-14326-SC AL-3693 LA-F1173 FL-873651-
0001-2007

1209C Highway 613 South
Lucedale MS 39452

Deficiency #5 - Photo #5



Date Taken: August 04, 2023

Report of Inspection / Test

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INDUSTRIAL-COMMERCIAL



2023-08-04

Property

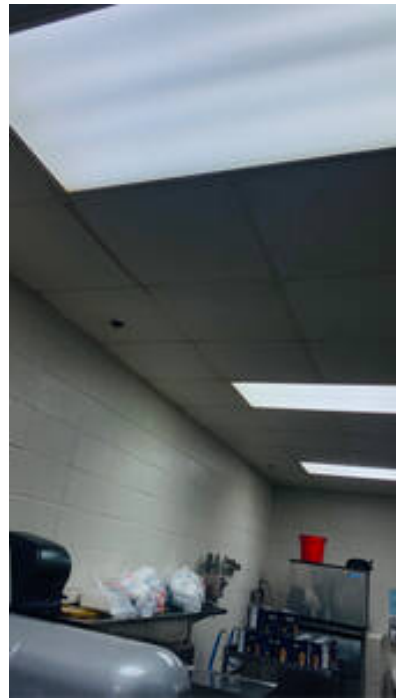
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Deficiency #5 - Photo #6



Date Taken: August 04, 2023

Report of Inspection / Test

Annual NFPA 25

INDUSTRIAL-COMMERCIAL



2023-08-04

Property

Howard Elementary School
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957 Dr. Martin Luther King Drive
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NICET LEVEL II - Inspection & Testing of
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Luedale MS 39452

Deficiency #5 - Photo #7



Date Taken: August 04, 2023

Deficiency #6

Are visible sprinklers free of foreign materials including paint?: No

Notes: Entire school- loaded heads throughout school
Bathroom outside cafeteria-(2) painted

Report of Inspection / Test

Annual NFPA 25

INDUSTRIAL-COMMERCIAL



FIRE PROTECTION, INC.

2023-08-04

Property

Howard Elementary School
KH

957 Dr. Martin Luther King Drive
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NICET LEVEL II - Inspection & Testing of
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Industrial Commercial Fire Protection, Inc
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Deficiency #6 - Photo #1



Date Taken: August 04, 2023

Report of Inspection / Test

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Deficiency #6 - Photo #2



Date Taken: August 04, 2023

Report of Inspection / Test

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INDUSTRIAL-COMMERCIAL



2023-08-04

Property

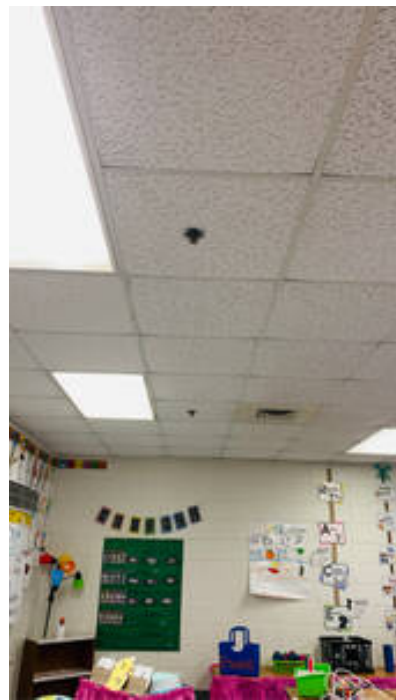
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Deficiency #6 - Photo #3



Date Taken: August 04, 2023

Deficiency #7

Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?: No

Notes: 15 greased heads in kitchen (20) total to be changed in kitchen

Report of Inspection / Test

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Deficiency #7 - Photo #1



Date Taken: August 04, 2023

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INDUSTRIAL-COMMERCIAL



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Property

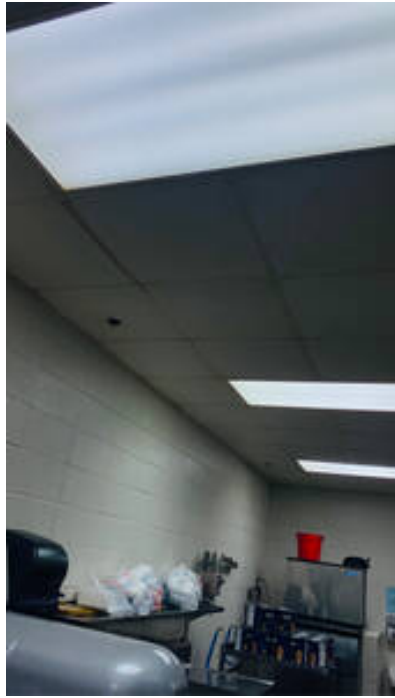
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Deficiency #7 - Photo #2



Date Taken: August 04, 2023

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Deficiency #7 - Photo #3



Date Taken: August 04, 2023

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Deficiency #7 - Photo #4



Date Taken: August 04, 2023

Deficiency #8

Is the building fully protected by sprinklers?: No

Notes: Gym is not fully sprinkled

Deficiency #9

Are all escutcheon plates installed on sprinkler heads?: No

Notes: Missing Esc throughout school

Report of Inspection / Test

Annual NFPA 25

INDUSTRIAL-COMMERCIAL



2023-08-04

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Howard Elementary School
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Deficiency #9 - Photo #1



Date Taken: August 04, 2023

Report of Inspection / Test

Annual NFPA 25

INDUSTRIAL-COMMERCIAL



2023-08-04

Property

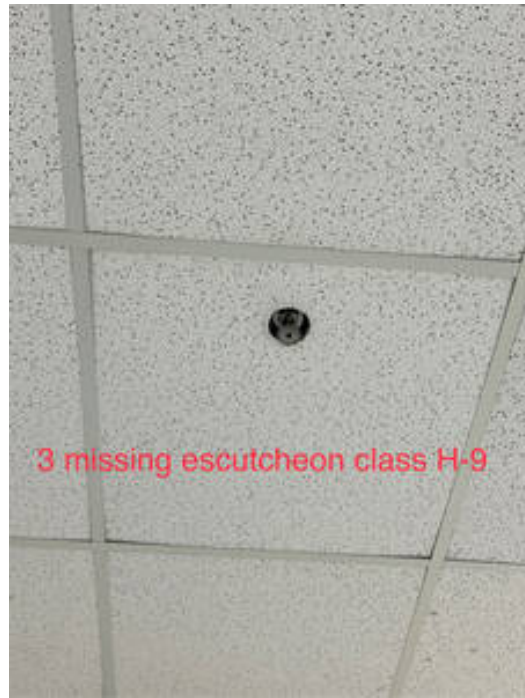
Howard Elementary School
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NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

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MS-14326-SC AL-3693 LA-F1173 FL-873651-
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Luedale MS 39452

Deficiency #9 - Photo #2



Date Taken: August 04, 2023

Report of Inspection / Test

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INDUSTRIAL-COMMERCIAL



FIRE PROTECTION, INC.

2023-08-04

Property

Howard Elementary School
KH

957 Dr. Martin Luther King Drive
Prichard AL 36603

Mario Morrisette

Print Date: 2023-08-04

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc
MS-14326-SC AL-3693 LA-F1173 FL-873651-
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1209C Highway 613 South
Lucedale MS 39452

Deficiency #9 - Photo #3



Date Taken: August 04, 2023

Report of Inspection / Test

Annual NFPA 25

INDUSTRIAL-COMMERCIAL



FIRE PROTECTION, INC.

2023-08-04

Property

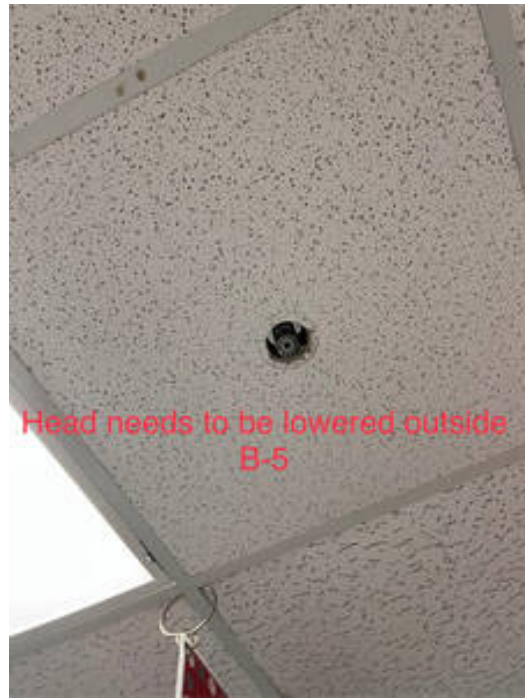
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Water-Based Systems # 153252

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Luedale MS 39452

Deficiency #9 - Photo #4



Date Taken: August 04, 2023

Report of Inspection / Test

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INDUSTRIAL-COMMERCIAL



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Deficiency #9 - Photo #5



Date Taken: August 04, 2023

Deficiencies - General Wet System Questions

None

Deficiencies - Main Bldg Wet #1

None

Deficiencies - Main Bldg Wet #2

None

Deficiencies - Pathway K-5 Bldg Wet #3

None

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

None

Deficiencies - High Pressure Switch

Report of Inspection / Test

Annual NFPA 25

INDUSTRIAL-COMMERCIAL



2023-08-04

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Howard Elementary School
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None

Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

None

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

None

Deficiencies - Alarm Pressure Switch

None

Deficiencies - PIV Tamper Switch

None

Deficiencies - Inspectors Test Connection

Deficiency #10

Location: Multi- purpose Storage Rm

Description: Above ceiling ITV

Terminates in Smooth Orifice?: No

Easily Accessible?: No

Signs: No

Notes: Manually tested flow switch .

ITV above ceiling , inaccessible, no signs or orifice

Report of Inspection / Test

Annual NFPA 25

INDUSTRIAL-COMMERCIAL



2023-08-04

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Deficiency #11

Location: Rm. E-1 NW. Ceiling
Description: 1" ITV
Terminates in Smooth Orifice?: No
Easily Accessible?: No
Signs: No

Notes: Furniture blocking access
Above ceiling , inaccessible. Manually tested flowswitch.
Recommend adding ITV @ risers

Deficiency #11 - Photo #1



Date Taken: August 04, 2023

Deficiencies - Valves

Deficiency #12

Location: SE. Exterior Mechanical Rm.
Valve Type: butter_fly
Size: 4
Description: Victaulic control valve
Signs: No

Notes: No sign

Report of Inspection / Test

Annual NFPA 25

INDUSTRIAL-COMMERCIAL



2023-08-04

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Deficiency #13

Location: SE. Exterior Mechanical Rm.

Valve Type: butter_fly

Size: 4

Description: Victaulic control valve

Signs: No

Notes: No sign

Deficiencies - Drain Valves

None

Report of Inspection / Test

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Inspector Signature

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

Inspector Name

Bora Yann
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
153252

Signature

A handwritten signature in black ink, appearing to be 'Bora Yann', written in a cursive style.

Date Completed

2023-08-04

Report of Inspection / Test

Annual NFPA 25

2023-02-24

Property

Hutchens Elementary
KH

1005 West Lake Road

Mobile AL 36695

Mario Morrisette

Print Date: 2023-02-27

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc

MS-14326-SC AL-3693 LA-F1173 FL-873651-

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FIRE PROTECTION, INC.

IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

Report of Inspection / Test

Annual NFPA 25

2023-02-24

Property

Hutchens Elementary
KH

1005 West Lake Road
Mobile AL 36695

Mario Morrisette

Print Date: 2023-02-27

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc
MS-14326-SC AL-3693 LA-F1173 FL-873651-
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1209C Highway 613 South
Lucaledale MS 39452

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FIRE PROTECTION, INC.

Is the clapper and automatic drain valve in place and properly operating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
---	---	---	---

SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

VALVE AREA

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2023-02-24

Property

Hutchens Elementary
KH

1005 West Lake Road
Mobile AL 36695

Mario Morrisette

Print Date: 2023-02-27

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc
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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
---	---	---	---

ALARMS

Is the alarm valve free from physical damage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

MAINTENANCE

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<p>Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>If sprinklers have been replaced, were they proper replacements?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If conditions were found that required flushing, was flushing of the system conducted?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Was a drain test conducted after opening any closed valve?</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
<p>Operating stem of all OS&Y valves lubricated, completely closed and reopened?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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FIRE PROTECTION, INC.

Report of Inspection / Test for Asset - Fire Hydrant #1 / West Side behind Cafeteria

Fire Hydrant Information

Hydrant ID	#1
Description	American Darling 5-1/4" B84B
Location	East Side behind Cafeteria
Static Hydrant Description	Yellow Hydrant

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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NICET LEVEL II - Inspection & Testing of
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Are monitor nozzles lubricated? Yes
 No
 NA

Hydrant Flow Test

Static Pressure	75	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Fire Hydrant #2 / East End of Main Building

Fire Hydrant Information

Hydrant ID	#2
Description	American Darling 5-1/4" B84B
Location	East End of Main Building
Static Hydrant Description	Yellow hydrant

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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Have backflow devices, if installed, passed full flow test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - N/A

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does the hydrant completely shut off?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there no ice or water in the barrel?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
System #1 / Main Building	75	35	58	.1	Yes	Yes

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FIRE PROTECTION, INC.

MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
System #2 / Gym	75	35	58	.1	Yes	Yes

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
System #1 / Main Building	Janitor closet back of school	1" Inspectors Test Valve	50	Yes	No	Yes	Yes	Yes
System #2 / Gym	Gym P.E Office	1" Inspectors Test Valve	45	Yes	No	Yes	Yes	Yes

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
System #1 / Main Building	Control Valve	Mechanical / Riser Room	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	16
System #2 / Gym	Control Valve	Mechanical / Riser Room	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	16

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
System #1 / Main Building	2" Main Drain	@ Riser	Ball Valve	Yes	Yes
System #2 / Gym	2" Main Drain	@ Riser	Ball Valve	Yes	Yes

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FIRE PROTECTION, INC.

Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
	Delete	2	Delete	Os&Y Tamper Switch			
	Exterior of Riser Room behind Cafeteria	1	FDC	Fire Department Connection			Pass
	System #1 / Main Building	1	Victaulic	Butterfly Tamper Switch			Pass
	System #2 / Gym	1	Victaulic	Butterfly Tamper Switch			Pass
	System #1 / Main Building	1	Potter	Water Flow Switch		Manually tested	Pass
	System #2 / Gym	1	Potter	Water Flow Switch		Manually tested	Pass

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Deficiencies - General Questions

Deficiency #1

Are visible sprinklers free of foreign materials including paint?: No

Notes:

Deficiency #2

Is the information sign attached and legible?: No

Notes:

Deficiency #3

Are all escutcheon plates installed on sprinkler heads?: No

Notes: Office

Deficiency #3 - Photo #1



Date Taken: February 24, 2023

Deficiencies - General Wet System Questions

None

Deficiencies - System #1 / Main Building

None

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FIRE PROTECTION, INC.

Deficiencies - System #2 / Gym

None

Deficiencies - Fire Hydrant #1 / West Side behind Cafeteria

None

Deficiencies - Fire Hydrant #2 / East End of Main Building

None

Deficiencies - N/A

None

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

None

Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

None

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

None

Deficiencies - Inspectors Test Connection

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Deficiency #4

Location: Gym P.E Office
Description: 1" Inspectors Test Valve
Terminates in Smooth Orifice?: No

Notes:

Deficiency #5

Location: Janitor closet back of school
Description: 1" Inspectors Test Valve
Terminates in Smooth Orifice?: No

Notes:

Deficiencies - Valves

None

Deficiencies - Drain Valves

None

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Inspector Signature

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

Inspector Name

Bora Yann
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
153252

Signature

A handwritten signature in black ink, appearing to be 'BY', written in a cursive style.

Date Completed

2023-02-24

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2023-08-30

Property

Indian Springs Elementary
KH

4550 Highpoint Boulevard

Eight Mile AL 36613

Mario Morrisette

Print Date: 2023-08-31

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Luedale MS 39452

IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

Report of Inspection / Test

Annual NFPA 25

INDUSTRIAL-COMMERCIAL



2023-08-30

Property

Indian Springs Elementary
KH

4550 Highpoint Boulevard

Eight Mile AL 36613

Mario Morrisette

Print Date: 2023-08-31

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc

MS-14326-SC AL-3693 LA-F1173 FL-873651-

0001-2007

1209C Highway 613 South

Lucaledale MS 39452

Is the clapper and automatic drain valve in place and properly operating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
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SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

VALVE AREA

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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
---	---	---	---

ALARMS

Is the alarm valve free from physical damage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

MAINTENANCE

Report of Inspection / Test

Annual NFPA 25

INDUSTRIAL-COMMERCIAL



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<p>Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>If sprinklers have been replaced, were they proper replacements?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If conditions were found that required flushing, was flushing of the system conducted?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Was a drain test conducted after opening any closed valve?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Operating stem of all OS&Y valves lubricated, completely closed and reopened?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?</p>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

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Report of Inspection / Test for Asset - Fire Hydrant

Fire Hydrant Information

Hydrant ID	Fire Hydrant
Description	Mueller 5-1/4"
Location	West side by Cafeteria

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

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Hydrant Flow Test

Static Pressure	50	Residual Pressure	30
Pitot Pressure	N/A	Orifice Size	2.5
Orifice Coefficient	0.77	Flow	N/A

Static Hydrant

Static Pressure	50	Residual Pressure	30
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
Building A Wet System	50	30	50	5	Yes	Yes
Building B Wet System	50	35	50	5	Yes	Yes
Gym Wet System	80	50	55	10	Yes	Yes

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
Building A Wet System	@ Riser	1" Inspectors Test Valve	63	Yes	Yes	Yes	Yes	Yes
Gym Wet System	@ Riser	2" Test & Drain Valve	90	Yes	Yes	Yes	Yes	Yes
Building B Wet System	@ Riser	1" Inspectors Test Valve	35	Yes	Yes	Yes	Yes	Yes

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
Building A Wet System	(13) 4" Butterfly Tamper Valve	Exterior Boiler Room West side of Building	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	13
Gym Wet System	(12) 4" Butterfly Tamper Valve	Exterior Riser Room East side of Gym	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	12

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FIRE PROTECTION, INC.

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
Building B Wet System	(13) 4" Butterfly Tamper Valve	Exterior Mech Rm.208A W.of Building	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	13

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
Building A Wet System	2" Aux	Kitchen dry goods	Globe Valve	Yes	Yes
Building A Wet System	Main Drain	@ Riser	Globe Valve	Yes	Yes
Building B Wet System	Main Drain	@ Riser	Globe Valve	Yes	Yes
Gym Wet System	Main Drain	@ Riser	Globe Valve	Yes	Yes

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FIRE PROTECTION, INC.

Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
Building A	@ Riser	1	Globe	Butterfly Tamper Switch			Pass
Building A	@ Riser	1	Flow Switch	Water Flow Switch			Pass
Building B	@ Riser	1	Globe	Butterfly Tamper Switch			Pass
Building B	@ Riser	1	Potter	Water Flow Switch			Pass
Gym	@ Riser	1	Potter	Water Flow Switch			Pass
Gym	@ Riser	1	Globe	Butterfly Tamper Switch			Pass
Buildings A, B & Gym	Exterior of Riser Room	3	FDC	Fire Department Connection			Pass

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Deficiencies - General Questions

Deficiency #1

Are visible sprinklers free of corrosion and physical damage?: No

Notes: Corroded pendent heads throughout kitchen (17)

Deficiency #2

Are there spare sprinklers and a sprinkler wrench?: No

Notes: Main Bldg - needs concealed wrench (globe5606)

Deficiency #3

Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?: No

Notes: Greased heads (6)

Deficiency #4

Are all escutcheon plates installed on sprinkler heads?: No

Notes: Gym entrance

Deficiencies - General Wet System Questions

None

Deficiencies - Building A Wet System

None

Deficiencies - Building B Wet System

None

Deficiencies - Gym Wet System

None

Deficiencies - Fire Hydrant

None

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

None

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Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

None

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

None

Deficiencies - Alarm Pressure Switch

None

Deficiencies - PIV Tamper Switch

None

Deficiencies - Inspectors Test Connection

None

Deficiencies - Valves

None

Deficiencies - Drain Valves

None

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INDUSTRIAL-COMMERCIAL



FIRE PROTECTION, INC.

Recommendations

Gym - yellow

School - purple

B hall - green tagged

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Inspector Signature

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

Inspector Name

Bora Yann
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
153252

Signature

A handwritten signature in black ink, appearing to be 'Bora Yann', written in a cursive style.

Date Completed

2023-08-30

Report of Inspection / Test

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INDUSTRIAL-COMMERCIAL



2023-09-07

Property

J. E. Turner Elementary School
KH

8361 Lott Road
Wilmer AL 36587

Mario Morrisette

Print Date: 2023-09-08

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Are all Identification Signs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Property

J. E. Turner Elementary School
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Mario Morrisette

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Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc
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Is the clapper and automatic drain valve in place and properly operating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
---	---	---	---

SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

VALVE AREA

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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
---	---	---	---

ALARMS

Is the alarm valve free from physical damage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

MAINTENANCE

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<p>Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>If sprinklers have been replaced, were they proper replacements?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If conditions were found that required flushing, was flushing of the system conducted?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Was a drain test conducted after opening any closed valve?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Operating stem of all OS&Y valves lubricated, completely closed and reopened?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Report of Inspection / Test for Asset - Fire Hydrant #1

Fire Hydrant Information

Hydrant ID	#1
Description	AVK
Location	East side

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

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Hydrant Flow Test

Static Pressure	85	Residual Pressure	N/A
Pitot Pressure	30	Orifice Size	2.5
Orifice Coefficient	1.0	Flow	920

Static Hydrant

Static Pressure	85	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	750
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Report of Inspection / Test for Asset - Fire Hydrant #2

Fire Hydrant Information

Hydrant ID	#2
Description	Red Mueller
Location	West Parking Island

QUESTIONS

Is there a hydrant wrench that is available and accessible? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	85	Residual Pressure	N/A
Pitot Pressure	30	Orifice Size	2.5
Orifice Coefficient	1.0	Flow	920

Static Hydrant

Static Pressure	85	Residual Pressure	N/A
-----------------	----	-------------------	-----

Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	750
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MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
Wet System #1	100	60	85	3	Yes	Yes
Wet System #2	100	60	85	3	Yes	Yes

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
Wet System #1	Main control valve	N. Exterior Mech Rm.	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	11
Wet System #2	Control valve	N. Exterior Mech Rm.	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	11

DRAIN VALVES

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System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
Wet System #2	2" main drain	N. Exterior Mech Rm.	Globe Valve	Yes	Yes

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Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
System 1	N. Exterior Mech Rm.	1	System Sensor	Water Flow Switch		Manually tested 18 sec	Pass
System 1	N. Exterior Mech Rm.	1	Grinnell	Butterfly Tamper Switch			Pass
Outside Cafeteria	NE of Bldg.	1	FDC	Fire Department Connection		Broken cap	Fail
System 2	N. Exterior Mech Rm.	1	System Sensor	Water Flow Switch		Manually tested 15sec	Pass
System 2	N. Exterior Mech Rm.	1	Grinnell	Butterfly Tamper Switch			Pass

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Deficiencies - General Questions

Deficiency #1

Are the FDC caps and plugs in place?: No

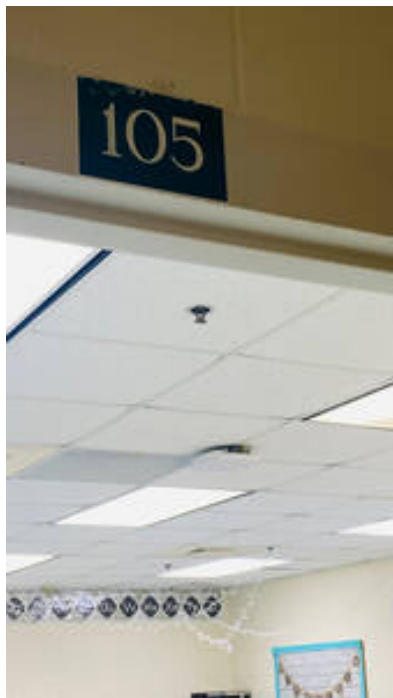
Notes: Caps broken

Deficiency #2

Are visible sprinklers free of corrosion and physical damage?: No

Notes: Class rm. 105 - bent deflector

Deficiency #2 - Photo #1



Date Taken: September 07, 2023

Deficiency #3

Are visible sprinklers free of foreign materials including paint?: No

Notes: Gym Bathroom - painted heads

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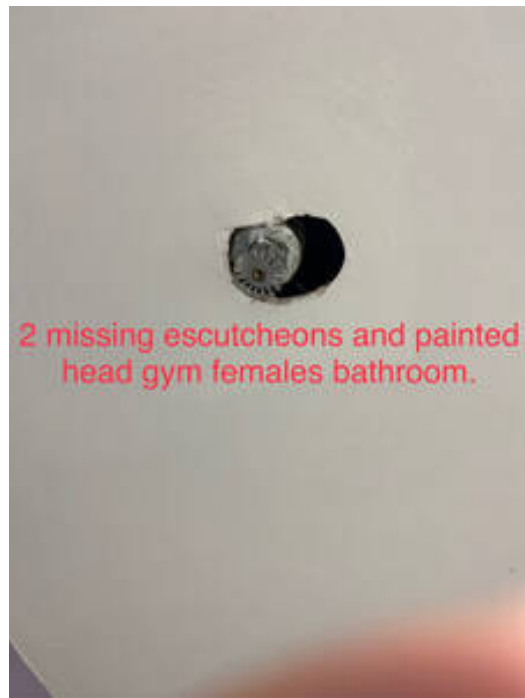
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Deficiency #3 - Photo #1



Date Taken: September 07, 2023

Deficiency #4

Are all escutcheon plates installed on sprinkler heads?: No

Notes: Missing chrome esc @ library, Computer Rm. Gym

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Deficiency #4 - Photo #1



Date Taken: September 07, 2023

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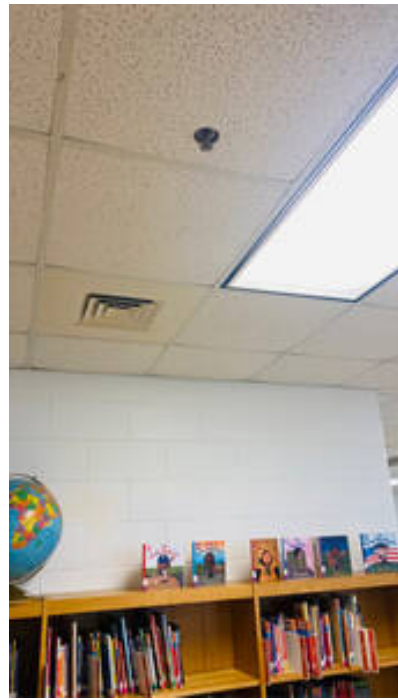
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Deficiency #4 - Photo #2



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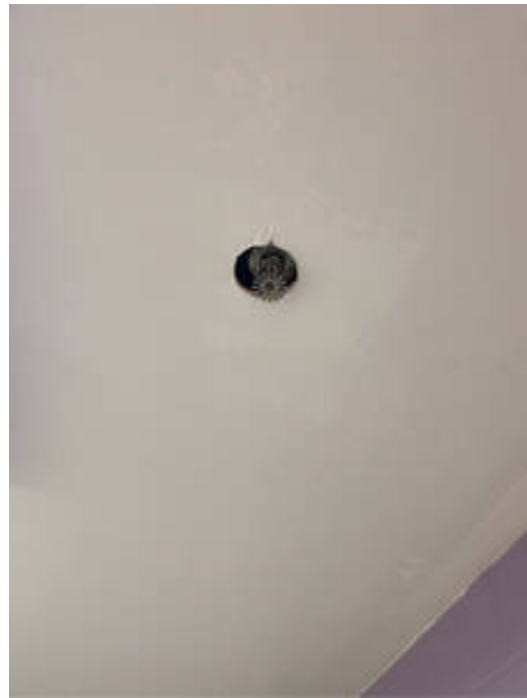
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Deficiency #4 - Photo #3



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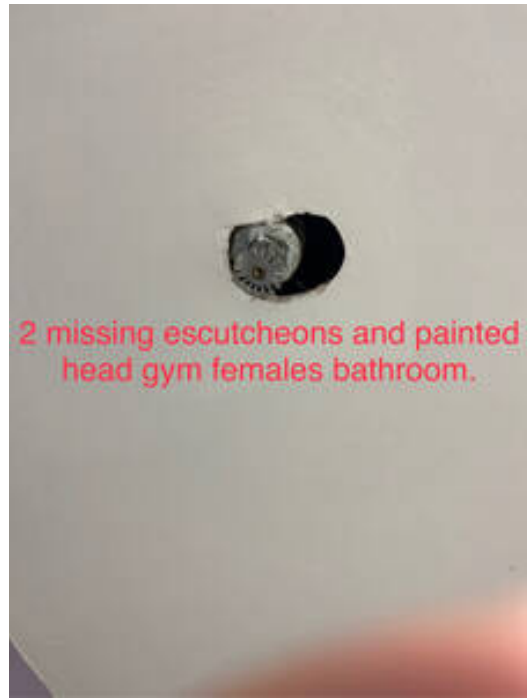
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Deficiency #4 - Photo #4



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Mario Morrisette

Print Date: 2023-09-08

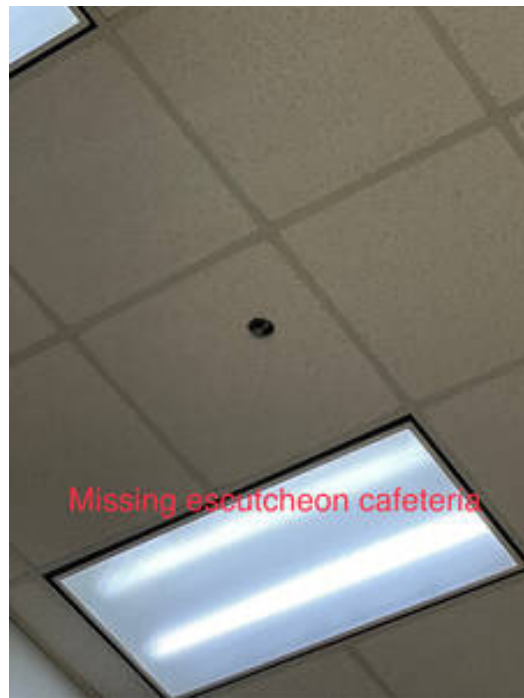
Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc
MS-14326-SC AL-3693 LA-F1173 FL-873651-
0001-2007

1209C Highway 613 South
Luedale MS 39452

Deficiency #4 - Photo #5



Date Taken: September 07, 2023

Deficiencies - General Wet System Questions

None

Deficiencies - Wet System #1

None

Deficiencies - Wet System #2

None

Deficiencies - Fire Hydrant #1

None

Deficiencies - Fire Hydrant #2

None

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

Report of Inspection / Test

Annual NFPA 25

INDUSTRIAL-COMMERCIAL



2023-09-07

Property

J. E. Turner Elementary School
KH

8361 Lott Road
Wilmer AL 36587

Mario Morrisette

Print Date: 2023-09-08

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

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None

Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

None

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

Deficiency #5

Address: Outside Cafeteria

Location: NE of Bldg.

Equipment Type: Fire Department Connection

QTY: 1

Description: Remote Siamese Connection

Status: Fail

Notes:

Deficiencies - Alarm Pressure Switch

None

Deficiencies - PIV Tamper Switch

None

Deficiencies - Ball Valve Tamper

None

Deficiencies - Valves

None

Deficiencies - Drain Valves

None

Report of Inspection / Test

Annual NFPA 25

INDUSTRIAL-COMMERCIAL



2023-09-07

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Inspector Signature

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

Inspector Name

Bora Yann
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
153252

Signature

A handwritten signature in black ink, appearing to read "Bora Yann", is written over a large, faint, light-colored watermark of the same signature.

Date Completed

2023-09-07

Report of Inspection / Test

Annual NFPA 25

INDUSTRIAL-COMMERCIAL



2023-09-11

Property

John Will Elementary School
KH

5750 Summit Avenue

Mobile AL 36608

Mario Morrisette

Print Date: 2023-09-11

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

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IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

Report of Inspection / Test

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INDUSTRIAL-COMMERCIAL



2023-09-11

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John Will Elementary School
KH

5750 Summit Avenue

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Is the clapper and automatic drain valve in place and properly operating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
---	---	---	---

SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

VALVE AREA

Report of Inspection / Test

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INDUSTRIAL-COMMERCIAL



FIRE PROTECTION, INC.

2023-09-11

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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
---	---	---	---

ALARMS

Is the alarm valve free from physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

MAINTENANCE

Report of Inspection / Test

Annual NFPA 25

INDUSTRIAL-COMMERCIAL



2023-09-11

Property

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Mobile AL 36608

Mario Morrisette

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<p>Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>If sprinklers have been replaced, were they proper replacements?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If conditions were found that required flushing, was flushing of the system conducted?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Was a drain test conducted after opening any closed valve?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Operating stem of all OS&Y valves lubricated, completely closed and reopened?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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Water-Based Systems # 153252

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1209C Highway 613 South

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FIRE PROTECTION, INC.

MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
Main Building	45	35	50	3	Yes	Yes
Building C	45	30	50	3	Yes	Yes
New Building	50	30	50	3	Yes	Yes
Gym	50	35	50	3	Yes	Yes

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
Main Building	Kitchen storage	1" Inspectors Test Valve	90	Yes	Yes	Yes	Yes	Yes
Building C	Principal Office	1" Test & Drain	39	Yes	Yes	Yes	Yes	Yes
Gym	N. Exterior Mech Rm. backside of Gym	1" Inspectors Test Valve	23	Yes	Yes	Yes	No	Yes

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
Main Building	Main Control	Dinning Room Storage	OS&Y	3 "	Monitored	Yes	Yes	Yes	Yes	Yes	11
Building C	Mueller OS&Y	Interior Air Handler Room	OS&Y	2-1/2 "	Monitored	Yes	Yes	Yes	Yes	Yes	11
New Building	Control valve	Exterior Mechanical Room	OS&Y	3 "	Monitored And Locked	Yes	Yes	No	Yes	Yes	11
Gym	Control Valve	Gym Storage Room	OS&Y	3 "	Monitored	Yes	Yes	Yes	Yes	Yes	11

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
Main Building	1-1/2" Main Drain	@ Riser	Angle Valve	N/A	Yes
New Building	1-1/2" Main Drain	@ Riser	Angle Valve	N/A	Yes
Gym	1-1/2" Main Drain	@ Riser	Angle Valve	N/A	Yes
Building C	1-1/4" Main Drain	@ Riser	Angle Valve	N/A	Yes

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INDUSTRIAL-COMMERCIAL

The logo for Industrial-Commercial Fire Protection, Inc. (ICFP) features the letters 'ICFP' in a large, bold, yellow font with a red outline. The letters are set against a background of horizontal lines in red and blue.

FIRE PROTECTION, INC.

Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
	@ Backflow X2	2	FDC	Fire Department Connection		Swivels seized on both	Fail
	Main Building	1	Potter	Water Flow Switch			Pass
	Building C	1	Potter	Water Flow Switch			Pass
	New Building	1	System Sensor	Water Flow Switch			Pass
	Main Building	1	Potter	Os&Y Tamper Switch			Pass
	Building C	1	Potter	Os&Y Tamper Switch		Needs adjusting	Pass
	Building C	1	Tyco	Mechanical Water Motor Bell			Pass
	Gym	1	Potter	Water Flow Switch			Pass
	New Building	1	Potter	Os&Y Tamper Switch			Pass
	Gym	1	Potter	Os&Y Tamper Switch			Pass

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FIRE PROTECTION, INC.

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Deficiencies - General Questions

Deficiency #1

Is the FDC swivels and couplings not damaged?: No

Notes: Swivels seized on both FDC

Deficiency #2

Is the visible pipe in good condition with no external corrosion?: No

Notes: Gym ITV pipe is corroded

Deficiency #3

Are there the proper number and type of spare sprinklers?: No

Notes: Main Bldg - none

Deficiency #4

Are visible sprinklers free of foreign materials including paint?: No

Notes: Dusty heads @
School entrance

Report of Inspection / Test

Annual NFPA 25

INDUSTRIAL-COMMERCIAL



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Deficiency #4 - Photo #1



Date Taken: September 11, 2023

Deficiency #5

Are there spare sprinklers and a sprinkler wrench?: No

Notes: Main Bldg - none

Deficiency #6

Are all Identification Signs in place?: No

Notes:

Deficiency #7

Are all escutcheon plates installed on sprinkler heads?: No

Notes: Kitchen missing esc

Report of Inspection / Test

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Deficiency #7 - Photo #1



Date Taken: September 11, 2023

Deficiencies - General Wet System Questions

None

Deficiencies - Main Building

None

Deficiencies - Building C

None

Deficiencies - New Building

None

Deficiencies - Gym

None

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

Report of Inspection / Test

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None

Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

None

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

Deficiency #8

Address

Location: @ Backflow X2

Equipment Type: Fire Department Connection

QTY: 2

Description: Siamese Connection

Status: Fail

Notes:

Deficiencies - Alarm Pressure Switch

None

Deficiencies - PIV Tamper Switch

None

Deficiencies - Inspectors Test Connection

Deficiency #9

Location: N. Exterior Mech Rm. backside of Gym

Model: Globe

Description: 1" Inspectors Test Valve

Signs: No

Notes: No sign

Deficiencies - Valves

Report of Inspection / Test

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FIRE PROTECTION, INC.

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Deficiency #10

Location: Exterior Mechanical Room

Make: Mueller

Valve Type: OS&Y

Size: 3

Description: Control valve

Signs: No

Notes: Missing sign

Deficiencies - Drain Valves

None

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Inspector Signature

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

Inspector Name

Bora Yann
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
153252

Signature

A handwritten signature in black ink, appearing to read 'BY', is written in the signature field.

Date Completed

2023-09-11

Report of Inspection / Test

Annual NFPA 25

2023-09-14

Property

LeFlore High School
KH

700 Donald Street

Mobile AL 36617

Mario Morrisette

Print Date: 2023-09-14

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
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IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are all fire protection systems in service?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the FDC easily accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the FDC check valve drip free?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

Report of Inspection / Test

Annual NFPA 25

2023-09-14

Property

LeFlore High School
KH

700 Donald Street
Mobile AL 36617

Mario Morrisette

Print Date: 2023-09-14

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc
MS-14326-SC AL-3693 LA-F1173 FL-873651-
0001-2007

1209C Highway 613 South
Lucaledale MS 39452

INDUSTRIAL-COMMERCIAL



FIRE PROTECTION, INC.

Is the clapper and automatic drain valve in place and properly operating?

Yes
 No
 NA

Is the FDC identification sign(s) in place?

Yes
 No
 NA

SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?

Yes
 No
 NA

Are visible sprinklers in the proper position: upright, pendent, sidewall?

Yes
 No
 NA

Are visible sprinklers free of corrosion and physical damage?

Yes
 No
 NA

Is there proper clearance below the sprinklers?

Yes
 No
 NA

Are visible sprinklers free of foreign materials including paint?

Yes
 No
 NA

Is there liquid in all visible glass bulb sprinklers?

Yes
 No
 NA

Are there spare sprinklers and a sprinkler wrench?

Yes
 No
 NA

Is the information sign attached and legible?

Yes
 No
 NA

Are all the sprinklers dated 1920 or later?

Yes
 No
 NA

Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?

Yes
 No
 NA

Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?

Yes
 No
 NA

Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?

Yes
 No
 NA

Dry-type sprinklers replaced or successfully sample tested within last 10 years?

Yes
 No
 NA

Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?

Yes
 No
 NA

Is the building fully protected by sprinklers?

Yes
 No
 NA

PIPES

Is the visible pipe in good condition with no external corrosion?

Yes
 No
 NA

Does visible pipe have no mechanical damage or leaks?

Yes
 No
 NA

Does visible pipe have no external loads?

Yes
 No
 NA

Are visible pipe hangers and seismic braces not damaged or loose?

Yes
 No
 NA

Is the pipe through freezers free if any ice blockage?

Yes
 No
 NA

Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)

Yes
 No
 NA

VALVE AREA

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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
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ALARMS

Is the alarm valve free from physical damage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

MAINTENANCE

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<p>Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>If sprinklers have been replaced, were they proper replacements?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If conditions were found that required flushing, was flushing of the system conducted?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Was a drain test conducted after opening any closed valve?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Operating stem of all OS&Y valves lubricated, completely closed and reopened?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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FIRE PROTECTION, INC.

Report of Inspection / Test for Asset - Fire Hydrant #1

Fire Hydrant Information

Hydrant ID	#1
Description	American Darling 5-1/4" B84B
Location	North Parking Lot

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does the hydrant completely shut off?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there no ice or water in the barrel?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

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FIRE PROTECTION, INC.

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Fire Hydrant #2

Fire Hydrant Information

Hydrant ID	#2
Description	American Darling 4" 850B
Location	South Parking Lot

QUESTIONS

Is there a hydrant wrench that is available and accessible? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does the hydrant completely shut off? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did monitor nozzle flowed acceptable water? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there no ice or water in the barrel? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Is the Operating nut not worn, twisted or broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Fire Hydrant #3

Fire Hydrant Information

Hydrant ID	#3
Description	Mueller 5-1/4"
Location	Behind Alethic Facility

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does the hydrant completely shut off?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there no ice or water in the barrel?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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FIRE PROTECTION, INC.

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
Library / Wet System	@ Riser	1" Inspectors Test Valve		Yes	Yes	Yes	Yes	Yes
Office / Wet System	@ Riser	1" Inspectors Test Valve		Yes	Yes	Yes	Yes	Yes
Gym / Wet System	@ Riser	1" Inspectors Test Valve		Yes	Yes	Yes	Yes	Yes
Stage / Wet System	@ Riser	1" Inspectors Test Valve		Yes	Yes	Yes	Yes	Yes
Alethic Facility / Wet System	@ Riser	1" Inspectors Test Valve		Yes	Yes	Yes	Yes	Yes

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
Library / Wet System	Control Valve	North Parking Lot Entrance / Riser Room	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	16
Office / Wet System	Control Valve	North Parking Lot Entrance / Riser Room	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	16
Gym / Wet System	Control Valve	North Parking Lot Entrance / Riser Room	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	16
Stage / Wet System	Control Valve	North Parking Lot Entrance / Riser Room	Butterfly	6 "	Monitored	Yes	Yes	Yes	Yes	Yes	
Alethic Facility / Wet System	Tyco Control Valve	Exterior Riser Room on Backside of Building	Butterfly	2 "	Monitored	Yes	Yes	Yes	Yes	Yes	

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
Alethic Facility / Wet System	1-1/4" Main Drain	@ Riser	Angle Valve	Yes	Yes
Library / Wet System	2" Main Drain	@ Riser	Angle Valve	Yes	Yes
Office / Wet System	2" Main Drain	@ Riser	Angle Valve	Yes	Yes
Gym / Wet System	2" Main Drain	@ Riser	Angle Valve	Yes	Yes
Stage / Wet System	2" Main Drain	@ Riser	Angle Valve	Yes	Yes

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FIRE PROTECTION, INC.

Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
	Alethic Facility Riser	1	Potter	Water Flow Switch			
	Alethic Facility Riser	1	Victaulic	Butterfly Tamper Switch			
	@ Backflow by Street for Alethic Facility Riser	1	FDC	Fire Department Connection			
	Library Riser	1	Potter	Water Flow Switch			
	Library Riser	1	Victaulic	Butterfly Tamper Switch			
	Office Riser	1	Potter	Water Flow Switch			
	Office Riser	1	Victaulic	Butterfly Tamper Switch			
	Gym Riser	1	Potter	Water Flow Switch			
	Gym Riser	1	Victaulic	Butterfly Tamper Switch			
	Stage Riser	1	Potter	Water Flow Switch			
	Stage Riser	1	Kennedy	Butterfly Tamper Switch			
	Exterior of Riser Room North Parking Lot	1	FDC	Fire Department Connection			

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Lucedale MS 39452

Deficiencies - General Questions

None

Deficiencies - General Wet System Questions

None

Deficiencies - Library / Wet System

None

Deficiencies - Office / Wet System

None

Deficiencies - Gym / Wet System

None

Deficiencies - Stage / Wet System

None

Deficiencies - Alethic Facility / Wet System

None

Deficiencies - Fire Hydrant #1

None

Deficiencies - Fire Hydrant #2

None

Deficiencies - Fire Hydrant #3

None

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

None

Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

Report of Inspection / Test

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INDUSTRIAL-COMMERCIAL



2023-09-14

Property

LeFlore High School
KH

700 Donald Street
Mobile AL 36617

Mario Morrisette

Print Date: 2023-09-14

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc
MS-14326-SC AL-3693 LA-F1173 FL-873651-
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None

Deficiencies - OS&Y Tamper Switch

None

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

None

Deficiencies - Alarm Pressure Switch

None

Deficiencies - PIV Tamper Switch

None

Deficiencies - Ball Valve Tamper

None

Deficiencies - Inspectors Test Connection

None

Deficiencies - Valves

None

Deficiencies - Drain Valves

None

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FIRE PROTECTION, INC.

Recommendations

School under renovations

F/A are disabled .

Was told not to inspect by Mario M.

Report of Inspection / Test

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2023-06-27

Property

Leinkauf Elementary School
KH

1410 Monroe Street

Mobile AL 36604

Mario Morrisette

Print Date: 2023-06-27

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IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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FIRE PROTECTION, INC.

Is the clapper and automatic drain valve in place and properly operating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
---	---	---	---

SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

VALVE AREA

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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
---	---	---	---

ALARMS

Is the alarm valve free from physical damage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

MAINTENANCE

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<p>Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>If sprinklers have been replaced, were they proper replacements?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If conditions were found that required flushing, was flushing of the system conducted?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Was a drain test conducted after opening any closed valve?</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
<p>Operating stem of all OS&Y valves lubricated, completely closed and reopened?</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<p>Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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FIRE PROTECTION, INC.

MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
Admin #1 Wet	65	45	65	1	Yes	Yes
Admin #2 Wet	65	45	65	1	Yes	Yes
Upper Campus Wet	70	45	70	1	Yes	N/A

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
Admin #1 Wet	@ Riser	2" MD	9	Yes	No	Yes	Yes	Yes
Admin #2 Wet	Classroom 320 HVAC closet	1" ITV	57	Yes	Yes	Yes	No	Yes
Upper Campus Wet	Basement	2" ball valve	17	Yes	No	Yes	Yes	Yes

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
Admin #1 Wet	Backflow Control #1	Admin Exterior Janitors Closet	OS&Y	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	14
Admin #2 Wet	Muller	Admin Exterior Janitors Closet	Sectional	4 "	Monitored And Locked	Yes	Yes	Yes	Yes	Yes	14
Upper Campus Wet	Backflow Control #1	Front Exterior Basement Entrance	OS&Y	4 "	Monitored And Locked	Yes	Yes	Yes	Yes	Yes	14
Admin #1 Wet	Backflow Control #2	Admin Exterior Janitors Closet	OS&Y	4 "	Monitored And Locked	Yes	Yes	Yes	Yes	Yes	14
Upper Campus Wet	Backflow Control #2	Front Exterior Basement Entrance	OS&Y	4 "	Monitored And Locked	Yes	Yes	Yes	Yes	Yes	14

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
Admin #1 Wet	2" main Drain	Riser	Globe Valve	Yes	Yes

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FIRE PROTECTION, INC.

Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
Admin exterior Janitors Closet	Admin #1	1	Potter	Water Flow Switch			Pass
Admin exterior Janitors Closet	Admin #1	2	Potter	Butterfly Tamper Switch			Pass
Serves Admin 1 & 2	Exterior of bldg	1	FDC	Fire Department Connection			Pass
Admin exterior Janitors Closet	Admin #2	1	Potter	Os&Y Tamper Switch			Pass
Admin exterior Janitors Closet	Admin #2	1	Potter	Water Flow Switch			Pass
Basement	Upper Campus	2	Potter	Os&Y Tamper Switch			Pass
Basement	Upper Campus	0	Potter	Water Flow Switch			Pass
NW Corner of Bldg	Upper Campus	1	FDC	Fire Department Connection			Pass

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Deficiencies - General Questions

Deficiency #1

The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?: No

Notes: Needs ITV added @ Riser (x2)

Electric bell broken

Deficiency #1 - Photo #1



Date Taken: June 27, 2023

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Deficiency #1 - Photo #2



Date Taken: June 27, 2023

Deficiency #2

Is the visible pipe in good condition with no external corrosion?: No

Notes: 6x4 flanged spool is corroded and has prior signs of leakage
1/4 3 way valve corroded / leaking

Report of Inspection / Test

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INDUSTRIAL-COMMERCIAL



FIRE PROTECTION, INC.

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Deficiency #2 - Photo #1



Date Taken: June 27, 2023

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Deficiency #2 - Photo #2



Date Taken: June 27, 2023

Deficiency #3

Does visible pipe have no mechanical damage or leaks?: No

Notes: 6x4 flanged spool is corroded and has prior signs of leakage

1/4" 3-way valve has prior signs of leakage

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Deficiency #3 - Photo #1



Date Taken: June 27, 2023

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Deficiency #3 - Photo #2



Date Taken: June 27, 2023

Deficiency #4

Has an internal investigation of the pipe (remove a flushing connection and a
sprinkler near the end of a branch line) been performed in the last 5 years?
(If no conduct investigation): No

Notes: Last known 5yr was dated 16

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Deficiency #4 - Photo #1



Date Taken: June 27, 2023

Deficiency #5

Are there the proper number and type of spare sprinklers?: No

Notes: Admin -Short 1 on spares

Upper campus - no spare concealed heads

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Deficiency #5 - Photo #1



Date Taken: June 27, 2023

Deficiency #5 - Photo #2



Date Taken: June 27, 2023

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Deficiency #6

Are visible sprinklers free of corrosion and physical damage?: No

Notes: Upper Campus 3rd FI- has corroded pendants on 2p 401

Deficiency #6 - Photo #1



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Deficiency #6 - Photo #2



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Deficiency #6 - Photo #3



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Mario Morrisette

Print Date: 2023-06-27

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc
MS-14326-SC AL-3693 LA-F1173 FL-873651-
0001-2007

1209C Highway 613 South
Lucedale MS 39452

Deficiency #6 - Photo #4



Date Taken: June 27, 2023

Deficiency #7

Are there spare sprinklers and a sprinkler wrench?: No

Notes: Admin - no spare wrench

Upper campus - needs 2 wrenches (concealed & SR)

Deficiency #8

**Fast response sprinklers 20 or more years old replaced or successfully
sample tested within last 10 years?: No**

Notes: Admin 1 & 2 - heads dated 1995 in head cabinet

Upper campus - heads dated 1994-1995

Report of Inspection / Test

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INDUSTRIAL-COMMERCIAL



FIRE PROTECTION, INC.

2023-06-27

Property

Leinkauf Elementary School
KH

1410 Monroe Street
Mobile AL 36604

Mario Morrisette

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NICET LEVEL II - Inspection & Testing of
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0001-2007

1209C Highway 613 South
Lucaledale MS 39452

Deficiency #8 - Photo #1



Date Taken: June 27, 2023

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2023-06-27

Property

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Deficiency #8 - Photo #2



Date Taken: June 27, 2023

Deficiency #9

Is the building fully protected by sprinklers?: No

Notes: Upper campus -kitchen isn't sprinkled

Deficiency #10

Are all escutcheon plates installed on sprinkler heads?: No

Notes: Upper campus missing concealed plates , SR esc
Admin/ office - missing Esc

Report of Inspection / Test

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INDUSTRIAL-COMMERCIAL



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Deficiency #10 - Photo #1



Date Taken: June 27, 2023

Deficiency #10 - Photo #2



Date Taken: June 27, 2023

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FIRE PROTECTION, INC.

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Deficiency #10 - Photo #3



Date Taken: June 27, 2023

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Deficiency #10 - Photo #4



Date Taken: June 27, 2023

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Deficiency #10 - Photo #5



Date Taken: June 27, 2023

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NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc

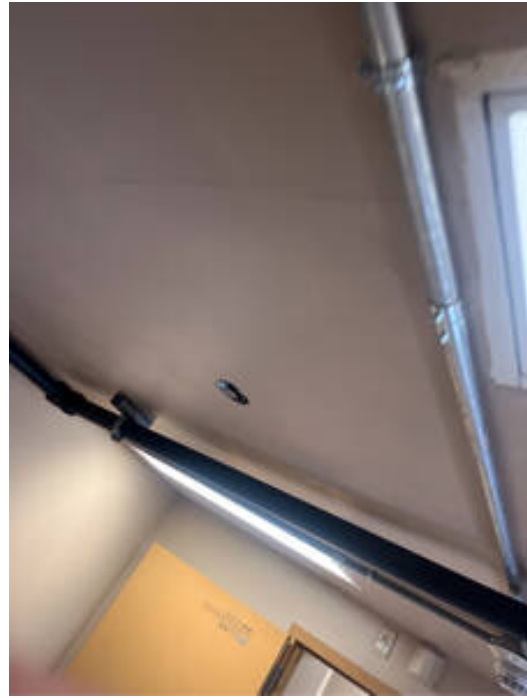
MS-14326-SC AL-3693 LA-F1173 FL-873651-

0001-2007

1209C Highway 613 South

Luedale MS 39452

Deficiency #10 - Photo #6



Date Taken: June 27, 2023

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Luedale MS 39452

Deficiency #10 - Photo #7



Date Taken: June 27, 2023

Deficiencies - General Wet System Questions

None

Deficiencies - Admin #1 Wet

None

Deficiencies - Admin #2 Wet

None

Deficiencies - Upper Campus Wet

None

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

None

Deficiencies - High Pressure Switch

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None

Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

None

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

None

Deficiencies - Alarm Pressure Switch

None

Deficiencies - PIV Tamper Switch

None

Deficiencies - Inspectors Test Connection

Deficiency #11

Location: Classroom 320 HVAC closet

Description: 1" ITV

Signs: No

Notes: No sign

Deficiency #12

Location: @ Riser

Description: 2" MD

Terminates in Smooth Orifice?: No

Notes: Needs ITV added @ riser

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Deficiency #13

Location: Basement

Description: 2" ball valve

Terminates in Smooth Orifice?: No

Notes: Riser needs ITV , Needs orifice

Deficiencies - Valves

None

Deficiencies - Drain Valves

None

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Inspector Signature

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

Inspector Name

Bora Yann
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
153252

Signature

A handwritten signature in black ink, appearing to be 'BY', is written in the signature field.

Date Completed

2023-06-27

Report of Inspection / Test

Annual NFPA 25

2023-04-21

Property

Lott Middle School
KH
17740 Celeste Drive
Cintronnelle AL 36522
Mario Morrisette
Print Date: 2023-04-24

Conducted by: Tony Kittrell
NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 127557
FL Fire Sprinkler Inspector FP118-000244
LA Fire Sprinkler Inspector E22293

Industrial Commercial Fire Protection, Inc
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IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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2023-04-21

Property

Lott Middle School
KH
17740 Celeste Drive
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NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 127557
FL Fire Sprinkler Inspector FP118-000244
LA Fire Sprinkler Inspector E22293

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Is the clapper and automatic drain valve in place and properly operating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
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SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

VALVE AREA

Report of Inspection / Test

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Water-Based Systems # 127557
FL Fire Sprinkler Inspector FP118-000244
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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

DRY VALVE

Are enclosures around valves maintaining a minimum of 40 degrees F?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the gauges on systems without low pressure alarms in good condition and showing normal air and water pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
For freezer systems, gauge near compressor reading the same as gauge near the dry-pipe valve?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are they free from physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are trim valves in appropriate (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there no leakage in the intermediate chamber?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on systems with low pressure alarms in good condition and showing normal air and water pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the dry-pipe valve passed inspection?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Is the priming level correct and has the low air pressure signal passed it's test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the quick opening device passed the test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
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ALARMS

Is the alarm valve free from physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have low temperature alarms passed test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

MAINTENANCE

Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
If sprinklers have been replaced, were they proper replacements?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	If conditions were found that required flushing, was flushing of the system conducted?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Was a drain test conducted after opening any closed valve?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Operating stem of all OS&Y valves lubricated, completely closed and reopened?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are dry-pipe systems kept in dry condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have auxiliary drains been emptied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

Report of Inspection / Test

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INDUSTRIAL-COMMERCIAL



2023-04-21

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- Yes
- No
- NA

Is interior of dry-pipe valves cleaned?

- Yes
- No
- NA

Have low points been drained before freezing weather?

- Yes
- No
- NA

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FIRE PROTECTION, INC.

2023-04-21

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0001-2007

Report of Inspection / Test for System - North building

DRY VALVE

Have automatic air maintenance devices passed test? Yes
 No
 NA

DRY VALVE TRIP TEST

Dry Valve	Size: 6	Year of Mfr.: 2015	Accelerator	Year of Mfr.: N/A		
Make	Model	Serial no.	Make	Model	Serial no.	
TYCO	DPV-1	0029	N/A	N/A	N/A	
	Time to Trip thru test pipe	Water Pressure	Air Pressure	Trip point air pressure	Time water reached test outlet	Alarm Operated
Without Accelerator	N/A	N/A	N/A	N/A	N/A	N/A
With Accelerator	N/A	N/A	N/A	N/A	N/A	N/A

DRY VALVE TRIP TEST (cont)

Were results comparable to previous test? Yes
 No
 NA

Has it passed air leakage test? Yes
 No
 NA

Report of Inspection / Test for Asset - Fire Hydrant #1

Fire Hydrant Information

Hydrant ID	#1
Description	MH Anniston
Location	North

QUESTIONS

Is there a hydrant wrench that is available and accessible? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

Report of Inspection / Test

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INDUSTRIAL-COMMERCIAL



FIRE PROTECTION, INC.

2023-04-21

Property

Lott Middle School
KH
17740 Celeste Drive
Cintronnelle AL 36522
Mario Morrisette
Print Date: 2023-04-24

Conducted by: Tony Kittrell
NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 127557
FL Fire Sprinkler Inspector FP118-000244
LA Fire Sprinkler Inspector E22293

Industrial Commercial Fire Protection, Inc
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Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Fire Hydrant #2

Fire Hydrant Information

Hydrant ID	#2
Description	Mueller

Report of Inspection / Test

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FIRE PROTECTION, INC.

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Location

Front @ road.

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flow acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

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NICET LEVEL II - Inspection & Testing of
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Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Fire Hydrant #3

Fire Hydrant Information

Hydrant ID	#3
Description	MH Anniston
Location	South

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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NICET LEVEL II - Inspection & Testing of
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Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
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Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
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Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
South bldg.	60	40	45	2	Yes	Yes
North bldg.	50	35	45	3	Yes	Yes
Gym	65	35	50	4	Yes	Yes
Attic	65	35	50	4	Yes	Yes

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
South bldg.	Riser	1" ITV	2	Yes	Yes	Yes	Yes	Yes
North bldg.	Riser	1" ITV		Yes	Yes	Yes	Yes	Yes
Gym	Riser. / Boiler Room	1"ITV	34	Yes	Yes	Yes	Yes	Yes
Attic	Riser / Boiler Room	1" ITV	39	Yes	Yes	Yes	Yes	Yes

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INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
North building	Room 113	1"ITV	2	Yes	Yes	Yes	Yes	Yes

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
South bldg.	Tyco control valve	Riser room South.	Butterfly	6 "	Monitored	Yes	Yes	Yes	Yes	N/A	10
North bldg.	Tyco control valve	Riser room North.	Butterfly	6 "	Monitored	Yes	Yes	Yes	Yes	N/A	9
Gym	Gruvlock	Boiler room / Gym System	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	N/A	10
Attic	Gruvlock	Boiler Room / Attic System	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	N/A	10

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
Gym	2 angle valve	Riser	Globe Valve	Yes	Yes
Attic	2 angle valve	Riser	Globe Valve	Yes	Yes
South bldg.	2" angle valve	Riser	Globe Valve	Yes	Yes
North bldg.	2"angle valve	Riser	Globe Valve	Yes	Yes
South bldg.	Angle vavle	Riser	Globe Valve	Yes	Yes

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Lott Middle School

KH

17740 Celeste Drive

Cintronnelle AL 36522

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NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 127557

FL Fire Sprinkler Inspector FP118-000244

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FIRE PROTECTION, INC.

Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
	Attic System	1	Potter	Water Flow Switch			Pass
Boiler Room	Gym System	1	Potter	Water Flow Switch			Pass
Boiler Room	North Bldg	1	Gym System	Butterfly Tamper Switch			Pass
Boiler Room	North bldg.	1	Attic System Control valve	Butterfly Tamper Switch			Pass
	North parking lot	1	FDC	Fire Department Connection			Pass
	Boiler Room / Attic	2	Potter	Water Flow Switch	Noncritical		Pass
	Riser room	1		Butterfly Tamper Switch			Pass
	North Classroom Wing	2	Potter	High Pressure Switch		Done through alarm line.	Pass
	North Classroom Wing	2	Potter	Low Air Pressure Switch		Done manually.	Pass
	North Classroom Wing	1	Tyco	Butterfly Tamper Switch			Pass
	South Bldg	1	Potter	Low Air Pressure Switch		Done manually.	Pass
	South Bldg	1	Potter	Alarm Pressure Switch		Done through alarm line.	Pass
	South Bldg	1	Tyco	Butterfly Tamper Switch			Pass

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Property

Lott Middle School
KH
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Cintronele AL 36522
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Water-Based Systems # 127557
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Questions with Photos and Notes

- Is the FDC plainly visible?

Yes

Notes:



- Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)

Yes

Notes:

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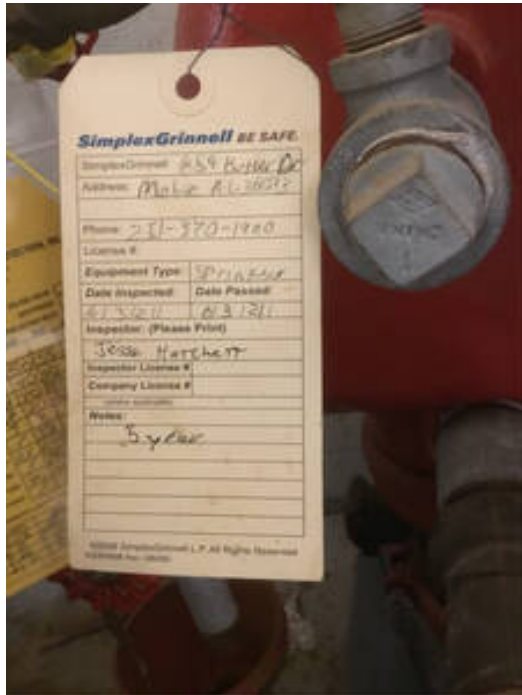
Property

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North bldg. - Record initial static pressure

50

Notes:

Did not trip due to inaccessibility.

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South bldg. - Record initial static pressure

60

Notes:

Did not trip due to inaccessibility.

ITV - 1" ITV Riser

Notes:

Done through alarm line.

ITV - 1"ITV Room 113

Notes:

Done through alarm line.

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Deficiencies - General Questions

Deficiency #1

Are there spare sprinklers and a sprinkler wrench?: No

Notes:

Deficiency #1 - Photo #1



Date Taken: April 21, 2023
Comments: No concealed head wrench.

Deficiencies - General Wet System Questions

None

Deficiencies - General Dry System Questions

Deficiency #2

Has the dry-pipe valve passed inspection?: No

Notes: Dry valve inaccessible.

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Deficiency #3

Is interior of dry-pipe valves cleaned?: No

Notes: Inaccessible.

Deficiencies - South bldg.

None

Deficiencies - North bldg.

None

Deficiencies - Gym

None

Deficiencies - Attic

None

Deficiencies - North building

None

Deficiencies - Fire Hydrant #1

Deficiency #4

Is there a hydrant wrench that is available and accessible?: No

Notes:

Deficiencies - Fire Hydrant #2

Deficiency #5

Is there a hydrant wrench that is available and accessible?: No

Notes:

Deficiency #6

Is the Road box and shutoff valve visible and accessible?: No

Notes: Could not locate.

Deficiencies - Fire Hydrant #3

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Deficiency #7

Is there a hydrant wrench that is available and accessible?: No

Notes:

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

None

Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

None

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

None

Deficiencies - Alarm Pressure Switch

None

Deficiencies - PIV Tamper Switch

None

Deficiencies - Inspectors Test Connection

None

Deficiencies - Valves

None

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FIRE PROTECTION, INC.

Deficiencies - Drain Valves

None

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Inspector Signature

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

Inspector Name

Tony Kittrell
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
127557
FL Fire Sprinkler
Inspector FP118-000244
LA Fire Sprinkler
Inspector E22293

Signature

A handwritten signature in black ink that reads 'Tony Kittrell'. The signature is written in a cursive style with a long horizontal stroke at the end.

Date Completed

2023-04-21

Report of Inspection / Test

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2023-07-27

Property

Maintenance Department
KH

1200 East Linwood Drive

Mobile AL 36605

Mario Morrisette

Print Date: 2023-07-28

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc

MS-14326-SC AL-3693 LA-F1173 FL-873651-

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1209C Highway 613 South

Lucaledale MS 39452

IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Building Occupancy?	Maintenan ce Facility
Are all Identification Signs in place?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the FDC easily accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the FDC check valve drip free?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

Report of Inspection / Test

Annual NFPA 25

2023-07-27

Property

Maintenance Department
KH

1200 East Linwood Drive

Mobile AL 36605

Mario Morrisette

Print Date: 2023-07-28

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc

MS-14326-SC AL-3693 LA-F1173 FL-873651-

0001-2007

1209C Highway 613 South

Lucaledale MS 39452

INDUSTRIAL-COMMERCIAL



FIRE PROTECTION, INC.

Is the clapper and automatic drain valve in place and properly operating?

Yes
 No
 NA

Is the FDC identification sign(s) in place?

Yes
 No
 NA

SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?

Yes
 No
 NA

Are visible sprinklers in the proper position: upright, pendent, sidewall?

Yes
 No
 NA

Are visible sprinklers free of corrosion and physical damage?

Yes
 No
 NA

Is there proper clearance below the sprinklers?

Yes
 No
 NA

Are visible sprinklers free of foreign materials including paint?

Yes
 No
 NA

Is there liquid in all visible glass bulb sprinklers?

Yes
 No
 NA

Are there spare sprinklers and a sprinkler wrench?

Yes
 No
 NA

Is the information sign attached and legible?

Yes
 No
 NA

Are all the sprinklers dated 1920 or later?

Yes
 No
 NA

Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?

Yes
 No
 NA

Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?

Yes
 No
 NA

Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?

Yes
 No
 NA

Dry-type sprinklers replaced or successfully sample tested within last 10 years?

Yes
 No
 NA

Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?

Yes
 No
 NA

Is the building fully protected by sprinklers?

Yes
 No
 NA

PIPES

Is the visible pipe in good condition with no external corrosion?

Yes
 No
 NA

Does visible pipe have no mechanical damage or leaks?

Yes
 No
 NA

Does visible pipe have no external loads?

Yes
 No
 NA

Are visible pipe hangers and seismic braces not damaged or loose?

Yes
 No
 NA

Is the pipe through freezers free if any ice blockage?

Yes
 No
 NA

Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)

Yes
 No
 NA

VALVE AREA

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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
---	---	---	---

ALARMS

Is the alarm valve free from physical damage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

MAINTENANCE

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<p>Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>If sprinklers have been replaced, were they proper replacements?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If conditions were found that required flushing, was flushing of the system conducted?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Was a drain test conducted after opening any closed valve?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Operating stem of all OS&Y valves lubricated, completely closed and reopened?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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FIRE PROTECTION, INC.

MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
System #1	50	N/A	N/A	N/A	No	Yes

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
System #1	2" control valve	Carpenter shop	Ball	2 "	Not Applicable	Yes	No	Yes	No	Yes	

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Deficiencies - General Questions

Deficiency #1

Has the system remained in service without modification since the last inspection?: No

Notes: System is Valved off

Deficiency #1 - Photo #1



Date Taken: July 27, 2023

Deficiency #2

Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?: No

Notes:

Deficiency #3

Is the visible pipe in good condition with no external corrosion?: No

Notes:

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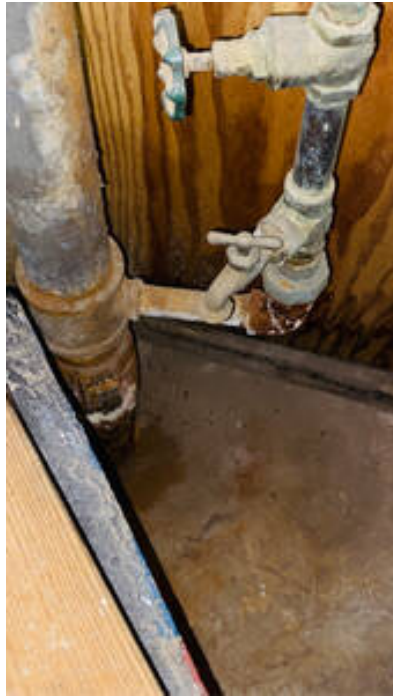
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ICFP

FIRE PROTECTION, INC.

Deficiency #3 - Photo #1



Date Taken: July 27, 2023

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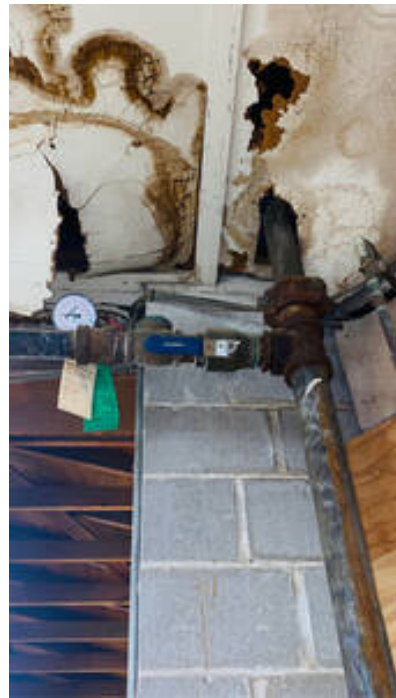
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Deficiency #3 - Photo #2



Date Taken: July 27, 2023

Deficiency #4

Are visible pipe hangers and seismic braces not damaged or loose?: No

Notes:

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Deficiency #4 - Photo #1



Date Taken: July 27, 2023

Deficiency #5

Are there the proper number and type of spare sprinklers?: No

Notes:

Deficiency #6

Are visible sprinklers free of foreign materials including paint?: No

Notes: Bag needs changing

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Deficiency #6 - Photo #1



Date Taken: July 27, 2023

Deficiency #7

Are there spare sprinklers and a sprinkler wrench?: No

Notes:

Deficiency #8

Are control valves properly sealed and/or supervised?: No

Notes:

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FIRE PROTECTION, INC.

Deficiency #8 - Photo #1



Date Taken: July 27, 2023

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Industrial Commercial Fire Protection, Inc

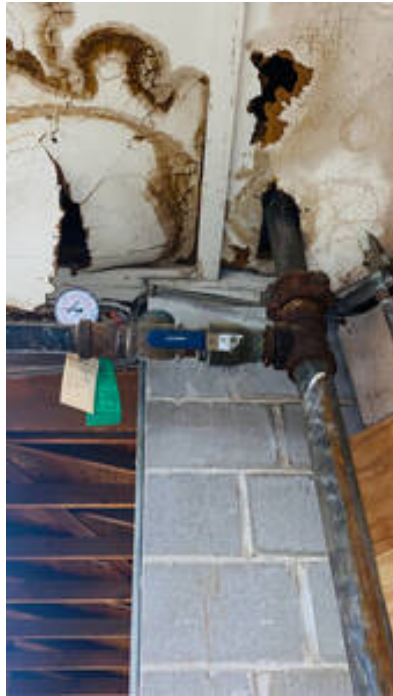
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Deficiency #8 - Photo #2



Date Taken: July 27, 2023

Deficiency #9

Is the building fully protected by sprinklers?: No

Notes:

Deficiency #10

Are all Identification Signs in place?: No

Notes:

Deficiencies - General Wet System Questions

None

Deficiencies - System #1

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Deficiency #11

Sprinkler Type: Wet

Is flow observed?: No

Notes: No drain valve

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

None

Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

None

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

None

Deficiencies - Alarm Pressure Switch

None

Deficiencies - PIV Tamper Switch

None

Deficiencies - Valves

Report of Inspection / Test

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FIRE PROTECTION, INC.

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Deficiency #12

Location: Carpenter shop
Valve Type: ball
Size: 2
Description: 2" control valve
Easily Accessible?: No
Exercised?: No

Notes: 10' AFF , materials in front

Report of Inspection / Test

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Maintenance Department
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The logo for Industrial-Commercial Fire Protection, Inc. features the letters 'ICFP' in a large, bold, yellow font with a red-to-orange gradient. The letters are outlined in black and set against a white background with a thin red horizontal line above and below them.

FIRE PROTECTION, INC.

Recommendations

System purple tagged

Report of Inspection / Test

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Inspector Signature

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

Inspector Name

Bora Yann
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
153252

Signature

A handwritten signature in black ink, appearing to be 'Bora Yann', written in a cursive style.

Date Completed

2023-07-27

Report of Inspection / Test

Annual NFPA 25

2023-06-23

Property

Maryvale Elementary School
KH

1901 North Maryvale Street
Mobile AL 36605

Mario Morrisette

Print Date: 2023-06-23

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

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FIRE PROTECTION, INC.

IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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2023-06-23

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Maryvale Elementary School
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Is the clapper and automatic drain valve in place and properly operating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
---	---	---	---

SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

VALVE AREA

Report of Inspection / Test

Annual NFPA 25

INDUSTRIAL-COMMERCIAL



2023-06-23

Property

Maryvale Elementary School
KH

1901 North Maryvale Street

Mobile AL 36605

Mario Morrisette

Print Date: 2023-06-23

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc

MS-14326-SC AL-3693 LA-F1173 FL-873651-

0001-2007

1209C Highway 613 South

Lucedale MS 39452

Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
---	---	---	---

ALARMS

Is the alarm valve free from physical damage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

MAINTENANCE

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<p>Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>If sprinklers have been replaced, were they proper replacements?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If conditions were found that required flushing, was flushing of the system conducted?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Was a drain test conducted after opening any closed valve?</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
<p>Operating stem of all OS&Y valves lubricated, completely closed and reopened?</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<p>Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?</p>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

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FIRE PROTECTION, INC.

2023-06-23

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Report of Inspection / Test for Asset - Fire Hydrant #1

Fire Hydrant Information

Hydrant ID	#1
Description	AVK
Location	Back of cafeteria

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

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Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	75	Residual Pressure	54
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
Main bldg-A	75	45	90	1	Yes	Yes
300 bldg. - B	75	45	90	1	Yes	Yes
Hall 4	55	50	70	1	Yes	Yes

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
Main bldg-A	Classroom 106	1" Ball valve	45	Yes	No	No	No	Yes
300 bldg. - B	S. End Janitors Closet	1" ball	1:02	Yes	Yes	Yes	Yes	Yes
Hall 4	W. Exterior Mech Rm.	@ riser	56	Yes	Yes	Yes	Yes	Yes

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
Main bldg-A	Kennedy control valve	Main Bldg E. Exterior Mech Rm.	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	10
300 bldg. - B	Kennedy Control valve	Main Bldg E. Exterior Mech Rm.	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	10
Hall 4	Kennedy	W. Exterior Mech Rm.	OS&Y	4 "	Monitored And Locked	Yes	Yes	Yes	Yes	Yes	13

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FIRE PROTECTION, INC.

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
Main bldg-A	Viking check	Main Bldg E. Exterior Mech Rm.	Riser Check Valve	4 "	Not Applicable	Yes	Yes	Yes	Yes	N/A	
300 bldg. - B	Viking check	Main Bldg E. Exterior Mech Rm.	Riser Check Valve	4 "	Not Applicable	Yes	Yes	Yes	Yes	N/A	

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
Hall 4	1" Test & Drain	Hall 4 W. Exterior Mechanical	Globe Valve	Yes	Yes
Main bldg-A	2" main Drain	Main Bldg E. Exterior Mechanical	Globe Valve	Yes	Yes
300 bldg. - B	2" main Drain	Main Bldg E. Exterior Mechanical	Globe Valve	Yes	Yes

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Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
@Street Backflow	Bordeaux Dr.	2	Potter	Os&Y Tamper Switch			Pass
Serves Main Bldg / Bldg B	Cafeteria parking lot	1	FDC	Fire Department Connection			Pass
Bldg B	E. Exterior Mechanical	1	Potter	Water Flow Switch			Pass
Main Bldg	W. Exterior Mech Rm.	1	Potter	Water Flow Switch			Pass
B Bldg	E. Exterior Mechanical	1	Built In	Butterfly Tamper Switch			Pass
Main Bldg	E. Exterior Mechanical	1		Butterfly Tamper Switch			Pass
Hall 4	W. Exterior Mech Rm.	1	Potter	Os&Y Tamper Switch	Noncritical		Pass
Hall 4	W. ExteriorMech Rm.	1	Potter	Water Flow Switch	Noncritical		Pass
Serves Hall 4	N. maryvale street	1	FDC	Fire Department Connection			Pass

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Deficiencies - General Questions

Deficiency #1

Are there the proper number and type of spare sprinklers?: No

Notes: Main Bldg - lacking spares

Deficiency #2

Are visible sprinklers free of corrosion and physical damage?: No

Notes: Main Bldg - corroded heads in kitchen

Deficiency #2 - Photo #1



Date Taken: June 23, 2023

19 corroded/
dusted 1/2 in qr
155 pendent

Deficiency #3

Are visible sprinklers free of foreign materials including paint?: No

Notes: Cafeteria- dusty heads

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Deficiency #3 - Photo #1



Date Taken: June 23, 2023

Deficiency #3 - Photo #2



Date Taken: June 23, 2023

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Deficiency #3 - Photo #3

Entrance to boys, bathroom, missing
plate, and sheet rock mud
on the reflector 1/2 in crome



Date Taken: June 23, 2023

Deficiency #4

Sprinklers and spray nozzles protecting commercial cooking equipment and
ventilating systems replaced except for bulb-type which show no signs of
grease buildup?: No

Notes: Greased & Corroded heads in kitchen

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Deficiency #4 - Photo #1



19 corroded/
dusted 1/2 in qr
155 pendent

Date Taken: June 23, 2023

Deficiency #5

Are all escutcheon plates installed on sprinkler heads?: No

Notes: Bldg B 300 - missing esc

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FIRE PROTECTION, INC.

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Deficiency #5 - Photo #1



Date Taken: June 23, 2023

Deficiencies - General Wet System Questions

None

Deficiencies - Main bldg-A

None

Deficiencies - 300 bldg. - B

None

Deficiencies - Hall 4

None

Deficiencies - Fire Hydrant #1

None

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

None

Deficiencies - High Pressure Switch

None

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Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

None

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

None

Deficiencies - Inspectors Test Connection

Deficiency #6

Location: Classroom 106

Description: 1" Ball valve

Terminates in Smooth Orifice?: No

Easily Accessible?: No

Signs: No

Notes: Filing cabinet blocking valve , missing sign , needs 1x1/2 bushing w/ orifice

Deficiencies - Valves

None

Deficiencies - Drain Valves

None

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FIRE PROTECTION, INC.

Recommendations

Main Bldg - yellow

Bldg B - yellow

Hall 4 - green

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Inspector Signature

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

Inspector Name

Bora Yann
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
153252

Signature

A handwritten signature in black ink, appearing to be 'BY', written in a cursive style.

Date Completed

2023-06-23

Report of Inspection / Test

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2023-04-21

Property

McDavid-Jones Elementary

KH

16250 Hwy 45 South

Cintronnelle AL 36522

Mario Morrisette

Print Date: 2023-04-24

Conducted by: Tony Kittrell

NICET LEVEL II - Inspection & Testing of

Water-Based Systems # 127557

FL Fire Sprinkler Inspector FP118-000244

LA Fire Sprinkler Inspector E22293

Industrial Commercial Fire Protection, Inc

MS-14326-SC AL-3693 LA-F1173 FL-873651-

0001-2007

IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Cintronnelle AL 36522

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Print Date: 2023-04-24

Conducted by: Tony Kittrell

NICET LEVEL II - Inspection & Testing of

Water-Based Systems # 127557

FL Fire Sprinkler Inspector FP118-000244

LA Fire Sprinkler Inspector E22293

Industrial Commercial Fire Protection, Inc

MS-14326-SC AL-3693 LA-F1173 FL-873651-

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Is the clapper and automatic drain valve in place and properly operating?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
---	--	---	---

SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

VALVE AREA

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FIRE PROTECTION, INC.

2023-04-21

Property

McDavid-Jones Elementary

KH

16250 Hwy 45 South

Cintronnelle AL 36522

Mario Morrisette

Print Date: 2023-04-24

Conducted by: Tony Kittrell

NICET LEVEL II - Inspection & Testing of

Water-Based Systems # 127557

FL Fire Sprinkler Inspector FP118-000244

LA Fire Sprinkler Inspector E22293

Industrial Commercial Fire Protection, Inc

MS-14326-SC AL-3693 LA-F1173 FL-873651-

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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
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ALARMS

Is the alarm valve free from physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

MAINTENANCE

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<p>Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>If sprinklers have been replaced, were they proper replacements?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If conditions were found that required flushing, was flushing of the system conducted?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Was a drain test conducted after opening any closed valve?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Operating stem of all OS&Y valves lubricated, completely closed and reopened?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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Report of Inspection / Test for Asset - Fire Hydrant #1

Fire Hydrant Information

Hydrant ID	#1
Description	Mueller
Location	Front door

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

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Property

McDavid-Jones Elementary
KH
16250 Hwy 45 South
Cintronnelle AL 36522
Mario Morrisette
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Conducted by: Tony Kittrell

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 127557
FL Fire Sprinkler Inspector FP118-000244
LA Fire Sprinkler Inspector E22293

Industrial Commercial Fire Protection, Inc
MS-14326-SC AL-3693 LA-F1173 FL-873651-
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Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Fire Hydrant #2

Fire Hydrant Information

Hydrant ID	#2
Description	Mueller
Location	Gym

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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NICET LEVEL II - Inspection & Testing of
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Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Fire Hydrant #3

Fire Hydrant Information

Hydrant ID	#3
Description	Mueller
Location	Bus parking

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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FIRE PROTECTION, INC.

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Water-Based Systems # 127557

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Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Fire Hydrant #4

Fire Hydrant Information

Description	Muller 5 1/4
Location	North east corner

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Water-Based Systems # 127557

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QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

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Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
System Boiler Room	60	55	65	1	Yes	Yes
Gym System	60	45	65	1	Yes	Yes
System #1 North	65	40	70	1	Yes	Yes
System #2 North	65	40	70	2	Yes	Yes
System #1 South West	60	45	65	3	Yes	Yes
System #2 South West	60	45	65	3	Yes	Yes

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
System Boiler Room	Riser	1" ITV	48	Yes	Yes	Yes	Yes	Yes
Gym System	West Side of Cafeteria, outside.	1" ITV	28	Yes	Yes	Yes	No	Yes
System #1 North	Riser	1" ITV	43	Yes	Yes	Yes	Yes	Yes
System #2 North	Riser	1" ITV	36	Yes	Yes	Yes	No	Yes
System #1 South West	E-hall storage. Near boiler rm.	1" ITV	36	Yes	Yes	Yes	No	Yes
System #2 South West	Done manually. Could not locate ITV.	1" ITV	26	Yes	N/A	Yes	N/A	Yes

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
System #2 North	Central control valve	Riser room	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	N/A	7.5

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FIRE PROTECTION, INC.

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
Gym System	Tyco control valve	Riser room	Butterfly	3 "	Monitored	Yes	Yes	Yes	Yes	N/A	10
System #1 North	Central control valve	Riser room	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	N/A	7.5
System Boiler Room	Victaulic 708W	Riser room	Butterfly	2-1/2 "	Monitored	Yes	Yes	Yes	Yes	N/A	16
System #1 South West	Victaulic control valve	Riser room . N.W. corner of South bldg..	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	N/A	16
System #2 South West	Victaulic control valve	Riser room . N.W. corner of South bldg.	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	N/A	16
System #1 South West	Control Valve	Southwest Riser Room	Butterfly	6 "	Monitored	Yes	Yes	Yes	Yes	N/A	16

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
System Boiler Room	1-1/4" main Drain	Riser	Globe Valve	Yes	Yes
Gym System	1-1/4" main Drain	Riser	Globe Valve	Yes	Yes
System #1 North	2" main Drain	Riser	Globe Valve	Yes	Yes
System #2 North	2" main Drain	Riser		Yes	Yes
System #1 South West	2" main Drain	Riser	Globe Valve	Yes	Yes
System #2 South West	2" main Drain	Riser	Globe Valve	Yes	Yes

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Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
	Boiler room	1	Potter	Water Flow Switch			Pass
	Gym	1	Potter	Water Flow Switch			Pass
	System #1 North	1	Potter	Water Flow Switch			Pass
	System #2 North	1	Potter	Water Flow Switch			Pass
	System #1 SW	1	Potter	Water Flow Switch			Pass
	System #2 SW	1	Potter	Water Flow Switch			Pass
	Boiler room	1	Potter	Butterfly Tamper Switch			
	Gym	1		Butterfly Tamper Switch			Pass
	System #1 North	1		Butterfly Tamper Switch			Pass
	System #2 North	1		Butterfly Tamper Switch			Pass
	System #1 SW	1		Butterfly Tamper Switch			Pass
	System #2 SW	1		Butterfly Tamper Switch			Pass
		1	FDC	Fire Department Connection			

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Questions with Photos and Notes

- Are the gauges on system in good condition and showing normal water supply pressure?

Yes

Notes:

2021

- Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?

Yes

Notes:

Not locked or supervised.



- Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)

Yes

Notes:

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System #1 South West - Record initial static pressure

60

Notes:

Main drain done at system #2. End of header.

Valve - Victaulic 708W Riser room

Notes:

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FDC - Fire Department Connection

Notes:

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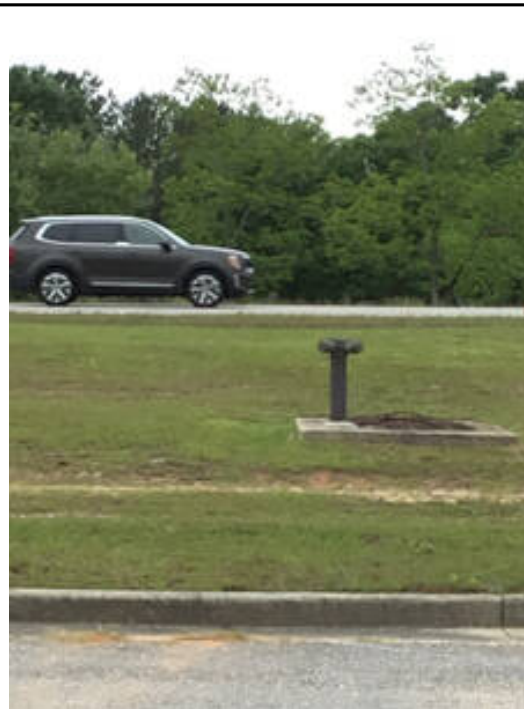
Deficiencies - General Questions

Deficiency #1

Is the FDC identification sign(s) in place?: No

Notes:

Deficiency #1 - Photo #1



Date Taken: April 21, 2023

Deficiency #2

Are visible sprinklers free of corrosion and physical damage?: No

Notes:

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Water-Based Systems # 127557

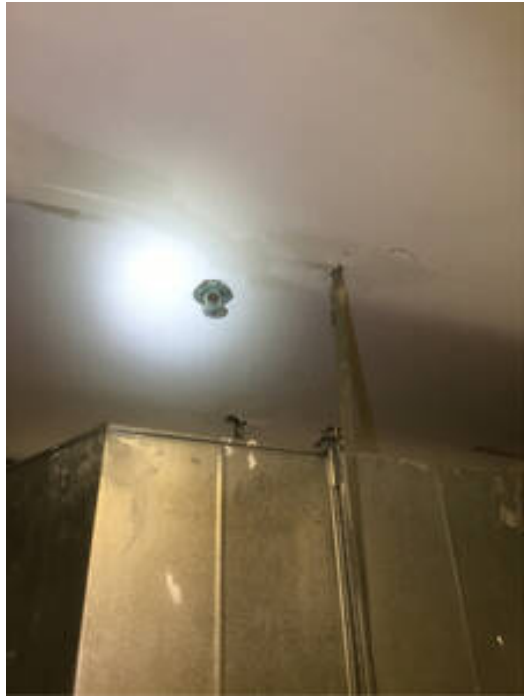
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Deficiency #2 - Photo #1



Date Taken: April 21, 2023

Comments: North center mech rm. South bldg.
Corroded.

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Deficiency #2 - Photo #2



Date Taken: April 21, 2023

Comments: Kitchen/serving area: approximately 40
loaded corroded heads.

Deficiency #3

Are visible sprinklers free of foreign materials including paint?: No

Notes:

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Deficiency #3 - Photo #1



Date Taken: April 21, 2023

Comments: Mech rm behind kitchen: Sheetrock mud & missing esc.

Deficiency #4

Are there spare sprinklers and a sprinkler wrench?: No

Notes:

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Deficiency #4 - Photo #1



Date Taken: April 21, 2023

Comments: S.W. Bldg.

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Deficiency #4 - Photo #2



Date Taken: April 21, 2023

Comments: Gym. No spare heads or head wrench.

Deficiency #5

Is the information sign attached and legible?: No

Notes:

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Deficiency #5 - Photo #1



Date Taken: April 21, 2023

Deficiency #6

Are all Identification Signs in place?: No

Notes:

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Deficiency #6 - Photo #1



Date Taken: April 21, 2023

Deficiency #7

Are all escutcheon plates installed on sprinkler heads?: No

Notes:

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Deficiency #7 - Photo #1



Date Taken: April 21, 2023
Comments: N.E. Storage rm.

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Deficiency #7 - Photo #2



Date Taken: April 21, 2023
Comments: S.W. Bldg. riser rm.

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Deficiency #7 - Photo #3



Date Taken: April 21, 2023

Comments: Janitors closet D-hall. Viking .

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Deficiency #7 - Photo #4



Date Taken: April 21, 2023

Comments: Gym. West mech rm. Viking.

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Deficiency #7 - Photo #5



Date Taken: April 21, 2023

Comments: Gym. Girls bathroom. Drop too short. (X2)

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Deficiency #7 - Photo #6



Date Taken: April 21, 2023

Comments: Cafeteria: missing escutcheons (x4)

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Deficiency #7 - Photo #7



Date Taken: April 21, 2023

Comments: Kitchen: 4 dry pendants out of date. 1999.

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Deficiency #7 - Photo #8



Date Taken: April 21, 2023

Comments: North bldg. S.E. mech rm. escutcheon.

Deficiencies - General Wet System Questions

None

Deficiencies - System Boiler Room

None

Deficiencies - Gym System

None

Deficiencies - System #1 North

None

Deficiencies - System #2 North

None

Deficiencies - System #1 South West

None

Deficiencies - System #2 South West

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FIRE PROTECTION, INC.

None

Deficiencies - Fire Hydrant #1

Deficiency #8

Is there a hydrant wrench that is available and accessible?: No

Notes:

Deficiency #9

Is the Road box and shutoff valve visible and accessible?: No

Notes: Could not locate.

Deficiencies - Fire Hydrant #2

Deficiency #10

Is there a hydrant wrench that is available and accessible?: No

Notes:

Deficiency #11

Is the Road box and shutoff valve visible and accessible?: No

Notes: Could not locate.

Deficiencies - Fire Hydrant #3

Deficiency #12

Is there a hydrant wrench that is available and accessible?: No

Notes:

Deficiency #13

Is the Road box and shutoff valve visible and accessible?: No

Notes: Could not locate.

Deficiencies - Fire Hydrant #4

Deficiency #14

Is there a hydrant wrench that is available and accessible?: No

Notes:

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Deficiency #15

Is the Road box and shutoff valve visible and accessible?: No

Notes: Could not locate.

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

None

Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

None

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

None

Deficiencies - Alarm Pressure Switch

None

Deficiencies - PIV Tamper Switch

None

Deficiencies - Inspectors Test Connection

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Deficiency #16

Location: Riser

Description: 1" ITV

Signs: No

Notes:

Deficiency #16 - Photo #1



Date Taken: April 21, 2023

Comments: Above ceiling, rm B-19. ?

Deficiency #17

Location: West Side of Cafeteria, outside.

Description: 1" ITV

Signs: No

Notes:

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Deficiency #17 - Photo #1



Date Taken: April 21, 2023

Comments: Kitchen/cafeteria ITV,no sign.

Deficiency #18

Location: E-hall storage. Near boiler rm.

Description: 1" ITV

Signs: No

Notes:

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Deficiency #18 - Photo #1



Date Taken: April 21, 2023

Comments: D-hall mech rm, near boiler house.

Deficiencies - Valves

None

Deficiencies - Drain Valves

None

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Inspector Signature

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

Inspector Name

Tony Kittrell
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
127557
FL Fire Sprinkler
Inspector FP118-000244
LA Fire Sprinkler
Inspector E22293

Signature

A handwritten signature in black ink that reads 'Tony Kittrell'. The signature is written in a cursive style with a long horizontal flourish at the end.

Date Completed

2023-04-21

Report of Inspection / Test

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2023-02-23

Property

Meadowlake Elementary
KH

8251 Three Knotch Road

Mobile AL 36619

Mario Morrisette

Print Date: 2023-02-23

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc

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1209C Highway 613 South

Lucedale MS 39452

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FIRE PROTECTION, INC.

IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Property

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Mario Morrisette

Print Date: 2023-02-23

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc

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Is the clapper and automatic drain valve in place and properly operating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
---	---	---	---

SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

VALVE AREA

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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
---	---	---	---

ALARMS

Is the alarm valve free from physical damage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

MAINTENANCE

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<p>Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>If sprinklers have been replaced, were they proper replacements?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If conditions were found that required flushing, was flushing of the system conducted?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Was a drain test conducted after opening any closed valve?</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
<p>Operating stem of all OS&Y valves lubricated, completely closed and reopened?</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<p>Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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FIRE PROTECTION, INC.

Report of Inspection / Test for Asset - School Fire Hydrant

Fire Hydrant Information

Hydrant ID	#1
Description	Mueller 5-1/4" 584N
Location	Front Left Corner of Main Building
Static Hydrant Description	Grey & Yellow

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flow acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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Are monitor nozzles lubricated?	<input type="checkbox"/> Yes
	<input type="checkbox"/> No
	<input checked="" type="checkbox"/> NA

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Gym Fire Hydrant

Fire Hydrant Information

Hydrant ID	#2
Description	American Darling 5-1/4" B84B
Location	Front of Gym
Static Hydrant Description	Grey & Yellow

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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Have backflow devices, if installed, passed full flow test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
Gym System	60	52	62	.1	Yes	Yes
System #1	60	48	60	.1	Yes	Yes
System #2	60	50	60	.1	Yes	Yes

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INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
Gym System	Exterior HVAC room	1" Test & drain assembly	42	Yes	Yes	Yes	Yes	Yes
System #1	@ Riser	1" Test & Drain assembly		No	Yes	Yes	Yes	No
System #2	@ Riser	1" Inspectors Test Valve		No	Yes	Yes	Yes	No

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
Gym System	Clow OS&Y	Gym Janitorial closet	OS&Y	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	13
System #1	3" Anvil Butterfly Tamper Valve	Classroom E-107 Closet / Riser Room	Butterfly	3 "	Monitored	Yes	Yes	Yes	Yes	Yes	15
System #2	3" Anvil Butterfly Tamper Valve	Classroom E-107 Closet / Riser room	Butterfly	3 "	Monitored	Yes	Yes	Yes	Yes	Yes	13
	Mueller	Past drop off lane	Post Indicator	6 "	Padlock	Yes	Yes	N/A	Yes	Yes	

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
System #1	1-1/2" Main Drain	@ Riser	Angle Valve	Yes	Yes
System #2	1-1/2" Main Drain	@ Riser	Angle Valve	Yes	Yes
Gym System	2" Main Drain	@ Riser	Ball Valve	Yes	Yes

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FIRE PROTECTION, INC.

Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
	System #1	1	Potter	Water Flow Switch		Reports to FP as system 1	Fail
	System#1	1	Anvil	Butterfly Tamper Switch			Fail
	Exterior of Riser Room, Front of Building	1	FDC	Fire Department Connection			Pass
	System #2	1	Potter	Water Flow Switch		Reports to FP spas System 1	Fail
	System #2	1	Anvil	Butterfly Tamper Switch		Reports to FP as system 1	Fail
	Gym System	1	Potter	Water Flow Switch			Pass
	Gym System	1	Potter	Os&Y Tamper Switch			Pass
	Exterior of Riser Room / Right Front Corner of Gym	1	FDC	Fire Department Connection			Pass

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Deficiencies - General Questions

Deficiency #1

Are the gauges on system in good condition and showing normal water supply pressure?: No

Notes: Main #2- outdated gauges

Deficiency #1 - Photo #1



Date Taken: February 23, 2023

Deficiency #2

Do valve supervisory switches indicate movement?: No

Notes:

Deficiency #3

The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?: No

Notes:

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Deficiency #4

Are alarms and supervisory devices not damaged?: No

Notes: Troubles and alarms on fire panel . Waterflow will not activate F/A

Deficiency #4 - Photo #1



Date Taken: February 23, 2023

Deficiency #5

Is the information sign attached and legible?: No

Notes:

Deficiency #6

Are control valves properly sealed and/or supervised?: No

Notes:

Deficiency #7

Are all escutcheon plates installed on sprinkler heads?: No

Notes: Mission plates for Tyco 3531 style ends (white)

Deficiencies - General Wet System Questions

None

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Deficiencies - Gym System

None

Deficiencies - System #1

None

Deficiencies - System #2

None

Deficiencies - School Fire Hydrant

None

Deficiencies - Gym Fire Hydrant

Deficiency #8

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

Deficiency #9

Address

Location: System #1

QTY: 1

Description: 3" VSR Flow Switch

Notes:

Status: Fail

Deficiency #10

Address

Location: System #2

QTY: 1

Description: 3" VSR Flow Switch

Notes:

Status: Fail

Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

None

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Deficiencies - OS&Y Tamper Switch

None

Deficiencies - Butterfly Tamper Switch

Deficiency #11

Address

Location: System#1

QTY: 1

Description: 3" Butterfly Tamper Valve

Notes:

Status: Fail

Deficiency #12

Address

Location: System #2

QTY: 1

Description: 3" Butterfly Tamper Valve

Notes:

Status: Fail

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

None

Deficiencies - Alarm Pressure Switch

None

Deficiencies - PIV Tamper Switch

None

Deficiencies - Inspectors Test Connection

Deficiency #13

Location: @ Riser

Description: 1" Test & Drain assembly

Pass?: No

Was alarm reported?: No

Notes:

Report of Inspection / Test

Annual NFPA 25

INDUSTRIAL-COMMERCIAL



2023-02-23

Property

Meadowlake Elementary
KH

8251 Three Knotch Road

Mobile AL 36619

Mario Morrisette

Print Date: 2023-02-23

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc

MS-14326-SC AL-3693 LA-F1173 FL-873651-

0001-2007

1209C Highway 613 South

Lucedale MS 39452

Deficiency #14

Location: @ Riser

Description: 1" Inspectors Test Valve

Pass?: No

Was alarm reported?: No

Notes:

Deficiencies - Valves

None

Deficiencies - Drain Valves

None

Report of Inspection / Test

Annual NFPA 25

2023-02-23

Property

Meadowlake Elementary
KH

8251 Three Knotch Road

Mobile AL 36619

Mario Morrisette

Print Date: 2023-02-23

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc

MS-14326-SC AL-3693 LA-F1173 FL-873651-

0001-2007

1209C Highway 613 South

Lucedale MS 39452

INDUSTRIAL-COMMERCIAL

ICFP

FIRE PROTECTION, INC.

Recommendations

Gym-green

Main school(2)

Purpled

Report of Inspection / Test

Annual NFPA 25

INDUSTRIAL-COMMERCIAL



2023-04-18

Property

Montgomery High School

KH

4275 Snow Road

Mobile AL 36575

Mario Morrisette

Print Date: 2023-04-18

Conducted by: Tony Kittrell

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 127557

FL Fire Sprinkler Inspector FP118-000244

LA Fire Sprinkler Inspector E22293

Industrial Commercial Fire Protection, Inc

MS-14326-SC AL-3693 LA-F1173 FL-873651-
0001-2007

IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

Report of Inspection / Test

Annual NFPA 25

2023-04-18

Property

Montgomery High School

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4275 Snow Road

Mobile AL 36575

Mario Morrisette

Print Date: 2023-04-18

Conducted by: Tony Kittrell

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 127557

FL Fire Sprinkler Inspector FP118-000244

LA Fire Sprinkler Inspector E22293

Industrial Commercial Fire Protection, Inc

MS-14326-SC AL-3693 LA-F1173 FL-873651-
0001-2007

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FIRE PROTECTION, INC.

Is the clapper and automatic drain valve in place and properly operating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
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SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

VALVE AREA

Report of Inspection / Test

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INDUSTRIAL-COMMERCIAL



FIRE PROTECTION, INC.

2023-04-18

Property

Montgomery High School

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4275 Snow Road

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NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 127557

FL Fire Sprinkler Inspector FP118-000244

LA Fire Sprinkler Inspector E22293

Industrial Commercial Fire Protection, Inc

MS-14326-SC AL-3693 LA-F1173 FL-873651-
0001-2007

Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
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ALARMS

Is the alarm valve free from physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

MAINTENANCE

Report of Inspection / Test

Annual NFPA 25

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2023-04-18

Property

Montgomery High School

KH

4275 Snow Road

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Mario Morrisette

Print Date: 2023-04-18

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NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 127557

FL Fire Sprinkler Inspector FP118-000244

LA Fire Sprinkler Inspector E22293

Industrial Commercial Fire Protection, Inc

MS-14326-SC AL-3693 LA-F1173 FL-873651-
0001-2007

<p>Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>If sprinklers have been replaced, were they proper replacements?</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<p>If conditions were found that required flushing, was flushing of the system conducted?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<p>Was a drain test conducted after opening any closed valve?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Operating stem of all OS&Y valves lubricated, completely closed and reopened?</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<p>Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

Report of Inspection / Test

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2023-04-18

Property

Montgomery High School
KH
4275 Snow Road
Mobile AL 36575
Mario Morrisette
Print Date: 2023-04-18

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NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 127557
FL Fire Sprinkler Inspector FP118-000244
LA Fire Sprinkler Inspector E22293

Industrial Commercial Fire Protection, Inc
MS-14326-SC AL-3693 LA-F1173 FL-873651-
0001-2007

Report of Inspection / Test for Asset - Fire Hydrant #6

Fire Hydrant Information

Hydrant ID	#6
Description	American Darling 5-1/4" B84B
Location	South of Bus Canopy

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Report of Inspection / Test

Annual NFPA 25

2023-04-18

Property

Montgomery High School

KH

4275 Snow Road

Mobile AL 36575

Mario Morrisette

Print Date: 2023-04-18

Conducted by: Tony Kittrell

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 127557

FL Fire Sprinkler Inspector FP118-000244

LA Fire Sprinkler Inspector E22293

Industrial Commercial Fire Protection, Inc

MS-14326-SC AL-3693 LA-F1173 FL-873651-
0001-2007

INDUSTRIAL-COMMERCIAL



FIRE PROTECTION, INC.

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Fire Hydrant #5

Fire Hydrant Information

Hydrant ID	#5
Description	American Darling 5-1/4" B84B
Location	By New Addition Remote FDC

QUESTIONS

Is there a hydrant wrench that is available and accessible? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

Report of Inspection / Test

Annual NFPA 25

INDUSTRIAL-COMMERCIAL



2023-04-18

Property

Montgomery High School
KH
4275 Snow Road
Mobile AL 36575
Mario Morrisette
Print Date: 2023-04-18

Conducted by: Tony Kittrell
NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 127557
FL Fire Sprinkler Inspector FP118-000244
LA Fire Sprinkler Inspector E22293

Industrial Commercial Fire Protection, Inc
MS-14326-SC AL-3693 LA-F1173 FL-873651-
0001-2007

Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Fire Hydrant #1

Fire Hydrant Information

Hydrant ID	#4
Description	American Darling 5-1/4" B84B
Location	N.E Corner by Fuel Station

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

Report of Inspection / Test

Annual NFPA 25

INDUSTRIAL-COMMERCIAL



FIRE PROTECTION, INC.

2023-04-18

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NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 127557

FL Fire Sprinkler Inspector FP118-000244

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MS-14326-SC AL-3693 LA-F1173 FL-873651-
0001-2007

Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Fire Hydrant #2

Fire Hydrant Information

Hydrant ID	#2
Description	American Darling 5-1/4" B84B

Report of Inspection / Test

Annual NFPA 25

INDUSTRIAL-COMMERCIAL



FIRE PROTECTION, INC.

2023-04-18

Property

Montgomery High School

KH

4275 Snow Road

Mobile AL 36575

Mario Morrisette

Print Date: 2023-04-18

Conducted by: Tony Kittrell

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 127557

FL Fire Sprinkler Inspector FP118-000244

LA Fire Sprinkler Inspector E22293

Industrial Commercial Fire Protection, Inc

MS-14326-SC AL-3693 LA-F1173 FL-873651-
0001-2007

Location

Horticulture Shop

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flow acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Report of Inspection / Test

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INDUSTRIAL-COMMERCIAL



2023-04-18

Property

Montgomery High School
KH
4275 Snow Road
Mobile AL 36575
Mario Morrisette
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NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 127557
FL Fire Sprinkler Inspector FP118-000244
LA Fire Sprinkler Inspector E22293

Industrial Commercial Fire Protection, Inc
MS-14326-SC AL-3693 LA-F1173 FL-873651-
0001-2007

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Fire Hydrant #3

Fire Hydrant Information

Hydrant ID	#3
Description	Mueller 5-1/4"
Location	West of JROTC

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Fire Hydrant #4

Fire Hydrant Information

Hydrant ID	#4
Description	American Darling 5-1/4" B84B
Location	By System#1 & #2 Remote FDC

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Fire Hydrant #8

Fire Hydrant Information

Hydrant ID	#8
Description	Mueller 5-1/4"
Location	Baseball Field

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
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Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Fire Hydrant #7

Fire Hydrant Information

Hydrant ID	#7
Description	American Darling 5-1/4" B84B
Location	Outside auditorium

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

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Water-Based Systems # 127557
FL Fire Sprinkler Inspector FP118-000244
LA Fire Sprinkler Inspector E22293

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Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
Wet System #1 / Kitchen & Gym	85	55	90	3	Yes	Yes
Wet System #2 / Classrooms	85	55	90	3	Yes	Yes
Auditorium System	95	55	90	8	Yes	Yes
ROTC System (East Attic) near baseball field	90	55	80	3	Yes	Yes
Horticulture System	85	55	90	3	Yes	Yes
New Addition System	95	55	90	6	Yes	Yes

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
Wet System #1 / Kitchen & Gym	Basketball Locker Room Closet	1" Inspectors Test Valve	53	Yes	Yes	Yes	No	Yes
Wet System #2 / Classrooms	Store room inside Classrooms 301 & 303	1" Inspectors Test Valve	122	Yes	Yes	Yes	No	Yes
Auditorium System	@ Riser	1" Inspectors Test Valve	43	Yes	Yes	Yes	Yes	Yes
ROTC System (East Attic) near baseball field	Exterior Mechanical Room South side of Building	1" Inspectors Test Valve	63	Yes	Yes	Yes	Yes	Yes

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INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
Horticulture System	Unknown	Could not locate ITV.	45	Yes	N/A	Yes	No	Yes
New Addition System	Unknown	1" Inspectors Test Valve	28	Yes	Yes	Yes	Yes	Yes

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
Wet System #1 / Kitchen & Gym	Control Valve	Exterior Mechanical Room	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	N/A	16
Wet System #2 / Classrooms	Control Valve	Exterior Mechanical Room	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	N/A	16
Auditorium System	Control Valve	Riser Room	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	N/A	16
ROTC System (East Attic) near baseball field	Control Valve	Exterior Mechanical Room West side of Building	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	N/A	6
Horticulture System	Control Valve	Horticulture Shop	Butterfly	4 "	Monitored	Yes	Yes	No	Yes	N/A	16
New Addition System	Control Valve	Exterior Riser Room	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	N/A	16
Wet System #1 / Kitchen & Gym	Riser Check	Mechanical Room	Riser Check Valve	4 "	Not Applicable	Yes	Yes	Yes	Yes	N/A	N/A
ROTC System (East Attic) near baseball field	Riser Check	Exterior Mechanical Room	Riser Check Valve	4 "	Not Applicable	Yes	Yes	Yes	Yes	N/A	N/A
Wet System #2 / Classrooms	Riser Check	Mechanical Room	Riser Check Valve	4 "	Not Applicable	Yes	Yes	Yes	Yes	N/A	N/A
New Addition System	Riser Check	Exterior Riser Room	Riser Check Valve	4 "	Not Applicable	Yes	Yes	Yes	Yes	N/A	N/A
Horticulture System	Riser Check	Horticulture Shop	Riser Check Valve	4 "	Not Applicable	Yes	Yes	Yes	Yes	N/A	N/A

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
Auditorium System	2" Main Drain	@ Riser	Angle Valve	Yes	Yes

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Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
System #1	@ Riser	1	Potter VSR-F	Water Flow Switch			Pass
System #2	@ Riser	1	Potter VSR-F	Water Flow Switch			Pass
New Addition	@ Riser	1	Potter VSR-1	Water Flow Switch			Pass
Horticulture Shop	@ Riser	1	Potter VRS	Water Flow Switch			Pass
JROTC Bldg.	@ Riser	1	Potter VSR	Water Flow Switch			Pass
Auditorium	@ Riser	1	Potter VSR	Water Flow Switch			Pass
Auditorium	@ Riser	1	Victaulic	Butterfly Tamper Switch			Pass
System #1	@ Riser	1	Victaulic	Butterfly Tamper Switch			Pass
System #2	@ Riser	1	Victaulic	Butterfly Tamper Switch			Pass
New Addition	@ Riser	1	Victaulic	Butterfly Tamper Switch			Pass
Horticulture Shop	@ Riser	1	Victaulic	Butterfly Tamper Switch			Pass
JROTC Bldg	@ Riser	1	Nibco	Butterfly Tamper Switch			Pass

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Questions with Photos and Notes

- Is the building fully protected by sprinklers?

Yes

Notes:

Heads plugged auditorium.



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ITV - 1" Inspectors Test Valve Unknown

Notes:

Flow done at auxiliary drain in riser rm. Could not locate ITV.

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Mario Morrisette

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Conducted by: Tony Kittrell

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 127557

FL Fire Sprinkler Inspector FP118-000244

LA Fire Sprinkler Inspector E22293

Industrial Commercial Fire Protection, Inc

MS-14326-SC AL-3693 LA-F1173 FL-873651-

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Deficiencies - General Questions

Deficiency #1

Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?: No

Notes: Horticulture, no hydraulic placard.

Deficiency #2

Is the FDC swivels and couplings not damaged?: No

Notes:

Deficiency #2 - Photo #1



Date Taken: April 17, 2023

Comments: Auditorium FDC swivels seized up.

Deficiency #3

Is the FDC identification sign(s) in place?: No

Notes: No sign on FDC front office.

Horticulture, FDC seized up.

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Property

Montgomery High School

KH

4275 Snow Road

Mobile AL 36575

Mario Morrisette

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FIRE PROTECTION, INC.

Deficiency #3 - Photo #1



Date Taken: April 17, 2023

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Deficiency #3 - Photo #2



Date Taken: April 17, 2023

Comments: Administration FDC, no sign.

Deficiency #4

Are visible sprinklers free of foreign materials including paint?: No

Notes:

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FIRE PROTECTION, INC.

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Deficiency #4 - Photo #1



Date Taken: April 17, 2023

Comments: Horticulture, all upright heads in shop area
are taped.

Deficiency #5

Are all Identification Signs in place?: No

Notes: Horticulture, missing signs.

Deficiency #6

Are all escutcheon plates installed on sprinkler heads?: No

Notes: 15 missing escutcheons band room missing escutcheon outside panel room

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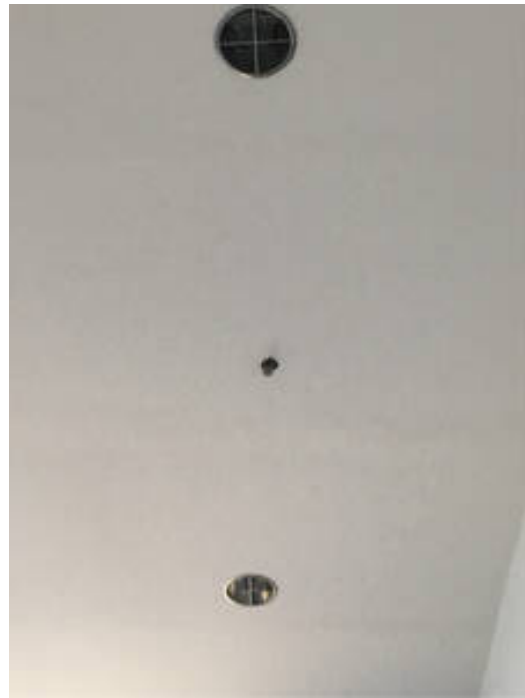
FL Fire Sprinkler Inspector FP118-000244

LA Fire Sprinkler Inspector E22293

Industrial Commercial Fire Protection, Inc

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Deficiency #6 - Photo #1



Date Taken: April 17, 2023

Comments: Auditorium entrance, missing escutcheon.
Chrome Victaulic.

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Deficiency #6 - Photo #2



Date Taken: April 18, 2023

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NICET LEVEL II - Inspection & Testing of
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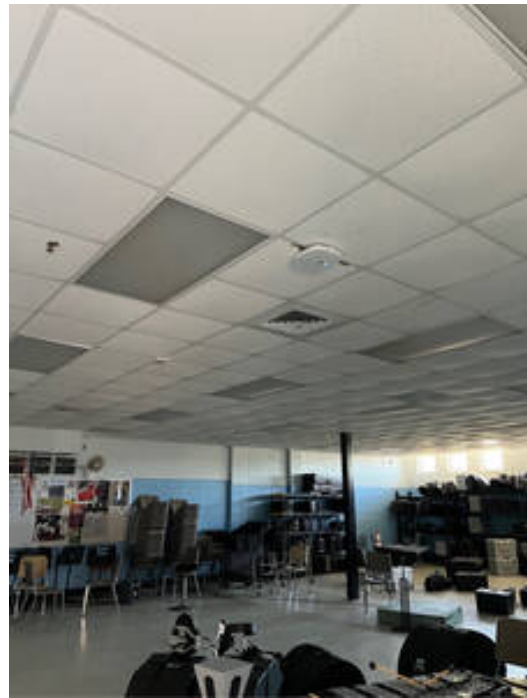
FL Fire Sprinkler Inspector FP118-000244

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Deficiency #6 - Photo #3



Date Taken: April 18, 2023

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Deficiency #6 - Photo #4



Date Taken: April 18, 2023

Deficiencies - General Wet System Questions

None

Deficiencies - Wet System #1 / Kitchen & Gym

None

Deficiencies - Wet System #2 / Classrooms

None

Deficiencies - Auditorium System

None

Deficiencies - ROTC System (East Attic) near baseball field

None

Deficiencies - Horticulture System

None

Deficiencies - New Addition System

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None

Deficiencies - Fire Hydrant #6

Deficiency #7

Is there a hydrant wrench that is available and accessible?: No

Notes:

Deficiency #8

Are pumper and nozzle caps tight?: No

Notes: Missing 2 caps

Deficiency #8 - Photo #1



Date Taken: April 17, 2023

Deficiency #9

Are hydrant caps, stems, outlets, and threads lubricated and in good condition?: No

Notes:

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Deficiency #10

Is the Road box and shutoff valve visible and accessible?: No

Notes: Could not locate.

Deficiencies - Fire Hydrant #5

Deficiency #11

Is there a hydrant wrench that is available and accessible?: No

Notes:

Deficiency #12

Is the Road box and shutoff valve visible and accessible?: No

Notes: Could not locate.

Deficiencies - Fire Hydrant #1

Deficiency #13

Is there a hydrant wrench that is available and accessible?: No

Notes:

Deficiencies - Fire Hydrant #2

Deficiency #14

Is there a hydrant wrench that is available and accessible?: No

Notes:

Deficiency #15

Is the Road box and shutoff valve visible and accessible?: No

Notes: Could not locate.

Deficiencies - Fire Hydrant #3

Deficiency #16

Is there a hydrant wrench that is available and accessible?: No

Notes:

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Deficiency #17

Is the Road box and shutoff valve visible and accessible?: No

Notes: Could not locate

Deficiencies - Fire Hydrant #4

Deficiency #18

Is there a hydrant wrench that is available and accessible?: No

Notes:

Deficiency #19

Is the Road box and shutoff valve visible and accessible?: No

Notes: Could not locate

Deficiencies - Fire Hydrant #8

None

Deficiencies - Fire Hydrant #7

Deficiency #20

Is there a hydrant wrench that is available and accessible?: No

Notes:

Deficiency #21

Is the Road box and shutoff valve visible and accessible?: No

Notes: Could not locate.

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

None

Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

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FIRE PROTECTION, INC.

None

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

None

Deficiencies - Alarm Pressure Switch

None

Deficiencies - PIV Tamper Switch

None

Deficiencies - Inspectors Test Connection

Deficiency #22

Location: Basketball Locker Room Closet

Description: 1" Inspectors Test Valve

Signs: No

Notes:

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Deficiency #22 - Photo #1



Date Taken: April 17, 2023

Comments: Administration riser ITV, mech rm. near boys
locker rm. No sign.

Deficiency #23

Location: Store room inside Classrooms 301 & 303

Description: 1" Inspectors Test Valve

Signs: No

Notes:

Deficiency #24

Location: Unknown

Description: Could not locate ITV.

Signs: No

Notes: Horticultural, could not locate ITV.

Deficiencies - Valves

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Deficiency #25

Location: Horticulture Shop

Valve Type: butter_fly

Size: 4

Description: Control Valve

Signs: No

Notes:

Deficiencies - Drain Valves

None

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Inspector Signature

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

Inspector Name

Tony Kittrell
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
127557
FL Fire Sprinkler
Inspector FP118-000244
LA Fire Sprinkler
Inspector E22293

Signature

A handwritten signature in black ink that reads 'Tony Kittrell'. The signature is written in a cursive style with a long horizontal stroke at the end.

Date Completed

2023-04-18

Report of Inspection / Test

Annual NFPA 25

INDUSTRIAL-COMMERCIAL



2023-07-10

Property

Morningside Elementary School
KH

2700 South Greenbrier Drive

Mobile AL 36605

Mario Morrisette

Print Date: 2023-07-11

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc

MS-14326-SC AL-3693 LA-F1173 FL-873651-

0001-2007

1209C Highway 613 South

Luedale MS 39452

IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc

MS-14326-SC AL-3693 LA-F1173 FL-873651-

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1209C Highway 613 South

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FIRE PROTECTION, INC.

Is the clapper and automatic drain valve in place and properly operating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
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SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

VALVE AREA

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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
---	---	---	---

ALARMS

Is the alarm valve free from physical damage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

MAINTENANCE

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MS-14326-SC AL-3693 LA-F1173 FL-873651-

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<p>Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>If sprinklers have been replaced, were they proper replacements?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If conditions were found that required flushing, was flushing of the system conducted?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Was a drain test conducted after opening any closed valve?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Operating stem of all OS&Y valves lubricated, completely closed and reopened?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?</p>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

Report of Inspection / Test

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INDUSTRIAL-COMMERCIAL



FIRE PROTECTION, INC.

2023-07-10

Property

Morningside Elementary School
KH

2700 South Greenbrier Drive

Mobile AL 36605

Mario Morrisette

Print Date: 2023-07-11

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc

MS-14326-SC AL-3693 LA-F1173 FL-873651-

0001-2007

1209C Highway 613 South

Lucedale MS 39452

Report of Inspection / Test for Asset - Fire Hydrant #1

Fire Hydrant Information

Hydrant ID	#1
Description	Avk
Location	Gym parking lot

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

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Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	85	Residual Pressure	65
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Fire Hydrant #2

Fire Hydrant Information

Hydrant ID	#2
Description	Meuller
Location	Main parking

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	85	Residual Pressure	65
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
Main Building	75	65	85	10	Yes	Yes
200 Hall	80	60	85	10	Yes	Yes
Gym System	75	65	85	10	Yes	Yes

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
Main Building	Kitchen wash room	1' test & drain	46	Yes	Yes	Yes	No	Yes

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INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
200 Hall	E. Exterior Riser Room	1" Test & Drain assembly	29	Yes	Yes	Yes	Yes	Yes
Gym System	Interior Riser Room	1" Test and drain assembly	33	Yes	Yes	Yes	Yes	Yes

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
Main Building	Anvil control valve	W. exterior Riser Room	Butterfly	3 "	Monitored	Yes	Yes	Yes	Yes	Yes	9.5
200 Hall	Anvil control valve	E. Exterior Riser Room	Butterfly	3 "	Monitored	Yes	Yes	Yes	Yes	Yes	9.5
Gym System	Anvil control valve	Riser room	Butterfly	2-1/2 "	Monitored	Yes	Yes	Yes	Yes	Yes	9.5

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FIRE PROTECTION, INC.

Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
	Gym	1	Potter	Water Flow Switch			Pass
	Hall 200	1	Potter	Water Flow Switch			Pass
	North side	1	Potter	Water Flow Switch			Pass
	North side	1	Anvil	Butterfly Tamper Switch			Pass
	Hall 200	1	Anvil	Butterfly Tamper Switch			Pass
	Gym	1	Anvil	Butterfly Tamper Switch			Pass
	Exterior of bldg.	1	FDC	Fire Department Connection			Pass

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Deficiencies - General Questions

Deficiency #1

Are visible sprinklers free of corrosion and physical damage?: No

Notes: Kitchen -corroded heads

Deficiency #1 - Photo #1



Date Taken: July 10, 2023

Deficiency #2

Are visible sprinklers free of foreign materials including paint?: No

Notes: Cafeteria- dusty heads throughout

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Deficiency #2 - Photo #1



Date Taken: July 10, 2023

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Deficiency #2 - Photo #2



Date Taken: July 10, 2023

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FIRE PROTECTION, INC.

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Deficiency #2 - Photo #3



Date Taken: July 10, 2023

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Deficiency #2 - Photo #4



Date Taken: July 10, 2023

Deficiency #3

Are there spare sprinklers and a sprinkler wrench?: No

Notes: Hall 200 - no head wrench

Deficiency #4

Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?: No

Notes: Kitchen - multiple greased pendent heads

Deficiency #5

Is the building fully protected by sprinklers?: No

Notes: Hall 200 - HVAC closet lacking coverage below ducts

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Deficiency #6

Are all Identification Signs in place?: No

Notes:

Deficiency #7

Are all escutcheon plates installed on sprinkler heads?: No

Notes: Kitchen - missing Esc /heads needs lowering - 155 chrome pendent

Library- missing esc

Deficiency #7 - Photo #1



Date Taken: July 10, 2023

Deficiencies - General Wet System Questions

None

Deficiencies - Main Building

None

Deficiencies - 200 Hall

None

Deficiencies - Gym System

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None

Deficiencies - Fire Hydrant #1

None

Deficiencies - Fire Hydrant #2

None

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

None

Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

None

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

None

Deficiencies - Alarm Pressure Switch

None

Deficiencies - PIV Tamper Switch

None

Deficiencies - Inspectors Test Connection

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Deficiency #8

Location: Kitchen wash room

Description: 1' test & drain

Signs: No

Notes:

Deficiencies - Valves

None

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Inspector Signature

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

Inspector Name

Bora Yann
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
153252

Signature

A handwritten signature in black ink, appearing to be 'Bora Yann', written in a cursive style.

Date Completed

2023-07-10

Report of Inspection / Test

Annual NFPA 25

INDUSTRIAL-COMMERCIAL



2023-08-03

Property

Murphy High School
KH

100 South Carlen Street

Mobile AL 36606

Mario Morrisette

Print Date: 2023-08-04

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
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IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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2023-08-03

Property

Murphy High School
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100 South Carlen Street

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Mario Morrisette

Print Date: 2023-08-04

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Is the clapper and automatic drain valve in place and properly operating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
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SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

VALVE AREA

Report of Inspection / Test

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2023-08-03

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Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc

MS-14326-SC AL-3693 LA-F1173 FL-873651-

0001-2007

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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

DRY VALVE

Are enclosures around valves maintaining a minimum of 40 degrees F?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the gauges on systems without low pressure alarms in good condition and showing normal air and water pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
For freezer systems, gauge near compressor reading the same as gauge near the dry-pipe valve?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are they free from physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are trim valves in appropriate (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there no leakage in the intermediate chamber?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on systems with low pressure alarms in good condition and showing normal air and water pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the dry-pipe valve passed inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the priming level correct and has the low air pressure signal passed it's test?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Has the quick opening device passed the test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
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FIRE PROTECTION, INC.

2023-08-03

Property

Murphy High School
KH

100 South Carlen Street

Mobile AL 36606

Mario Morrisette

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ALARMS

Is the alarm valve free from physical damage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have low temperature alarms passed test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

MAINTENANCE

Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
If sprinklers have been replaced, were they proper replacements?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	If conditions were found that required flushing, was flushing of the system conducted?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Was a drain test conducted after opening any closed valve?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Operating stem of all OS&Y valves lubricated, completely closed and reopened?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are dry-pipe systems kept in dry condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have auxiliary drains been emptied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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- Yes
- No
- NA

Is interior of dry-pipe valves cleaned?

- Yes
- No
- NA

Have low points been drained before freezing weather?

- Yes
- No
- NA

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Report of Inspection / Test for System - Bldg 7 Dry System #1

DRY VALVE

Have automatic air maintenance devices passed test? Yes
 No
 NA

DRY VALVE TRIP TEST

Dry Valve	Size: 2-1/2"	Year of Mfr.: 4-2015	Accelerator	Year of Mfr.: N/A		
Make	Model	Serial no.	Make	Model	Serial no.	
Tyco	DPV-1	0063	N/A	N/A	N/A	
	Time to Trip thru test pipe	Water Pressure	Air Pressure	Trip point air pressure	Time water reached test outlet	Alarm Operated
Without Accelerator	5	70	35	10	11	Yes
With Accelerator	N/A	N/A	N/A	N/A	N/A	N/A

DRY VALVE TRIP TEST (cont)

Were results comparable to previous test? Yes
 No
 NA

Has it passed air leakage test? Yes
 No
 NA

Report of Inspection / Test for System - Main Bldg Dry system #4

DRY VALVE

Have automatic air maintenance devices passed test? Yes
 No
 NA

DRY VALVE TRIP TEST

Dry Valve	Size: 2-1/2	Year of Mfr.: 2015	Accelerator	Year of Mfr.: N/A		
Make	Model	Serial no.	Make	Model	Serial no.	
tyco	DPV-1	0049	N/A	N/A	N/A	
	Time to Trip thru test pipe	Water Pressure	Air Pressure	Trip point air pressure	Time water reached test outlet	Alarm Operated
Without Accelerator	4	70	40	3	5	Yes
With Accelerator	N/A	N/A	N/A	N/A	N/A	N/A

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DRY VALVE TRIP TEST (cont)

Were results comparable to previous test?	<input type="checkbox"/> Yes	Has it passed air leakage test?	<input type="checkbox"/> Yes
	<input type="checkbox"/> No		<input type="checkbox"/> No
	<input checked="" type="checkbox"/> NA		<input checked="" type="checkbox"/> NA

Report of Inspection / Test for System - Auditorium Dry System #5

DRY VALVE

Have automatic air maintenance devices passed test?	<input type="checkbox"/> Yes
	<input checked="" type="checkbox"/> No
	<input type="checkbox"/> NA

DRY VALVE TRIP TEST

Dry Valve	Size: 4"	Year of Mfr.: 2015	Accelerator	Year of Mfr.: N/A		
Make	Model	Serial no.	Make	Model	Serial no.	
tyco	DPV-1	0049	N/A	N/A	N/A	
	Time to Trip thru test pipe	Water Pressure	Air Pressure	Trip point air pressure	Time water reached test outlet	Alarm Operated
Without Accelerator	22	70	25	2	28	Yes
With Accelerator	N/A	N/A	N/A	N/A	N/A	N/A

DRY VALVE TRIP TEST (cont)

Were results comparable to previous test?	<input type="checkbox"/> Yes	Has it passed air leakage test?	<input type="checkbox"/> Yes
	<input type="checkbox"/> No		<input type="checkbox"/> No
	<input checked="" type="checkbox"/> NA		<input checked="" type="checkbox"/> NA

Report of Inspection / Test for Asset - Fire Hydrants #1

Fire Hydrant Information

Hydrant ID	#1
Description	MH Anniston
Location	Band room field

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes
	<input type="checkbox"/> No		<input type="checkbox"/> No
	<input checked="" type="checkbox"/> NA		<input type="checkbox"/> NA

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Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
Bldg 7 Dry System #1	70	65	85	1	Yes	Yes
Bldg 7 Wet System #2	70	65	85	3	Yes	Yes
Bldg 7 Wet system #3	70	65	85	3	Yes	Yes
Main Bldg Dry system #4	70	60	70	10	Yes	Yes
Auditorium Dry System #5	80	50	75	8	Yes	Yes
Auditorium Wet System #6	80	50	75	8	Yes	Yes
Biology Bldg Wet System #7	65	40	70	2	Yes	Yes
Foreign Bldg Wet System #8	70	50	80	3	Yes	Yes
Math Bldg Wet System #9	85	50	80	3	Yes	Yes
Culinary Bldg Wet System # 10	70	40	85	3	Yes	Yes
Vocational Bldg Wet System #11	70	20	70	120	Yes	Yes
Band Bldg Wet System # 12	85	55	75	3	Yes	Yes

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
Band Bldg Wet System # 12	Exterior mechanical room	1"ITV @ riser	30	Yes	Yes	Yes	Yes	Yes
Bldg 7 Wet System #2	Cafeteria Exterior M-3	1" Test & Drain @ riser	50	Yes	Yes	Yes	Yes	Yes
Bldg 7 Wet system #3	Cafeteria Exterior M-3	1" Test & Drain @ riser	31	Yes	Yes	Yes	Yes	Yes
Bldg 7 Dry System #1	Cafeteria Storage M-3	1" ITV @ riser	10	Yes	Yes	Yes	Yes	Yes
Auditorium Dry System #5	W. Auditorium backstage	1" ITV	25	Yes	Yes	Yes	Yes	Yes
Auditorium Wet System #6	Auditorium Exterior M-118	1"ITV @ riser	39	Yes	Yes	Yes	Yes	Yes
Biology Bldg Wet System #7	Exterior Electrical room	1"ITV	37	Yes	Yes	Yes	Yes	Yes

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INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
Foreign Bldg Wet System #8	Near Mens Restroom	1"ITV	35	Yes	Yes	Yes	Yes	Yes
Math Bldg Wet System #9	Janitors Closet	1"ITV beside riser	45	Yes	Yes	Yes	Yes	Yes
Culinary Bldg Wet System # 10	Interior Rm. 194	1"ITV @ riser	89	Yes	Yes	Yes	Yes	Yes
Vocational Bldg Wet System #11	Vocational Storage room	1"ITV @ riser	42	Yes	No	Yes	Yes	Yes
Main Bldg Dry system #4	Interior Mech- 117	1"ITV @ riser	7	Yes	Yes	Yes	Yes	Yes

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
Bldg 7 Dry System #1	(Bldg7) Anvil control valve	Cafeteria Exterior M-3	Butterfly	2-1/2 "	Monitored	Yes	Yes	Yes	Yes	Yes	10
Bldg 7 Wet System #2	(Bldg7) Anvil control valve	Cafeteria Exterior M-3	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	10
Bldg 7 Wet system #3	(Bldg7) Gruvlok	Cafeteria Exterior M-3	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	10
Auditorium Dry System #5	Gruvlok	Auditorium Exterior M-118	Butterfly	2-1/2 "	Monitored	Yes	Yes	Yes	Yes	Yes	
Auditorium Wet System #6	Gruvlok	Auditorium Exterior M-118	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	10
Biology Bldg Wet System #7	4" victaulic	Classroom 143	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	16
Foreign Bldg Wet System #8	Victaulic	Near mens Restroom	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	16
Math Bldg Wet System #9	Victaulic	Janitors Closet	Butterfly	4 "	Monitored	Yes	Yes	No	Yes	Yes	7.5
Culinary Bldg Wet System # 10	Victaulic	Interior Rm. 194	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	7.5
Vocational Bldg Wet System #11	Backflow Control #1	Outside Vocational Bldg	OS&Y	6 "	Padlock	Yes	Yes	No	No	No	22
Band Bldg Wet System # 12	Global	Exterior Mechanical room	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	14

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VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
Vocational Bldg Wet System #11	Backflow Control #2	Outside Vocational Bldg	OS&Y	6 "	Padlock	Yes	Yes	Yes	No	No	22
Bldg 7 Wet system #3	Delete	Delete	Globe Valve	2 "	Not Applicable	Yes	Yes	Yes	Yes	Yes	
Bldg 7 Wet System #2	Delete	Delete	Globe Valve	2 "	Not Applicable	N/A	N/A	N/A	N/A	N/A	
Main Bldg Dry system #4	Tyco	Interior Mech -117	Butterfly	2-1/2 "	Monitored	Yes	Yes	Yes	Yes	Yes	8.5
Bldg 7 Dry System #1	Backflow Control #1	S. Carlen St. NE parking Lot	OS&Y	6 "	Monitored And Locked	Yes	Yes	N/A	N/A	Yes	16
Bldg 7 Dry System #1	Backflow Control #2	S. Carlen St. NE. Parking Lot	OS&Y	6 "	Monitored And Locked	Yes	Yes	N/A	N/A	Yes	16
Auditorium Wet System #6	Backflow Control #1	S. Carlen St. SE. Parking Lot	OS&Y	4 "	Monitored And Locked	Yes	Yes	Yes	No	Yes	
Auditorium Wet System #6	Backflow Control #2	S. Carlen St. SE. Parking Lot	OS&Y	4 "	Monitored And Locked	Yes	Yes	Yes	No	Yes	
Band Bldg Wet System #12	Backflow Control #1	South St. SW. Parking lot	OS&Y	6 "	Monitored And Locked	Yes	Yes	N/A	N/A	N/A	
Band Bldg Wet System #12	Backflow Control #2	South St. SW. Parking Lot	OS&Y	6 "	Monitored And Locked	Yes	Yes	N/A	N/A	N/A	
	Backflow Control #1	South St. SW. Middle Parking Lot	OS&Y	6 "	Padlock	Yes	Yes	N/A	N/A	N/A	
	#Backflow Control #2	South St. SW. Middle Parking Lot	OS&Y	6 "	Padlock	Yes	Yes	N/A	N/A	N/A	
	Backflow Control #1	South St. Culinary Bldg	OS&Y	4 "	Padlock	Yes	Yes	N/A	N/A	N/A	
	Backflow Control #2	South St. Culinary Bldg	OS&Y	4 "	Padlock	Yes	Yes	N/A	N/A	N/A	
	Mueller	South St. middle parking Lot	Post Indicator	6 "	Padlock	Yes	Yes	N/A	N/A	N/A	
	Mueller	South St. Middle Parking Lot	Post Indicator	6 "	Padlock	Yes	Yes	N/A	N/A	N/A	
	Mueller	South St. Culinary Parking Lot	Post Indicator	6 "	Padlock	Yes	Yes	N/A	N/A	N/A	
	Mueller	South St. Culinary Parking Lot	Post Indicator	6 "	Padlock	Yes	Yes	N/A	N/A	N/A	

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
Auditorium Dry System #5	1-1/4	Boiler room		Yes	Yes

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Main Bldg Dry system #4	1-1/4 drain valve	Riser room	Globe Valve	Yes	Yes
Bldg 7 Dry System #1	1-1/4" main Drain	Riser	Globe Valve	Yes	Yes
Bldg 7 Wet system #3	1" ITV	Cafeteria Storage	Globe Valve	Yes	Yes
Bldg 7 Wet system #3	2" main drain	Riser room	Globe Valve	Yes	Yes
Bldg 7 Wet System #2	2" main Drain	Riser	Globe Valve	Yes	Yes
Auditorium Dry System #5	Drum drip	W. auditorium backstage	Drum Drip	Yes	Yes

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INDUSTRIAL-COMMERCIAL



Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
Delete	System #2&3	2	Potter	Water Flow Switch		Did not have water pressure	
Delete	System #1&2	2		Butterfly Tamper Switch			
South St.	Outside Math Bldg	1	FDC	Fire Department Connection			
Delete	System #1	1	Potter	Low Air Pressure Switch		Reports as low air	Pass
Delete	System #1	1	Potter	Air Compressor			Pass
Delete	Riser room	1	Potter	High Pressure Switch	Noncritical		
Delete	Riser room	1	Potter	High Pressure Switch			
Delete	Riser room	1	Potter	Low Air Pressure Switch			
Delete	Bldg-A biology	1	Potter	Water Flow Switch		Did not have water pressure	
S. Carlen St.	NE Corner of Parking Lot (Bldg 7)	1	Potter	Os&Y Tamper Switch		Activates F/A, reports as pull station	Fail
S. Carlen St.	NE. Corner of Parking lot (Bldg 7)	1	Potter	Os&Y Tamper Switch		Activates F/A, reports as pull station	Fail
S. Carlen St.	NE. Corner of Parking lot	1	FDC	Fire Department Connection			Pass
S. Carlen St.	SE Parking lot	1	Potter	Os&Y Tamper Switch		Did not report	Fail
S. Carlen St.	SE. Parking lot	1	Potter	Os&Y Tamper Switch		Did not report	Fail
South St.	SW. parking lot	1	Potter	Os&Y Tamper Switch			Fail
South St.	SW. Parking lot	1	Potter	Os&Y Tamper Switch			Fail

Report of Inspection / Test

Annual NFPA 25

2023-08-03

Property

Murphy High School
KH

100 South Carlen Street
Mobile AL 36606
Mario Morrisette
Print Date: 2023-08-04

Conducted by: Bora Yann
NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc
MS-14326-SC AL-3693 LA-F1173 FL-873651-
0001-2007
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INDUSTRIAL-COMMERCIAL



FIRE PROTECTION, INC.

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
South St.	SW. Middle parking lot	1	FDC	Fire Department Connection			
South St.	NW. Middle Parking lot	0	Potter	Os&Y Tamper Switch			
South St.	NW. middle Parking Lot	1	Potter	Os&Y Tamper Switch			
South St	Outside Math Bldg	1	FDC	Fire Department Connection			Pass
Wilcox St.	Outside Vocational Bldg	1	FDC	Fire Department Connection		No sign	Pass

Report of Inspection / Test

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INDUSTRIAL-COMMERCIAL



2023-08-03

Property

Murphy High School
KH

100 South Carlen Street

Mobile AL 36606

Mario Morrisette

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Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc

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1209C Highway 613 South

Luedale MS 39452

Deficiencies - General Questions

Deficiency #1

Are the gauges on system in good condition and showing normal water supply pressure?: No

Notes: Broken gauges on bldgs- Math & Language

Deficiency #1 - Photo #1



Date Taken: August 03, 2023

Deficiency #2

Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?: No

Notes: No data plaque @ - Culinary Bldg

Deficiency #3

Do valve supervisory switches indicate movement?: No

Notes: Auditorium Backflow tampers are not reporting / locked
Band Backflow tampers needs adjusting (mounted wrong) / locked
Bldg 7 Backflow tampers activates F/A ; reports as pull station / locked

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INDUSTRIAL-COMMERCIAL



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Murphy High School
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Deficiency #3 - Photo #1



Date Taken: August 03, 2023

Report of Inspection / Test

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INDUSTRIAL-COMMERCIAL



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Deficiency #3 - Photo #2



Date Taken: August 03, 2023

Deficiency #4

Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?: No

Notes: Locked , no key

Deficiency #5

Are alarms and supervisory devices not damaged?: No

Notes: NE. Park lot(Bldg 7) - Backflow tampers activates F/A, reports as pull station (2) Bldg 7 Dry-low air reports as jockey pump low pressure
SE parking lot (Auditorium)- Osy tampers did not activate (2)
SW parking lot (Band) Osy tampers need adjustments, mounted wrong

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Murphy High School
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NICET LEVEL II - Inspection & Testing of
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FIRE PROTECTION, INC.

Deficiency #5 - Photo #1



Date Taken: August 03, 2023

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2023-08-03

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Murphy High School
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Mario Morrisette

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NICET LEVEL II - Inspection & Testing of
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Deficiency #5 - Photo #2



Date Taken: August 03, 2023

Deficiency #6

Is the FDC swivels and couplings not damaged?: No

Notes: All FDC with Knox Caps - swivels will not spin freely

Deficiency #7

Is the FDC identification sign(s) in place?: No

Notes: Band Bldg- no sign

Vocational Bldg- needs new sign

Report of Inspection / Test

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NICET LEVEL II - Inspection & Testing of
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FIRE PROTECTION, INC.

Deficiency #7 - Photo #1



Date Taken: August 03, 2023

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INDUSTRIAL-COMMERCIAL



2023-08-03

Property

Murphy High School
KH

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NICET LEVEL II - Inspection & Testing of
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Deficiency #7 - Photo #2



Date Taken: August 03, 2023

Deficiency #8

Does visible pipe have no external loads?: No

Notes: Dance Bldg- clothes hanging on sprinkler pipe

Report of Inspection / Test

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NICET LEVEL II - Inspection & Testing of
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Deficiency #8 - Photo #1



Date Taken: August 03, 2023

Deficiency #9

Are there the proper number and type of spare sprinklers?: No

Notes: No spares - Math Bldg

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NICET LEVEL II - Inspection & Testing of
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Industrial Commercial Fire Protection, Inc

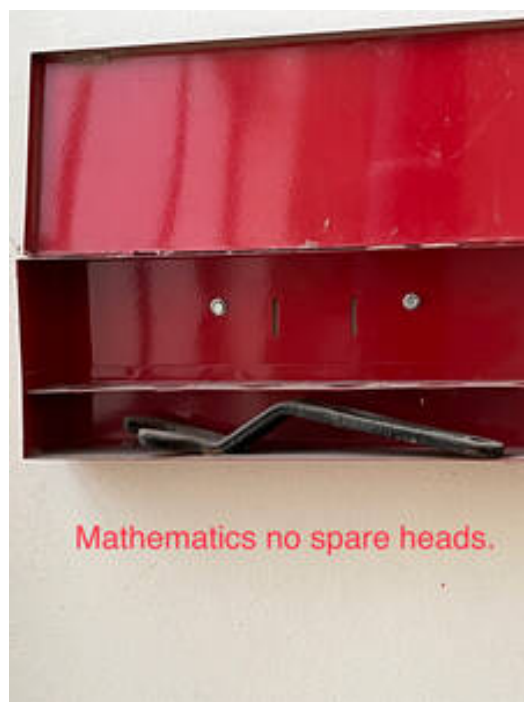
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Deficiency #9 - Photo #1



Date Taken: August 03, 2023

Deficiency #10

Are visible sprinklers free of foreign materials including paint?: No

Notes: Loaded heads @ - Culinary Bldg

Deficiency #11

Operating stem of all OS&Y valves lubricated, completely closed and reopened?: No

Notes: Vocational Bldg- Backflow controls are hard to close , needs lubrication

Deficiency #12

Are all escutcheon plates installed on sprinkler heads?: No

Notes: Math Bldg - missing esc @r.118

Technical Bldg - missing (10) esc

Outside R. 168- esc

R.198 - missing esc

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FIRE PROTECTION, INC.

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Deficiency #12 - Photo #1



Date Taken: August 03, 2023

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FIRE PROTECTION, INC.

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Deficiency #12 - Photo #2



Date Taken: August 03, 2023

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Deficiency #12 - Photo #3



Date Taken: August 03, 2023

Deficiencies - General Wet System Questions

None

Deficiencies - General Dry System Questions

Deficiency #13

Is the priming level correct and has the low air pressure signal passed it's test?: No

Notes: Bldg 7 - low Air reports as jockey low pressure
Auditorium- low air trouble

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Deficiency #13 - Photo #1



Date Taken: August 03, 2023

Deficiencies - Bldg 7 Dry System #1

None

Deficiencies - Bldg 7 Wet System #2

None

Deficiencies - Bldg 7 Wet system #3

None

Deficiencies - Main Bldg Dry system #4

None

Deficiencies - Auditorium Dry System #5

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Deficiency #14

Sprinkler Type: Dry

Have automatic air maintenance devices passed test?: No

Notes: Low air trouble ; AMD might need adjustments

Deficiencies - Auditorium Wet System #6

None

Deficiencies - Biology Bldg Wet System #7

None

Deficiencies - Foreign Bldg Wet System #8

None

Deficiencies - Math Bldg Wet System #9

None

Deficiencies - Culinary Bldg Wet System # 10

None

Deficiencies - Vocational Bldg Wet System #11

None

Deficiencies - Band Bldg Wet System # 12

None

Deficiencies - Fire Hydrants #1

Deficiency #15

Did the hydrant flow until clear (minimum of 1 minute)?: No

Notes: Hydrant has no water , valve might be shut off

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Deficiency #15 - Photo #1



Date Taken: August 03, 2023

Deficiency #16

Is the Road box and shutoff valve visible and accessible?: No

Notes: Did not visually see, hydrant shut off; no water

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

None

Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

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Murphy High School
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Deficiency #17

Address: S. Carlen St.
Location: SE. Parking lot
Equipment Type: OS&Y Tamper Switch
QTY: 1
Description: Osysu #2

Status: Fail

Notes:

Deficiency #18

Address: S. Carlen St.
Location: SE Parking lot
Equipment Type: OS&Y Tamper Switch
QTY: 1
Description: Osysu #1

Status: Fail

Notes:

Deficiency #19

Address: South St.
Location: SW. Parking lot
Equipment Type: OS&Y Tamper Switch
QTY: 1
Description: Osysu #2

Status: Fail

Notes:

Deficiency #20

Address: South St.
Location: SW. parking lot
Equipment Type: OS&Y Tamper Switch
QTY: 1
Description: Osysu #1

Status: Fail

Notes:

Deficiency #21

Address: S. Carlen St.
Location: NE. Corner of Parking lot (Bldg 7)
Equipment Type: OS&Y Tamper Switch
QTY: 1
Description: Osysu-2

Status: Fail

Notes:

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Deficiency #22

Address: S. Carlen St.
Location: NE Corner of Parking Lot (Bldg 7)
Equipment Type: OS&Y Tamper Switch
QTY: 1
Description: Osysu #1

Status: Fail

Notes:

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

None

Deficiencies - Alarm Pressure Switch

None

Deficiencies - PIV Tamper Switch

None

Deficiencies - Inspectors Test Connection

Deficiency #23

Location: Vocational Storage room
Description: 1"ITV @ riser
Terminates in Smooth Orifice?: No

Notes: No orifice

Deficiencies - Valves

Deficiency #24

Location: S. Carlen St. SE. Parking Lot
Valve Type: o_s_y
Size: 4
Description: Backflow Control #2
Exercised?: No

Notes: Locked

Report of Inspection / Test

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INDUSTRIAL-COMMERCIAL



2023-08-03

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Murphy High School
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NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

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MS-14326-SC AL-3693 LA-F1173 FL-873651-

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Deficiency #25

Location: S. Carlen St. SE. Parking Lot

Valve Type: o_s_y

Size: 4

Description: Backflow Control #1

Exercised?: No

Notes: Locked

Deficiency #26

Location: Janitors Closet

Valve Type: butter_fly

Size: 4

Description: Victaulic

Signs: No

Notes: No sign

Deficiency #27

Location: Outside Vocational Bldg

Valve Type: o_s_y

Size: 6

Description: Backflow Control #1

Signs: No

Exercised?: No

Stems Lubricated?: No

Notes: Needs lubrication, seized

Deficiency #28

Location: Outside Vocational Bldg

Valve Type: o_s_y

Size: 6

Description: Backflow Control #2

Exercised?: No

Stems Lubricated?: No

Notes: Needs lubrication, seized

Deficiencies - Drain Valves

None

Report of Inspection / Test

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Murphy High School
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INDUSTRIAL-COMMERCIAL



FIRE PROTECTION, INC.

Recommendations

Auditorium Bldg - yellow, green

Band Bldg - yellow

Vocational Bldg - purple

Foreign language Bldg- Yellow

Math Bldg - yellow

Biology Bldg - green

Main Bldg - green

Bldg 7 - dry yellow - (2) green

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INDUSTRIAL-COMMERCIAL



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NICET LEVEL II - Inspection & Testing of
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Inspector Signature

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

Inspector Name

Bora Yann
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
153252

Signature

A handwritten signature in black ink, appearing to read 'Bora Yann', is written over a large, faint, stylized watermark of the letters 'ICFP'.

Date Completed

2023-08-03

Report of Inspection / Test

Annual NFPA 25

INDUSTRIAL-COMMERCIAL



FIRE PROTECTION, INC.

2023-04-21

Property

New Citronelle High School

KH

8200 Lebaron Ave

Cintronelle AL 36522

Mario Morrisette

Print Date: 2023-04-24

Conducted by: Tony Kittrell

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 127557

FL Fire Sprinkler Inspector FP118-000244

LA Fire Sprinkler Inspector E22293

Industrial Commercial Fire Protection, Inc

MS-14326-SC AL-3693 LA-F1173 FL-873651-

0001-2007

IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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INDUSTRIAL-COMMERCIAL



2023-04-21

Property

New Citronelle High School
KH
8200 Lebaron Ave
Cintronnelle AL 36522
Mario Morrisette
Print Date: 2023-04-24

Conducted by: Tony Kittrell
NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 127557
FL Fire Sprinkler Inspector FP118-000244
LA Fire Sprinkler Inspector E22293

Industrial Commercial Fire Protection, Inc
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Is the clapper and automatic drain valve in place and properly operating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
---	---	---	---

SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

VALVE AREA

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Property

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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
---	---	---	---

ALARMS

Is the alarm valve free from physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

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<p>Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>If sprinklers have been replaced, were they proper replacements?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If conditions were found that required flushing, was flushing of the system conducted?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Was a drain test conducted after opening any closed valve?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Operating stem of all OS&Y valves lubricated, completely closed and reopened?</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<p>Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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FIRE PROTECTION, INC.

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Report of Inspection / Test for Asset - Fire Pump

OWNER SECTION

Is there a Jockey Pump on system?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Jockey Settings? (on/off)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the fire pump in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the pump remained in service since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

CONTROLLER TEST

Did the pump start at least 6 times from automatic sources?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Was each automatic starting feature tested at least once?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
For electric driven pump controllers: on a simulation of a power failure, while pump is under peak load, did the transfer switch transfer from the normal to emergency source without opening overcurrent protection devices on either line?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	For electric driven pump controllers: when normal power was restored, did retransfer from emergency to normal power occur without overcurrent protection devices opening on either line?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
For electric driven pump controllers: were at least half of the automatic and manual starts required performed with the pump connected to the alternate source?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Were all signal conditions simulated demonstrating workable operation?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

INSPECTION

Pump house/room proper temperature?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Ventilating louvers free to operate?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are suction, discharge and bypass valves open?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Piping free from leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Suction and system pressure gauges normal?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Suction reservoir, if provided, full?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Wet pit suction screens are clean and in place?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Waterflow test valves in closed position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Controller indicating power on?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Transfer switch indicating normal situation?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Isolation switch closed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Pump in correct phase?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Oil level in motor sight glass in correct range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Circulation relief valve flowing water?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Pressure relief valves operating with proper pressure downstream while pump is operational?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

TESTING

Electric pump started automatically?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Electric motor driven pump ran for 10 min?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Packing gland showing slight discharge? (Adjust if necessary)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Packing boxes, bearing and pump casing free from overheating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Time for engine motor to reach full speed:	2	For automatic stop controllers, record time pump runs after starting:	600
Electric motor driven pumps with reduced voltage or reduced current starting, record the time the controller is in the 1st step:	N/A	Are all above times and pressures and results acceptable?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Circulation and pressure relief valves operated properly during all flow tests?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	No alarm indicators or other visible abnormalities observed during no-flow test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Were Suction screens cleaned after flow?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Automatic transfer switch test: Power failure simulated during peak flow?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Automatic transfer switch test: Connection made to alternate source?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Automatic transfer switch test: After termination of simulated power failure did motor reconnect to source?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
All alarm conditions simulated?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	All alarms operated?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

MAINTENANCE

Fuel tank level, tank float switch, and solenoid valve operation acceptable?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Flexible hoses and connectors in fuel and coolant systems acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Oil Level and lube oil heater acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Coolant level acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Water pump for coolant system operating?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Jacket water heater for coolant system okay?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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Exhaust system free of leakage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Drain condensate trap on exhaust system operational?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Connections to electrical system acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Cranking voltage acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Isolation switch and circuit breaker exercised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Battery case clean, dry and free of corrosion?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Charger and charge rate passed inspection and battery charge being equalized?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Do Circuit breakers appear clean?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Cleaned or replaced crank case breather in lubrication systems?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Cleaned water strainer in coolant system?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Battery terminals clean and tight?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Electrical systems free of wire chafing?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Manual starting means on electrical systems operated and boxes, panels and cabinets cleaned?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Antifreeze tested in coolant system?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Flexible exhaust section acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Changed pump bearing lubrication?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Shaft end play acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Pressure gauges and sensors accurate?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Coupling alignment acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Transmission coupling, right angle gear drive and mechanical moving parts lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Circuit breakers passed trip test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Emergency manual starting means operated without power?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Electrical connections secure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the volt meter and ammeter accurate?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Pressure switch settings calibrated?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Motor bearing greased?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Fuel tank free of water and foreign material?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Fuel tank vents and overflow pipes free of obstructions?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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Fuel piping acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Antifreeze changed in coolant system?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Heater exchange cleaned out?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Ducts and louvers for combustion air okay?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Exhaust system hanged in supports acceptable and system free of back pressure?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Control and power wiring tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
No corrosion on circuit boards?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	No cracked cable wire insulation?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
No leaks in plumbing parts?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	No sign or water on electrical parts?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

FLOW TEST

Run the pump at no-load, rated load and peak load (usually 150% of the rated load) conditions. For variable speed drivers, run the test with pressure limiting control "on" at 25, 50, 75, 100, 125, and 150% of rated load and then again rated speed w/ the pump isolated from the fire protection system and the relief valve closed.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Was equipment and gauges calibrated?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Date of last calibration	2/1/23	For electric motors operating at the rated voltage and frequency, is the ampere demand on each phase less than or equal to the product of the full load ampere rating times the allowable service factor as stamped on the motor nameplate?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
For electric motors operating under varying voltage, was the product of the actual voltage and current demand on each phase less than or equal to the product of the rated full load current times the rated voltage times the allowable service factor?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	For electric motors operating under varying voltage, did the voltage stay within the range of 95% to 110% of the rated voltage during the test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Did engine-drive unit show no signs of overload or stress?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Was the governor set to properly regulate the engine speed at rated pump speed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Did the gear drive assembly operate without excessive objectionable noise, vibration, or heating?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Was the unit started and brought up to rated speed without interruption under discharge conditions equal to peak load?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Did the pump perform equal to the manufacturer's curve within the accuracy limits of the test equipment?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the unadjusted performance discharge curve meet or exceed the fire protection system demands?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Were there no vibrations that could damage any fire pump component?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the pump perform at all conditions without objectionable overheating of any component?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Have electric motor pumps pass the phase reversal test on
normal and alternate (if provided) power?

Yes

No

NA

For vertical turbine pumps taking the suction from wells, is
the water level capable of being recorded?

Yes

No

NA

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PERFORMANCE

Rated %	Driver speed: RPM	Total Flow	Net Pressure: PSI	Discharge Pressure: PSI	Suction Pressure: PSI
0%	3567	N/A	90.0	97.0	7.0
100%	3542	406	79.0	85.0	6.0
150%	3545	604	70.0	75.0	5.0
Roof Shot	N/A	N/A	0.0	0.0	0.0

ELECTRIC MOTOR

	L1 Voltage	L1 Amperes	L2 Voltage	L2 Amperes	L3 Voltage	L3 Amperes
0%	475	22	475	21	475	21
100%	474	30	474	29	475	30
150%	474	33	474	32	474	33
Roof Shot	N/A	N/A	N/A	N/A	N/A	N/A

Pump Flow Detail

Coefficient (same for all): 0.91

Nozzle/Orifice Size: 1.75 (inches)

	PITOT					
	1	2	3	4	5	6
0%	N/A	N/A	N/A	N/A	N/A	N/A
100%	20	N/A	N/A	N/A	N/A	N/A
150%	11	11	N/A	N/A	N/A	N/A
Roof Shot	N/A	N/A	N/A	N/A	N/A	N/A

	FLOW					
	1	2	3	4	5	6
0%	N/A	N/A	N/A	N/A	N/A	N/A
100%	406	N/A	N/A	N/A	N/A	N/A
150%	302	302	N/A	N/A	N/A	N/A
Roof Shot	N/A	N/A	N/A	N/A	N/A	N/A

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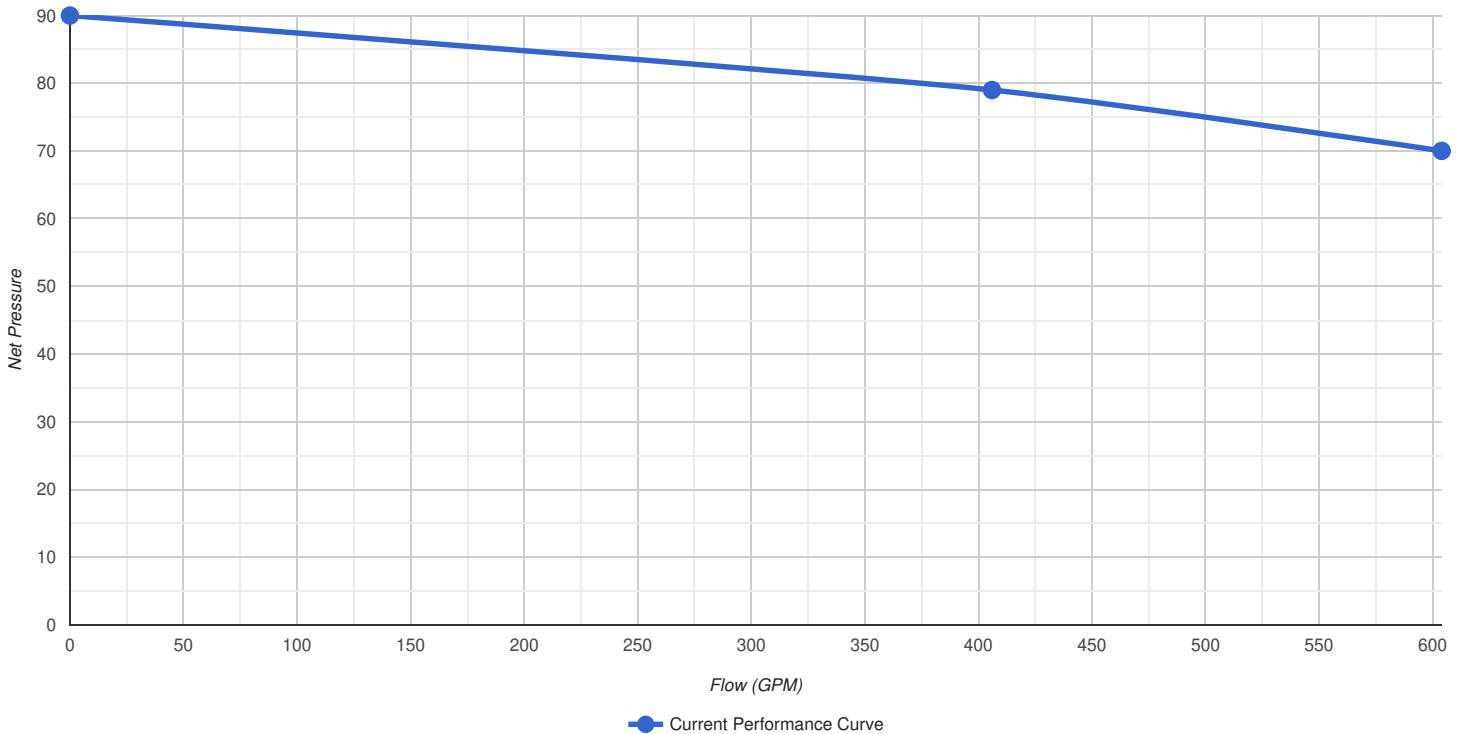
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FIRE PROTECTION, INC.



Report of Inspection / Test

Annual NFPA 25

2023-04-21

Property

New Citronelle High School
KH
8200 Lebaron Ave
Cintronnelle AL 36522
Mario Morrisette
Print Date: 2023-04-24

Conducted by: Tony Kittrell
NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 127557
FL Fire Sprinkler Inspector FP118-000244
LA Fire Sprinkler Inspector E22293

Industrial Commercial Fire Protection, Inc
MS-14326-SC AL-3693 LA-F1173 FL-873651-
0001-2007

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Report of Inspection / Test for Asset - Fire Hydrant Southeast Side

Fire Hydrant Information

Description	American Darling
Location	By road.
Static Hydrant Description	Red hydrant

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have control valves been operated through complete range??	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

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Water-Based Systems # 127557

FL Fire Sprinkler Inspector FP118-000244

LA Fire Sprinkler Inspector E22293

Industrial Commercial Fire Protection, Inc

MS-14326-SC AL-3693 LA-F1173 FL-873651-
0001-2007

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Fire Hydrant Southwest Side

Fire Hydrant Information

Description	M & H
Location	Southwest.
Static Hydrant Description	Red Hydrant

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

Report of Inspection / Test

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Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Fire Hydrant Northeast Side

Fire Hydrant Information

Description	M & H
Location	Eastside baseball field
Static Hydrant Description	Red Hydrant

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Fire Hydrant North Side

Fire Hydrant Information

Description	M & H
Location	Gym entrance

Report of Inspection / Test

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Static Hydrant Description

Red Hydrant

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

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Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Fire Hydrant Northwest Sode

Fire Hydrant Information

Description	M & H
Location	@ School Sign
Static Hydrant Description	Red Hydrant

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
Wet System 1	85	85	90	1	Yes	Yes
Wet System 2	85	85	90	N/A	Yes	Yes

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
Wet System 1	exterior auditorium North mech	1" globe valve	41	Yes	Yes	Yes	Yes	Yes
Wet System 2	Pump Room	1" Test & Drain assembly	27	Yes	Yes	Yes	Yes	Yes

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
Wet System 1	4" Butterfly	Pump Room	Butterfly	6"	Monitored	Yes	Yes	Yes	Yes	N/A	7

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VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
Wet System 2	Butterfly Control Valve	Pump Room	Butterfly	3 "	Monitored	Yes	Yes	Yes	Yes	N/A	12

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
Wet System 2	1-1/4" Main Drain	@ Riser	Globe Valve	Yes	Yes
Wet System 1	2" Main Drain	@ Riser	Globe Valve	Yes	Yes

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Questions with Photos and Notes

Fire Hydrant Southeast Side - Is there a hydrant wrench that is available and accessible?

N/A

Notes:

Could not access.



Fire Pump - Pump house/room proper temperature?

Yes

Notes:

Above 40°.

Fire Pump - At 0% L1: Amperes

22

Notes:

22

Fire Pump - At 0% Total Flow

N/A

Notes:

Zero flow/churn.

Fire Pump - Jockey Settings? (on/off)

Yes

Notes:

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In 88#, out 90#.

Fire Pump - Suction reservoir, if provided, full?

Yes

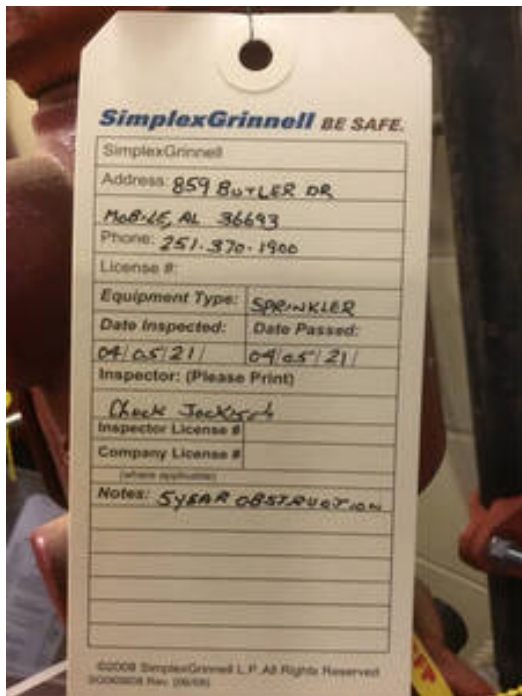
Notes:

Tank.

- Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)

Yes

Notes:



- Is the information sign attached and legible?

Yes

Notes:

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FIRE PROTECTION, INC.



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Deficiencies - General Questions

Deficiency #1

Are visible pipe hangers and seismic braces not damaged or loose?: No

Notes: Loose Hangars in mech/pump rm.

Deficiency #1 - Photo #1



Date Taken: April 18, 2023

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Deficiency #1 - Photo #2



Date Taken: April 18, 2023

Deficiency #2

Are all escutcheon plates installed on sprinkler heads?: No

Notes: Cafeteria, outside room 1202, mens bathroom, concealed vk 462

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FL Fire Sprinkler Inspector FP118-000244

LA Fire Sprinkler Inspector E22293

Industrial Commercial Fire Protection, Inc

MS-14326-SC AL-3693 LA-F1173 FL-873651-
0001-2007

Deficiency #2 - Photo #1



Date Taken: April 18, 2023

Report of Inspection / Test

Annual NFPA 25

INDUSTRIAL-COMMERCIAL



2023-04-21

Property

New Citronelle High School

KH

8200 Lebaron Ave

Cintronelle AL 36522

Mario Morrisette

Print Date: 2023-04-24

Conducted by: Tony Kittrell

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 127557

FL Fire Sprinkler Inspector FP118-000244

LA Fire Sprinkler Inspector E22293

Industrial Commercial Fire Protection, Inc

MS-14326-SC AL-3693 LA-F1173 FL-873651-
0001-2007

Deficiency #2 - Photo #2



Date Taken: April 18, 2023

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2023-04-21

Property

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KH

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Mario Morrisette

Print Date: 2023-04-24

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Deficiency #2 - Photo #3



Date Taken: April 18, 2023

Deficiencies - General Wet System Questions

None

Deficiencies - Wet System 1

None

Deficiencies - Wet System 2

None

Deficiencies - Wet System 3

None

Deficiencies - Wet System 4

None

Deficiencies - Fire Pump

None

Deficiencies - Fire Hydrant Southeast Side

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2023-04-21

Property

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None

Deficiencies - Fire Hydrant Southwest Side

Deficiency #3

Is there a hydrant wrench that is available and accessible?: No

Notes:

Deficiencies - Fire Hydrant Northeast Side

Deficiency #4

Is there a hydrant wrench that is available and accessible?: No

Notes:

Deficiencies - Fire Hydrant North Side

Deficiency #5

Is there a hydrant wrench that is available and accessible?: No

Notes:

Deficiency #6

Is the Road box and shutoff valve visible and accessible?: No

Notes: Could not locate.

Deficiencies - Fire Hydrant Northwest Sode

Deficiency #7

Is there a hydrant wrench that is available and accessible?: No

Notes:

Deficiency #8

Is the Road box and shutoff valve visible and accessible?: No

Notes: Could not locate.

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

None

Deficiencies - High Pressure Switch

None

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Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

None

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

None

Deficiencies - Alarm Pressure Switch

None

Deficiencies - PIV Tamper Switch

None

Deficiencies - Ball Valve Tamper

None

Deficiencies - Inspectors Test Connection

None

Deficiencies - Valves

None

Deficiencies - Drain Valves

None

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FIRE PROTECTION, INC.

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0001-2007

Inspector Signature

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

Inspector Name

Tony Kittrell
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
127557
FL Fire Sprinkler
Inspector FP118-000244
LA Fire Sprinkler
Inspector E22293

Signature

A handwritten signature in black ink that reads 'Tony Kittrell'. The signature is written in a cursive, flowing style.

Date Completed

2023-04-21

Report of Inspection / Test

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2023-04-18

Property

North Mobile County Middle School
KH

1950 Salco Road West
Axis AL 36505

Mario Morrisette

Print Date: 2023-04-18

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Water-Based Systems # 127557

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IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Is the clapper and automatic drain valve in place and properly operating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
---	---	---	---

SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

VALVE AREA

Report of Inspection / Test

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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
---	---	---	---

ALARMS

Is the alarm valve free from physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

MAINTENANCE

Report of Inspection / Test

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FIRE PROTECTION, INC.

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<p>Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
<p>If sprinklers have been replaced, were they proper replacements?</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<p>If conditions were found that required flushing, was flushing of the system conducted?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
<p>Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<p>Was a drain test conducted after opening any closed valve?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Operating stem of all OS&Y valves lubricated, completely closed and reopened?</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<p>Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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Report of Inspection / Test for Asset - Fire Pump

Fire Pump Information

Property Owner	Mobile Co. Schools.
Property Name	North mobile middle school
Property Address	1950 Salco Rd.,Axis,AL 36505
Demand(s) of Fire protection systems supplied by pump:	Sprinkler system
Pump (Horizontal or Vertical):	Vertical
Pump Manufacturer	Patterson
Shop/Serial Number	FP-C095176
Model	5x3 VIP
Rated GPM	400
Rated Pressure	47
Rated 150 Pressure	39
Rated 0 Pressure	56
Rated RPM	3520
Suction	City
If Tank, size and height	n/a
Driver, (electric or diesel engine)	Electric
Engine Manufacturer	Weg
Engine Shop/Serial Number	11SET09 1005487702
Engine Model	020360S3E254JPV
Rated Horsepower	20
Rated Speed	3520
Rated Voltage	208-230
Operating Voltage	208-230
Rated Amps	56.4-51.0
Phase Cycles	3
Service Factor	1.15
Controller Manufacturer	Hubbell

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Controller Shop/Serial Number	22499408
Controller Model	LXi1900
Jockey Pump Manufacturer	Grundfos
Jockey Pump Model	A96082417-P21010646
Jockey Pump Serial Number	n/a
Jockey Controller Manufacturer	Hubbell
Jockey Controller Model	LX-600
Jockey Controller Serial Number	22500884
Transfer Switch Manufacturer	N/a
Transfer Switch Model	N/a
Transfer Switch Serial Number	n/a

OWNER SECTION

Is there a Jockey Pump on system?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Jockey Settings? (on/off)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the fire pump in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the pump remained in service since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

CONTROLLER TEST

Did the pump start at least 6 times from automatic sources?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Was each automatic starting feature tested at least once?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
For electric driven pump controllers: on a simulation of a power failure, while pump is under peak load, did the transfer switch transfer from the normal to emergency source without opening overcurrent protection devices on either line?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	For electric driven pump controllers: when normal power was restored, did retransfer from emergency to normal power occur without overcurrent protection devices opening on either line?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
For electric driven pump controllers: were at least half of the automatic and manual starts required performed with the pump connected to the alternate source?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Were all signal conditions simulated demonstrating workable operation?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

INSPECTION

Pump house/room proper temperature?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Ventilating louvers free to operate?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
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Are suction, discharge and bypass valves open?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Piping free from leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Suction and system pressure gauges normal?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Suction reservoir, if provided, full?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Wet pit suction screens are clean and in place?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Waterflow test valves in closed position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Controller indicating power on?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Transfer switch indicating normal situation?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Isolation switch closed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Pump in correct phase?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Oil level in motor sight glass in correct range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Circulation relief valve flowing water?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Pressure relief valves operating with proper pressure downstream while pump is operational?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

TESTING

Electric pump started automatically?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Electric motor driven pump ran for 10 min?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Packing gland showing slight discharge? (Adjust if necessary)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Packing boxes, bearing and pump casing free from overheating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Time for engine motor to reach full speed:	N/A	For automatic stop controllers, record time pump runs after starting:	600
Electric motor driven pumps with reduced voltage or reduced current starting, record the time the controller is in the 1st step:	N/A	Are all above times and pressures and results acceptable?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Circulation and pressure relief valves operated properly during all flow tests?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	No alarm indicators or other visible abnormalities observed during no-flow test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Were Suction screens cleaned after flow?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Automatic transfer switch test: Power failure simulated during peak flow?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Automatic transfer switch test: Connection made to alternate source?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Automatic transfer switch test: After termination of simulated power failure did motor reconnect to source?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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All alarm conditions simulated?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	All alarms operated?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
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MAINTENANCE

Fuel tank level, tank float switch, and solenoid valve operation acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Flexible hoses and connectors in fuel and coolant systems acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Oil Level and lube oil heater acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Coolant level acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Water pump for coolant system operating?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Jacket water heater for coolant system okay?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Exhaust system free of leakage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Drain condensate trap on exhaust system operational?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Connections to electrical system acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Cranking voltage acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Isolation switch and circuit breaker exercised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Battery case clean, dry and free of corrosion?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Charger and charge rate passed inspection and battery charge being equalized?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Do Circuit breakers appear clean?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Cleaned or replaced crank case breather in lubrication systems?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Cleaned water strainer in coolant system?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Battery terminals clean and tight?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Electrical systems free of wire chafing?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Manual starting means on electrical systems operated and boxes, panels and cabinets cleaned?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Antifreeze tested in coolant system?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Flexible exhaust section acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Changed pump bearing lubrication?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Shaft end play acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Pressure gauges and sensors accurate?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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FIRE PROTECTION, INC.

2023-04-18

Property

North Mobile County Middle School
KH

1950 Salco Road West
Axis AL 36505

Mario Morrisette

Print Date: 2023-04-18

Conducted by: Tony Kittrell

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 127557

FL Fire Sprinkler Inspector FP118-000244

LA Fire Sprinkler Inspector E22293

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Coupling alignment acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Transmission coupling, right angle gear drive and mechanical moving parts lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Circuit breakers passed trip test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Emergency manual starting means operated without power?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Electrical connections secure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the volt meter and ammeter accurate?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Pressure switch settings calibrated?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Motor bearing greased?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Fuel tank free of water and foreign material?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Fuel tank vents and overflow pipes free of obstructions?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Fuel piping acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Antifreeze changed in coolant system?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Heater exchange cleaned out?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Ducts and louvers for combustion air okay?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Exhaust system hanged in supports acceptable and system free of back pressure?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Control and power wiring tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
No corrosion on circuit boards?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	No cracked cable wire insulation?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
No leaks in plumbing parts?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	No sign or water on electrical parts?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

FLOW TEST

Run the pump at no-load, rated load and peak load (usually 150% of the rated load) conditions. For variable speed drivers, run the test with pressure limiting control "on" at 25, 50, 75, 100, 125, and 150% of rated load and then again rated speed w/ the pump isolated from the fire protection system and the relief valve closed.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Was equipment and gauges calibrated?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Date of last calibration	2/1/23	For electric motors operating at the rated voltage and frequency, is the ampere demand on each phase less than or equal to the product of the full load ampere rating times the allowable service factor as stamped on the motor nameplate?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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For electric motors operating under varying voltage, was the product of the actual voltage and current demand on each phase less than or equal to the product of the rated full load current times the rated voltage times the allowable service factor?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	For electric motors operating under varying voltage, did the voltage stay within the range of 95% to 110% of the rated voltage during the test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Did engine-drive unit show no signs of overload or stress?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Was the governor set to properly regulate the engine speed at rated pump speed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Did the gear drive assembly operate without excessive objectionable noise, vibration, or heating?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Was the unit started and brought up to rated speed without interruption under discharge conditions equal to peak load?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Did the pump perform equal to the manufacturer's curve within the accuracy limits of the test equipment?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the unadjusted performance discharge curve meet or exceed the fire protection system demands?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Were there no vibrations that could damage any fire pump component?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the pump perform at all conditions without objectionable overheating of any component?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have electric motor pumps pass the phase reversal test on normal and alternate (if provided) power?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	For vertical turbine pumps taking the suction from wells, is the water level capable of being recorded?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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PERFORMANCE

Rated %	Driver speed: RPM	Total Flow	Net Pressure: PSI	Discharge Pressure: PSI	Suction Pressure: PSI
0%	3560	N/A	55.0	97.0	42.0
100%	3546	406	46.0	68.0	22.0
150%	N/A	N/A	0.0	0.0	0.0
Roof Shot	N/A	N/A	0.0	0.0	0.0

ELECTRIC MOTOR

	L1 Voltage	L1 Amperes	L2 Voltage	L2 Amperes	L3 Voltage	L3 Amperes
0%	481	15	484	16	481	15
100%	484	N/A	484	N/A	481	N/A
150%	N/A	N/A	N/A	N/A	N/A	N/A
Roof Shot	N/A	N/A	N/A	N/A	N/A	N/A

Pump Flow Detail

Coefficient (same for all): 0.91

Nozzle/Orifice Size: 1.75 (inches)

PITOT

	1	2	3	4	5	6
0%	N/A	N/A	N/A	N/A	N/A	N/A
100%	20	N/A	N/A	N/A	N/A	N/A
150%	11	11	N/A	N/A	N/A	N/A
Roof Shot	N/A	N/A	N/A	N/A	N/A	N/A

FLOW

0%	N/A	N/A	N/A	N/A	N/A	N/A
100%	406	N/A	N/A	N/A	N/A	N/A
150%	N/A	N/A	N/A	N/A	N/A	N/A
Roof Shot	N/A	N/A	N/A	N/A	N/A	N/A

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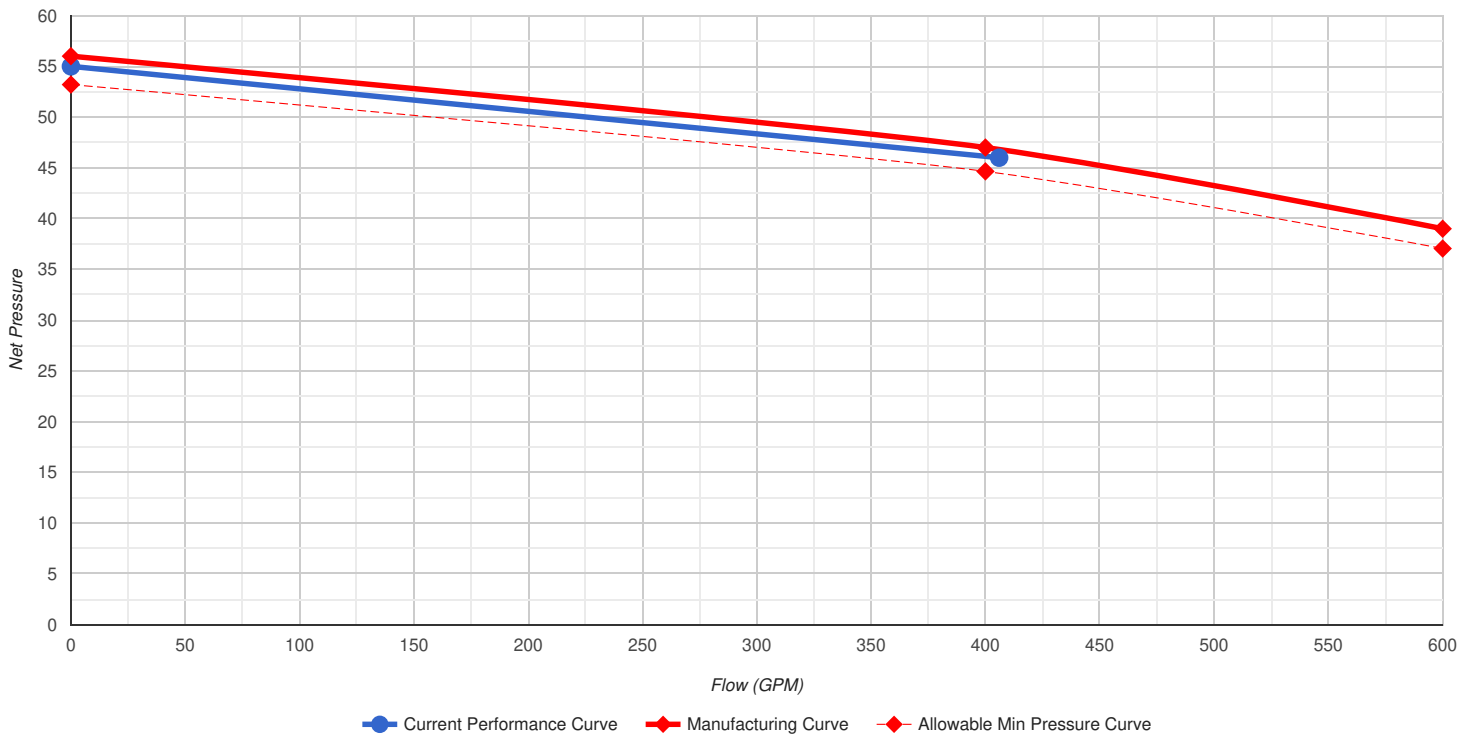
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FIRE PROTECTION, INC.



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Report of Inspection / Test for Asset - Hydrant#1 - South-West side

Fire Hydrant Information

Description

American Darling 5-1/4

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure

N/A

Residual Pressure

N/A

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Water-Based Systems # 127557

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Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Hydrant#2 - South-East side

Fire Hydrant Information

Description	Muller 5-1/4
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QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flow acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Water-Based Systems # 127557
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Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Hydrant#3 - North-East side

Fire Hydrant Information

Description	Muller 5-1/4
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QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Hydrant#4 - North-West side

Fire Hydrant Information

Description	American Darling 5-1/4
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QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Hydrant#5 - South side @ Road

Fire Hydrant Information

Description	Muller 5-1 /4
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QUESTIONS

Report of Inspection / Test

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Property

North Mobile County Middle School
KH
1950 Salco Road West
Axis AL 36505
Mario Morrisette
Print Date: 2023-04-18

Conducted by: Tony Kittrell
NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 127557
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Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:

N/A

Total Flow

N/A

Report of Inspection / Test for Asset - Hydrant#6 - South side @ Backflow

Fire Hydrant Information

Description

Muller 5-1/4

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

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Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
Zone 1 wet system	82	65	88	2	Yes	Yes
Zone 2 wet system	82	65	88	2	Yes	Yes

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
Zone 1 wet system	East side mech room	ITV	49	Yes	Yes	Yes	Yes	Yes
Zone 2 wet system	East side mech room	ITV	46	Yes	Yes	Yes	Yes	Yes

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
Zone 1 wet system	Control valve	East side mech room	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	N/A	10.
Zone 2 wet system	Control valve	East side mech room	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	N/A	10.

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
Zone 1 wet system	2" Main Drain	On Riser	Globe Valve	Yes	Yes

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FIRE PROTECTION, INC.

Zone 2 wet system	2" Main Drain	On Riser	Globe Valve	Yes	Yes
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FIRE PROTECTION, INC.

Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
	East side mech room	2	Control valve on both systems	Butterfly Tamper Switch			Pass
	East side mech room	2	Flow switch on both systems	Water Flow Switch			Pass
	Exterior of bldg	1	FDC	Fire Department Connection			Pass
	Riser Room / Suction Side	1	Built in	Butterfly Tamper Switch			Pass
	Riser Room / Discharge side of pump	1	Built in	Butterfly Tamper Switch			Pass
	Riser Room / pump by-Pass	2	Built in	Butterfly Tamper Switch			Pass
	Riser Room / Jockey Pump Suction	1	Tamper Switch	Butterfly Tamper Switch			Pass
	Riser Room / Jockey Pump Discharge side	1	Tamper Switch	Butterfly Tamper Switch			Pass

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Questions with Photos and Notes

Fire Pump - Pump house/room proper temperature?

Yes

Notes:

Above 40°.

Fire Pump - Suction reservoir, if provided, full?

N/A

Notes:

City

Fire Pump - Jockey Settings? (on/off)

Yes

Notes:

In 60#, out 85#.

Fire Pump - At 150% Total Flow

N/A

Notes:

Could not flow 150% due to lack of city supply pressure.

Zone 2 wet system - Record initial static pressure

82

Notes:

Main drain done on system #1.

Exterior of bldg - FDC - Fire Department Connection

Notes:

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ICFP

FIRE PROTECTION, INC.



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FIRE PROTECTION, INC.

Deficiencies - General Questions

None

Deficiencies - General Wet System Questions

None

Deficiencies - Zone 1 wet system

None

Deficiencies - Zone 2 wet system

None

Deficiencies - Fire Pump

None

Deficiencies - Hydrant#1 - South-West side

Deficiency #1

Is there a hydrant wrench that is available and accessible?: No

Notes:

Deficiency #2

Is the Road box and shutoff valve visible and accessible?: No

Notes: Could not locate.

Deficiencies - Hydrant#2 - South-East side

Deficiency #3

Is there a hydrant wrench that is available and accessible?: No

Notes:

Deficiencies - Hydrant#3 - North-East side

Deficiency #4

Is there a hydrant wrench that is available and accessible?: No

Notes:

Deficiencies - Hydrant#4 - North-West side

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Deficiency #5

Is there a hydrant wrench that is available and accessible?: No

Notes:

Deficiencies - Hydrant#5 - South side @ Road

Deficiency #6

Is there a hydrant wrench that is available and accessible?: No

Notes:

Deficiencies - Hydrant#6 - South side @ Backflow

Deficiency #7

Is there a hydrant wrench that is available and accessible?: No

Notes:

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

None

Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

None

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

None

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ICFP

FIRE PROTECTION, INC.

Deficiencies - Alarm Pressure Switch

None

Deficiencies - PIV Tamper Switch

None

Deficiencies - Inspectors Test Connection

None

Deficiencies - Valves

None

Deficiencies - Drain Valves

None

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Inspector Signature

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

Inspector Name

Tony Kittrell
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
127557
FL Fire Sprinkler
Inspector FP118-000244
LA Fire Sprinkler
Inspector E22293

Signature

A handwritten signature in black ink, appearing to read 'Tony Kittrell', is written across the signature field.

Date Completed

2023-04-18

Report of Inspection / Test

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2023-04-21

Property

Old Citronelle High School
KH
19325 Rowe Street
Cintronnelle AL 36522
Mario Morrisette
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Water-Based Systems # 127557
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IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Is the clapper and automatic drain valve in place and properly operating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
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SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

VALVE AREA

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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

DRY VALVE

Are enclosures around valves maintaining a minimum of 40 degrees F?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the gauges on systems without low pressure alarms in good condition and showing normal air and water pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
For freezer systems, gauge near compressor reading the same as gauge near the dry-pipe valve?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are they free from physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are trim valves in appropriate (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there no leakage in the intermediate chamber?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on systems with low pressure alarms in good condition and showing normal air and water pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the dry-pipe valve passed inspection?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Is the priming level correct and has the low air pressure signal passed it's test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the quick opening device passed the test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
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Report of Inspection / Test

Annual NFPA 25

2023-04-21

Property

Old Citronelle High School
KH
19325 Rowe Street
Cintronnelle AL 36522
Mario Morrisette
Print Date: 2023-04-21

Conducted by: Tony Kittrell
NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 127557
FL Fire Sprinkler Inspector FP118-000244
LA Fire Sprinkler Inspector E22293

Industrial Commercial Fire Protection, Inc
MS-14326-SC AL-3693 LA-F1173 FL-873651-
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ALARMS

Is the alarm valve free from physical damage? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the trim in correct (open or closed) position? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are alarms and supervisory devices not damaged? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have low temperature alarms passed test? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

MAINTENANCE

Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
If sprinklers have been replaced, were they proper replacements? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	If conditions were found that required flushing, was flushing of the system conducted? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Was a drain test conducted after opening any closed valve? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Operating stem of all OS&Y valves lubricated, completely closed and reopened? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are dry-pipe systems kept in dry condition? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have auxiliary drains been emptied? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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FIRE PROTECTION, INC.

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FL Fire Sprinkler Inspector FP118-000244

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- Yes
- No
- NA

Is interior of dry-pipe valves cleaned?

- Yes
- No
- NA

Have low points been drained before freezing weather?

- Yes
- No
- NA

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Report of Inspection / Test for System - Career center/Bldg A dry system

DRY VALVE

Have automatic air maintenance devices passed test? Yes
 No
 NA

DRY VALVE TRIP TEST

Dry Valve	Size: 2"	Year of Mfr.: N/A	Accelerator	Year of Mfr.: n/a		
Make	Model	Serial no.	Make	Model	Serial no.	
reliable	DDX	N/A	n/a	n/a	n/a	
	Time to Trip thru test pipe	Water Pressure	Air Pressure	Trip point air pressure	Time water reached test outlet	Alarm Operated
Without Accelerator	N/A	N/A	N/A	N/A	N/A	N/A
With Accelerator	N/A	N/A	N/A	N/A	N/A	Yes

DRY VALVE TRIP TEST (cont)

Were results comparable to previous test? Yes
 No
 NA

Has it passed air leakage test? Yes
 No
 NA

Report of Inspection / Test for Asset - Career Center/Bldg A fire pump

Fire Pump Information

Property Name	Citronelle high school
Demand(s) of Fire protection systems supplied by pump:	Sprinkler system
Pump (Horizontal or Vertical):	Vertical
Pump Manufacturer	Patterson
Shop/Serial Number	FP-C024801
Model	4x3 VIP
Rated GPM	250
Rated Pressure	50
Rated 150 Pressure	41
Rated 0 Pressure	63
Rated RPM	3525

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Suction	City
Driver, (electric or diesel engine)	Electric
Engine Manufacturer	U.S electrical
Engine Shop/Serial Number	C08 01044285 012 F
Engine Model	R434A
Rated Horsepower	15
Rated Speed	3475
Rated Voltage	208/230/460
Operating Voltage	460
Rated Amps	43.0-38.0/19.0
Phase Cycles	3
Service Factor	1.15
Controller Manufacturer	Hubbell
Controller Shop/Serial Number	A019023-2-1
Controller Model	LX1200
Jockey Pump Manufacturer	Baldor
Jockey Pump Model	84.Z00003
Jockey Controller Manufacturer	Hubbell
Jockey Controller Model	LX-600
Jockey Controller Serial Number	A-019023-1-1

OWNER SECTION

Is there a Jockey Pump on system?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Jockey Settings? (on/off)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the fire pump in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the pump remained in service since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

CONTROLLER TEST

Did the pump start at least 6 times from automatic sources?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Was each automatic starting feature tested at least once?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
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For electric driven pump controllers: on a simulation of a power failure, while pump is under peak load, did the transfer switch transfer from the normal to emergency source without opening overcurrent protection devices on either line?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	For electric driven pump controllers: when normal power was restored, did retransfer from emergency to normal power occur without overcurrent protection devices opening on either line?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
For electric driven pump controllers: were at least half of the automatic and manual starts required performed with the pump connected to the alternate source?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Were all signal conditions simulated demonstrating workable operation?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

INSPECTION

Pump house/room proper temperature?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Ventilating louvers free to operate?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are suction, discharge and bypass valves open?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Piping free from leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Suction and system pressure gauges normal?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Suction reservoir, if provided, full?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Wet pit suction screens are clean and in place?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Waterflow test valves in closed position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Controller indicating power on?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Transfer switch indicating normal situation?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Isolation switch closed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Pump in correct phase?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Oil level in motor sight glass in correct range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Circulation relief valve flowing water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Pressure relief valves operating with proper pressure downstream while pump is operational?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

TESTING

Electric pump started automatically?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Electric motor driven pump ran for 10 min?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Packing gland showing slight discharge? (Adjust if necessary)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Packing boxes, bearing and pump casing free from overheating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Time for engine motor to reach full speed:	N/A	For automatic stop controllers, record time pump runs after starting:	600

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Electric motor driven pumps with reduced voltage or reduced current starting, record the time the controller is in the 1st step:	N/A	Are all above times and pressures and results acceptable?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Circulation and pressure relief valves operated properly during all flow tests?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	No alarm indicators or other visible abnormalities observed during no-flow test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Were Suction screens cleaned after flow?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Automatic transfer switch test: Power failure simulated during peak flow?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Automatic transfer switch test: Connection made to alternate source?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Automatic transfer switch test: After termination of simulated power failure did motor reconnect to source?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
All alarm conditions simulated?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	All alarms operated?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

MAINTENANCE

Fuel tank level, tank float switch, and solenoid valve operation acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Flexible hoses and connectors in fuel and coolant systems acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Oil Level and lube oil heater acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Coolant level acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Water pump for coolant system operating?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Jacket water heater for coolant system okay?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Exhaust system free of leakage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Drain condensate trap on exhaust system operational?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Connections to electrical system acceptable?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Cranking voltage acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Isolation switch and circuit breaker exercised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Battery case clean, dry and free of corrosion?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Charger and charge rate passed inspection and battery charge being equalized?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Do Circuit breakers appear clean?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Cleaned or replaced crank case breather in lubrication systems?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Cleaned water strainer in coolant system?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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Battery terminals clean and tight?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Electrical systems free of wire chafing?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Manual starting means on electrical systems operated and boxes, panels and cabinets cleaned?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Antifreeze tested in coolant system?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Flexible exhaust section acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Changed pump bearing lubrication?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Shaft end play acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Pressure gauges and sensors accurate?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Coupling alignment acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Transmission coupling, right angle gear drive and mechanical moving parts lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Circuit breakers passed trip test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Emergency manual starting means operated without power?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Electrical connections secure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the volt meter and ammeter accurate?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Pressure switch settings calibrated?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Motor bearing greased?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Fuel tank free of water and foreign material?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Fuel tank vents and overflow pipes free of obstructions?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Fuel piping acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Antifreeze changed in coolant system?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Heater exchange cleaned out?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Ducts and louvers for combustion air okay?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Exhaust system hanged in supports acceptable and system free of back pressure?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Control and power wiring tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
No corrosion on circuit boards?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	No cracked cable wire insulation?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
No leaks in plumbing parts?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	No sign or water on electrical parts?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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FLOW TEST

Run the pump at no-load, rated load and peak load (usually 150% of the rated load) conditions. For variable speed drivers, run the test with pressure limiting control "on" at 25, 50, 75, 100, 125, and 150% of rated load and then again rated speed w/ the pump isolated from the fire protection system and the relief valve closed.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Was equipment and gauges calibrated?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Date of last calibration	2/1/23	For electric motors operating at the rated voltage and frequency, is the ampere demand on each phase less than or equal to the product of the full load ampere rating times the allowable service factor as stamped on the motor nameplate?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
For electric motors operating under varying voltage, was the product of the actual voltage and current demand on each phase less than or equal to the product of the rated full load current times the rated voltage times the allowable service factor?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	For electric motors operating under varying voltage, did the voltage stay within the range of 95% to 110% of the rated voltage during the test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Did engine-drive unit show no signs of overload or stress?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Was the governor set to properly regulate the engine speed at rated pump speed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Did the gear drive assembly operate without excessive objectionable noise, vibration, or heating?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Was the unit started and brought up to rated speed without interruption under discharge conditions equal to peak load?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Did the pump perform equal to the manufacturer's curve within the accuracy limits of the test equipment?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the unadjusted performance discharge curve meet or exceed the fire protection system demands?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Were there no vibrations that could damage any fire pump component?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the pump perform at all conditions without objectionable overheating of any component?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have electric motor pumps pass the phase reversal test on normal and alternate (if provided) power?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	For vertical turbine pumps taking the suction from wells, is the water level capable of being recorded?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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PERFORMANCE

Rated %	Driver speed: RPM	Total Flow	Net Pressure: PSI	Discharge Pressure: PSI	Suction Pressure: PSI
0%	3552	0	61.0	63.0	2.0
100%	3523	257	53.0	55.0	2.0
150%	3514	375	40.0	40.0	0.0
Roof Shot	N/A	N/A	0.0	0.0	0.0

ELECTRIC MOTOR

	L1 Voltage	L1 Amperes	L2 Voltage	L2 Amperes	L3 Voltage	L3 Amperes
0%	474	11	476	11	482	10
100%	484	15	486	15	485	14
150%	480	16	486	16	483	16
Roof Shot	N/A	N/A	N/A	N/A	N/A	N/A

Pump Flow Detail

Coefficient (same for all): 0.91

Nozzle/Orifice Size: 1.75 (inches)

PITOT

	1	2	3	4	5	6
0%	N/A	N/A	N/A	N/A	N/A	N/A
100%	8	N/A	N/A	N/A	N/A	N/A
150%	17	N/A	N/A	N/A	N/A	N/A
Roof Shot	N/A	N/A	N/A	N/A	N/A	N/A

FLOW

0%	N/A	N/A	N/A	N/A	N/A	N/A
100%	257	N/A	N/A	N/A	N/A	N/A
150%	375	N/A	N/A	N/A	N/A	N/A
Roof Shot	N/A	N/A	N/A	N/A	N/A	N/A

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Property

Old Citronelle High School
KH
19325 Rowe Street
Cintronnelle AL 36522
Mario Morrisette
Print Date: 2023-04-21

Conducted by: Tony Kittrell

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 127557

FL Fire Sprinkler Inspector FP118-000244

LA Fire Sprinkler Inspector E22293

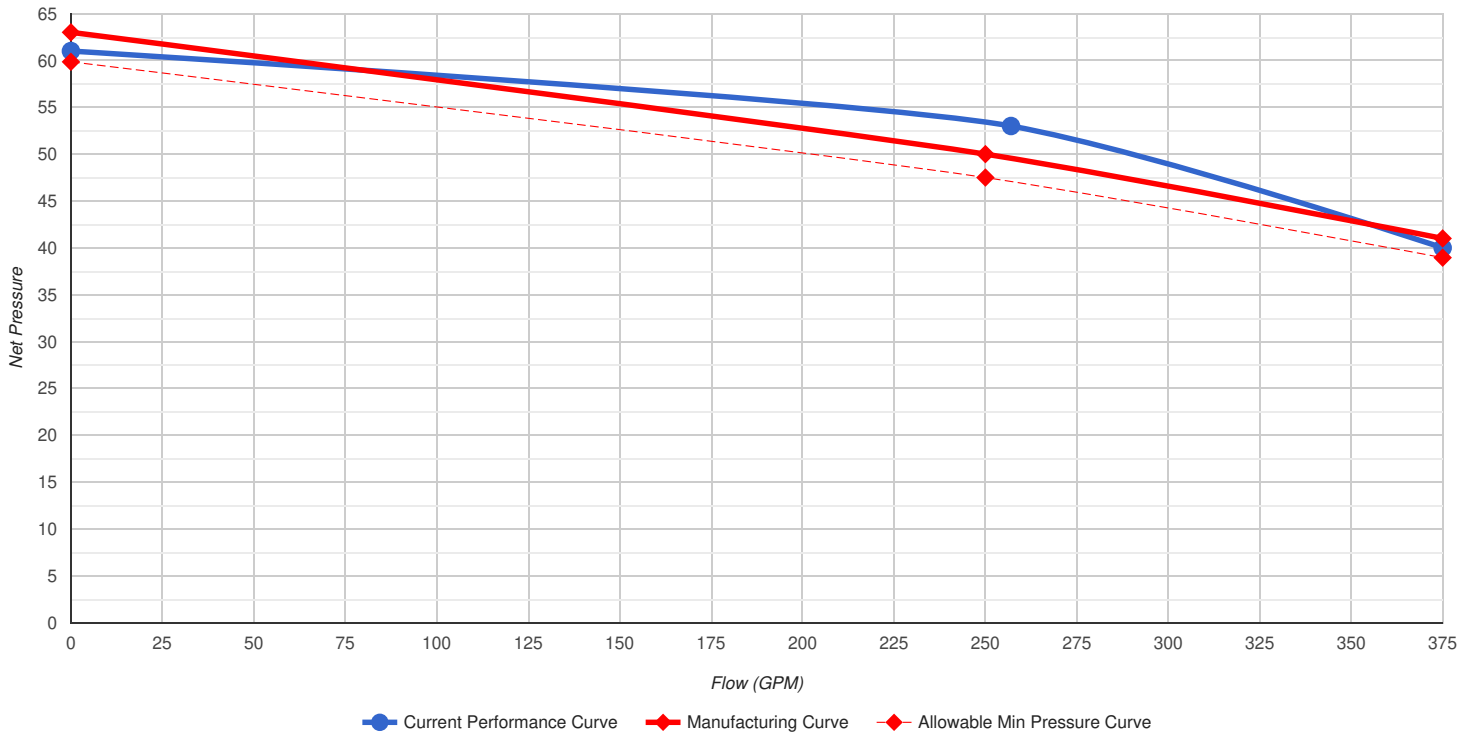
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Report of Inspection / Test for Asset - Hydrant #1

Fire Hydrant Information

Description	Mueller 5 q/4
Location	SE Corner Stadium
Static Hydrant Description	Red body / White top

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

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Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Hydrant #2

Fire Hydrant Information

Description	Mueller 5 1/4
Location	NE Stadium Corner
Static Hydrant Description	Red body /white top

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Hydrant #3

Fire Hydrant Information

Description	M & H 5 1/4
Location	NW Behind Baseball Concessions
Static Hydrant Description	Red ahydrant

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Hydrant #4

Fire Hydrant Information

Description	Mueller 5 1/4
Location	Between tennis court and baseball field

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Water-Based Systems # 127557
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Static Hydrant Description

Red hydrant

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

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Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
Career center/Bldg A dry system	60	50	60	2	Yes	Yes
Career center/Bldg A wet system 1	60	45	60	2	Yes	Yes
Career center/Bldg A Wet System 2	60	45	60	2	Yes	Yes

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
Career center/Bldg A dry system	Classroom 1618 closet	1" globe valve	bad compressor.	Yes	Yes	Yes	Yes	Yes
Career center/Bldg A wet system 1	Gym Weight Room SE closet	1" globe valve	57	Yes	Yes	Yes	Yes	Yes
Career center/Bldg A Wet System 2	Engineering Classroom 1518 closet	1" globe valve	74	Yes	Yes	Yes	Yes	Yes

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
Career center/Bldg A dry system	Control valve	Pump room	Butterfly	2"	Monitored	Yes	Yes	Yes	Yes	Yes	10.5
Career center/Bldg A wet system 1	Control valve	Career center/Bldg A Pump room	Butterfly	4"	Monitored	Yes	Yes	Yes	Yes	N/A	16
Career center/Bldg A Wet System 2	Control valve	Career center/Bldg A Pump room	Butterfly	4"	Monitored	Yes	Yes	Yes	Yes	N/A	16
	Dead head	Mechanical room on north east corner	Butterfly	4"	Monitored	Yes	Yes	Yes	Yes	N/A	16

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VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
	Test header	Mechanical room on north east corner	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	N/A	16
	Suction side of pump	Mechanical room on north east corner	OS&Y	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	13
	Jockey pump suction	Mechanical room on north east corner	OS&Y	1-1/4 "	Monitored	Yes	Yes	Yes	Yes	Yes	9
	Discharge side of jockey pump	Mechanical room on north east corner	Butterfly	1-1/4 "	Monitored	Yes	Yes	Yes	Yes	Yes	9
	Suction side of pump	Career center/Bldg A pump room	OS&Y	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	13

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
Career center/Bldg A dry system	1-1/4" main drain	On Riser	Globe Valve	Yes	Yes

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Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
	Mechanical room on north east corner	1	Wet system 1 control valve	Butterfly Tamper Switch			
	Mechanical room on north east corner	1	Gym mechanical room	Butterfly Tamper Switch			
	Classroom 1618	1	System #2	Water Flow Switch			
		1		Water Flow Switch			N/A
Dead Head Valve	Gym mechanical room	1	Dead head valve	Butterfly Tamper Switch			Pass
Test Header	Gym mechanical room	1	Test header valve	Butterfly Tamper Switch			Pass
Jockey discharge	Gym mechanical room	1	Discharge side of jockey pump	Butterfly Tamper Switch			Pass
FP suction	Gym mechanical room	1	Suction side of pump	Os&Y Tamper Switch			Pass
Jockey Suction	Gym mechanical room	1	Suction side of jockey pump	Os&Y Tamper Switch			Pass
Deluge System	Gym mechanical room	1	Gym Courtyard Canopy	Butterfly Tamper Switch			Pass
Deluge System	Gym mechanical room	1	Gym Courtyard Canopy	High Pressure Switch			Pass
Deluge System	Gym mechanical room	1	Gym Courtyard Canopy	Low Air Pressure Switch			Pass
Pump Suction	Gym mechanical room	1	Suction side of pump	Os&Y Tamper Switch		Cover missing	Pass
Dead Head	Gym mechanical room	1	Dead head	Butterfly Tamper Switch			Pass
Test Header	Gym mechanical room	1	Test header valve	Butterfly Tamper Switch			Pass
System #2	Gym mechanical room	1	Career center/Bldg A wet system 2	Butterfly Tamper Switch			Pass

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Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
System #2	Gym mechanical room	1	Career center/Bldg A wet system 2	Water Flow Switch			Pass
System #1	Gym mechanical room	1	Career center/Bldg A wet system 1	Butterfly Tamper Switch			Pass
System #1	Gym mechanical room	1	Career center/Bldg A Wet System 1	Water Flow Switch			Pass

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Questions with Photos and Notes

Career Center/Bldg A fire pump - Pump house/room proper temperature? Yes

Notes:

Above 40°.

Career Center/Bldg A fire pump - At 0% Total Flow 0

Notes:

Zero flow/churn.

Career Center/Bldg A fire pump - Jockey Settings? (on/off) Yes

Notes:

In 25#, out 40#.

Career Center/Bldg A fire pump - At 100%: Suction Pressure: 2

Notes:

Tank fed

- Is the priming level correct and has the low air pressure signal passed it's test? Yes

Notes:

Low air done manually.

- Dry-type sprinklers replaced or successfully sample tested within last 10 years? Yes

Notes:

Dry pendents 2016.

- Is the FDC plainly visible? Yes

Notes:

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Career center/Bldg A Wet System 2 - Record initial static pressure

60

Notes:

Main drain done on system #1. End of header.

Career center/Bldg A dry system - Without Accelerator: Time to Trip

N/A

Notes:

Could not trip system. Air compressor is bad. Would not be able to reset system to normal condition.

Report of Inspection / Test

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FIRE PROTECTION, INC.

2023-04-21

Property

Old Citronelle High School

KH

19325 Rowe Street

Cintronelle AL 36522

Mario Morrisette

Print Date: 2023-04-21

Conducted by: Tony Kittrell

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 127557

FL Fire Sprinkler Inspector FP118-000244

LA Fire Sprinkler Inspector E22293

Industrial Commercial Fire Protection, Inc

MS-14326-SC AL-3693 LA-F1173 FL-873651-
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Career center/Bldg A dry system - Has it passed air leakage test?

Yes

Notes:

Holding air at 20#.

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Property

Old Citronelle High School
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Career center/Bldg A dry system - Have automatic air maintenance devices passed test?

Yes

Notes:

Air compressor is bad. Won't come one.

Career center/Bldg A dry system - With Accelerator: Did alarm operate?

Yes

Notes:

Through alarm test line.

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FIRE PROTECTION, INC.

2023-04-21

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Deficiencies - General Questions

Deficiency #1

Is the information sign attached and legible?: No

Notes:

Deficiencies - General Wet System Questions

None

Deficiencies - General Dry System Questions

Deficiency #2

Has the dry-pipe valve passed inspection?: No

Notes: Could not trip out due to bad air compressor.

Deficiencies - Career center/Bldg A dry system

None

Deficiencies - Career center/Bldg A wet system 1

None

Deficiencies - Career center/Bldg A Wet System 2

None

Deficiencies - Career Center/Bldg A fire pump

Deficiency #3

Controller indicating power on?: No

Notes: Light bulb burnt out.

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Deficiency #3 - Photo #1



Date Taken: April 21, 2023

Deficiencies - Hydrant #1

Deficiency #4

Is there a hydrant wrench that is available and accessible?: No

Notes:

Deficiency #5

Is the Road box and shutoff valve visible and accessible?: No

Notes: Could not locate.

Deficiencies - Hydrant #2

Deficiency #6

Is there a hydrant wrench that is available and accessible?: No

Notes:

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Deficiency #7

Is the Road box and shutoff valve visible and accessible?: No

Notes: Could not locate.

Deficiencies - Hydrant #3

Deficiency #8

Is there a hydrant wrench that is available and accessible?: No

Notes:

Deficiencies - Hydrant #4

Deficiency #9

Is there a hydrant wrench that is available and accessible?: No

Notes:

Deficiency #10

Are pumper and nozzle caps tight?: No

Notes: Missing cap .

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Water-Based Systems # 127557
FL Fire Sprinkler Inspector FP118-000244
LA Fire Sprinkler Inspector E22293

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Deficiency #10 - Photo #1



Date Taken: April 21, 2023

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

None

Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

None

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

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NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 127557

FL Fire Sprinkler Inspector FP118-000244

LA Fire Sprinkler Inspector E22293

Industrial Commercial Fire Protection, Inc

MS-14326-SC AL-3693 LA-F1173 FL-873651-
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None

Deficiencies - Fire Department Connection

None

Deficiencies - Inspectors Test Connection

None

Deficiencies - Valves

None

Deficiencies - Drain Valves

None

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Water-Based Systems # 127557
FL Fire Sprinkler Inspector FP118-000244
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Inspector Signature

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

Inspector Name

Tony Kittrell
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
127557
FL Fire Sprinkler
Inspector FP118-000244
LA Fire Sprinkler
Inspector E22293

Signature

A handwritten signature in black ink that reads 'Tony Kittrell'. The signature is written in a cursive style with a long horizontal stroke at the end.

Date Completed

2023-04-21

Report of Inspection / Test

Annual NFPA 25

2023-06-15

Property

Old Shell Road Magnet
KH

3160 Heather Street

Mobile AL 36607

Mario Morrisette

Print Date: 2023-06-15

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc

MS-14326-SC AL-3693 LA-F1173 FL-873651-

0001-2007

1209C Highway 613 South

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FIRE PROTECTION, INC.

IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Property

Old Shell Road Magnet
KH

3160 Heather Street
Mobile AL 36607

Mario Morrisette

Print Date: 2023-06-15

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc
MS-14326-SC AL-3693 LA-F1173 FL-873651-
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FIRE PROTECTION, INC.

Is the clapper and automatic drain valve in place and properly operating?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
---	---	---	---

SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

VALVE AREA

Report of Inspection / Test

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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
---	---	---	---

ALARMS

Is the alarm valve free from physical damage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

MAINTENANCE

Report of Inspection / Test

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Property

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NICET LEVEL II - Inspection & Testing of
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<p>Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>If sprinklers have been replaced, were they proper replacements?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If conditions were found that required flushing, was flushing of the system conducted?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Was a drain test conducted after opening any closed valve?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Operating stem of all OS&Y valves lubricated, completely closed and reopened?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?</p>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

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Report of Inspection / Test for Asset - Fire Hydrant #1

Fire Hydrant Information

Hydrant ID	#1
Description	American Darling 5-1/4 B84B
Location	NE corner of Gym

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

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Property

Old Shell Road Magnet
KH

3160 Heather Street

Mobile AL 36607

Mario Morrisette

Print Date: 2023-06-15

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc

MS-14326-SC AL-3693 LA-F1173 FL-873651-

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1209C Highway 613 South

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FIRE PROTECTION, INC.

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	85	Residual Pressure	60
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Fire Hydrant #2

Fire Hydrant Information

Hydrant ID	#2
Description	American Darling 5-1/4" B84B
Location	West Side of School

QUESTIONS

Is there a hydrant wrench that is available and accessible? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Print Date: 2023-06-15

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc

MS-14326-SC AL-3693 LA-F1173 FL-873651-

0001-2007

1209C Highway 613 South

Luedale MS 39452

Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	85	Residual Pressure	60
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
Wet System	74	60	85	1	Yes	Yes

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
Wet System	Cafeteria Exterior Boiler Rm	1" Inspectors Test Valve	1:08	Yes	Yes	Yes	Yes	Yes

Report of Inspection / Test

Annual NFPA 25

2023-06-15

Property

Old Shell Road Magnet
KH

3160 Heather Street
Mobile AL 36607

Mario Morrisette

Print Date: 2023-06-15

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VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
Wet System	Victaulic Control Valve	South Exterior Mech Rm. / near portable	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	16

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
Wet System	2"Main Drain	@ Riser	Angle Valve	Yes	Yes

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Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
	@ Riser	1	Potter	Water Flow Switch			
	@ Riser	1	Victaulic	Butterfly Tamper Switch			Pass
	Exterior of West Wall	1	FDC	Fire Department Connection		Sign faded	Pass

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Deficiencies - General Questions

Deficiency #1

Is the FDC plainly visible?: No

Notes: FDC is not visible from Drive. Needs multiple signs with directional arrows

Deficiency #2

Is the FDC swivels and couplings not damaged?: No

Notes: Needs lubrication

Deficiency #3

Is the FDC identification sign(s) in place?: No

Notes: Sign is faded

Deficiency #3 - Photo #1



Date Taken: June 15, 2023

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Deficiency #4

Are visible sprinklers free of foreign materials including paint?: No

Notes: Library entrance - (1)
Classrooms - dusty heads throughout (6-8/room)
Cafeteria Dining- (24) dusty in high ceiling
Office RR- 1

Deficiency #4 - Photo #1



Date Taken: June 12, 2023

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Deficiency #4 - Photo #2



Date Taken: June 12, 2023

Deficiency #5

Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?: No

Notes: 15-20 chrome 155 pendants needs to be replaced in kitchen area/ rooms

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Deficiency #5 - Photo #1



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FIRE PROTECTION, INC.

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Deficiency #5 - Photo #2



Date Taken: June 15, 2023

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Deficiency #5 - Photo #3



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Deficiency #5 - Photo #4



Date Taken: June 15, 2023

Deficiency #6

Is the building fully protected by sprinklers?: No

Notes: Mech rm 1&2- needs coverage under ducts

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Deficiency #6 - Photo #1



Date Taken: June 12, 2023

Deficiency #7

Are all escutcheon plates installed on sprinkler heads?: No

Notes: Missing chrome SR. In-
Sprinkler room
Kitchen / kitchen rooms

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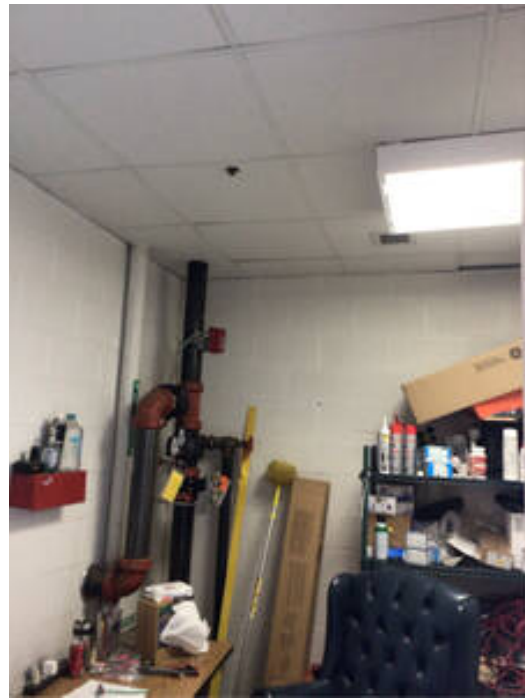
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Deficiency #7 - Photo #1



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Deficiency #7 - Photo #2



Date Taken: June 15, 2023

Deficiencies - General Wet System Questions

None

Deficiencies - Wet System

None

Deficiencies - Fire Hydrant #1

Deficiency #8

Are hydrant caps, stems, outlets, and threads lubricated and in good condition?: No

Notes: 5-1/4cap needs new gasket; leaks

Deficiencies - Fire Hydrant #2

None

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

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None

Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

None

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

None

Deficiencies - Alarm Pressure Switch

None

Deficiencies - PIV Tamper Switch

None

Deficiencies - Inspectors Test Connection

None

Deficiencies - Valves

None

Deficiencies - Drain Valves

None

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The logo for Industrial-Commercial Fire Protection, Inc. features the letters "ICFP" in a large, bold, yellow font with a red-to-orange gradient. The letters are outlined in black and set against a white background with a thin red horizontal line above and below them.

FIRE PROTECTION, INC.

Recommendations

System is purple tagged

Report of Inspection / Test

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Inspector Signature

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

Inspector Name

Bora Yann
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
153252

Signature

A handwritten signature in black ink, appearing to be 'Bora Yann', written in a cursive style.

Date Completed

2023-06-15

Report of Inspection / Test

Annual NFPA 25

2023-09-12

Property

Orchard Elementary
KH

6400 Howells Ferry Road

Mobile AL 36618

Mario Morrisette

Print Date: 2023-09-12

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NICET LEVEL II - Inspection & Testing of
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FIRE PROTECTION, INC.

IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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FIRE PROTECTION, INC.

Is the clapper and automatic drain valve in place and properly operating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
---	---	---	---

SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

VALVE AREA

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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
---	---	---	---

ALARMS

Is the alarm valve free from physical damage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

MAINTENANCE

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<p>Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>If sprinklers have been replaced, were they proper replacements?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If conditions were found that required flushing, was flushing of the system conducted?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Was a drain test conducted after opening any closed valve?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Operating stem of all OS&Y valves lubricated, completely closed and reopened?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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2023-09-12

Property

Orchard Elementary
KH

6400 Howells Ferry Road

Mobile AL 36618

Mario Morrisette

Print Date: 2023-09-12

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc

MS-14326-SC AL-3693 LA-F1173 FL-873651-

0001-2007

1209C Highway 613 South

Lucedale MS 39452

Report of Inspection / Test for Asset - Fire Hydrant #1

Fire Hydrant Information

Hydrant ID	#1
Description	M&H. 5-1/4"
Location	Front of Gym

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

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Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	45	Orifice Size	2.5
Orifice Coefficient	1.0	Flow	1125

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	750
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Report of Inspection / Test for Asset - Fire Hydrant #2

Fire Hydrant Information

Hydrant ID	#2
Description	American Darling 5-1/4" B84B
Location	@ D-Wing

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	45	Orifice Size	2.5
Orifice Coefficient	1.0	Flow	1125

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	750
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MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
D-Wing Wet System	70	45	70	3	Yes	Yes
Gym Wet System	70	50	65	3	Yes	Yes

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
Gym Wet System	@ Riser	1" Inspectors Test Valve	39	Yes	Yes	Yes	Yes	Yes

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FIRE PROTECTION, INC.

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
D-Wing Wet System	Victaulic Control Valve	Exterior Mechanical Room West Side of Building	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	16
Gym Wet System	Mueller OS&Y	Gym Storage Room	OS&Y	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	14

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
D-Wing Wet System	2" Main Drain	@ Riser	Angle Valve	N/A	Yes
Gym Wet System	2" Main Drain	@ Riser	Angle Valve	N/A	Yes

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FIRE PROTECTION, INC.

Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
	D-Wing	1	Victaulic	Butterfly Tamper Switch			Pass
	D-Wing	1	Potter	Water Flow Switch		40sec Manually tripped tested	
	D-Wing	1	FDC	Fire Department Connection		Seized	Fail
	Gym	1	Potter	Os&Y Tamper Switch		Needs adjusting; manually tripped tested	Pass
	Gym	1	Potter	Water Flow Switch			Pass
	Remote @ Street	1	FDC	Fire Department Connection			Pass

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Deficiencies - General Questions

Deficiency #1

Do valve supervisory switches indicate movement?: No

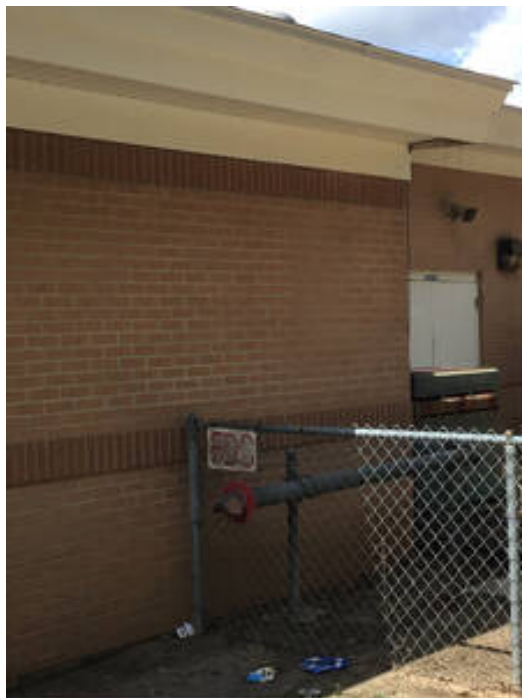
Notes: Manually tested all supervised valves , tampers needs adj

Deficiency #2

Is the FDC swivels and couplings not damaged?: No

Notes: D Bldg - swivels seized

Deficiency #2 - Photo #1



Date Taken: September 12, 2023

Deficiency #3

Is the building fully protected by sprinklers?: No

Notes: Only Gym & D wing

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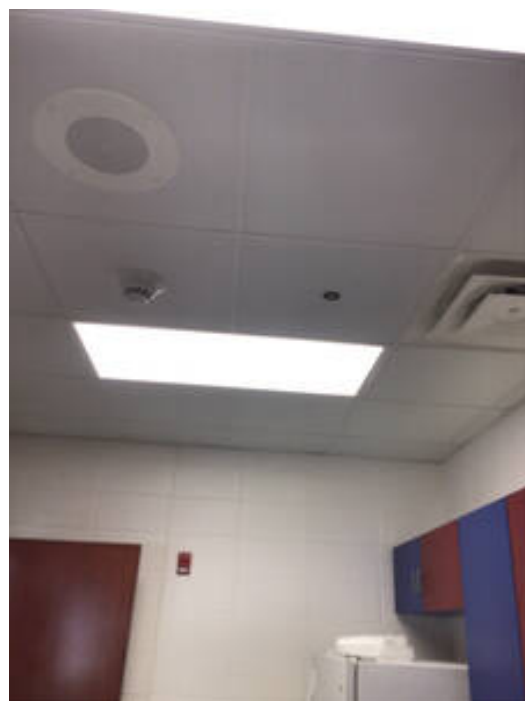
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Deficiency #4

Are all escutcheon plates installed on sprinkler heads?: No

Notes: Gym- missing concealed plate

Deficiency #4 - Photo #1



Date Taken: September 12, 2023

Deficiencies - General Wet System Questions

None

Deficiencies - D-Wing Wet System

None

Deficiencies - Gym Wet System

None

Deficiencies - Fire Hydrant #1

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Deficiency #5

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - Fire Hydrant #2

Deficiency #6

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

None

Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

None

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

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Deficiency #7

Address

Location: D-Wing

Equipment Type: Fire Department Connection

QTY: 1

Description: Siamese Connection

Status: Fail

Notes:

Deficiencies - Alarm Pressure Switch

None

Deficiencies - PIV Tamper Switch

None

Deficiencies - Inspectors Test Connection

None

Deficiencies - Valves

None

Deficiencies - Drain Valves

None

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Inspector Signature

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

Inspector Name

Bora Yann
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
153252

Signature

A handwritten signature in black ink, appearing to be 'Bora Yann', written in a cursive style.

Date Completed

2023-09-12

Report of Inspection / Test

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2023-09-01

Property

O'Rourke Elementary
KH

1975 Leroy Stevens Road
Mobile AL 36695
Mario Morrisette
Print Date: 2023-09-01

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IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Is the clapper and automatic drain valve in place and properly operating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
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SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

VALVE AREA

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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
---	---	---	---

ALARMS

Is the alarm valve free from physical damage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

MAINTENANCE

Report of Inspection / Test

Annual NFPA 25

INDUSTRIAL-COMMERCIAL



FIRE PROTECTION, INC.

2023-09-01

Property

O'Rourke Elementary
KH

1975 Leroy Stevens Road
Mobile AL 36695

Mario Morrisette

Print Date: 2023-09-01

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc
MS-14326-SC AL-3693 LA-F1173 FL-873651-
0001-2007

1209C Highway 613 South
Lucaledale MS 39452

<p>Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>If sprinklers have been replaced, were they proper replacements?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If conditions were found that required flushing, was flushing of the system conducted?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Was a drain test conducted after opening any closed valve?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Operating stem of all OS&Y valves lubricated, completely closed and reopened?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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Report of Inspection / Test for Asset - Fire Hydrant #1 / Backside of Building B

Fire Hydrant Information

Hydrant ID	#1
Description	Clow
Location	Backside of Building B

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Report of Inspection / Test

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2023-09-01

Property

O'Rourke Elementary
KH

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NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

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MS-14326-SC AL-3693 LA-F1173 FL-873651-
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Hydrant Flow Test

Static Pressure	55	Residual Pressure	N/A
Pitot Pressure	20	Orifice Size	2.5
Orifice Coefficient	1.0	Flow	750

Static Hydrant

Static Pressure	55	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	750
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Report of Inspection / Test for Asset - Fire Hydrant #2 Right Side of Parking Lot

Fire Hydrant Information

Hydrant ID	#2
Description	M&H
Location	Right Side of Parking Lot

QUESTIONS

Is there a hydrant wrench that is available and accessible? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flow acceptable water? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	55	Residual Pressure	N/A
Pitot Pressure	20	Orifice Size	2.5
Orifice Coefficient	1.0	Flow	750

Static Hydrant

Static Pressure	55	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	750
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Report of Inspection / Test for Asset - Fire Hydrant #3 Behind Cafeteria

Fire Hydrant Information

Hydrant ID	#3
Description	M&H
Location	Behind Cafeteria

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	55	Residual Pressure	N/A
Pitot Pressure	20	Orifice Size	2.5
Orifice Coefficient	1.0	Flow	750

Static Hydrant

Static Pressure	55	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	55	Total Flow	750
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MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
System #1 Building B	50	35	55	3	Yes	Yes

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NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

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INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
System #1 Building B	Exterior Mechanical Room end of Building by Gym	1" Inspectors Test Valve	35	Yes	No	Yes	Yes	Yes

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
System #1 Building B	Control Valve	Exterior Mechanical Room by Portable Buildings	OS&Y	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	13.5

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
System #1 Building B	2" Main Drain	@ Riser	Ball Valve	Yes	Yes

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FIRE PROTECTION, INC.

Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
	@ Riser	1	Potter	Water Flow Switch		35 sec , manually tested	Pass
	@ Riser	1	Potter	Os&Y Tamper Switch		Needs adjusting / Activated F/A	Pass
	Remote by Street West Side of Gym	1	FDC	Fire Department Connection		Missing sign	Pass
	Behind Bldg B	1	FDC	Fire Department Connection		Missing cap	Fail

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Questions with Photos and Notes

- Is the visible pipe in good condition with no external corrosion?

Yes

Notes:

Surface rust

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Deficiencies - General Questions

Deficiency #1

Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?: No

Notes: Did not visually see one

Deficiency #2

Do valve supervisory switches indicate movement?: No

Notes: Tamper needs adjusting/ does not report to F/A panel when opening / closing valves

Deficiency #3

Are alarms and supervisory devices not damaged?: No

Notes: Tamper supervisory activates F/A

Deficiency #4

Are the FDC caps and plugs in place?: No

Notes: Bldg B - missing caps

Deficiency #5

Is the FDC identification sign(s) in place?: No

Notes: Near Gym - no sign

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Deficiency #5 - Photo #1



Date Taken: September 01, 2023

Deficiency #6

Are control valves properly sealed and/or supervised?: No

Notes: Tamper activates F/A

Deficiency #7

Is the building fully protected by sprinklers?: No

Notes: Only Bldg B

Deficiency #8

Are all Identification Signs in place?: No

Notes: No data plaque

Deficiencies - General Wet System Questions

None

Deficiencies - System #1 Building B

None

Deficiencies - Fire Hydrant #1 / Backside of Building B

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Deficiency #9

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - Fire Hydrant #2 Right Side of Parking Lot

Deficiency #10

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - Fire Hydrant #3 Behind Cafeteria

Deficiency #11

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

None

Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

None

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

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Deficiency #12

Address

Location: Behind Bldg B
Equipment Type: Fire Department Connection
QTY: 1
Description: 1" wall Siamese connection

Status: Fail

Notes:

Deficiencies - Alarm Pressure Switch

None

Deficiencies - PIV Tamper Switch

None

Deficiencies - Inspectors Test Connection

Deficiency #13

Location: Exterior Mechanical Room end of Building by Gym
Description: 1" Inspectors Test Valve
Terminates in Smooth Orifice?: No

Notes: Manually tested switch , could not locate ITV

Deficiencies - Valves

None

Deficiencies - Drain Valves

None

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FIRE PROTECTION, INC.

Recommendations

Purple tagged

Report of Inspection / Test

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Inspector Signature

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

Inspector Name

Bora Yann
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
153252

Signature

A handwritten signature in black ink, appearing to be "BY", written in a cursive style.

Date Completed

2023-09-01

Report of Inspection / Test

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INDUSTRIAL-COMMERCIAL



2023-06-05

Property

Pearl Haskew Elementary School
KH

7001 White Oak Drive
Irvington AL 36544

Mario Morrisette

Print Date: 2023-06-05

Conducted by: Bora Yann

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IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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2023-06-05

Property

Pearl Haskew Elementary School
KH

7001 White Oak Drive

Irvington AL 36544

Mario Morrisette

Print Date: 2023-06-05

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc

MS-14326-SC AL-3693 LA-F1173 FL-873651-

0001-2007

1209C Highway 613 South

Lucaledale MS 39452

INDUSTRIAL-COMMERCIAL



FIRE PROTECTION, INC.

Is the clapper and automatic drain valve in place and properly operating?

Yes
 No
 NA

Is the FDC identification sign(s) in place?

Yes
 No
 NA

SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?

Yes
 No
 NA

Are visible sprinklers in the proper position: upright, pendent, sidewall?

Yes
 No
 NA

Are visible sprinklers free of corrosion and physical damage?

Yes
 No
 NA

Is there proper clearance below the sprinklers?

Yes
 No
 NA

Are visible sprinklers free of foreign materials including paint?

Yes
 No
 NA

Is there liquid in all visible glass bulb sprinklers?

Yes
 No
 NA

Are there spare sprinklers and a sprinkler wrench?

Yes
 No
 NA

Is the information sign attached and legible?

Yes
 No
 NA

Are all the sprinklers dated 1920 or later?

Yes
 No
 NA

Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?

Yes
 No
 NA

Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?

Yes
 No
 NA

Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?

Yes
 No
 NA

Dry-type sprinklers replaced or successfully sample tested within last 10 years?

Yes
 No
 NA

Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?

Yes
 No
 NA

Is the building fully protected by sprinklers?

Yes
 No
 NA

PIPES

Is the visible pipe in good condition with no external corrosion?

Yes
 No
 NA

Does visible pipe have no mechanical damage or leaks?

Yes
 No
 NA

Does visible pipe have no external loads?

Yes
 No
 NA

Are visible pipe hangers and seismic braces not damaged or loose?

Yes
 No
 NA

Is the pipe through freezers free if any ice blockage?

Yes
 No
 NA

Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)

Yes
 No
 NA

VALVE AREA

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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
---	---	---	---

ALARMS

Is the alarm valve free from physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

MAINTENANCE

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<p>Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>If sprinklers have been replaced, were they proper replacements?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If conditions were found that required flushing, was flushing of the system conducted?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Was a drain test conducted after opening any closed valve?</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
<p>Operating stem of all OS&Y valves lubricated, completely closed and reopened?</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<p>Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Report of Inspection / Test for Asset - Fire Hydrant #1

Fire Hydrant Information

Description	Mueller
Location	Front of Pick -up Line
Static Hydrant Description	Grey Body W/ Red Top

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

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Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Fire Hydrant #2

Fire Hydrant Information

Description	Mueller 5 1/4
Location	Rear of pick-up line
Static Hydrant Description	Grey Body W/ Red Top

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Fire Hydrant #3

Fire Hydrant Information

Description	Mueller 5 1/4
Location	Left of Office
Static Hydrant Description	Grey Body W/ Red Top

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Fire Hydrant #4

Fire Hydrant Information

Description	Mueller 5 1/4
Location	Outside Gym

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FIRE PROTECTION, INC.

Static Hydrant Description

Grey body W/ Red top

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

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Static Hydrant

Static Pressure

N/A

Residual Pressure

N/A

Final Hydrant Flow Test

Flow at 20 psi residual pressure:

N/A

Total Flow

N/A

Report of Inspection / Test for Asset - Fire Hydrant #5

Fire Hydrant Information

Description

Mueller 5 1/4

Location

Beside Cafeteria

Static Hydrant Description

Grey Body W/ Red Top

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flow acceptable water?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Are strainers, if installed, free from corrosion and not blocked?

Yes

No

NA

Did monitor nozzles move through complete range?

Yes

No

NA

Are monitor nozzles lubricated?

Yes

No

NA

Hydrant Flow Test

Static Pressure

N/A

Residual Pressure

N/A

Pitot Pressure

N/A

Orifice Size

N/A

Orifice Coefficient

N/A

Flow

N/A

Static Hydrant

Static Pressure

N/A

Residual Pressure

N/A

Final Hydrant Flow Test

Flow at 20 psi residual pressure:

N/A

Total Flow

N/A

Report of Inspection / Test for Asset - Electric Fire Pump

Fire Pump Information

Property Owner

MCPSS

Property Name

Pearl Haskew Elementary

Property Address

7001 White Oak Drive

Demand(s) of Fire protection systems supplied by pump:

Sprinkler System

Pump (Horizontal or Vertical):

Vertical

Pump Manufacturer

Patterson

Shop/Serial Number

FP-C052930

Model

4x3 VIP

Rated GPM

250

Rated Pressure

80

Rated 150 Pressure

74

Rated 0 Pressure

89

Rated RPM

3555

Suction

City

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If Tank, size and height	N/A
Driver, (electric or diesel engine)	Electric
Engine Manufacturer	WEG
Engine Shop/Serial Number	16MAR05 B099819
Engine Model	025360S3E256JPV
Rated Horsepower	25
Rated Speed	3520
Rated Voltage	208-230/460
Operating Voltage	460
Rated Amps	30.2
Phase Cycles	3
Service Factor	1.15
Controller Manufacturer	Eaton Cutler Hammer
Controller Shop/Serial Number	16E3881E
Controller Model	FD20-25D-L1-P-T-F
Jockey Pump Manufacturer	Baldor
Jockey Pump Model	84Z04002
Jockey Pump Serial Number	34G446-0255G1
Jockey Controller Manufacturer	Eaton Cutler Hammer
Jockey Controller Model	FDJP-0.75D
Jockey Controller Serial Number	16E3881J
Transfer Switch Manufacturer	N/A
Transfer Switch Model	N/A
Transfer Switch Serial Number	N/A

OWNER SECTION

Is there a Jockey Pump on system?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Jockey Settings? (on/off)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the fire pump in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the pump remained in service since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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CONTROLLER TEST

Did the pump start at least 6 times from automatic sources?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Was each automatic starting feature tested at least once?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
For electric driven pump controllers: on a simulation of a power failure, while pump is under peak load, did the transfer switch transfer from the normal to emergency source without opening overcurrent protection devices on either line?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	For electric driven pump controllers: when normal power was restored, did retransfer from emergency to normal power occur without overcurrent protection devices opening on either line?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
For electric driven pump controllers: were at least half of the automatic and manual starts required performed with the pump connected to the alternate source?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Were all signal conditions simulated demonstrating workable operation?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

INSPECTION

Pump house/room proper temperature?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Ventilating louvers free to operate?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are suction, discharge and bypass valves open?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Piping free from leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Suction and system pressure gauges normal?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Suction reservoir, if provided, full?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Wet pit suction screens are clean and in place?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Waterflow test valves in closed position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Controller indicating power on?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Transfer switch indicating normal situation?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Isolation switch closed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Pump in correct phase?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Oil level in motor sight glass in correct range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Circulation relief valve flowing water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Pressure relief valves operating with proper pressure downstream while pump is operational?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

TESTING

Electric pump started automatically?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Electric motor driven pump ran for 10 min?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
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Packing gland showing slight discharge? (Adjust if necessary)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Packing boxes, bearing and pump casing free from overheating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Time for engine motor to reach full speed:	3	For automatic stop controllers, record time pump runs after starting:	3
Electric motor driven pumps with reduced voltage or reduced current starting, record the time the controller is in the 1st step:	N/A	Are all above times and pressures and results acceptable?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Circulation and pressure relief valves operated properly during all flow tests?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	No alarm indicators or other visible abnormalities observed during no-flow test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Were Suction screens cleaned after flow?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Automatic transfer switch test: Power failure simulated during peak flow?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Automatic transfer switch test: Connection made to alternate source?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Automatic transfer switch test: After termination of simulated power failure did motor reconnect to source?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
All alarm conditions simulated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All alarms operated?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

MAINTENANCE

Fuel tank level, tank float switch, and solenoid valve operation acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Flexible hoses and connectors in fuel and coolant systems acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Oil Level and lube oil heater acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Coolant level acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Water pump for coolant system operating?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Jacket water heater for coolant system okay?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Exhaust system free of leakage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Drain condensate trap on exhaust system operational?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Connections to electrical system acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Cranking voltage acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Isolation switch and circuit breaker exercised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Battery case clean, dry and free of corrosion?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Charger and charge rate passed inspection and battery charge being equalized?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Do Circuit breakers appear clean?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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Cleaned or replaced crank case breather in lubrication systems?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Cleaned water strainer in coolant system?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Battery terminals clean and tight?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Electrical systems free of wire chafing?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Manual starting means on electrical systems operated and boxes, panels and cabinets cleaned?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Antifreeze tested in coolant system?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Flexible exhaust section acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Changed pump bearing lubrication?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Shaft end play acceptable?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Pressure gauges and sensors accurate?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Coupling alignment acceptable?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Transmission coupling, right angle gear drive and mechanical moving parts lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Circuit breakers passed trip test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Emergency manual starting means operated without power?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Electrical connections secure?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the volt meter and ammeter accurate?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Pressure switch settings calibrated?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Motor bearing greased?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Fuel tank free of water and foreign material?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Fuel tank vents and overflow pipes free of obstructions?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Fuel piping acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Antifreeze changed in coolant system?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Heater exchange cleaned out?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Ducts and louvers for combustion air okay?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Exhaust system hanged in supports acceptable and system free of back pressure?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Control and power wiring tight?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
No corrosion on circuit boards?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	No cracked cable wire insulation?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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No leaks in plumbing parts?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	No sign or water on electrical parts?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
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FLOW TEST

Run the pump at no-load, rated load and peak load (usually 150% of the rated load) conditions. For variable speed drivers, run the test with pressure limiting control "on" at 25, 50, 75, 100, 125, and 150% of rated load and then again rated speed w/ the pump isolated from the fire protection system and the relief valve closed.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Was equipment and gauges calibrated?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Date of last calibration	01/31/23	For electric motors operating at the rated voltage and frequency, is the ampere demand on each phase less than or equal to the product of the full load ampere rating times the allowable service factor as stamped on the motor nameplate?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
For electric motors operating under varying voltage, was the product of the actual voltage and current demand on each phase less than or equal to the product of the rated full load current times the rated voltage times the allowable service factor?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	For electric motors operating under varying voltage, did the voltage stay within the range of 95% to 110% of the rated voltage during the test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Did engine-drive unit show no signs of overload or stress?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Was the governor set to properly regulate the engine speed at rated pump speed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Did the gear drive assembly operate without excessive objectionable noise, vibration, or heating?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Was the unit started and brought up to rated speed without interruption under discharge conditions equal to peak load?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Did the pump perform equal to the manufacturer's curve within the accuracy limits of the test equipment?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the unadjusted performance discharge curve meet or exceed the fire protection system demands?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Were there no vibrations that could damage any fire pump component?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the pump perform at all conditions without objectionable overheating of any component?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have electric motor pumps pass the phase reversal test on normal and alternate (if provided) power?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	For vertical turbine pumps taking the suction from wells, is the water level capable of being recorded?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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PERFORMANCE

Rated %	Driver speed: RPM	Total Flow	Net Pressure: PSI	Discharge Pressure: PSI	Suction Pressure: PSI
0%	N/A	No Flow / Churn Only	89.0	154.0	65.0
100%	N/A	257	84.0	142.0	58.0
150%	N/A	386	86.0	137.0	51.0
Roof Shot	N/A	N/A	0.0	0.0	0.0

ELECTRIC MOTOR

	L1 Voltage	L1 Amperes	L2 Voltage	L2 Amperes	L3 Voltage	L3 Amperes
0%	N/A	N/A	N/A	N/A	N/A	N/A
100%	N/A	N/A	N/A	N/A	N/A	N/A
150%	N/A	N/A	N/A	N/A	N/A	N/A
Roof Shot	N/A	N/A	N/A	N/A	N/A	N/A

Pump Flow Detail

Coefficient (same for all): .97

Nozzle/Orifice Size: 1.75 (inches)

	PITOT					
	1	2	3	4	5	6
0%	N/A	N/A	N/A	N/A	N/A	N/A
100%	6.6	0	0	0	0	0
150%	14.9	0	0	0	0	0
Roof Shot	N/A	N/A	N/A	N/A	N/A	N/A

	FLOW					
	No Flow / Churn Only	No Flow / Churn Only	No Flow / Churn Only	No Flow / Churn Only	No Flow / Churn Only	No Flow / Churn Only
0%	No Flow / Churn Only	No Flow / Churn Only	No Flow / Churn Only	No Flow / Churn Only	No Flow / Churn Only	No Flow / Churn Only
100%	257	0	0	0	0	0
150%	386	0	0	0	0	0
Roof Shot	N/A	N/A	N/A	N/A	N/A	N/A

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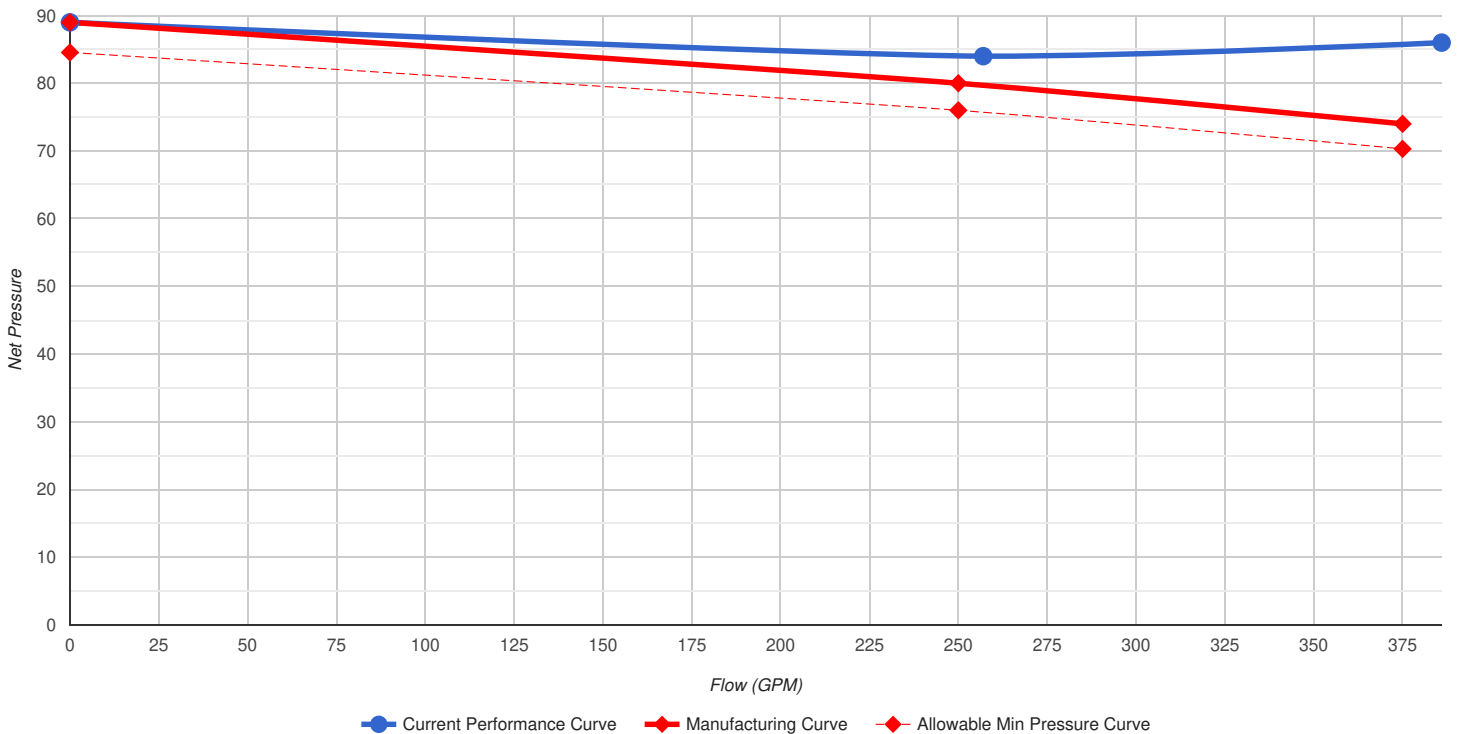
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MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
System# 1	158	150	175	.1	Yes	Yes
System# 2	158	152	170	.1	Yes	Yes

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
System# 1	P.E Office in the Gym	1" ITV	42	Yes	Yes	Yes	Yes	Yes
System# 2	Riser room	1" Inspectors Test Valve	90	No	Yes	Yes	Yes	No

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
System# 1	Riser #1 OS&Y Control Valve	Rear Riser Room	OS&Y	3 "	Monitored	Yes	Yes	Yes	Yes	Yes	11
System# 2	Riser #2 OS&Y Control Valve	Rear riser room	OS&Y	2-1/2 "	Monitored	Yes	Yes	Yes	Yes	Yes	11
System# 1	Central Riser Check	Rear Riser Room	Riser Check Valve	3 "	Not Applicable	Yes	Yes	N/A	N/A	N/A	
System# 2	Tyco Alarm Valve	Rear Riser room	Alarm Valve	2-1/2 "	Not Applicable	Yes	Yes	N/A	N/A	N/A	

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
System# 1	1-1/4" Main Drain	@ Riser	Ball Valve	Yes	Yes
System# 2	1-1/4" Main Drain	@ Riser	Angle Valve	Yes	Yes

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Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
	System #1	1	System Sensor	Water Flow Switch			Pass
	System #2	1	System Sensor	Water Flow Switch		Reports as a tamper supervisory	Fail
	System #1	1	Potter	Os&Y Tamper Switch			Pass
	System #2	1	System Sensor	Os&Y Tamper Switch			Pass
	Remote FDC by the Dumpster backside of Kitchen	1	FDC	Fire Department Connection			Pass

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Deficiencies - General Questions

Deficiency #1

Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?: No

Notes: Mechanical bell only operated with the alarm test line 1/2 open

Deficiency #2

Do valve supervisory switches indicate movement?: No

Notes:

Deficiency #3

Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?: No

Notes:

Deficiency #4

Are alarms and supervisory devices not damaged?: No

Notes: Waterflow did not active Fire alarms
Supervisory did not report to fire panes

Deficiency #5

Is the visible pipe in good condition with no external corrosion?: No

Notes: Corroded / rusty pipes in riser room

Deficiency #6

Are there the proper number and type of spare sprinklers?: No

Notes: Short on spares

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2023-06-05

Property

Pearl Haskew Elementary School
KH

7001 White Oak Drive
Irvington AL 36544

Mario Morrisette

Print Date: 2023-06-05

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc
MS-14326-SC AL-3693 LA-F1173 FL-873651-
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Deficiency #6 - Photo #1



Date Taken: June 05, 2023

Deficiency #7

Are visible sprinklers free of corrosion and physical damage?: No

Notes: 3 corroded chrome pendent @ restroom near cafeteria

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Deficiency #7 - Photo #1



Date Taken: June 05, 2023

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Deficiency #7 - Photo #2



Date Taken: June 05, 2023

Deficiency #8

Is the information sign attached and legible?: No

Notes:

Deficiencies - General Wet System Questions

None

Deficiencies - System# 1

None

Deficiencies - System# 2

None

Deficiencies - Fire Hydrant #1

None

Deficiencies - Fire Hydrant #2

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Deficiency #9

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - Fire Hydrant #3

Deficiency #10

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - Fire Hydrant #4

Deficiency #11

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - Fire Hydrant #5

Deficiency #12

Did monitor nozzle flowed acceptable water?: No

Notes:

Deficiencies - Electric Fire Pump

None

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

Deficiency #13

Address

Location: System #2

Equipment Type: Water Flow Switch

QTY: 1

Description: 2-1/2" Flow Switch

Notes:

Status: Fail

Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

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None

Deficiencies - OS&Y Tamper Switch

None

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

None

Deficiencies - Inspectors Test Connection

Deficiency #14

Location: Riser room

Description: 1" Inspectors Test Valve

Pass?: No

Was alarm reported?: No

Notes: Waterflow did not activate F/A or report to Fire panel

Deficiencies - Valves

None

Deficiencies - Drain Valves

None

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Recommendations

System 1 - yellow tagged

System 2 - purple tagged

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Inspector Signature

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

Inspector Name

Bora Yann
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
153252

Signature

A handwritten signature in black ink, appearing to be 'Bora Yann', written in a cursive style.

Date Completed

2023-06-05

Inspector Signature

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

Inspector Name

Bora Yann
NICET LEVEL II -
Inspection & Testing of
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153252

Signature

A handwritten signature in black ink, appearing to be 'Bora Yann', written in a cursive style.

Date Completed

2023-02-21

Report of Inspection / Test

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2023-02-21

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NICET LEVEL II - Inspection & Testing of
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IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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FIRE PROTECTION, INC.

Is the clapper and automatic drain valve in place and properly operating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
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SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

VALVE AREA

Report of Inspection / Test

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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
---	---	---	---

ALARMS

Is the alarm valve free from physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

MAINTENANCE

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<p>Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>If sprinklers have been replaced, were they proper replacements?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If conditions were found that required flushing, was flushing of the system conducted?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Was a drain test conducted after opening any closed valve?</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
<p>Operating stem of all OS&Y valves lubricated, completely closed and reopened?</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<p>Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Report of Inspection / Test for Asset - Fire Hydrant #1

Fire Hydrant Information

Description	Mueller
Location	Front of Pick -up Line
Static Hydrant Description	Grey Body W/ Red Top

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

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NICET LEVEL II - Inspection & Testing of
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Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Fire Hydrant #2

Fire Hydrant Information

Description	Mueller 5 1/4
Location	Rear of pick-up line
Static Hydrant Description	Grey Body W/ Red Top

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flow acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Irvington AL 36544

Mario Morrisette

Print Date: 2023-02-22

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc
MS-14326-SC AL-3693 LA-F1173 FL-873651-
0001-2007

1209C Highway 613 South
Lucaledale MS 39452

Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Fire Hydrant #3

Fire Hydrant Information

Description	Mueller 5 1/4
Location	Left of Office
Static Hydrant Description	Grey Body W/ Red Top

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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INDUSTRIAL-COMMERCIAL



2023-02-21

Property

Pearl Haskew Elementary School
KH

7001 White Oak Drive
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Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Fire Hydrant #4

Fire Hydrant Information

Description	Mueller 5 1/4
Location	Outside Gym

Report of Inspection / Test

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Static Hydrant Description

Grey body W/ Red top

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

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Static Hydrant

Static Pressure

N/A

Residual Pressure

N/A

Final Hydrant Flow Test

Flow at 20 psi residual pressure:

N/A

Total Flow

N/A

Report of Inspection / Test for Asset - Fire Hydrant #5

Fire Hydrant Information

Description

Mueller 5 1/4

Location

Beside Cafeteria

Static Hydrant Description

Grey Body W/ Red Top

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flow acceptable water?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
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Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
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Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
System# 1	158	150	175	.1	Yes	Yes
System# 2	158	152	170	.1	Yes	Yes

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
System# 1	P.E Office in the Gym	1" ITV	42	Yes	Yes	Yes	Yes	Yes
System# 2	Riser room	1" Inspectors Test Valve	90	No	Yes	Yes	Yes	No

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
System# 1	Riser #1 OS&Y Control Valve	Rear Riser Room	OS&Y	3 "	Monitored	Yes	Yes	Yes	Yes	Yes	11

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FIRE PROTECTION, INC.

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
System# 2	Riser #2 OS&Y Control Valve	Rear riser room	OS&Y	2-1/2 "	Monitored	Yes	Yes	Yes	Yes	Yes	11
System# 1	Central Riser Check	Rear Riser Room	Riser Check Valve	3 "	Not Applicable	Yes	Yes	N/A	N/A	N/A	
System# 2	Tyco Alarm Valve	Rear Riser room	Alarm Valve	2-1/2 "	Not Applicable	Yes	Yes	N/A	N/A	N/A	

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
System# 1	1-1/4" Main Drain	@ Riser	Ball Valve	Yes	Yes
System# 2	1-1/4" Main Drain	@ Riser	Angle Valve	Yes	Yes

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FIRE PROTECTION, INC.

Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
	System #1	1	System Sensor	Water Flow Switch			Pass
	System #2	1	System Sensor	Water Flow Switch		Reports as a tamper supervisory	Fail
	System #1	1	Potter	Os&Y Tamper Switch			Pass
	System #2	1	System Sensor	Os&Y Tamper Switch			Pass
	Remote FDC by the Dumpster backside of Kitchen	1	FDC	Fire Department Connection			Pass

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Deficiencies - General Questions

Deficiency #1

Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?: No

Notes: Mechanical bell only operated with the alarm test line 1/2 open

Deficiency #2

Do valve supervisory switches indicate movement?: No

Notes:

Deficiency #3

Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?: No

Notes:

Deficiency #4

Are alarms and supervisory devices not damaged?: No

Notes: Waterflow did not active Fire alarms

Supervisory did not report to fire panes

Deficiency #5

Is the visible pipe in good condition with no external corrosion?: No

Notes: Corroded / rusty pipes in riser room

Deficiency #6

Are there the proper number and type of spare sprinklers?: No

Notes: Short on spares

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Deficiency #6 - Photo #1



Date Taken: February 21, 2023

Deficiency #7

Are visible sprinklers free of corrosion and physical damage?: No

Notes: 3 corroded chrome pendent @ restroom near cafeteria

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Deficiency #7 - Photo #1



Date Taken: February 21, 2023

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Deficiency #7 - Photo #2



Date Taken: February 21, 2023

Deficiency #8

Is the information sign attached and legible?: No

Notes:

Deficiencies - General Wet System Questions

None

Deficiencies - System# 1

None

Deficiencies - System# 2

None

Deficiencies - Fire Hydrant #1

None

Deficiencies - Fire Hydrant #2

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Deficiency #9

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - Fire Hydrant #3

Deficiency #10

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - Fire Hydrant #4

Deficiency #11

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - Fire Hydrant #5

Deficiency #12

Did monitor nozzle flowed acceptable water?: No

Notes:

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

Deficiency #13

Address

Location: System #2

QTY: 1

Description: 2-1/2" Flow Switch

Status: Fail

Notes:

Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

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FIRE PROTECTION, INC.

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None

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

None

Deficiencies - Inspectors Test Connection

Deficiency #14

Location: Riser room

Description: 1" Inspectors Test Valve

Pass?: No

Was alarm reported?: No

Notes: Waterflow did not activate F/A or report to Fire panel

Deficiencies - Valves

None

Deficiencies - Drain Valves

None

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FIRE PROTECTION, INC.

Recommendations

System 1 - yellow tagged

System 2 - purple tagged

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Inspector Signature

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

Inspector Name

Bora Yann
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
153252

Signature

A handwritten signature in black ink, appearing to read "BY", is written in the signature field.

Date Completed

2023-02-21

Report of Inspection / Test

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2023-06-15

Property

Phillips Preparatory
KH

3255 Old Shell Road

Mobile AL 36607

Mario Morrisette

Print Date: 2023-06-15

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
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IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc
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FIRE PROTECTION, INC.

Is the clapper and automatic drain valve in place and properly operating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
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SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

VALVE AREA

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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
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ALARMS

Is the alarm valve free from physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

MAINTENANCE

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<p>Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>If sprinklers have been replaced, were they proper replacements?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If conditions were found that required flushing, was flushing of the system conducted?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Was a drain test conducted after opening any closed valve?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Operating stem of all OS&Y valves lubricated, completely closed and reopened?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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FIRE PROTECTION, INC.

Report of Inspection / Test for Asset - Fire Hydrant #2

Fire Hydrant Information

Hydrant ID	#2
Description	M&H 5-1/4"
Location	Next to pavilion
Static Hydrant Description	Grey body faded green top

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flow acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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Are monitor nozzles lubricated? Yes
 No
 NA

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	75	Residual Pressure	65
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Fire Hydrant #3

Fire Hydrant Information

Hydrant ID	#3 Front Entrance
Description	M&H 5-1/4"
Location	@ Front Entrance

QUESTIONS

Is there a hydrant wrench that is available and accessible? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	75	Residual Pressure	65
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Fire Hydrant #4

Fire Hydrant Information

Hydrant ID	#4
Description	M&H 5-1/4"
Location	East Side of A-Hall Building

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	75	Residual Pressure	65
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Fire Hydrant #1

Fire Hydrant Information

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FIRE PROTECTION, INC.

Hydrant ID	#1
Description	Mueller 5-1/4"
Location	Backside of Cafeteria
Static Hydrant Description	Grey body pastel green top

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

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Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
Admin Building wet	85	65	75	1	Yes	Yes
Hartzog Hall Wet	95	65	70	1	Yes	Yes
A-Hall Wet	85	65	75	1	Yes	Yes

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
Admin Building wet	Cafeteria exterior mechanical rm. D122	1" Inspectors Test Valve	40	Yes	Yes	Yes	Yes	Yes
Hartzog Hall Wet	Hartzog interior mech rm	1" Test & Drain assembly	90	Yes	Yes	Yes	Yes	Yes
A-Hall Wet	B108 Book Storage / Elec Room	1" Inspectors Test Valve	32	Yes	Yes	Yes	Yes	Yes

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
Admin Building wet	Tyco Control Valve	Cafeteria exterior mechanical rm. D122	Butterfly	4 "	Monitored And Locked	Yes	Yes	Yes	Yes	Yes	8.5
Hartzog Hall Wet	Tyco Control Valve	Mechanical Room / Riser Room	Butterfly	2-1/2 "	Monitored	Yes	Yes	Yes	Yes	Yes	10
A-Hall Wet	Victaulic Control Valve	A126 Storage / Riser Room	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	7

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Property

Phillips Preparatory
KH

3255 Old Shell Road
Mobile AL 36607

Mario Morrisette

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Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc
MS-14326-SC AL-3693 LA-F1173 FL-873651-
0001-2007

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Lucaledale MS 39452

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FIRE PROTECTION, INC.

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
Hartzog Hall Wet	1-1/4" Main Drain	Interior HVAC closet	Angle Valve	Yes	Yes
Admin Building wet	1" Aux Drain	conference rm.123 above ceiling	Globe Valve	Yes	Yes
Admin Building wet	2" Main Drain	Cafeteria exterior mechanical rm. D122	Angle Valve	Yes	Yes
A-Hall Wet	2" Main Drain	Rm. A-126	Angle Valve	Yes	Yes
Admin Building wet	Aux Drain	Gym Storage E-101	Globe Valve	Yes	Yes
A-Hall Wet	Aux Drain	C-109 closet	Globe Valve	Yes	Yes

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Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
Cafeteria exterior mechanical rm. D122	Admin Building	1	Potter	Water Flow Switch			Pass
Interior mechanical room	Hartzog Hall	1	System Sensor	Water Flow Switch			Pass
A-126 storage room	A Hall	1	Potter	Water Flow Switch			Pass
Cafeteria exterior mechanical rm. D122	Admin system	1	Sam Chang Foundry	Butterfly Tamper Switch			Pass
Interior mechanical room	Hartzog Hall	1	Anvil Star	Butterfly Tamper Switch			Pass
A-126 Storage rm	A Hall	1	Victaulic	Butterfly Tamper Switch			Pass
Cafeteria exterior mechanical rm. D122	Exterior of Admin Building Riser Room	1	FDC	Fire Department Connection		Needs multiple signs	Pass
Interior mechanical room	Hartzog Hall	1	Tyco	Mechanical Water Motor Bell			Fail
Cafeteria parking lot	Remote FDC for Hartzog Hall @ Backside Cafeteria	1	FDC	Fire Department Connection			Pass
Exterior wall	Exterior East Wall of A-Hall Riser	1	FDC	Fire Department Connection			Pass

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Deficiencies - General Questions

Deficiency #1

Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?: No

Notes: Mechanical bell did not operate

Deficiency #2

Is the FDC plainly visible?: No

Notes: Admin FDC is not visible

Deficiency #3

Is the FDC identification sign(s) in place?: No

Notes: Admin - sign faded , needs multiple signs & directing arrows

Deficiency #3 - Photo #1



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Deficiency #4

Are visible sprinklers free of foreign materials including paint?: No

Notes: Hogwartz Hall - dusty heads throughout hall & classrooms

Deficiencies - General Wet System Questions

None

Deficiencies - Admin Building wet

None

Deficiencies - Hartzog Hall Wet

None

Deficiencies - A-Hall Wet

None

Deficiencies - Fire Hydrant #2

Deficiency #5

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - Fire Hydrant #3

Deficiency #6

Is the hydrant properly painted and is the paint in good condition?: No

Notes: Needs painting

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Deficiency #6 - Photo #1



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Deficiency #7

Are hydrant caps, stems, outlets, and threads lubricated and in good condition?: No

Notes: 2.5 cap seized

Deficiency #8

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - Fire Hydrant #4

Deficiency #9

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - Fire Hydrant #1

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Deficiency #10

Did the hydrant flow until clear (minimum of 1 minute)?: No

Notes: Lacking water pressure

Deficiency #11

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

None

Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

None

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

Deficiency #12

Address: Interior mechanical room

Location: Hartzog Hall

Equipment Type: Mechanical Water Motor Bell

QTY: 1

Description: Water Motor Gong

Status: Fail

Notes:

Deficiencies - Fire Department Connection

None

Deficiencies - Alarm Pressure Switch

None

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Deficiencies - PIV Tamper Switch

None

Deficiencies - Inspectors Test Connection

None

Deficiencies - Valves

None

Deficiencies - Drain Valves

None

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FIRE PROTECTION, INC.

Recommendations

A-hall- green

Admin - green

Hartzog - yellow

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Inspector Signature

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

Inspector Name

Bora Yann
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
153252

Signature

A handwritten signature in black ink, appearing to read 'Bora Yann', is written over a large, faint watermark of the signature.

Date Completed

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IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Is the clapper and automatic drain valve in place and properly operating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
---	---	---	---

SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

VALVE AREA

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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
---	---	---	---

ALARMS

Is the alarm valve free from physical damage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

MAINTENANCE

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<p>Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>If sprinklers have been replaced, were they proper replacements?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If conditions were found that required flushing, was flushing of the system conducted?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Was a drain test conducted after opening any closed valve?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Operating stem of all OS&Y valves lubricated, completely closed and reopened?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?</p>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

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MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
Wet System #1	75	55	70	1	Yes	Yes
Wet System #2	75	55	70	1	Yes	Yes
Wet System #3	75	55	70	1	Yes	Yes

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
Wet System #1	@ Riser	1" Inspectors Test Valve	27	Yes	Yes	Yes	Yes	Yes
Wet System #2	@ Riser	1" Inspectors Test Valve	32	Yes	Yes	Yes	Yes	Yes
Wet System #3	@ Riser	1" Inspectors Test Valve	30	Yes	Yes	Yes	Yes	Yes

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
Wet System #1	Victaulic Control Valve	Maintenance Shop	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	14
Wet System #2	Victaulic Control Valve	Maintenance Shop	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	14
Wet System #3	Victaulic Control Valve	Maintenance Shop	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	14

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
Wet System #1	2" Main Drain	@ Riser	Angle Valve	Yes	Yes
Wet System #2	2" Main Drain	@ Riser	Angle Valve	Yes	Yes
Wet System #3	2" Main Drain	@ Riser	Angle Valve	Yes	Yes

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Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
	System #1	1	Victaulic	Butterfly Tamper Switch			Pass
	System #2	1	Victaulic	Butterfly Tamper Switch			Pass
	System #3	1	Victaulic	Butterfly Tamper Switch			Pass
	System #1	1	Potter	Water Flow Switch			Pass
	System #2	1	Potter	Water Flow Switch			Pass
	System #3	1	Potter	Water Flow Switch			Pass
	Bus entrance @ Backflow	1	FDC	Fire Department Connection			Pass

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2023-06-23

Property

Pillans Middle School
KH

2051 Military Road
Mobile AL 36605

Mario Morrisette

Print Date: 2023-06-23

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc
MS-14326-SC AL-3693 LA-F1173 FL-873651-
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Deficiencies - General Questions

Deficiency #1

Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?: No

Notes: Missing data plaque

Deficiency #2

Are visible sprinklers free of foreign materials including paint?: No

Notes: Dusty and greased heads , label in pictures

Deficiency #2 - Photo #1



7 dusty and corroded
In gym

Date Taken: June 23, 2023

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Deficiency #2 - Photo #2



Date Taken: June 23, 2023

Deficiency #3

Are there spare sprinklers and a sprinkler wrench?: No

Notes: Missing concealed wrench and SR wrench

Deficiency #3 - Photo #1



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Deficiency #4

Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?: No

Notes: Greased heads in kitchen

Deficiency #4 - Photo #1



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Deficiency #4 - Photo #2



Date Taken: June 23, 2023

Deficiency #5

Are all escutcheon plates installed on sprinkler heads?: No

Notes: Missing concealed plates and SR. Esc

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Deficiency #5 - Photo #1



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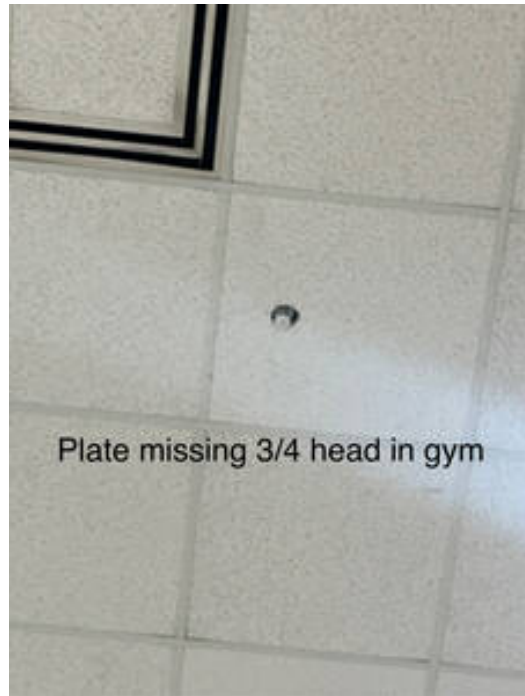
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Deficiency #5 - Photo #2



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Deficiency #5 - Photo #3



Date Taken: June 23, 2023

Deficiencies - General Wet System Questions

None

Deficiencies - Wet System #1

None

Deficiencies - Wet System #2

None

Deficiencies - Wet System #3

None

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

None

Deficiencies - High Pressure Switch

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None

Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

None

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

None

Deficiencies - Alarm Pressure Switch

None

Deficiencies - PIV Tamper Switch

None

Deficiencies - Inspectors Test Connection

None

Deficiencies - Valves

None

Deficiencies - Drain Valves

None

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FIRE PROTECTION, INC.

Recommendations

Systems are Yellow tagged

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Inspector Signature

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

Inspector Name

Bora Yann
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
153252

Signature

A handwritten signature in black ink, appearing to read 'Bora Yann', is written over a large, faint, light-colored watermark of the same signature.

Date Completed

2023-06-23

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3125 Dauphin Island Parkway

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FIRE PROTECTION, INC.

IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Building Occupancy?	N/A
Are all Identification Signs in place?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Industrial Commercial Fire Protection, Inc

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FIRE PROTECTION, INC.

Is the clapper and automatic drain valve in place and properly operating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
---	---	---	---

SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

VALVE AREA

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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

DRY VALVE

Are enclosures around valves maintaining a minimum of 40 degrees F?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the gauges on systems without low pressure alarms in good condition and showing normal air and water pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
For freezer systems, gauge near compressor reading the same as gauge near the dry-pipe valve?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are they free from physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are trim valves in appropriate (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there no leakage in the intermediate chamber?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on systems with low pressure alarms in good condition and showing normal air and water pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the dry-pipe valve passed inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the priming level correct and has the low air pressure signal passed it's test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the quick opening device passed the test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
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ALARMS

Is the alarm valve free from physical damage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have low temperature alarms passed test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

MAINTENANCE

Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
If sprinklers have been replaced, were they proper replacements?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	If conditions were found that required flushing, was flushing of the system conducted?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Was a drain test conducted after opening any closed valve?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Operating stem of all OS&Y valves lubricated, completely closed and reopened?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Are dry-pipe systems kept in dry condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have auxiliary drains been emptied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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- Yes
- No
- NA

Is interior of dry-pipe valves cleaned?

- Yes
- No
- NA

Have low points been drained before freezing weather?

- Yes
- No
- NA

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FIRE PROTECTION, INC.

Report of Inspection / Test for System - Bldg J Dry System

DRY VALVE

Have automatic air maintenance devices passed test? Yes
 No
 NA

DRY VALVE TRIP TEST

Dry Valve	Size: 3"	Year of Mfr.: 2011	Accelerator	Year of Mfr.: N/A		
Make	Model	Serial no.	Make	Model	Serial no.	
Viking	F-2	W508743	N/A	N/A	N/A	
	Time to Trip thru test pipe	Water Pressure	Air Pressure	Trip point air pressure	Time water reached test outlet	Alarm Operated
Without Accelerator	45	75	33	8	70	Yes
With Accelerator	N/A	N/A	N/A	N/A	N/A	N/A

DRY VALVE TRIP TEST (cont)

Were results comparable to previous test? Yes
 No
 NA

Has it passed air leakage test? Yes
 No
 NA

Report of Inspection / Test for Asset - Fire Hydrant #1 / Front of Aerospace

Fire Hydrant Information

Hydrant ID	#1
Description	M&H
Location	Front of Aerospace

QUESTIONS

Is there a hydrant wrench that is available and accessible? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	75	Residual Pressure	N/A
Pitot Pressure	45	Orifice Size	2.5
Orifice Coefficient	1.0	Flow	1125

Static Hydrant

Static Pressure	75	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	750
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Report of Inspection / Test for Asset - Fire Hydrant #2 / Front of Cafeteria

Fire Hydrant Information

Hydrant ID	#2
Description	M&H

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FIRE PROTECTION, INC.

2023-09-15

Property
Rain High School
KH

3125 Dauphin Island Parkway
Mobile AL 36605
Mario Morrisette
Print Date: 2023-09-15

Conducted by: Bora Yann
NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc
MS-14326-SC AL-3693 LA-F1173 FL-873651-
0001-2007
1209C Highway 613 South
Lucaledale MS 39452

Location

Front of Cafeteria

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flow acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	75	Residual Pressure	N/A
Pitot Pressure	45	Orifice Size	2.5
Orifice Coefficient	1.0	Flow	1125

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Static Hydrant

Static Pressure	75	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	750
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Report of Inspection / Test for Asset - Fire Hydrant #3 / Rear of Cafeteria

Fire Hydrant Information

Hydrant ID	#3
Description	Grey with light green top M&H
Location	Rear of Cafeteria

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
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Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
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Hydrant Flow Test

Static Pressure	75	Residual Pressure	N/A
Pitot Pressure	45	Orifice Size	2.5
Orifice Coefficient	1.0	Flow	1125

Static Hydrant

Static Pressure	75	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	750
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Report of Inspection / Test for Asset - Delete

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
---	--	---	--

Are pumper and nozzle caps tight?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
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Does the operating nut turn with no difficulty?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
---	--	---	--

Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does the hydrant completely shut off?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
---	--	---------------------------------------	--

Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
--	--	---	--

Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there no ice or water in the barrel?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
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Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
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Is the Operating nut not worn, twisted or broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
Admin A & B Wet System	85	50	70	5	Yes	Yes
Bldg C & D Wet System	90	50	70	5	Yes	Yes
Bldg E Wet System	85	35	85	4	Yes	Yes
Aerospace Bldg Wet System	90	45	70	3	Yes	Yes
Cafeteria Wet System	90	45	75	3	Yes	Yes
Maintenance Shop Wet System	85	50	70	3	Yes	Yes
Bldg H Wet System	75	45	75	3	Yes	Yes
Bldg J Wet System	85	50	70	3	Yes	Yes
Bldg J Dry System	75	45	75	3	Yes	Yes

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INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
Admin A & B Wet System	Storage Room B112	1" Inspectors Test Valve	42	Yes	Yes	Yes	Yes	Yes
Bldg C & D Wet System	Interior Mech (Rm 102) Next to Elevator	1" Inspectors Test Valve	41	Yes	Yes	Yes	Yes	Yes
Bldg E Wet System	Exterior Mech Rm. K120	1" Inspectors Test Valve	67	Yes	Yes	Yes	Yes	Yes
Aerospace Bldg Wet System	@ Riser	1" Inspectors Test Valve	28	Yes	Yes	Yes	Yes	Yes
Cafeteria Wet System	Mech Rm near Kitchen Mop Sink	1" Inspectors Test Valve	26	Yes	Yes	Yes	Yes	Yes
Maintenance Shop Wet System	@ Riser	1" Inspectors Test / Main Drain Valve	53	Yes	Yes	Yes	Yes	Yes
Bldg H Wet System	Storage Room H105	1" Inspectors Test Valve	18	Yes	Yes	Yes	Yes	Yes
Bldg J Wet System	Classroom J102 Closet	1" Inspectors Test Valve	34	Yes	Yes	Yes	Yes	Yes
Bldg J Dry System	E. Computer lab	1" Inspectors Test Valve	45	Yes	Yes	Yes	Yes	Yes

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
Admin A & B Wet System	Control Valve	N. Interior mech Rm near office	Butterfly	3 "	Monitored	Yes	Yes	Yes	Yes	Yes	10
Bldg C & D Wet System	Control Valve	N. Exterior Mech Riser Rm. (C.117)	Butterfly	3 "	Monitored	Yes	Yes	Yes	Yes	Yes	10
Bldg E Wet System	Control valve	Exterior Mech Rm. E105	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	10
Aerospace Bldg Wet System	Control Valve	S. Exterior Mech Rm.	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	8
Cafeteria Wet System	Control Valve	Kitchen Food Storage	Butterfly	2-1/2 "	Monitored	Yes	Yes	Yes	Yes	Yes	10
Maintenance Shop Wet System	Control Valve	Exterior Mech Rm.	Butterfly	2 "	Monitored	Yes	Yes	No	Yes	Yes	7
Bldg H Wet System	Control Valve	Interior Mech H113	Butterfly	2-1/2 "	Monitored	Yes	Yes	Yes	Yes	Yes	10

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VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
Bldg J Wet System	Control Valve	Exterior Mech Rm 1112A	Butterfly	3 "	Monitored	Yes	Yes	Yes	Yes	Yes	10
Bldg J Dry System	Control Valve	N. Exterior Mech Rm 1112A	Butterfly	3 "	Monitored	Yes	Yes	Yes	Yes	Yes	10

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
Bldg J Dry System	1-1/2" Main Drain	@ Riser	Angle Valve	N/A	Yes
Bldg J Wet System	1-1/2" Main Drain	@ Riser	Globe Valve	N/A	Yes
Bldg H Wet System	1-1/4" Main Drain	@ Riser	Ball Valve	N/A	Yes
Bldg C & D Wet System	1-1/4" Main Drain	@ Riser	Ball Valve	N/A	Yes
Cafeteria Wet System	1-1/4" Main Drain	@ Riser	Ball Valve	N/A	Yes
Maintenance Shop Wet System	1" Inspectors Test / Main Drain Valve	@ Riser	Test And Drain	N/A	Yes
Admin A & B Wet System	2" Main Drain	@ Riser	Angle Valve	N/A	Yes
Aerospace Bldg Wet System	2" Main Drain	@ Riser	Angle Valve	N/A	Yes
Bldg E Wet System	2" Main Drain	@ Riser	Ball Valve	N/A	Yes
Bldg J Dry System	Auxiliary Drain	Classroom J101 Closet	Ball Valve	N/A	Yes
Bldg J Dry System	Auxiliary Drain	Classroom J108 Closet	Ball Valve	N/A	Yes

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Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
	Building A&B Riser	1	Kennedy	Butterfly Tamper Switch			Pass
	Building A&B Riser	1	Potter	Water Flow Switch			Pass
	Building C&D Riser	1	Kennedy	Butterfly Tamper Switch			Pass
	Building C&D Riser	1	Potter	Water Flow Switch			
	Building E Riser	1	Kennedy	Butterfly Tamper Switch			
	Building E Riser	1	Potter	Water Flow Switch			Pass
	Aerospace Riser	1	Anvil	Butterfly Tamper Switch			Pass
	Aerospace Riser	1	Potter	Water Flow Switch			Pass
	Cafeteria Riser	1	Kennedy	Butterfly Tamper Switch			Pass
	Cafeteria Riser	1	Potter	Water Flow Switch			Pass
	Maintenance Shop Riser	1	Milwaukee	Butterfly Tamper Switch			Pass
	Maintenance Shop Riser	1	Potter	Water Flow Switch	Improper Funtion		Pass
	Building H Riser	1	Kennedy	Butterfly Tamper Switch			Pass
	Building H Riser	1	Potter	Water Flow Switch			Pass
	Building J Wet System Riser	1	Kennedy	Butterfly Tamper Switch			Pass
	Building J Wet System Riser	1	Potter	Water Flow Switch			Pass

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FIRE PROTECTION, INC.

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Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
	Building J Dry System	1	Kennedy	Butterfly Tamper Switch			Pass
	Building J Dry System	1	Potter	High Pressure Switch			Pass
	Building J Dry System	1	Potter	Low Air Pressure Switch			Pass

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Deficiencies - General Questions

Deficiency #1

Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?: No

Notes: Maintenance shop - no sign

E Bldg - no sign

C Hall - no sign

H- Bldg - no sign

Deficiency #2

Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?: No

Notes: Either locked or missing handle

Deficiency #3

Is the FDC identification sign(s) in place?: No

Notes: Cafeteria- No Sign

Deficiency #3 - Photo #1



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Deficiency #4

Are there the proper number and type of spare sprinklers?: No

Notes: Maintenance shop- none
J Bldg - does not have any spare dry pendants

Deficiency #5

Are visible sprinklers free of corrosion and physical damage?: No

Notes: J-Bldg Breezeway -corroded dry pendants

Deficiency #5 - Photo #1



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Deficiency #5 - Photo #2



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Deficiency #5 - Photo #3



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Deficiency #6

Are visible sprinklers free of foreign materials including paint?: No

Notes: Kitchen - 12 greased

Deficiency #7

Are there spare sprinklers and a sprinkler wrench?: No

Notes: Maintenance shop- none
J Bldg - missing concealed head socket & 1/2- 3/4 head wrench
Bldg H - missing concealed wrench

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Deficiency #7 - Photo #1



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Deficiency #8

Dry-type sprinklers replaced or successfully sample tested within last 10 years?: No

Notes:

Deficiency #9

Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?: No

Notes: 8 greased heads

Deficiency #10

Are control valves properly sealed and/or supervised?: No

Notes: Aerospace Bldg- PIV is not secured

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INDUSTRIAL-COMMERCIAL



FIRE PROTECTION, INC.

2023-09-15

Property

Rain High School
KH

3125 Dauphin Island Parkway

Mobile AL 36605

Mario Morrisette

Print Date: 2023-09-15

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc

MS-14326-SC AL-3693 LA-F1173 FL-873651-

0001-2007

1209C Highway 613 South

Lucedale MS 39452

Deficiency #11

Are all escutcheon plates installed on sprinkler heads?: No

Notes: Kitchen - missing esc

Media rm . - missing concealed plate

Outside B106 - missing concealed plate

E. Bldg - missing esc @ locker rooms

Deficiency #11 - Photo #1



Date Taken: September 15, 2023

Report of Inspection / Test

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INDUSTRIAL-COMMERCIAL



FIRE PROTECTION, INC.

2023-09-15

Property

Rain High School
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3125 Dauphin Island Parkway
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Mario Morrisette
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Lucedale MS 39452

Deficiency #11 - Photo #2



Missing escutcheon locker room
cooler room.

Date Taken: September 15, 2023

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Industrial Commercial Fire Protection, Inc

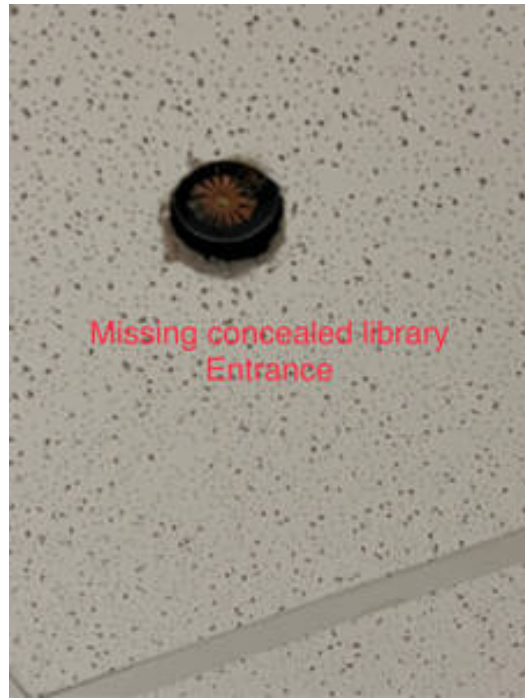
MS-14326-SC AL-3693 LA-F1173 FL-873651-

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Deficiency #11 - Photo #3



Date Taken: September 15, 2023

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Deficiency #11 - Photo #4



Date Taken: September 15, 2023

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2023-09-15

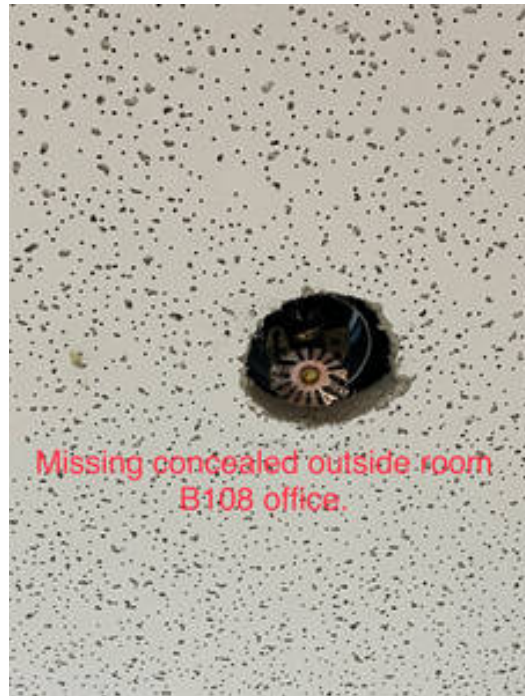
Property
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Deficiency #11 - Photo #5



Date Taken: September 15, 2023

Deficiencies - General Wet System Questions

None

Deficiencies - General Dry System Questions

None

Deficiencies - Admin A & B Wet System

None

Deficiencies - Bldg C & D Wet System

None

Deficiencies - Bldg E Wet System

None

Deficiencies - Aerospace Bldg Wet System

None

Deficiencies - Cafeteria Wet System

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None

Deficiencies - Maintenance Shop Wet System

None

Deficiencies - Bldg H Wet System

None

Deficiencies - Bldg J Wet System

None

Deficiencies - Bldg J Dry System

None

Deficiencies - Fire Hydrant #1 / Front of Aerospace

None

Deficiencies - Fire Hydrant #2 / Front of Cafeteria

None

Deficiencies - Fire Hydrant #3 / Rear of Cafeteria

None

Deficiencies - Delete

None

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

None

Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

None

Deficiencies - Butterfly Tamper Switch

Report of Inspection / Test

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None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

None

Deficiencies - Alarm Pressure Switch

None

Deficiencies - PIV Tamper Switch

None

Deficiencies - Ball Valve Tamper

None

Deficiencies - Inspectors Test Connection

None

Deficiencies - Valves

Deficiency #12

Location: Exterior Mech Rm.
Model: Shotgun
Valve Type: Butterfly
Size: 2
Description: Control Valve
Signs: No

Notes: No sign

Deficiencies - Drain Valves

None

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Inspector Signature

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

Inspector Name

Bora Yann
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
153252

Signature

A handwritten signature in black ink, appearing to be 'Bora Yann', written in a cursive style.

Date Completed

2023-09-15

Report of Inspection / Test

Annual NFPA 25

INDUSTRIAL-COMMERCIAL



2023-06-08

Property

Regional School for the Deaf & Blind
KH

3980 Burma Road

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Mario Morrisette

Print Date: 2023-06-08

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc

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IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

Report of Inspection / Test

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NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc

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FIRE PROTECTION, INC.

Is the clapper and automatic drain valve in place and properly operating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
---	---	---	---

SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

VALVE AREA

Report of Inspection / Test

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FIRE PROTECTION, INC.

Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
---	---	---	---

ALARMS

Is the alarm valve free from physical damage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

MAINTENANCE

Report of Inspection / Test

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<p>Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>If sprinklers have been replaced, were they proper replacements?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If conditions were found that required flushing, was flushing of the system conducted?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Was a drain test conducted after opening any closed valve?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Operating stem of all OS&Y valves lubricated, completely closed and reopened?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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FIRE PROTECTION, INC.

MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
Wet System# 1	100	60	80	1	Yes	Yes

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
Wet System# 1	Janitors Closet by Classroom 15	1" Inspectors Test Valve	51	Yes	Yes	Yes	Yes	Yes

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
Wet System# 1	Central Riser Check	8A Closet	Riser Check Valve	4 "	Not Applicable	Yes	Yes	Yes	N/A	N/A	
	Kennedy Control valve	@ Backflow	OS&Y	4 "	Locked	Yes	Yes	Yes	N/A	Yes	
	Kennedy control valve	@ Backflow	OS&Y	4 "	Locked	Yes	Yes	Yes	N/A	Yes	

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
Wet System# 1	2" Main Drain	@ Riser	Ball Valve	Yes	Yes

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FIRE PROTECTION, INC.

Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
	@ Riser	1	Potter	Water Flow Switch			Pass
	@ Backflow	1	FDC	Fire Department Connection		1 broken cap	Fail

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Questions with Photos and Notes

- Is the building fully protected by sprinklers?

Yes

Notes:

Electrical rooms are not sprinkled

- Are all escutcheon plates installed on sprinkler heads?

Yes

Notes:

Esc in hallways needs adjusting



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Deficiencies - General Questions

Deficiency #1

Are the FDC caps and plugs in place?: No

Notes: 1 cap broken

Deficiency #2

Are visible sprinklers free of corrosion and physical damage?: No

Notes: SR head has bent deflector

Deficiency #2 - Photo #1



Date Taken: June 08, 2023

Deficiency #3

Is there proper clearance below the sprinklers?: No

Notes: Office storage room - stocks too high

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Deficiency #3 - Photo #1



Date Taken: June 08, 2023

Deficiency #4

Are visible sprinklers free of foreign materials including paint?: No

Notes: Dusty heads in rooms 1-4

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Deficiency #4 - Photo #1



Date Taken: June 08, 2023

Deficiency #4 - Photo #2



Date Taken: June 08, 2023

Deficiencies - General Wet System Questions

None

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Deficiencies - Wet System# 1

None

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

None

Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

None

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

Deficiency #5

Address

Location: @ Backflow

Equipment Type: Fire Department Connection

QTY: 1

Description: Siamese Connection

Notes:

Status: Fail

Deficiencies - Alarm Pressure Switch

None

Deficiencies - PIV Tamper Switch

None

Deficiencies - Inspectors Test Connection

Report of Inspection / Test

Annual NFPA 25

2023-06-08

Property

Regional School for the Deaf & Blind
KH

3980 Burma Road

Mobile AL 36693

Mario Morrisette

Print Date: 2023-06-08

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc

MS-14326-SC AL-3693 LA-F1173 FL-873651-

0001-2007

1209C Highway 613 South

Lucedale MS 39452

INDUSTRIAL-COMMERCIAL

The logo for Industrial-Commercial Fire Protection, Inc. (ICFP) features the letters 'ICFP' in a large, bold, yellow font with a red-to-orange gradient. The letters are outlined in black and set against a white background with a thin red horizontal line above and below them.

FIRE PROTECTION, INC.

None

Deficiencies - Valves

None

Deficiencies - Drain Valves

None

Report of Inspection / Test

Annual NFPA 25

2023-06-08

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FIRE PROTECTION, INC.

Recommendations

System purple tagged

Report of Inspection / Test

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Inspector Signature

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

Inspector Name

Bora Yann
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
153252

Signature

A handwritten signature in black ink, appearing to read "Bora Yann", is written over a large, empty rectangular area.

Date Completed

2023-06-08

Report of Inspection / Test

Annual NFPA 25

INDUSTRIAL-COMMERCIAL



2023-08-30

Property

Robbins Elementary School
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2416 West Main Street

Mobile AL 36610

Mario Morrisette

Print Date: 2023-08-31

Conducted by: Bora Yann

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IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

Report of Inspection / Test

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FIRE PROTECTION, INC.

Is the clapper and automatic drain valve in place and properly operating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
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SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

VALVE AREA

Report of Inspection / Test

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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
---	---	---	---

ALARMS

Is the alarm valve free from physical damage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

MAINTENANCE

Report of Inspection / Test

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INDUSTRIAL-COMMERCIAL



FIRE PROTECTION, INC.

2023-08-30

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<p>Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>If sprinklers have been replaced, were they proper replacements?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If conditions were found that required flushing, was flushing of the system conducted?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Was a drain test conducted after opening any closed valve?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Operating stem of all OS&Y valves lubricated, completely closed and reopened?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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FIRE PROTECTION, INC.

Report of Inspection / Test for Asset - Fire Hydrant #1

Fire Hydrant Information

Hydrant ID	#1
Description	American Darling 5-1/4" B84B
Location	Not on property

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does the hydrant completely shut off?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there no ice or water in the barrel?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

Report of Inspection / Test

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FIRE PROTECTION, INC.

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Fire Hydrant #2

Fire Hydrant Information

Hydrant ID	#2
Description	American Darling 5-1/4" B84B
Location	Not on property

QUESTIONS

Is there a hydrant wrench that is available and accessible? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does the hydrant completely shut off? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did monitor nozzle flow acceptable water? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there no ice or water in the barrel? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Is the Operating nut not worn, twisted or broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
Main Bldg Wet	70	40	60	10	Yes	Yes
Hall 200 Wet	70	40	60	10	Yes	Yes
Gym Wet	80	60	65	10	Yes	Yes

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
Main Bldg Wet	Hall 200 exterior mechanical room	1" Test and drain assembly	75	Yes	Yes	Yes	Yes	Yes

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INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
Hall 200 Wet	Exterior mechanical room	1" Test and drain assembly	39	Yes	Yes	Yes	Yes	Yes
Gym Wet	@ Riser	2" Test / Drain Valve	30	Yes	Yes	Yes	Yes	Yes

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
Main Bldg Wet	4" Butterfly Tamper Valve	Hall 200 exterior mechanical room	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	13
Hall 200 Wet	3" Butterfly Tamper Valve (13)	Exterior Riser Room Backside of School by Gym	Butterfly	3 "	Monitored	Yes	Yes	Yes	Yes	Yes	13
Gym Wet	(8) Tamper control valve	Exterior Air Handler / Riser Room	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	8
	6" Main Feed Control Valve (13)	Hall 200	Sectional	6 "	Monitored	Yes	Yes	Yes	Yes	Yes	13

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
Hall 200 Wet	1-1/4" Main Drain	Riser	Angle Valve	Yes	Yes
Main Bldg Wet	2" Main Drain	Riser	Angle Valve	Yes	Yes
Gym Wet	2" Test / Drain Valve	Riser	Test And Drain	Yes	Yes

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FIRE PROTECTION, INC.

Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
	System #1	1	Potter	Water Flow Switch			Pass
	System #2	1	Potter	Water Flow Switch			Pass
	Gym	1	Potter	Water Flow Switch			Pass
	System #1	1	Global Safety	Butterfly Tamper Switch			Pass
	System #2	1	Global Safety	Butterfly Tamper Switch			Pass
	Gym	1	Global Safety	Butterfly Tamper Switch			Pass
	By Street	1	FDC	Fire Department Connection			Pass

Report of Inspection / Test

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INDUSTRIAL-COMMERCIAL



2023-08-30

Property

Robbins Elementary School
KH

2416 West Main Street

Mobile AL 36610

Mario Morrisette

Print Date: 2023-08-31

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
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Industrial Commercial Fire Protection, Inc

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Deficiencies - General Questions

Deficiency #1

Are Pressure reducing valves in good condition including no handwheels broken?: No

Notes:

Deficiency #2

Are there the proper number and type of spare sprinklers?: No

Notes: Main school - short 2 uprights

Deficiency #3

Are there spare sprinklers and a sprinkler wrench?: No

Notes: Gym - 3/4 head wrench needed

Main school - needs Tyco concealed wrench

Deficiencies - General Wet System Questions

None

Deficiencies - Main Bldg Wet

None

Deficiencies - Hall 200 Wet

None

Deficiencies - Gym Wet

None

Deficiencies - Fire Hydrant #1

None

Deficiencies - Fire Hydrant #2

None

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

None

Deficiencies - High Pressure Switch

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FIRE PROTECTION, INC.

None

Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

None

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

None

Deficiencies - Alarm Pressure Switch

None

Deficiencies - PIV Tamper Switch

None

Deficiencies - Inspectors Test Connection

None

Deficiencies - Valves

None

Deficiencies - Drain Valves

None

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Inspector Signature

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

Inspector Name

Bora Yann
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
153252

Signature

A handwritten signature in black ink, appearing to read 'Bora Yann', is written over a large, faint, light-colored watermark of the same signature.

Date Completed

2023-08-30

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IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Is the clapper and automatic drain valve in place and properly operating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
---	---	---	---

SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

VALVE AREA

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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
---	---	---	---

ALARMS

Is the alarm valve free from physical damage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

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<p>Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>If sprinklers have been replaced, were they proper replacements?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If conditions were found that required flushing, was flushing of the system conducted?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Was a drain test conducted after opening any closed valve?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Operating stem of all OS&Y valves lubricated, completely closed and reopened?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?</p>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

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FIRE PROTECTION, INC.

Report of Inspection / Test for Asset - Fire Pump

Fire Pump Information

Property Name	CL Scarbrough middle school
Demand(s) of Fire protection systems supplied by pump:	Sprinkler system
Pump (Horizontal or Vertical):	Vertical
Pump Manufacturer	Patterson
Shop/Serial Number	FP-C0103022
Model	5x3 VIP
Rated GPM	400
Rated Pressure	50
Rated 150 Pressure	41
Rated 0 Pressure	58
Suction	City
If Tank, size and height	n/a
Driver, (electric or diesel engine)	Electric
Engine Manufacturer	Weg
Engine Shop/Serial Number	09AG010 1008780517
Engine Model	020360S3E254JPV
Rated Horsepower	20
Rated Speed	3520
Rated Voltage	208/230
Operating Voltage	208/230
Rated Amps	56.4/51.0
Phase Cycles	3
Service Factor	1.15
Controller Manufacturer	Eaton cutler hammer
Controller Shop/Serial Number	16BO047E
Controller Model	FT30-20D-L1
Jockey Pump Manufacturer	Grundfos

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Jockey Pump Model	A960821 17-P21113035
Jockey Controller Manufacturer	Patterson
Jockey Controller Model	FPJPC12360460
Jockey Controller Serial Number	BX-11771
Transfer Switch Manufacturer	N/a
Transfer Switch Model	N/a
Transfer Switch Serial Number	n/a

OWNER SECTION

Is there a Jockey Pump on system?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Jockey Settings? (on/off)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the fire pump in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the pump remained in service since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

CONTROLLER TEST

Did the pump start at least 6 times from automatic sources?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Was each automatic starting feature tested at least once?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
For electric driven pump controllers: on a simulation of a power failure, while pump is under peak load, did the transfer switch transfer from the normal to emergency source without opening overcurrent protection devices on either line?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	For electric driven pump controllers: when normal power was restored, did retransfer from emergency to normal power occur without overcurrent protection devices opening on either line?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
For electric driven pump controllers: were at least half of the automatic and manual starts required performed with the pump connected to the alternate source?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Were all signal conditions simulated demonstrating workable operation?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

INSPECTION

Pump house/room proper temperature?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Ventilating louvers free to operate?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are suction, discharge and bypass valves open?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Piping free from leaks?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Suction and system pressure gauges normal?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Suction reservoir, if provided, full?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Wet pit suction screens are clean and in place?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Waterflow test valves in closed position?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Controller indicating power on?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Transfer switch indicating normal situation?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Isolation switch closed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Pump in correct phase?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Oil level in motor sight glass in correct range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Circulation relief valve flowing water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Pressure relief valves operating with proper pressure downstream while pump is operational?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

TESTING

Electric pump started automatically?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Electric motor driven pump ran for 10 min?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Packing gland showing slight discharge? (Adjust if necessary)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Packing boxes, bearing and pump casing free from overheating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Time for engine motor to reach full speed:	N/A	For automatic stop controllers, record time pump runs after starting:	N/A
Electric motor driven pumps with reduced voltage or reduced current starting, record the time the controller is in the 1st step:	3	Are all above times and pressures and results acceptable?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Circulation and pressure relief valves operated properly during all flow tests?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	No alarm indicators or other visible abnormalities observed during no-flow test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Were Suction screens cleaned after flow?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Automatic transfer switch test: Power failure simulated during peak flow?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Automatic transfer switch test: Connection made to alternate source?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Automatic transfer switch test: After termination of simulated power failure did motor reconnect to source?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
All alarm conditions simulated?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	All alarms operated?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Fuel tank level, tank float switch, and solenoid valve operation acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Flexible hoses and connectors in fuel and coolant systems acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Oil Level and lube oil heater acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Coolant level acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Water pump for coolant system operating?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Jacket water heater for coolant system okay?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Exhaust system free of leakage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Drain condensate trap on exhaust system operational?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Connections to electrical system acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Cranking voltage acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Isolation switch and circuit breaker exercised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Battery case clean, dry and free of corrosion?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Charger and charge rate passed inspection and battery charge being equalized?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Do Circuit breakers appear clean?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Cleaned or replaced crank case breather in lubrication systems?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Cleaned water strainer in coolant system?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Battery terminals clean and tight?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Electrical systems free of wire chafing?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Manual starting means on electrical systems operated and boxes, panels and cabinets cleaned?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Antifreeze tested in coolant system?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Flexible exhaust section acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Changed pump bearing lubrication?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Shaft end play acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Pressure gauges and sensors accurate?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Coupling alignment acceptable?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Transmission coupling, right angle gear drive and mechanical moving parts lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Circuit breakers passed trip test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Emergency manual starting means operated without power?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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Property

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Electrical connections secure?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the volt meter and ammeter accurate?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Pressure switch settings calibrated?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Motor bearing greased?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Fuel tank free of water and foreign material?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Fuel tank vents and overflow pipes free of obstructions?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Fuel piping acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Antifreeze changed in coolant system?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Heater exchange cleaned out?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Ducts and louvers for combustion air okay?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Exhaust system hanged in supports acceptable and system free of back pressure?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Control and power wiring tight?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
No corrosion on circuit boards?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	No cracked cable wire insulation?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
No leaks in plumbing parts?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	No sign or water on electrical parts?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

FLOW TEST

Run the pump at no-load, rated load and peak load (usually 150% of the rated load) conditions. For variable speed drivers, run the test with pressure limiting control "on" at 25, 50, 75, 100, 125, and 150% of rated load and then again rated speed w/ the pump isolated from the fire protection system and the relief valve closed.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Was equipment and gauges calibrated?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Date of last calibration	01/31/2023	For electric motors operating at the rated voltage and frequency, is the ampere demand on each phase less than or equal to the product of the full load ampere rating times the allowable service factor as stamped on the motor nameplate?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
For electric motors operating under varying voltage, was the product of the actual voltage and current demand on each phase less than or equal to the product of the rated full load current times the rated voltage times the allowable service factor?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	For electric motors operating under varying voltage, did the voltage stay within the range of 95% to 110% of the rated voltage during the test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Did engine-drive unit show no signs of overload or stress?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Was the governor set to properly regulate the engine speed at rated pump speed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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Did the gear drive assembly operate without excessive objectionable noise, vibration, or heating?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Was the unit started and brought up to rated speed without interruption under discharge conditions equal to peak load?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Did the pump perform equal to the manufacturer's curve within the accuracy limits of the test equipment?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Did the unadjusted performance discharge curve meet or exceed the fire protection system demands?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Were there no vibrations that could damage any fire pump component?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the pump perform at all conditions without objectionable overheating of any component?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have electric motor pumps pass the phase reversal test on normal and alternate (if provided) power?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	For vertical turbine pumps taking the suction from wells, is the water level capable of being recorded?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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PERFORMANCE

Rated %	Driver speed: RPM	Total Flow	Net Pressure: PSI	Discharge Pressure: PSI	Suction Pressure: PSI
0%	N/A	No Flow/ Churn Only	53.0	80.0	27.0
100%	N/A	412	47.0	66.0	19.0
150%	N/A	618	40.0	61.0	21.0
Roof Shot	N/A	N/A	0.0	0.0	0.0

ELECTRIC MOTOR

	L1 Voltage	L1 Amperes	L2 Voltage	L2 Amperes	L3 Voltage	L3 Amperes
0%	481	17	481	17	480	17
100%	479	21	478	21	477	20
150%	479	21	478	21	477	21
Roof Shot	N/A	N/A	N/A	N/A	N/A	N/A

Pump Flow Detail

Coefficient (same for all): .97

Nozzle/Orifice Size: 1.75 (inches)

	PITOT					
	1	2	3	4	5	6
0%	N/A	N/A	N/A	N/A	N/A	N/A
100%	17	0	0	00	0	0
150%	9.5	9.5	0	0	0	0
Roof Shot	N/A	N/A	N/A	N/A	N/A	N/A

	FLOW					
	No Flow/ Churn Only	No Flow/ Churn Only	No Flow/ Churn Only	No Flow/ Churn Only	No Flow/ Churn Only	No Flow/ Churn Only
0%	No Flow/ Churn Only	No Flow/ Churn Only	No Flow/ Churn Only	No Flow/ Churn Only	No Flow/ Churn Only	No Flow/ Churn Only
100%	412	0	0	0	0	0
150%	309	309	0	0	0	0
Roof Shot	N/A	N/A	N/A	N/A	N/A	N/A

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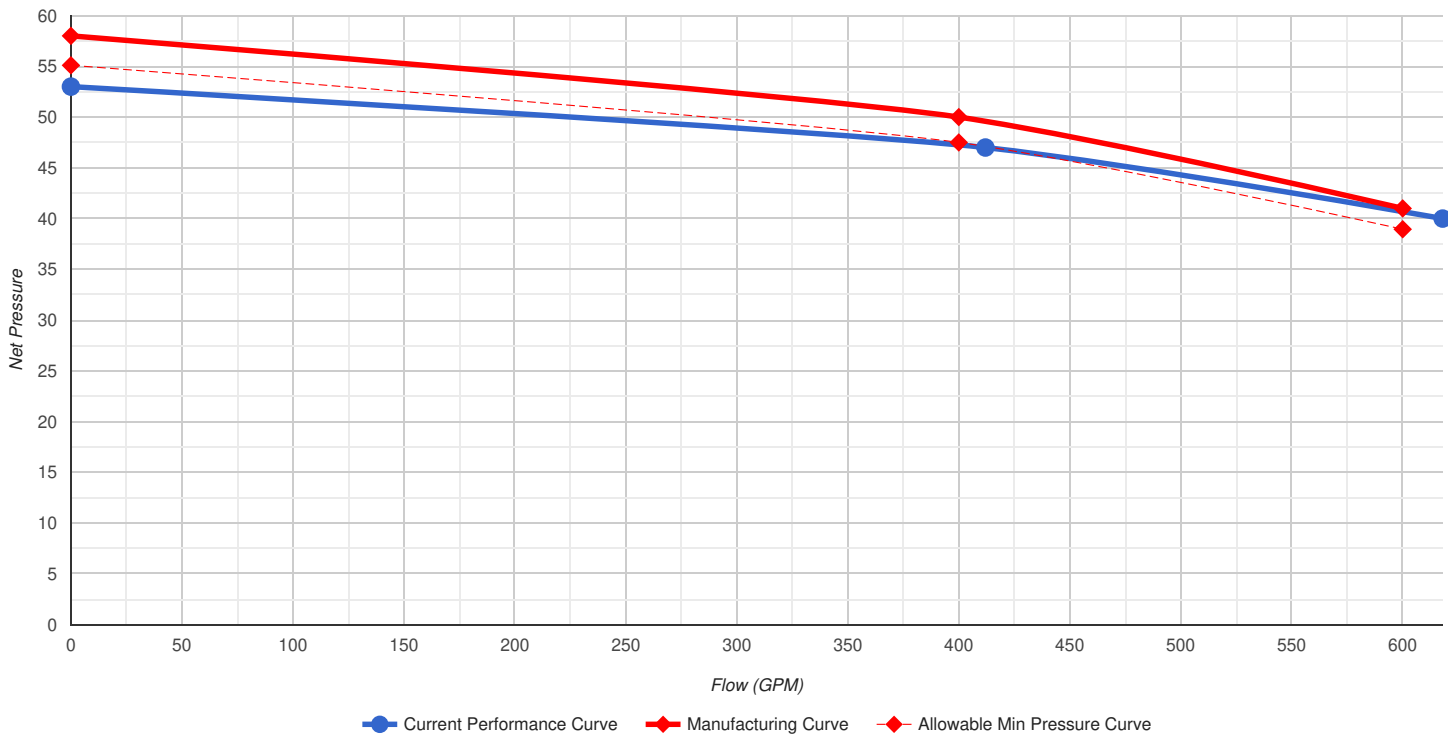
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Report of Inspection / Test for Asset - Hydrant #1

Fire Hydrant Information

Hydrant ID	#1
Description	M&H 5-1/4"
Location	@ Backflow Front of School

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

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Hydrant Flow Test

Static Pressure	85	Residual Pressure	N/A
Pitot Pressure	20	Orifice Size	2.5
Orifice Coefficient	1.0	Flow	750

Static Hydrant

Static Pressure	85	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	750
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Report of Inspection / Test for Asset - Hydrant #2

Fire Hydrant Information

Hydrant ID	#2
Description	M&H
Location	Rear Parking Lot

QUESTIONS

Is there a hydrant wrench that is available and accessible? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	2.5
Orifice Coefficient	1.0	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
Wet System #1	75	80	85	.1	Yes	Yes
Wet System #2	75	80	85	.1	Yes	Yes

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
Wet System #1	@ Riser	1" Inspectors Test Valve	15	Yes	Yes	Yes	Yes	Yes
Wet System #2	@ Riser	1" Inspectors Test Valve	46	Yes	Yes	Yes	Yes	Yes

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VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
Wet System #1	System #1	Interior Mechanical Room 127	Butterfly	3 "	Monitored And Locked	Yes	Yes	Yes	Yes	Yes	13
Wet System #2	System #2	Interior Mechanical Room 127	Butterfly	4 "	Monitored And Locked	Yes	Yes	Yes	Yes	Yes	13
Wet System #1	Riser Check Valve	Interior Mechanical Room 127	Riser Check Valve	2-1/2 "	Not Applicable						

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
Wet System #1	1-1/4" Main Drain	@ Riser	Angle Valve	Yes	Yes
Wet System #2	2" Main Drain	@ Riser	Angle Valve	Yes	Yes

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Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
	Wet System #1	1	Potter	Water Flow Switch			Pass
	Wet System #2	1	Potter	Water Flow Switch			
	Remote @ Street	1	FDC	Fire Department Connection			Pass
	Wet System #1	1	Global	Butterfly Tamper Switch			Pass
	Wet System #2	1	Global	Butterfly Tamper Switch			Pass
	Suction Control Valve	1	Potter	Os&Y Tamper Switch		Needs adjusting	Pass
	Discharge Control Valve	1	Global	Butterfly Tamper Switch		13rds	Pass
	By-Pass	2	Global	Butterfly Tamper Switch		13rds	Pass
	Suction Control Valve on Jockey Pump	1	Milwaukee	Butterfly Tamper Switch			Pass
	Discharge Control Valve on Jockey Pump	1	Milwaukee	Butterfly Tamper Switch			Pass
	Test Header Control Valve	1	Anvil Star	Butterfly Tamper Switch			Pass

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Deficiencies - General Questions

Deficiency #1

Is the visible pipe in good condition with no external corrosion?: No

Notes: 4" FDC pipe corroded in F/P

Deficiency #1 - Photo #1



Date Taken: September 11, 2023

Deficiency #2

Are visible sprinklers free of foreign materials including paint?: No

Notes: Dusty heads @ cafeteria , kitchen , class rm. 177 hallway , office exit , outside pump Rm , class rm 139 inside and out

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Deficiency #2 - Photo #1



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Deficiency #2 - Photo #2



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Deficiency #2 - Photo #3



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Deficiency #2 - Photo #4



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Deficiency #2 - Photo #5



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Deficiency #2 - Photo #6



Date Taken: September 11, 2023

Deficiency #3

Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?: No

Notes: 13 greased heads in kitchen

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Deficiency #3 - Photo #1



Date Taken: September 11, 2023

Deficiency #4

Are all escutcheon plates installed on sprinkler heads?: No

Notes: Missing esc @ kitchen & cafeteria

Report of Inspection / Test

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FIRE PROTECTION, INC.

2023-09-11

Property

Scarborough Middle School
KH

1800 Phillips Lane
Mobile AL 36618

Mario Morrisette

Print Date: 2023-09-11

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc
MS-14326-SC AL-3693 LA-F1173 FL-873651-
0001-2007

1209C Highway 613 South
Lucedale MS 39452

Deficiency #4 - Photo #1



Date Taken: September 11, 2023

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0001-2007

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Luedale MS 39452

Deficiency #4 - Photo #2



Date Taken: September 11, 2023

Deficiencies - General Wet System Questions

None

Deficiencies - Wet System #1

None

Deficiencies - Wet System #2

None

Deficiencies - Fire Pump

Deficiency #5

Did the pump perform equal to the manufacturer's curve within the accuracy limits of the test equipment?: No

Notes: City water pressure is low ; pump under demand curve

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Deficiency #6

Did the unadjusted performance discharge curve meet or exceed the fire protection system demands?: No

Notes:

Deficiency #7

Automatic transfer switch test: Power failure simulated during peak flow?: No

Notes: Switch was in the on position but screen did not have power

Deficiency #8

Automatic transfer switch test: Connection made to alternate source?: No

Notes:

Deficiency #9

Automatic transfer switch test: After termination of simulated power failure did motor reconnect to source?: No

Notes:

Deficiency #10

All alarm conditions simulated?: No

Notes:

Deficiency #11

For electric driven pump controllers: on a simulation of a power failure, while pump is under peak load, did the transfer switch transfer from the normal to emergency source without opening overcurrent protection devices on either line?: No

Notes:

Deficiencies - Hydrant #1

Deficiency #12

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - Hydrant #2

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Deficiency #13

Is the hydrant properly painted and is the paint in good condition?: No

Notes: Need red paint

Deficiency #13 - Photo #1



Date Taken: September 11, 2023

Deficiency #14

Did the hydrant flow until clear (minimum of 1 minute)?: No

Notes: Hydrant is lacking water pressure

Deficiency #15

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

None

Deficiencies - High Pressure Switch

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None

Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

None

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

None

Deficiencies - Alarm Pressure Switch

None

Deficiencies - PIV Tamper Switch

None

Deficiencies - Inspectors Test Connection

None

Deficiencies - Valves

None

Deficiencies - Drain Valves

None

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ICFP

FIRE PROTECTION, INC.

Recommendations

Recommend adding 3/4 check valve to casing relief line . Relief line is tied into 2" drain pipe and will backup into F/P bowl during MD test

Pump tagged - yellow

System #1 - green

System #2- purple multiple(loaded heads)

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1209C Highway 613 South
Luedale MS 39452

Inspector Signature

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

Inspector Name

Bora Yann
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
153252

Signature

A handwritten signature in black ink, appearing to be 'Bora Yann', written in a cursive style.

Date Completed

2023-09-11

Report of Inspection / Test

Annual NFPA 25

INDUSTRIAL-COMMERCIAL



2023-04-18

Property

Semmes Elementary School
KH
10100 Blackwell Nursery Road
Semmes AL 36575
Mario Morrisette
Print Date: 2023-04-18

Conducted by: Tony Kittrell
NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 127557
FL Fire Sprinkler Inspector FP118-000244
LA Fire Sprinkler Inspector E22293

Industrial Commercial Fire Protection, Inc
MS-14326-SC AL-3693 LA-F1173 FL-873651-
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IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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KH
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Conducted by: Tony Kittrell
NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 127557
FL Fire Sprinkler Inspector FP118-000244
LA Fire Sprinkler Inspector E22293

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Is the clapper and automatic drain valve in place and properly operating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
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SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

VALVE AREA

Report of Inspection / Test

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KH
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Water-Based Systems # 127557
FL Fire Sprinkler Inspector FP118-000244
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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
---	---	---	---

ALARMS

Is the alarm valve free from physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

MAINTENANCE

Report of Inspection / Test

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Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
If sprinklers have been replaced, were they proper replacements?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	If conditions were found that required flushing, was flushing of the system conducted?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Was a drain test conducted after opening any closed valve?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Operating stem of all OS&Y valves lubricated, completely closed and reopened?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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Report of Inspection / Test for Asset - Fire Hydrant #1 / Front Gym

Fire Hydrant Information

Hydrant ID	#1
Description	American Darling
Location	Front of Gym

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

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Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Fire Hydrant #2 / Behind Cafeteria

Fire Hydrant Information

Hydrant ID	#2
Description	American Darling
Location	Behind Cafeteria

QUESTIONS

Is there a hydrant wrench that is available and accessible? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
-----------------	-----	-------------------	-----

Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
West Wet System	110	90	110	12	Yes	Yes
East Wet System	110	90	115	3	Yes	Yes

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
West Wet System	West Janitor Closet #143	1" Inspectors Test Valve	62	Yes	No	Yes	No	Yes
East Wet System	East Janitor Closet #234	1" Inspectors Test Valve	48	Yes	No	Yes	No	Yes

Report of Inspection / Test

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2023-04-18

Property

Semmes Elementary School
 KH
 10100 Blackwell Nursery Road
 Semmes AL 36575
 Mario Morrisette
 Print Date: 2023-04-18

Conducted by: Tony Kittrell
 NICET LEVEL II - Inspection & Testing of
 Water-Based Systems # 127557
 FL Fire Sprinkler Inspector FP118-000244
 LA Fire Sprinkler Inspector E22293

Industrial Commercial Fire Protection, Inc
 MS-14326-SC AL-3693 LA-F1173 FL-873651-
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VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
West Wet System	Control Valve	Mechanical Room	OS&Y	4 "	Monitored	Yes	Yes	No	Yes	Yes	14
East Wet System	Control Valve	Mechanical Room	OS&Y	4 "	Monitored	Yes	Yes	No	Yes	Yes	14

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
West Wet System	2" Main Drain	West Wet System	Angle Valve	Yes	Yes
East Wet System	2" Main Drain	East Wet System	Angle Valve	Yes	Yes

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FIRE PROTECTION, INC.

Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
	West Wet System	1	Flow Switch	Water Flow Switch			Pass
	East Wet System	1	Flow Switch	Water Flow Switch			Pass
	West Wet System	1	Potter	Os&Y Tamper Switch			Pass
	East Wet System	1	Potter	Os&Y Tamper Switch			Pass
	Exterior of Mechanical Room	1	FDC	Fire Department Connection			Pass

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FIRE PROTECTION, INC.

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Questions with Photos and Notes

- Is the building occupied?

Yes

Notes:

Panel located inside office area.

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Deficiencies - General Questions

Deficiency #1

Are visible sprinklers free of foreign materials including paint?: No

Notes: 12 loaded heads cafeteria

Deficiency #1 - Photo #1



Date Taken: April 18, 2023

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Deficiency #1 - Photo #2



Date Taken: April 18, 2023

Deficiency #2

Are all Identification Signs in place?: No

Notes:

Deficiency #3

Are all escutcheon plates installed on sprinkler heads?: No

Notes: Missing 2 escutcheons cafeteria

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Deficiency #3 - Photo #1



Date Taken: April 18, 2023

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Deficiency #3 - Photo #2



Date Taken: April 18, 2023

Deficiencies - General Wet System Questions

None

Deficiencies - West Wet System

None

Deficiencies - East Wet System

None

Deficiencies - Fire Hydrant #1 / Front Gym

Deficiency #4

Is there a hydrant wrench that is available and accessible?: No

Notes:

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Deficiency #5

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - Fire Hydrant #2 / Behind Cafeteria

Deficiency #6

Is there a hydrant wrench that is available and accessible?: No

Notes:

Deficiency #7

Is the Road box and shutoff valve visible and accessible?: No

Notes: Could not locate.

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

None

Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

None

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

None

Deficiencies - Alarm Pressure Switch

None

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Deficiencies - PIV Tamper Switch

None

Deficiencies - Inspectors Test Connection

Deficiency #8

Location: West Janitor Closet #143
Description: 1" Inspectors Test Valve
Terminates in Smooth Orifice?: No
Signs: No

Notes:

Deficiency #9

Location: East Janitor Closet #234
Description: 1" Inspectors Test Valve
Terminates in Smooth Orifice?: No
Signs: No

Notes:

Deficiencies - Valves

Deficiency #10

Location: Mechanical Room
Valve Type: o_s_y
Size: 4
Description: Control Valve
Signs: No

Notes:

Deficiency #11

Location: Mechanical Room
Valve Type: o_s_y
Size: 4
Description: Control Valve
Signs: No

Notes:

Deficiencies - Drain Valves

None

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Inspector Signature

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

Inspector Name

Tony Kittrell
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
127557
FL Fire Sprinkler
Inspector FP118-000244
LA Fire Sprinkler
Inspector E22293

Signature

A handwritten signature in black ink that reads 'Tony Kittrell'. The signature is written in a cursive, flowing style.

Date Completed

2023-04-18

Report of Inspection / Test

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4566 Ed George Road
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Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc
MS-14326-SC AL-3693 LA-F1173 FL-873651-
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1209C Highway 613 South
Lucaledale MS 39452

IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Mario Morrisette

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Is the clapper and automatic drain valve in place and properly operating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
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SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

VALVE AREA

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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
---	---	---	---

ALARMS

Is the alarm valve free from physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

MAINTENANCE

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<p>Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>If sprinklers have been replaced, were they proper replacements?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If conditions were found that required flushing, was flushing of the system conducted?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Was a drain test conducted after opening any closed valve?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Operating stem of all OS&Y valves lubricated, completely closed and reopened?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?</p>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

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FIRE PROTECTION, INC.

Report of Inspection / Test for Asset - Fire Hydrant #1

Fire Hydrant Information

Hydrant ID	#1
Description	American Darling 5-1/4" B84B
Location	Front Left corner of School

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Report of Inspection / Test

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Property

Semmes Middle School
KH

4566 Ed George Road
Semmes AL 36575

Mario Morrisette

Print Date: 2023-09-08

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc
MS-14326-SC AL-3693 LA-F1173 FL-873651-
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Luedale MS 39452

INDUSTRIAL-COMMERCIAL



Hydrant Flow Test

Static Pressure	100	Residual Pressure	N/A
Pitot Pressure	35	Orifice Size	2.5
Orifice Coefficient	1.0	Flow	995

Static Hydrant

Static Pressure	100	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	750
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Report of Inspection / Test for Asset - Fire Hydrant #2

Fire Hydrant Information

Hydrant ID	#2
Description	American Darling 5-1/4" B84B
Location	N. End of school / near 500 Bldg

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	100	Residual Pressure	N/A
Pitot Pressure	35	Orifice Size	2.5
Orifice Coefficient	1.0	Flow	995

Static Hydrant

Static Pressure	100	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	750
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Report of Inspection / Test for Asset - Fire Hydrant #3

Fire Hydrant Information

Hydrant ID	#3
Description	American Darling 5-1/4" B84B
Location	SE corner of School

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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FIRE PROTECTION, INC.

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Property

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Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	100	Residual Pressure	N/A
Pitot Pressure	35	Orifice Size	2.5
Orifice Coefficient	1.0	Flow	995

Static Hydrant

Static Pressure	100	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	750
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Report of Inspection / Test for Asset - Fire Hydrant #4

Fire Hydrant Information

Hydrant ID	#4
Description	American Darling 5-1/4" B84B

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MS-14326-SC AL-3693 LA-F1173 FL-873651-
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Location

Front of Basketball Court

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flow acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	100	Residual Pressure	N/A
Pitot Pressure	35	Orifice Size	2.5
Orifice Coefficient	1.0	Flow	995

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INDUSTRIAL-COMMERCIAL



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Semmes Middle School
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4566 Ed George Road
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Static Hydrant

Static Pressure	100	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	750
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MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
500 Bldg System	100	60	100	5	Yes	Yes
System #1	110	70	110	3	Yes	Yes
System #2	110	70	110	3	Yes	Yes
System #3	110	70	110	3	Yes	Yes

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
500 Bldg System	Mech Rm. 525	1" Inspectors Test Valve	38	Yes	Yes	Yes	Yes	Yes
System #3	Kitchen Water Heater Closet	1" Inspectors Test Valve	66	Yes	Yes	Yes	Yes	Yes

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
500 Bldg System	Control Valve	Rear exterior Mech Rm. 525	Butterfly	2-1/2 "	Monitored	Yes	Yes	Yes	Yes	Yes	11
System #1	N. Classroom System	Gym Interior Laundry Rm.	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	16
System #2	S. Classroom System	Gym Interior Laundry Rm.	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	
System #3	Gym/ Kitchen System	Gym Interior Laundry Rm.	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	16

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
500 Bldg System	1-1/4" Main Drain	Art Building System	Angle Valve	N/A	Yes

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FIRE PROTECTION, INC.

System #1	2" Main Drain	System #1	Angle Valve	N/A	Yes
System #2	2" Main Drain	System #2	Angle Valve	N/A	Yes
System #3	2" Main Drain	System #3	Angle Valve	N/A	Yes

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FIRE PROTECTION, INC.

Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
System #1	Gym Laundry Rm.	1	Victaulic	Butterfly Tamper Switch			Pass
System #2	Gym Laundry Rm.	1	Victaulic	Butterfly Tamper Switch			Pass
System #3	Gym Laundry Rm.	1	Victaulic	Butterfly Tamper Switch			Pass
System #1	Gym Laundry Rm.	1	Potter	Water Flow Switch		Manually tested 34sec	Pass
System #2	Gym Laundry Rm.	1	Potter	Water Flow Switch		Manually tested 33 sec	Pass
System #3	Gym Laundry Rm.	1	Potter	Water Flow Switch			Pass
Main School	Exterior of Riser Room @ Main Building	1	FDC	Fire Department Connection		Swivels seized	Fail
500 Bldg	Mech Rm. 525	1	Victaulic	Butterfly Tamper Switch			Pass
500 Bldg	Mech Rm. 525	1	Potter	Water Flow Switch			Pass
500 Bldg	Remote FDC North End of 500 Bldg	1	FDC	Fire Department Connection		Sign faded, cap seized	Fail

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Deficiencies - General Questions

Deficiency #1

Is the FDC swivels and couplings not damaged?: No

Notes: Main Bldg - swivels seized
500 Bldg - swivels seized

Deficiency #2

Are visible sprinklers free of corrosion and physical damage?: No

Notes: Kitchen - 8 loaded

Deficiency #3

Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?: No

Notes: Kitchen - 8 loaded

Deficiency #4

Are all escutcheon plates installed on sprinkler heads?: No

Notes: Kitchen - missing 4
Boiler rm. - missing 5

Deficiencies - General Wet System Questions

None

Deficiencies - 500 Bldg System

None

Deficiencies - System #1

None

Deficiencies - System #2

None

Deficiencies - System #3

None

Deficiencies - Fire Hydrant #1

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Deficiency #5

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - Fire Hydrant #2

None

Deficiencies - Fire Hydrant #3

Deficiency #6

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - Fire Hydrant #4

None

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

None

Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

None

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

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Deficiency #7

Address: 500 Bldg

Location: Remote FDC North End of 500 Bldg

Equipment Type: Fire Department Connection

QTY: 1

Description: Siamese Connection

Status: Fail

Notes:

Deficiency #8

Address: Main School

Location: Exterior of Riser Room @ Main Building

Equipment Type: Fire Department Connection

QTY: 1

Description: Siamese Connection

Status: Fail

Notes:

Deficiencies - Alarm Pressure Switch

None

Deficiencies - PIV Tamper Switch

None

Deficiencies - Inspectors Test Connection

None

Deficiencies - Valves

None

Deficiencies - Drain Valves

None

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Inspector Signature

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

Inspector Name

Bora Yann
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
153252

Signature

A handwritten signature in black ink, appearing to read 'Bora Yann', is written in the signature field.

Date Completed

2023-09-07

Report of Inspection / Test

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2023-06-08

Property

Shepard Elementary School
KH

3980-B Burma Road

Mobile AL 36693

Mario Morrisette

Print Date: 2023-06-08

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
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IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Shepard Elementary School
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3980-B Burma Road

Mobile AL 36693

Mario Morrisette

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NICET LEVEL II - Inspection & Testing of
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INDUSTRIAL-COMMERCIAL



FIRE PROTECTION, INC.

Is the clapper and automatic drain valve in place and properly operating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
---	---	---	---

SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

VALVE AREA

Report of Inspection / Test

Annual NFPA 25

INDUSTRIAL-COMMERCIAL



2023-06-08

Property

Shepard Elementary School
KH

3980-B Burma Road

Mobile AL 36693

Mario Morrisette

Print Date: 2023-06-08

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc

MS-14326-SC AL-3693 LA-F1173 FL-873651-

0001-2007

1209C Highway 613 South

Lucedale MS 39452

Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
---	---	---	---

ALARMS

Is the alarm valve free from physical damage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

MAINTENANCE

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FIRE PROTECTION, INC.

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Property

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<p>Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>If sprinklers have been replaced, were they proper replacements?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If conditions were found that required flushing, was flushing of the system conducted?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Was a drain test conducted after opening any closed valve?</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
<p>Operating stem of all OS&Y valves lubricated, completely closed and reopened?</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<p>Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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FIRE PROTECTION, INC.

MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
System # 1	80	65	77	2	Yes	Yes
System # 2	80	65	77	2	Yes	Yes

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
System # 1	Exterior Mechanical Room West side of the Building	1" Inspectors Test Valve	31	Yes	Yes	Yes	Yes	Yes
System # 2	Dinning Room Storage Closet	1" Inspectors Test Valve	30	Yes	Yes	Yes	Yes	Yes

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
System # 1	Mueller OS&Y	Exterior Mechanical Room @ Gym	OS&Y	2-1/2 "	Monitored	Yes	Yes	Yes	Yes	Yes	11
System # 2	Mueller OS&Y	Exterior Mechanical Room @ Gym	OS&Y	3 "	Monitored	Yes	Yes	Yes	Yes	Yes	11
	Mueller OS&Y	@ Backflow	OS&Y	6 "	Locked	Yes	Yes	Yes	Yes	Yes	
	Mueller OS&Y	@ Backflow	OS&Y	6 "	Locked	Yes	Yes	Yes	Yes	Yes	

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
System # 1	2" Main Drain	@ Riser	Globe Valve	Yes	Yes
System # 2	2" Main Drain	@ Riser	Globe Valve	Yes	Yes

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FIRE PROTECTION, INC.

Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
System #1 & #2	@ Riser	2	System Sensor	Water Flow Switch			
System #1 & #2	@ Riser	2	Potter	Os&Y Tamper Switch		#1 needs adjusting	
	@ Backflow	1	FDC	Fire Department Connection			

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Deficiencies - General Questions

Deficiency #1

Do valve supervisory switches indicate movement?: No

Notes: Osysu-2 on both tampers needs adu

Deficiency #2

Are visible sprinklers free of foreign materials including paint?: No

Notes: Dusty heads throughout school

Hallway 100 & 200 classrooms

Kitchen

Deficiency #2 - Photo #1



Date Taken: June 08, 2023

Report of Inspection / Test

Annual NFPA 25

INDUSTRIAL-COMMERCIAL



FIRE PROTECTION, INC.

2023-06-08

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Shepard Elementary School
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Deficiency #2 - Photo #2



Date Taken: June 08, 2023

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Deficiency #2 - Photo #3



Date Taken: June 08, 2023

Deficiency #3

Are control valves properly sealed and/or supervised?: No

Notes: tamper needs adjusting on both systems

Deficiency #4

Are all escutcheon plates installed on sprinkler heads?: No

Notes: Missing chrome SR in kitchen

Report of Inspection / Test

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Deficiency #4 - Photo #1



Date Taken: June 08, 2023

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Deficiency #4 - Photo #2



Date Taken: June 08, 2023

Deficiencies - General Wet System Questions

None

Deficiencies - System # 1

None

Deficiencies - System # 2

None

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

None

Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

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FIRE PROTECTION, INC.

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NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

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None

Deficiencies - OS&Y Tamper Switch

None

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

None

Deficiencies - Alarm Pressure Switch

None

Deficiencies - PIV Tamper Switch

None

Deficiencies - Inspectors Test Connection

None

Deficiencies - Valves

None

Deficiencies - Drain Valves

None

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INDUSTRIAL-COMMERCIAL

The logo for Industrial-Commercial Fire Protection, Inc. features the letters "ICFP" in a large, bold, yellow font with a red-to-orange gradient. The letters are outlined in blue and are positioned between two horizontal blue lines.

FIRE PROTECTION, INC.

Recommendations

Both systems are tagged yellow

Report of Inspection / Test

Annual NFPA 25

INDUSTRIAL-COMMERCIAL



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Inspector Signature

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

Inspector Name

Bora Yann
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
153252

Signature

A handwritten signature in black ink, appearing to be 'Bora Yann', written in a cursive style.

Date Completed

2023-06-08

Report of Inspection / Test

Annual NFPA 25

INDUSTRIAL-COMMERCIAL



2023-06-19

Property

Spencer/Westlawn Elementary
KH

3071 Ralston Road

Mobile AL 36608

Mario Morrisette

Print Date: 2023-06-19

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc

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IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Is the clapper and automatic drain valve in place and properly operating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
---	---	---	---

SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

VALVE AREA

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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
---	---	---	---

ALARMS

Is the alarm valve free from physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

MAINTENANCE

Report of Inspection / Test

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2023-06-19

Property

Spencer/Westlawn Elementary
KH

3071 Ralston Road
Mobile AL 36608

Mario Morrisette

Print Date: 2023-06-19

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc
MS-14326-SC AL-3693 LA-F1173 FL-873651-
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<p>Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>If sprinklers have been replaced, were they proper replacements?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If conditions were found that required flushing, was flushing of the system conducted?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Was a drain test conducted after opening any closed valve?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Operating stem of all OS&Y valves lubricated, completely closed and reopened?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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Report of Inspection / Test for Asset - Fire Hydrant #1

Fire Hydrant Information

Hydrant ID	#1
Description	American Darling 5-1/4" 584B
Location	S.E Corner of School

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

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INDUSTRIAL-COMMERCIAL



FIRE PROTECTION, INC.

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	89	Residual Pressure	55
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Fire Hydrant #2

Fire Hydrant Information

Hydrant ID	#2
Description	American Darling 5-1/4" 584B
Location	N.E Corner of School
Static Hydrant Description	Yellow body / green top

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	89	Residual Pressure	55
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Fire Hydrant #3

Fire Hydrant Information

Hydrant ID	#3
Description	American Darling 5-1/4" 584B
Location	N.W Corner of School
Static Hydrant Description	Yellow body / green top

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
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Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	89	Residual Pressure	55
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Fire Hydrant #4

Fire Hydrant Information

Hydrant ID	#4
Description	American Darling 5-1/4" 584B
Location	S.W Corner of School

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

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Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	89	Residual Pressure	55
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
System #1	70	55	80	1	Yes	Yes
System #2	89	55	89	1	Yes	Yes

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
System #1	SE.Exterior Riser room	1" Inspectors Test Valve	36	Yes	Yes	Yes	Yes	Yes
System #2	SE. exterior mechanical room	1" Inspectors Test Valve	44	Yes	Yes	Yes	Yes	Yes

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
System #1	Mueller OS&Y Control Valve	SE.Exterior Riser room	OS&Y	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	16
System #2	Mueller OS&Y Control Valve	SE.Exterior Riser room	OS&Y	4 "	Monitored And Locked	Yes	Yes	Yes	Yes	Yes	16

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
System #1	2" Main Drain	@ Riser	Ball Valve	Yes	Yes

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FIRE PROTECTION, INC.

System #2	2" Main Drain	@ Riser	Ball Valve	Yes	Yes
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FIRE PROTECTION, INC.

Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
	System #1	1	Potter	Water Flow Switch			Pass
	System #2	1	Potter	Water Flow Switch			Pass
	System #1	1	Potter	Os&Y Tamper Switch			Pass
	System #2	1	Potter	Os&Y Tamper Switch			Pass
	Exterior of Riser Room S.E Corner of School	1	FDC	Fire Department Connection		Needs lubrication	Pass

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Questions with Photos and Notes

- Is the FDC swivels and couplings not damaged?

Yes

Notes:

Needs lubrication

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Deficiencies - General Questions

Deficiency #1

Has an internal investigation of the pipe (remove a flushing connection and a
sprinkler near the end of a branch line) been performed in the last 5 years?

(If no conduct investigation): No

Notes: Late known date was 2/26/16

Deficiency #1 - Photo #1



Date Taken: June 19, 2023

Deficiencies - General Wet System Questions

None

Deficiencies - System #1

None

Deficiencies - System #2

None

Deficiencies - Fire Hydrant #1

None

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Deficiencies - Fire Hydrant #2

None

Deficiencies - Fire Hydrant #3

None

Deficiencies - Fire Hydrant #4

None

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

None

Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

None

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

None

Deficiencies - Alarm Pressure Switch

None

Deficiencies - PIV Tamper Switch

None

Deficiencies - Inspectors Test Connection

Report of Inspection / Test

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2023-06-19

Property

Spencer/Westlawn Elementary
KH

3071 Ralston Road
Mobile AL 36608

Mario Morrisette

Print Date: 2023-06-19

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc
MS-14326-SC AL-3693 LA-F1173 FL-873651-
0001-2007

1209C Highway 613 South
Lucedale MS 39452

INDUSTRIAL-COMMERCIAL



FIRE PROTECTION, INC.

None

Deficiencies - Valves

None

Deficiencies - Drain Valves

None

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The logo for Industrial-Commercial Fire Protection, Inc. features the letters 'ICFP' in a large, bold, yellow font with a red-to-orange gradient. The letters are outlined in black and set against a white background with a thin red horizontal line above and below them.

FIRE PROTECTION, INC.

Recommendations

Systems green tagged

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Inspector Signature

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

Inspector Name

Bora Yann
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
153252

Signature

A handwritten signature in black ink, appearing to be 'Bora Yann', written in a cursive style.

Date Completed

2023-06-19

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2023-06-07

Property

St. Elmo Elementary
KH

8666 McDonald Road
Irvington AL 36544

Mario Morrisette

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IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Is the clapper and automatic drain valve in place and properly operating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
---	---	---	---

SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

VALVE AREA

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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
---	---	---	---

ALARMS

Is the alarm valve free from physical damage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

MAINTENANCE

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Property

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<p>Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>If sprinklers have been replaced, were they proper replacements?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If conditions were found that required flushing, was flushing of the system conducted?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Was a drain test conducted after opening any closed valve?</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
<p>Operating stem of all OS&Y valves lubricated, completely closed and reopened?</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<p>Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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Report of Inspection / Test for Asset - Fire Hydrant #1

Fire Hydrant Information

Hydrant ID	#1
Description	M&H 5-1/4"
Location	At the Street by School Sign

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

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Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Fire Hydrant #2

Fire Hydrant Information

Hydrant ID	#2
Description	Mueller 5-1/4" 584N
Location	North of Building D

QUESTIONS

Is there a hydrant wrench that is available and accessible? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there no ice or water in the barrel? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Electric Fire Pump

Fire Pump Information

Property Owner	MCPSS
Property Name	St. Elmo Elementary
Property Address	8666 McDonald Rd.fr
Demand(s) of Fire protection systems supplied by pump:	Sprinkler system
Pump (Horizontal or Vertical):	Vertical
Pump Manufacturer	Patterson
Shop/Serial Number	N/A
Model	4x3 Vinyl Ju
Rated GPM	250
Rated Pressure	75

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Rated 150 Pressure	69
Rated 0 Pressure	86
Rated RPM	3534
Suction	City
If Tank, size and height	N/A
Driver, (electric or diesel engine)	Electric
Engine Manufacturer	WEG
Engine Shop/Serial Number	N/A
Engine Model	020360P3E254JPV
Rated Horsepower	20
Rated Speed	3540
Rated Voltage	460
Operating Voltage	208-230
Rated Amps	53.7-48.6
Phase Cycles	3
Service Factor	1.15
Controller Manufacturer	Firetrol
Controller Shop/Serial Number	957088-01RE
Controller Model	TE01C0X0C0000101334
Jockey Pump Manufacturer	AMT
Jockey Pump Model	TE01C0X0C0000101334
Jockey Pump Serial Number	P00031MSV109
Jockey Controller Manufacturer	Firetrol
Jockey Controller Model	FTA-550F-AG001
Jockey Controller Serial Number	927628-01RE
Transfer Switch Manufacturer	N/A
Transfer Switch Model	N/A
Transfer Switch Serial Number	N/A

OWNER SECTION

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Is there a Jockey Pump on system?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Jockey Settings? (on/off)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the fire pump in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the pump remained in service since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

CONTROLLER TEST

Did the pump start at least 6 times from automatic sources?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Was each automatic starting feature tested at least once?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
For electric driven pump controllers: on a simulation of a power failure, while pump is under peak load, did the transfer switch transfer from the normal to emergency source without opening overcurrent protection devices on either line?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	For electric driven pump controllers: when normal power was restored, did retransfer from emergency to normal power occur without overcurrent protection devices opening on either line?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
For electric driven pump controllers: were at least half of the automatic and manual starts required performed with the pump connected to the alternate source?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Were all signal conditions simulated demonstrating workable operation?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

INSPECTION

Pump house/room proper temperature?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Ventilating louvers free to operate?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are suction, discharge and bypass valves open?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Piping free from leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Suction and system pressure gauges normal?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Suction reservoir, if provided, full?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Wet pit suction screens are clean and in place?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Waterflow test valves in closed position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Controller indicating power on?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Transfer switch indicating normal situation?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Isolation switch closed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Pump in correct phase?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Oil level in motor sight glass in correct range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Circulation relief valve flowing water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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INDUSTRIAL-COMMERCIAL



2023-06-07

Property

St. Elmo Elementary
KH

8666 McDonald Road
Irvington AL 36544

Mario Morrisette

Print Date: 2023-06-07

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc
MS-14326-SC AL-3693 LA-F1173 FL-873651-
0001-2007

1209C Highway 613 South
Lucaledale MS 39452

Pressure relief valves operating with proper pressure downstream while pump is operational?
 Yes
 No
 NA

TESTING

Electric pump started automatically?
 Yes
 No
 NA

Electric motor driven pump ran for 10 min?
 Yes
 No
 NA

Packing gland showing slight discharge? (Adjust if necessary)
 Yes
 No
 NA

Packing boxes, bearing and pump casing free from overheating?
 Yes
 No
 NA

Time for engine motor to reach full speed: N/A

For automatic stop controllers, record time pump runs after starting: 3

Electric motor driven pumps with reduced voltage or reduced current starting, record the time the controller is in the 1st step: N/A

Are all above times and pressures and results acceptable?
 Yes
 No
 NA

Circulation and pressure relief valves operated properly during all flow tests?
 Yes
 No
 NA

No alarm indicators or other visible abnormalities observed during no-flow test?
 Yes
 No
 NA

Were Suction screens cleaned after flow?
 Yes
 No
 NA

Automatic transfer switch test: Power failure simulated during peak flow?
 Yes
 No
 NA

Automatic transfer switch test: Connection made to alternate source?
 Yes
 No
 NA

Automatic transfer switch test: After termination of simulated power failure did motor reconnect to source?
 Yes
 No
 NA

All alarm conditions simulated?
 Yes
 No
 NA

All alarms operated?
 Yes
 No
 NA

MAINTENANCE

Fuel tank level, tank float switch, and solenoid valve operation acceptable?
 Yes
 No
 NA

Flexible hoses and connectors in fuel and coolant systems acceptable?
 Yes
 No
 NA

Oil Level and lube oil heater acceptable?
 Yes
 No
 NA

Coolant level acceptable?
 Yes
 No
 NA

Water pump for coolant system operating?
 Yes
 No
 NA

Jacket water heater for coolant system okay?
 Yes
 No
 NA

Exhaust system free of leakage?
 Yes
 No
 NA

Drain condensate trap on exhaust system operational?
 Yes
 No
 NA

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FIRE PROTECTION, INC.

Connections to electrical system acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Cranking voltage acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Isolation switch and circuit breaker exercised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Battery case clean, dry and free of corrosion?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Charger and charge rate passed inspection and battery charge being equalized?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Do Circuit breakers appear clean?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Cleaned or replaced crank case breather in lubrication systems?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Cleaned water strainer in coolant system?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Battery terminals clean and tight?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Electrical systems free of wire chafing?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Manual starting means on electrical systems operated and boxes, panels and cabinets cleaned?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Antifreeze tested in coolant system?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Flexible exhaust section acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Changed pump bearing lubrication?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Shaft end play acceptable?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Pressure gauges and sensors accurate?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Coupling alignment acceptable?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Transmission coupling, right angle gear drive and mechanical moving parts lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Circuit breakers passed trip test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Emergency manual starting means operated without power?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Electrical connections secure?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the volt meter and ammeter accurate?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Pressure switch settings calibrated?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Motor bearing greased?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Fuel tank free of water and foreign material?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Fuel tank vents and overflow pipes free of obstructions?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Fuel piping acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Antifreeze changed in coolant system?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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Heater exchange cleaned out?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Ducts and louvers for combustion air okay?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Exhaust system hanged in supports acceptable and system free of back pressure?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Control and power wiring tight?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
No corrosion on circuit boards?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	No cracked cable wire insulation?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
No leaks in plumbing parts?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	No sign or water on electrical parts?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

FLOW TEST

Run the pump at no-load, rated load and peak load (usually 150% of the rated load) conditions. For variable speed drivers, run the test with pressure limiting control "on" at 25, 50, 75, 100, 125, and 150% of rated load and then again rated speed w/ the pump isolated from the fire protection system and the relief valve closed.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Was equipment and gauges calibrated?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Date of last calibration	01/31/23	For electric motors operating at the rated voltage and frequency, is the ampere demand on each phase less than or equal to the product of the full load ampere rating times the allowable service factor as stamped on the motor nameplate?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
For electric motors operating under varying voltage, was the product of the actual voltage and current demand on each phase less than or equal to the product of the rated full load current times the rated voltage times the allowable service factor?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	For electric motors operating under varying voltage, did the voltage stay within the range of 95% to 110% of the rated voltage during the test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Did engine-drive unit show no signs of overload or stress?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Was the governor set to properly regulate the engine speed at rated pump speed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Did the gear drive assembly operate without excessive objectionable noise, vibration, or heating?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Was the unit started and brought up to rated speed without interruption under discharge conditions equal to peak load?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Did the pump perform equal to the manufacturer's curve within the accuracy limits of the test equipment?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the unadjusted performance discharge curve meet or exceed the fire protection system demands?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Were there no vibrations that could damage any fire pump component?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the pump perform at all conditions without objectionable overheating of any component?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have electric motor pumps pass the phase reversal test on normal and alternate (if provided) power?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	For vertical turbine pumps taking the suction from wells, is the water level capable of being recorded?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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PERFORMANCE

Rated %	Driver speed: RPM	Total Flow	Net Pressure: PSI	Discharge Pressure: PSI	Suction Pressure: PSI
0%	N/A	No Flow / Churn Only	85.0	125.0	40.0
100%	N/A	257	80.0	120.0	40.0
150%	N/A	386	73.0	110.0	37.0
Roof Shot	N/A	N/A	0.0	0.0	0.0

ELECTRIC MOTOR

	L1 Voltage	L1 Amperes	L2 Voltage	L2 Amperes	L3 Voltage	L3 Amperes
0%	484	16	484	16	484	16
100%	482	21	482	21	482	21
150%	482	23	481	24	482	24
Roof Shot	N/A	N/A	N/A	N/A	N/A	N/A

Pump Flow Detail

Coefficient (same for all): .97

Nozzle/Orifice Size: 1.75 (inches)

	PITOT					
	1	2	3	4	5	6
0%	N/A	N/A	N/A	N/A	N/A	N/A
100%	6.6	0	0	0	0	0
150%	14.9	0	0	0	0	0
Roof Shot	N/A	N/A	N/A	N/A	N/A	N/A

	FLOW					
	No Flow / Churn Only	No Flow / Churn Only	No Flow / Churn Only	No Flow / Churn Only	No Flow / Churn Only	No Flow / Churn Only
0%	No Flow / Churn Only	No Flow / Churn Only	No Flow / Churn Only	No Flow / Churn Only	No Flow / Churn Only	No Flow / Churn Only
100%	257	0	0	0	0	0
150%	386	0	0	0	0	0
Roof Shot	N/A	N/A	N/A	N/A	N/A	N/A

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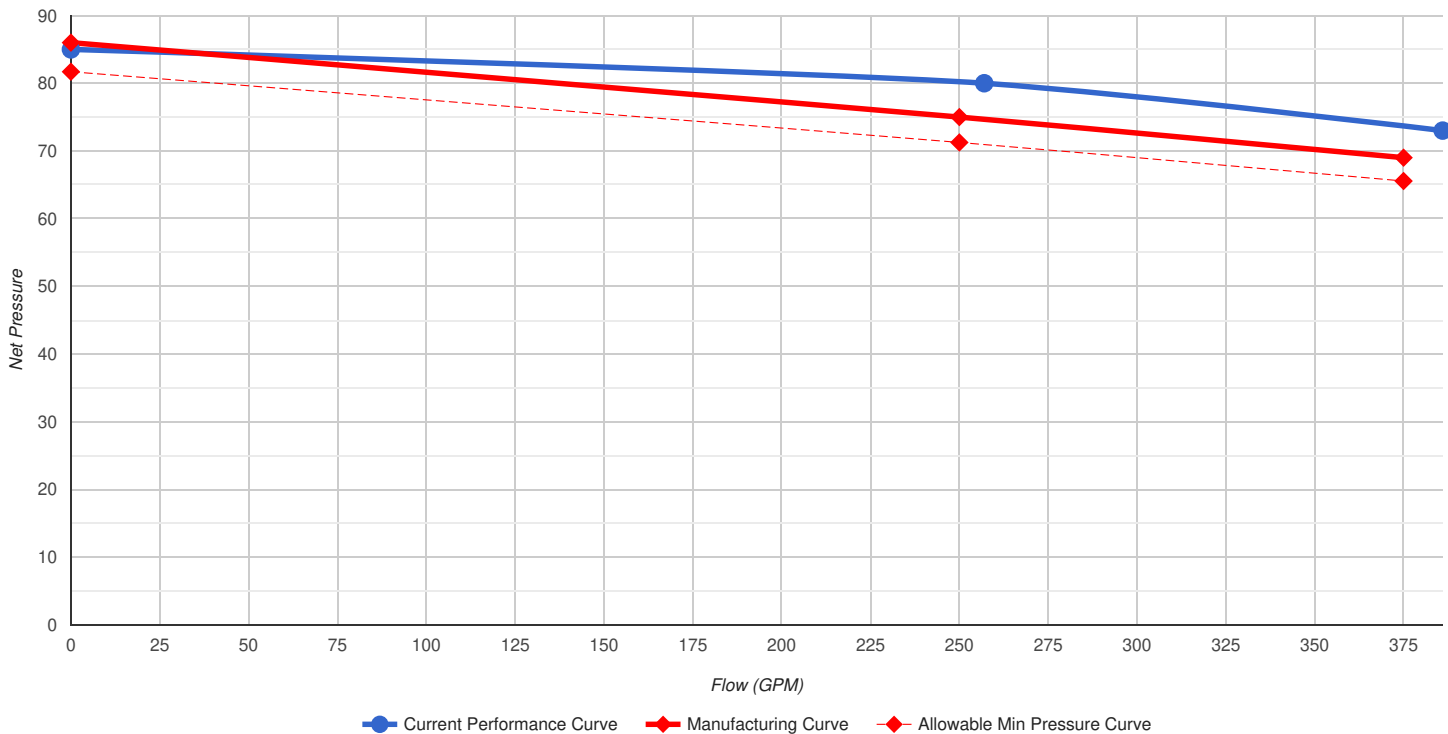
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FIRE PROTECTION, INC.



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FIRE PROTECTION, INC.

MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
Bldg. A	136	100	145	.1	Yes	Yes
Bldg. C	141	130	145	.1	Yes	Yes
Gym	130	100	145	.1	Yes	Yes
Bldg. D	65	28	55	.1	Yes	Yes

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
Bldg. A	Kitchen Storage Closet	1" Inspectors Test Valve	12	Yes	Yes	Yes	Yes	Yes
Bldg. C	Riser Room next to Classroom 303	1" Inspectors Test Valve	29	Yes	Yes	Yes	Yes	Yes
Gym	S.W. Mechanical Room	1" Inspectors Test Valve	7	Yes	Yes	Yes	Yes	Yes
Bldg. D	Air Handler next to Classroom 410	1" globe valve	40	Yes	Yes	Yes	Yes	Yes

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
Bldg. C	Global	Riser Room next to Classroom 303	Butterfly	3 "	Monitored	Yes	Yes	Yes	Yes	Yes	14
Bldg. A	Tyco (main bldg tamper)	Exterior Janitorial Room	Butterfly	3 "	Monitored	Yes	Yes	Yes	Yes	Yes	7
	Delete	Delete	Underground	6 "	Not Applicable	Yes	Yes	Yes	Yes	Yes	
Bldg. D	Anvil star	Air Handler next to Classroom 410	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	7
Gym	Global	Riser Room inside Gym	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	13
Bldg. A	Viking Check	Exterior Janitorial Room	Riser Check Valve	3 "	Not Applicable	Yes	Yes	N/A	N/A	N/A	
Bldg. C	Viking Riser Check	Riser Room next to Classroom 303	Riser Check Valve	3 "	Not Applicable	Yes	Yes	N/A	N/A	N/A	
Gym	Viking Riser Check	Riser Room inside Gym	Riser Check Valve	4 "	Not Applicable	Yes	Yes	N/A	N/A	N/A	

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VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
Bldg. A	Mueller (pump suction)	Exterior Janitorial Room	OS&Y	6 "	Monitored And Locked	Yes	Yes	Yes	Yes	Yes	20
Bldg. A	Global safety (Deadhead)	Exterior Janitorial Room	Butterfly	6 "	Monitored And Locked	Yes	Yes	Yes	Yes	Yes	14
Bldg. A	Global safety (test header)	Exterior Janitorial Room	Butterfly	6 "	Monitored And Locked	Yes	Yes	Yes	Yes	Yes	14
Bldg. A	Global safety (city bypass)	Exterior Janitorial Room	Butterfly	6 "	Monitored And Locked	Yes	Yes	Yes	Yes	Yes	14
Bldg. A	Anvil star (system bypass)	Exterior Janitorial Room	Butterfly	6 "	Monitored And Locked	Yes	Yes	Yes	Yes	Yes	14

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
Bldg. D	2" Main Drain	Riser Room next to Classroom 410	Angle Valve	Yes	Yes
Bldg. C	2" Main Drain	Riser Room next to Classroom 303	Angle Valve	Yes	Yes
Gym	2" Main Drain	Riser Room inside Gym	Ball Valve	Yes	Yes

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FIRE PROTECTION, INC.

Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
	Bldg A	1	Potter	Water Flow Switch			Pass
	Bldg C	1	Potter	Water Flow Switch			Pass
	Gym	1	Potter	Water Flow Switch			Pass
	Bldg D	1	Potter	Water Flow Switch			Pass
	Bldg A	1		Butterfly Tamper Switch			
	Bldg C	1		Butterfly Tamper Switch			Pass
	Gym	1		Butterfly Tamper Switch			Pass
	Bldg D	1		Butterfly Tamper Switch			Pass
	Behind Building D	2	FDC	Fire Department Connection		Plugs under pressure	Pass
Gym - school	Near main entrance.	2		Fire Department Connection			Pass

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Deficiencies - General Questions

Deficiency #1

Is the information sign attached and legible?: No

Notes:

Deficiencies - General Wet System Questions

None

Deficiencies - Bldg. A

None

Deficiencies - Bldg. C

None

Deficiencies - Gym

None

Deficiencies - Bldg. D

None

Deficiencies - Fire Hydrant #1

Deficiency #2

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - Fire Hydrant #2

Deficiency #3

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - Electric Fire Pump

None

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

None

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Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

None

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

None

Deficiencies - Alarm Pressure Switch

None

Deficiencies - PIV Tamper Switch

None

Deficiencies - Inspectors Test Connection

None

Deficiencies - Valves

None

Deficiencies - Drain Valves

None

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The logo for Industrial-Commercial Fire Protection, Inc. features the letters 'ICFP' in a large, bold, yellow font with a red-to-orange gradient. The letters are outlined in black and set against a white background with a thin red horizontal line above and below them.

FIRE PROTECTION, INC.

Recommendations

Gym - fire panel & Sprinkler riser to be kept accessible

Gym - green tagged

A bldg - green tagged

B Bldg -green tagged

C Bldg -green tagged

D Bldg - green tagged

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Inspector Signature

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

Inspector Name

Bora Yann
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
153252

Signature

A handwritten signature in black ink, appearing to be "BY", written over a light gray background.

Date Completed

2023-06-07

Inspector Signature

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

Inspector Name

Bora Yann
NICET LEVEL II -
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153252

Signature

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Date Completed

2023-02-22

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IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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2023-02-22

Property

St. Elmo Elementary
KH

8666 McDonald Road
Irvington AL 36544

Mario Morrisette

Print Date: 2023-02-22

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc
MS-14326-SC AL-3693 LA-F1173 FL-873651-
0001-2007

1209C Highway 613 South
Lucaledale MS 39452

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FIRE PROTECTION, INC.

Is the clapper and automatic drain valve in place and properly operating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
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SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

VALVE AREA

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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
---	---	---	---

ALARMS

Is the alarm valve free from physical damage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

MAINTENANCE

Report of Inspection / Test

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FIRE PROTECTION, INC.

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<p>Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>If sprinklers have been replaced, were they proper replacements?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If conditions were found that required flushing, was flushing of the system conducted?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Was a drain test conducted after opening any closed valve?</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
<p>Operating stem of all OS&Y valves lubricated, completely closed and reopened?</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<p>Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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Report of Inspection / Test for Asset - Fire Hydrant #1

Fire Hydrant Information

Hydrant ID	#1
Description	M&H 5-1/4"
Location	At the Street by School Sign

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

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Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Fire Hydrant #2

Fire Hydrant Information

Hydrant ID	#2
Description	Mueller 5-1/4" 584N
Location	North of Building D

QUESTIONS

Is there a hydrant wrench that is available and accessible? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there no ice or water in the barrel? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
Bldg. A	136	100	145	.1	Yes	Yes
Bldg. C	141	130	145	.1	Yes	Yes
Gym	130	100	145	.1	Yes	Yes
Bldg. D	65	28	55	.1	Yes	Yes

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
Bldg. A	Kitchen Storage Closet	1" Inspectors Test Valve	12	Yes	Yes	Yes	Yes	Yes

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FIRE PROTECTION, INC.

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
Bldg. C	Riser Room next to Classroom 303	1" Inspectors Test Valve	29	Yes	Yes	Yes	Yes	Yes
Gym	S.W. Mechanical Room	1" Inspectors Test Valve	7	Yes	Yes	Yes	Yes	Yes
Bldg. D	Air Handler next to Classroom 410	1" globe valve	40	Yes	Yes	Yes	Yes	Yes

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
Bldg. C	Global	Riser Room next to Classroom 303	Butterfly	3 "	Monitored	Yes	Yes	Yes	Yes	Yes	14
Bldg. A	Tyco (main bldg tamper)	Exterior Janitorial Room	Butterfly	3 "	Monitored	Yes	Yes	Yes	Yes	Yes	7
	Delete	Delete	Underground	6 "	Not Applicable	Yes	Yes	Yes	Yes	Yes	
Bldg. D	Anvil star	Air Handler next to Classroom 410	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	7
Gym	Global	Riser Room inside Gym	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	13
Bldg. A	Viking Check	Exterior Janitorial Room	Riser Check Valve	3 "	Not Applicable	Yes	Yes	N/A	N/A	N/A	
Bldg. C	Viking Riser Check	Riser Room next to Classroom 303	Riser Check Valve	3 "	Not Applicable	Yes	Yes	N/A	N/A	N/A	
Gym	Viking Riser Check	Riser Room inside Gym	Riser Check Valve	4 "	Not Applicable	Yes	Yes	N/A	N/A	N/A	
Bldg. A	Mueller (pump suction)	Exterior Janitorial Room	OS&Y	6 "	Monitored And Locked	Yes	Yes	Yes	Yes	Yes	20
Bldg. A	Global safety (Deadhead)	Exterior Janitorial Room	Butterfly	6 "	Monitored And Locked	Yes	Yes	Yes	Yes	Yes	14
Bldg. A	Global safety (test header)	Exterior Janitorial Room	Butterfly	6 "	Monitored And Locked	Yes	Yes	Yes	Yes	Yes	14
Bldg. A	Global safety (city bypass)	Exterior Janitorial Room	Butterfly	6 "	Monitored And Locked	Yes	Yes	Yes	Yes	Yes	14
Bldg. A	Anvil star (system bypass)	Exterior Janitorial Room	Butterfly	6 "	Monitored And Locked	Yes	Yes	Yes	Yes	Yes	14

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
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FIRE PROTECTION, INC.

Bldg. D	2" Main Drain	Riser Room next to Classroom 410	Angle Valve	Yes	Yes
Bldg. C	2" Main Drain	Riser Room next to Classroom 303	Angle Valve	Yes	Yes
Gym	2" Main Drain	Riser Room inside Gym	Ball Valve	Yes	Yes

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FIRE PROTECTION, INC.

Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
	Bldg A	1	Potter	Water Flow Switch			Pass
	Bldg C	1	Potter	Water Flow Switch			Pass
	Gym	1	Potter	Water Flow Switch			Pass
	Bldg D	1	Potter	Water Flow Switch			Pass
	Bldg A	1		Butterfly Tamper Switch			
	Bldg C	1		Butterfly Tamper Switch			Pass
	Gym	1		Butterfly Tamper Switch			Pass
	Bldg D	1		Butterfly Tamper Switch			Pass
	Behind Building D	2	FDC	Fire Department Connection		Plugs under pressure	Pass
Gym - school	Near main entrance.	2		Fire Department Connection			Pass

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Deficiencies - General Questions

Deficiency #1

Is the information sign attached and legible?: No

Notes:

Deficiencies - General Wet System Questions

None

Deficiencies - Bldg. A

None

Deficiencies - Bldg. C

None

Deficiencies - Gym

None

Deficiencies - Bldg. D

None

Deficiencies - Fire Hydrant #1

Deficiency #2

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - Fire Hydrant #2

Deficiency #3

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

None

Deficiencies - High Pressure Switch

None

Report of Inspection / Test

Annual NFPA 25

INDUSTRIAL-COMMERCIAL



2023-02-22

Property

St. Elmo Elementary
KH

8666 McDonald Road
Irvington AL 36544

Mario Morrisette

Print Date: 2023-02-22

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc
MS-14326-SC AL-3693 LA-F1173 FL-873651-
0001-2007

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Luedale MS 39452

Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

None

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

None

Deficiencies - Alarm Pressure Switch

None

Deficiencies - PIV Tamper Switch

None

Deficiencies - Inspectors Test Connection

None

Deficiencies - Valves

None

Deficiencies - Drain Valves

None

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2023-02-22

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FIRE PROTECTION, INC.

Recommendations

Gym - fire panel & Sprinkler riser to be kept accessible

Gym - green tagged

A bldg - green tagged

B Bldg -green tagged

C Bldg -green tagged

D Bldg - green tagged

Report of Inspection / Test

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Inspector Signature

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

Inspector Name

Bora Yann
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
153252

Signature

A handwritten signature in black ink, appearing to be 'BY', written in a cursive style.

Date Completed

2023-02-22

Report of Inspection / Test

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2023-09-12

Property

Tanner Williams Elementary School
KH

13700 Tanner Williams Road

Wilmer AL 36587

Mario Morrisette

Print Date: 2023-09-12

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc

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IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

Report of Inspection / Test

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Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc

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FIRE PROTECTION, INC.

Is the clapper and automatic drain valve in place and properly operating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
---	---	---	---

SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

VALVE AREA

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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
---	---	---	---

ALARMS

Is the alarm valve free from physical damage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

MAINTENANCE

Report of Inspection / Test

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NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

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<p>Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>If sprinklers have been replaced, were they proper replacements?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If conditions were found that required flushing, was flushing of the system conducted?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Was a drain test conducted after opening any closed valve?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Operating stem of all OS&Y valves lubricated, completely closed and reopened?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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Report of Inspection / Test for Asset - Fire Hydrant #1 S.E Corner of Property by Backflow

Fire Hydrant Information

Hydrant ID	#1
Description	Clow 5-1/4" 996G
Location	S.E Corner of Property by Backflow

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

Report of Inspection / Test

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INDUSTRIAL-COMMERCIAL



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MS-14326-SC AL-3693 LA-F1173 FL-873651-
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Are monitor nozzles lubricated? Yes
 No
 NA

Hydrant Flow Test

Static Pressure	75	Residual Pressure	N/A
Pitot Pressure	35	Orifice Size	2.5
Orifice Coefficient	0.77	Flow	755.15

Static Hydrant

Static Pressure	75	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	577.5
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Report of Inspection / Test for Asset - Fire Hydrant #2 E. Of Playground

Fire Hydrant Information

Hydrant ID	#2
Description	MH 5-1/4" H209688
Location	Parking Lot of Main Building

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	75	Residual Pressure	N/A
Pitot Pressure	35	Orifice Size	2.5
Orifice Coefficient	0.77	Flow	755.15

Static Hydrant

Static Pressure	75	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	577.5
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Report of Inspection / Test for Asset - Fire Hydrant #3 N.W of Gym in North Field

Fire Hydrant Information

Hydrant ID	#3
Description	MH 5-1/4" H209560
Location	N. Walking Circle

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
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Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	75	Residual Pressure	N/A
Pitot Pressure	35	Orifice Size	2.5
Orifice Coefficient	0.77	Flow	755.15

Static Hydrant

Static Pressure	75	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	577.5
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Report of Inspection / Test

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2023-09-12

Property

Tanner Williams Elementary School
KH

13700 Tanner Williams Road
Wilmer AL 36587

Mario Morrisette

Print Date: 2023-09-12

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc
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Lucaledale MS 39452

Report of Inspection / Test for Asset - Fire Hydrant #4 N.E Corner of Main Parking Lot

Fire Hydrant Information

Hydrant ID	#4
Description	MH 5-1/4" 455751
Location	Main Parking Lot
Static Hydrant Description	Red Hydrant

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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Are monitor nozzles lubricated?	<input type="checkbox"/> Yes
	<input type="checkbox"/> No
	<input checked="" type="checkbox"/> NA

Hydrant Flow Test

Static Pressure	75	Residual Pressure	N/A
Pitot Pressure	35	Orifice Size	2.5
Orifice Coefficient	0.77	Flow	755.15

Static Hydrant

Static Pressure	75	Residual Pressure	N/A
-----------------	----	-------------------	-----

Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	577.5
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MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
Sys #1 main Bldg.	75	60	75	3	Yes	Yes
Sys #2 multi purpose/Gym	70	50	75	3	Yes	Yes
Sys #3 Class Wing	85	55	75	3	Yes	Yes

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
Sys #1 main Bldg.	E. Exterior Storage (Cafeteria)	1" ITV	35	Yes	Yes	Yes	Yes	Yes
Sys #2 multi purpose/Gym	janitors Closet	1" ITV	32	Yes	Yes	Yes	Yes	Yes
Sys #3 Class Wing	Exterior Mech Room	1" ITV	28	Yes	Yes	Yes	Yes	Yes

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
Sys #1 main Bldg.	control valve	East side main bldg.	Butterfly	2-1/2 "	Monitored	Yes	Yes	Yes	Yes	Yes	10.5

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VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
Sys #2 multi purpose/Gym	Conril valve	Interior Gym storage	Butterfly	4 "	Monitored And Locked	Yes	Yes	Yes	Yes	Yes	10.5
Sys #3 Class Wing	Control valve	N. Exterior Mech Room	Butterfly	3 "	Monitored	Yes	Yes	Yes	Yes	Yes	8

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
Sys #3 Class Wing	1-1/2" main drain	Class Wing	Globe Valve	N/A	Yes
Sys #1 main Bldg.	1-1/4" main dran	Main bldg	Globe Valve	N/A	Yes
Sys #2 multi purpose/Gym	2" Main drain	Gym	Globe Valve	N/A	Yes

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FIRE PROTECTION, INC.

Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
	Main Building Riser Room	1	Anvil	Butterfly Tamper Switch			
	Main bldg	1	Anvil	Butterfly Tamper Switch			Pass
	System #1	1		Butterfly Tamper Switch			
Delete	East side main bldg	1	FDC	Fire Department Connection			Pass
	System #2	1		Butterfly Tamper Switch			
	Main Building Riser Room	1	Potter	Water Flow Switch			
Main Building & Gym	By Street @ Backflow	1	FDC	Fire Department Connection			Pass
Delete	System #3	1		Butterfly Tamper Switch			
Main Bldg	E. Exterior Storage	1	Potter	Water Flow Switch			Pass
Main Bldg	E. Exterior Storage	1	Potter	Water Flow Switch			Pass
Gym	Interior Gym Storage	1	Anvil	Butterfly Tamper Switch			Pass
Delete	Class Wing Riser Room	1	Tyco	Butterfly Tamper Switch			
Delete	Exterior Gym Wall	1	FDC	Fire Department Connection			Pass
Delete	System #2	1	System Sensor	Water Flow Switch			
	Class Wing Riser Room	1	Potter	Water Flow Switch			Pass
Gym	Interior Gym Storage	1	System Sensor	Water Flow Switch			Pass

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FIRE PROTECTION, INC.

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
Classwing	N. Exterior Mech Rm.	1	FDC	Fire Department Connection			Pass
Delete	System #3	1	Potter	Water Flow Switch			
Delelte	@ Backflow	1	FDC	Fire Department Connection			
Delete	Gym Riser Room	1	Anvil	Butterfly Tamper Switch			
Class wing	N. Exterior Mech Rm.	1	Tyco	Butterfly Tamper Switch			Pass
Delete	Gym Riser Room	1	System Sensor	Water Flow Switch			
Delete	Back of System #3 Class Wing	1	FDC	Fire Department Connection			
Class Wing	N. Exterior Mech Rm.	1	FDC	Fire Department Connection			Pass
Delete	Class Wing	1	Potter	Water Flow Switch			

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Deficiencies - General Questions

Deficiency #1

Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?: No

Notes:

Deficiency #2

Are all Identification Signs in place?: No

Notes:

Deficiencies - General Wet System Questions

None

Deficiencies - Sys #1 main Bldg.

None

Deficiencies - Sys #2 multi purpose/Gym

None

Deficiencies - Sys #3 Class Wing

None

Deficiencies - Fire Hydrant #1 S.E Corner of Property by Backflow

Deficiency #3

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - Fire Hydrant #2 E. Of Playground

None

Deficiencies - Fire Hydrant #3 N.W of Gym in North Field

Deficiency #4

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - Fire Hydrant #4 N.E Corner of Main Parking Lot

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Deficiency #5

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Water Flow Switch

None

Deficiencies - Fire Department Connection

None

Deficiencies - Air Compressor

None

Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Alarm Pressure Switch

None

Deficiencies - PIV Tamper Switch

None

Deficiencies - Ball Valve Tamper

None

Deficiencies - Inspectors Test Connection

None

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FIRE PROTECTION, INC.

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Deficiencies - Valves

None

Deficiencies - Drain Valves

None

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INDUSTRIAL-COMMERCIAL

The logo for Industrial-Commercial Fire Protection, Inc. features the letters 'ICFP' in a large, bold, serif font. The letters are filled with a gradient from yellow to orange, with a dark outline. The logo is centered between two horizontal lines.

FIRE PROTECTION, INC.

Recommendations

Gym & Classwing- system activates F/A even when in walktest

Report of Inspection / Test

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Inspector Signature

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

Inspector Name

Bora Yann
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
153252

Signature

A handwritten signature in black ink, appearing to be "Bora Yann", written in a cursive style.

Date Completed

2023-09-12

Report of Inspection / Test

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2023-09-08

Property

Taylor-White Elementary School
 476 Eliza Jordan Road North
 Mobile AL 36608
 Mario Morrisette
 Print Date: 2023-09-11

Conducted by: Bora Yann
 NICET LEVEL II - Inspection & Testing of
 Water-Based Systems # 153252

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IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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FIRE PROTECTION, INC.

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Is the clapper and automatic drain valve in place and properly operating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
---	---	---	---

SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

VALVE AREA

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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
---	---	---	---

ALARMS

Is the alarm valve free from physical damage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

MAINTENANCE

Report of Inspection / Test

Annual NFPA 25

INDUSTRIAL-COMMERCIAL



FIRE PROTECTION, INC.

2023-09-08

Property

Taylor-White Elementary School
 476 Eliza Jordan Road North
 Mobile AL 36608
 Mario Morrisette
 Print Date: 2023-09-11

Conducted by: Bora Yann
 NICET LEVEL II - Inspection & Testing of
 Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc
 MS-14326-SC AL-3693 LA-F1173 FL-873651-
 0001-2007
 1209C Highway 613 South
 Lucedale MS 39452

<p>Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>If sprinklers have been replaced, were they proper replacements?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If conditions were found that required flushing, was flushing of the system conducted?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Was a drain test conducted after opening any closed valve?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Operating stem of all OS&Y valves lubricated, completely closed and reopened?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?</p>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

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FIRE PROTECTION, INC.

Report of Inspection / Test for Asset - Fire Hydrant #1 N.W Corner of South Parking Lot

Fire Hydrant Information

Hydrant ID	#1
Description	MH 5-1/4" H164800
Location	N.W Corner of South Parking Lot

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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Are monitor nozzles lubricated? Yes
 No
 NA

Hydrant Flow Test

Static Pressure	75	Residual Pressure	N/A
Pitot Pressure	30	Orifice Size	2.5
Orifice Coefficient	1.0	Flow	920

Static Hydrant

Static Pressure	75	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	750
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Report of Inspection / Test for Asset - Fire Hydrant #2 Center of Planter in South Parking Lot

Fire Hydrant Information

Hydrant ID	#2
Description	MH 5-1/4" 455751
Location	Center of Planter in South Parking Lot

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	75	Residual Pressure	N/A
Pitot Pressure	30	Orifice Size	2.5
Orifice Coefficient	1.0	Flow	920

Static Hydrant

Static Pressure	75	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	750
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Report of Inspection / Test for Asset - Fire Hydrant #3 S.E Planter in South Parking Lot

Fire Hydrant Information

Hydrant ID	#3
Description	MH 5-1/4" H164786
Location	S.E Planter in South Parking Lot

QUESTIONS

Report of Inspection / Test

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FIRE PROTECTION, INC.

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Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	75	Residual Pressure	N/A
Pitot Pressure	30	Orifice Size	2.5
Orifice Coefficient	1.0	Flow	920

Static Hydrant

Static Pressure	75	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	750
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Report of Inspection / Test for Asset - Fire Hydrant #4 N.W Corner of North Parking Lot

Fire Hydrant Information

Hydrant ID	#4
Description	MH 5-1/4" H164782
Location	N.W Corner of North Parking Lot
Static Hydrant Description	Red

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
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Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
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Hydrant Flow Test

Static Pressure	75	Residual Pressure	N/A
Pitot Pressure	30	Orifice Size	2.5
Orifice Coefficient	1.0	Flow	920

Static Hydrant

Static Pressure	75	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	750
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Report of Inspection / Test for Asset - Fire Hydrant #5 N.E Corner of North Parking Lot

Fire Hydrant Information

Hydrant ID	#5
Description	MH 5-1/4" H57805
Location	N.E Corner of North Parking Lot
Static Hydrant Description	Red

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	75	Residual Pressure	N/A
Pitot Pressure	30	Orifice Size	2.5
Orifice Coefficient	1.0	Flow	920

Static Hydrant

Static Pressure	75	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	750
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MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
Wet System #1	80	50	75	5	Yes	Yes
Wet System #2	80	50	75	5	Yes	Yes

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INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
Wet System #2	Exterior Hvac mech rm 409	1" ITV	48	Yes	Yes	Yes	Yes	Yes

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
Wet System #1	System #1	Gym Exterior Mech Rm.	Butterfly	4 "	Monitored And Locked	Yes	Yes	Yes	Yes	Yes	10
Wet System #2	System #2	Gym Exterior Mech Rm.	Butterfly	3 "	Locked	Yes	Yes	Yes	Yes	Yes	10

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
Wet System #2	1-1/4" Main Drain	System #2	Ball Valve	Yes	Yes
Wet System #1	2" Main Drain	System #1	Ball Valve	Yes	Yes

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Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
System #1	Gym Exterior Mech Rm.	1	Potter	Water Flow Switch		39 Manually tested	Pass
System #2	Gym Exterior Mech Rm.	1	Potter	Water Flow Switch			Pass
System 1	Gym Exterior Mech Rm.	1	Kennedy	Butterfly Tamper Switch			Pass
System #2	Gym Exterior Mech Rm.	1	Kennedy	Butterfly Tamper Switch			Pass
	Gym Exterior Mech Rm Wall	1	FDC	Fire Department Connection			Pass
@ Street	Backflow Osy Valves	2	Potter	Os&Y Tamper Switch		Valves are chained & Locked	Fail

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Deficiencies - General Questions

Deficiency #1

Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?: No

Notes: Missing Data Plaque

Deficiency #2

Do valve supervisory switches indicate movement?: No

Notes: Osy Valves on Backflow - tampers did not report to F/A panel , Valves are chained & Locked

Deficiency #3

Are visible sprinklers free of foreign materials including paint?: No

Notes: Greased heads in kitchen , heads lightly dusted throughout school

Deficiency #4

Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?: No

Notes: 4 greased

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Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc
MS-14326-SC AL-3693 LA-F1173 FL-873651-
0001-2007
1209C Highway 613 South
Lucedale MS 39452

Deficiency #4 - Photo #1



Date Taken: September 08, 2023

Deficiency #5

Are all Identification Signs in place?: No

Notes:

Deficiencies - General Wet System Questions

None

Deficiencies - Wet System #1

None

Deficiencies - Wet System #2

None

Deficiencies - Fire Hydrant #1 N.W Corner of South Parking Lot

None

Deficiencies - Fire Hydrant #2 Center of Planter in South Parking Lot

None

Report of Inspection / Test

Annual NFPA 25

INDUSTRIAL-COMMERCIAL



2023-09-08

Property

Taylor-White Elementary School
476 Eliza Jordan Road North
Mobile AL 36608
Mario Morrisette
Print Date: 2023-09-11

Conducted by: Bora Yann
NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc
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Deficiencies - Fire Hydrant #3 S.E Planter in South Parking Lot

None

Deficiencies - Fire Hydrant #4 N.W Corner of North Parking Lot

None

Deficiencies - Fire Hydrant #5 N.E Corner of North Parking Lot

None

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

None

Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

Deficiency #6

Address: @ Street
Location: Backflow Osy Valves
Equipment Type: OS&Y Tamper Switch
QTY: 2
Description: Osysu-2

Status: Fail

Notes:

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

None

Deficiencies - Alarm Pressure Switch

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2023-09-08

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FIRE PROTECTION, INC.

None

Deficiencies - PIV Tamper Switch

None

Deficiencies - Ball Valve Tamper

None

Deficiencies - Inspectors Test Connection

None

Deficiencies - Valves

None

Deficiencies - Drain Valves

None

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Inspector Signature

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

Inspector Name

Bora Yann
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
153252

Signature

A handwritten signature in black ink, appearing to be 'BY', is written in the signature field.

Date Completed

2023-09-08

Report of Inspection / Test

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INDUSTRIAL-COMMERCIAL



2023-04-17

Property

Theodore High School
KH

6201 Swedetown Road
Theodore AL 36582

Mario Morrisette

Print Date: 2023-04-17

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc
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IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

Report of Inspection / Test

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Is the clapper and automatic drain valve in place and properly operating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
---	---	---	---

SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

VALVE AREA

Report of Inspection / Test

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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
---	---	---	---

ALARMS

Is the alarm valve free from physical damage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

MAINTENANCE

Report of Inspection / Test

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INDUSTRIAL-COMMERCIAL



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<p>Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>If sprinklers have been replaced, were they proper replacements?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If conditions were found that required flushing, was flushing of the system conducted?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Was a drain test conducted after opening any closed valve?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Operating stem of all OS&Y valves lubricated, completely closed and reopened?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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FIRE PROTECTION, INC.

Report of Inspection / Test for Asset - Fire Hydrant #2

Fire Hydrant Information

Hydrant ID	#2
Description	M&H
Location	Students parking lot
Static Hydrant Description	Red Body with white top

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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Are monitor nozzles lubricated?

Yes

No

NA

Hydrant Flow Test

Static Pressure

N/A

Residual Pressure

N/A

Pitot Pressure

N/A

Orifice Size

N/A

Orifice Coefficient

N/A

Flow

N/A

Static Hydrant

Static Pressure

90

Residual Pressure

60

Final Hydrant Flow Test

Flow at 20 psi residual pressure:

N/A

Total Flow

N/A

Report of Inspection / Test for Asset - Fire Hydrant #3

Fire Hydrant Information

Hydrant ID

#3

Description

American Darling 5-1/4" B84B-5

Location

Outside Multi- Purpose Bldg

Static Hydrant Description

Grey body with Yellow Top

QUESTIONS

Is there a hydrant wrench that is available and accessible?

Yes

No

NA

Is the hydrant free from cracks or leaks at outlets and on the top?

Yes

No

NA

Are pumper and nozzle caps tight?

Yes

No

NA

Is the hydrant properly painted and is the paint in good condition?

Yes

No

NA

Does the operating nut turn with no difficulty?

Yes

No

NA

Did the hydrant flow until clear (minimum of 1 minute)?

Yes

No

NA

Are all dry barrels which require pumping identified?

Yes

No

NA

Does the hydrant completely shut off?

Yes

No

NA

Have the strainers been cleaned (if possible)?

Yes

No

NA

Did monitor nozzle flowed acceptable water?

Yes

No

NA

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Have backflow devices, if installed, passed full flow test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	90	Residual Pressure	60
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Fire Hydrant #1

Fire Hydrant Information

Description	M & H 5-1/4
Location	Parking lot Front entrance
Static Hydrant Description	Red body with white top

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
---	---	---	---

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Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	90	Residual Pressure	60
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test

Annual NFPA 25

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Property

Theodore High School
KH

6201 Swedetown Road
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Mario Morrisette

Print Date: 2023-04-17

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc
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INDUSTRIAL-COMMERCIAL



FIRE PROTECTION, INC.

MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
Multiple Purposes Bldg.	90	60	95	.1	Yes	Yes

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
Multiple Purposes Bldg.	Exterior Mechanical Room backside of Building	1" Inspectors Test Valve	N/A	No	Yes	Yes	Yes	No

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
Multiple Purposes Bldg.	Anvil Control Valve	Riser Closet E-124	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	11
	Backflow OS&Y	Backflow	OS&Y	6 "	Monitored	Yes	Yes	Yes	Yes	Yes	
	Backflow OS&Y	Backflow	OS&Y	6 "	Monitored	Yes	Yes	Yes	Yes	Yes	

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
Multiple Purposes Bldg.	2" Main Drain	Riser Closet E-124	Ball Valve	Yes	Yes

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FIRE PROTECTION, INC.

Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
	Riser Room	1	Potter	Water Flow Switch	Critical	Did not activate F/A / report to Fire Panel	Fail
	Riser Room	1	Anvil	Butterfly Tamper Switch			Pass
	Backflow	2	Potter	Os&Y Tamper Switch	Improper Funtion	Did not report to panel until 5mns after test	Fail
	@ Backflow	1	FDC	Fire Department Connection			Pass

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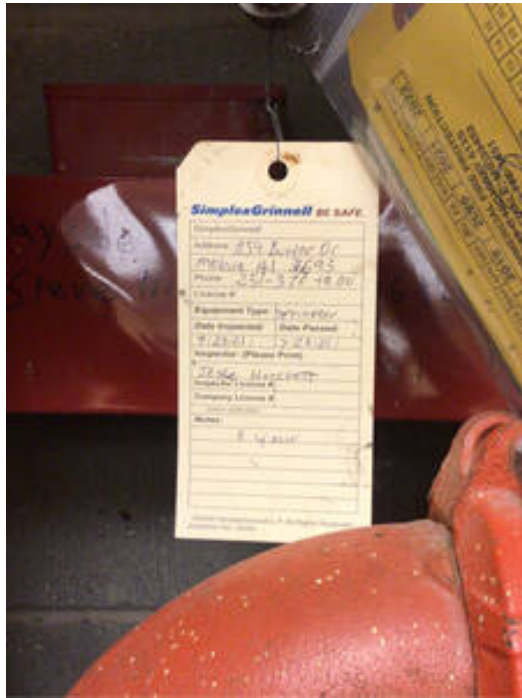
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Questions with Photos and Notes

- Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation) Yes

Notes:



Visit Photos

System Purple Tagged

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Deficiencies - General Questions

Deficiency #1

Do valve supervisory switches indicate movement?: No

Notes: Tamper switches on Backflow did not report to FP

Deficiency #2

The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?: No

Notes: Waterflow test exceeded 90 sec (3:00) F/A did not activate or report to F/P

Deficiency #3

Are alarms and supervisory devices not damaged?: No

Notes: Troubles on FP

Deficiency #4

Are visible sprinklers free of foreign materials including paint?: No

Notes: (2) Heads painted in lobby entrance

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Deficiency #4 - Photo #1



Date Taken: April 17, 2023

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Deficiency #4 - Photo #2



Date Taken: April 17, 2023

Deficiency #5

Are all escutcheon plates installed on sprinkler heads?: No

Notes: Missing Chrome SR esc @ entrance

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Deficiency #5 - Photo #1



Date Taken: April 17, 2023

Deficiencies - General Wet System Questions

None

Deficiencies - Multiple Purposes Bldg.

None

Deficiencies - Fire Hydrant #2

Deficiency #6

Is the hydrant properly painted and is the paint in good condition?: No

Notes: Red / White

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Deficiency #6 - Photo #1



Date Taken: April 17, 2023

Deficiency #7

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - Fire Hydrant #3

Deficiency #8

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - Fire Hydrant #1

Deficiency #9

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - Air Compressor

None

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Deficiencies - Water Flow Switch

Deficiency #10

Address

Location: Riser Room

Equipment Type: #EquipmentType:0x00005555f73e4b38>

QTY: 1

Description: 4" VSR

Status: Fail

Notes:

Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

Deficiency #11

Address

Location: Backflow

Equipment Type: #EquipmentType:0x00005555f73e48e0>

QTY: 2

Description: OSYSU-2

Status: Fail

Notes:

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

None

Deficiencies - Inspectors Test Connection

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Deficiency #12

Location: Exterior Mechanical Room backside of Building

Description: 1" Inspectors Test Valve

Pass?: No

Was alarm reported?: No

Status: Critical

Notes: Waterflow did not activate F/As or Report to FP

Deficiencies - Valves

None

Deficiencies - Drain Valves

None

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Inspector Signature

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

Inspector Name

Bora Yann
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
153252

Signature

A handwritten signature in black ink, appearing to read 'Bora Yann', is written in the signature field.

Date Completed

2023-04-17

Report of Inspection / Test

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Vigor High School
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913 North Wilson Avenue

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IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Is the clapper and automatic drain valve in place and properly operating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
---	---	---	---

SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

VALVE AREA

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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
---	---	---	---

ALARMS

Is the alarm valve free from physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

MAINTENANCE

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<p>Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>If sprinklers have been replaced, were they proper replacements?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If conditions were found that required flushing, was flushing of the system conducted?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Was a drain test conducted after opening any closed valve?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Operating stem of all OS&Y valves lubricated, completely closed and reopened?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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Report of Inspection / Test for Asset - City Hydrant #3

Fire Hydrant Information

Hydrant ID	#3
Description	M&H 5-1/4"
Location	North End Front of School

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have control valves been operated through complete range??	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Report of Inspection / Test

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2023-08-02

Property

Vigor High School
KH

913 North Wilson Avenue

Prichard AL 36610

Mario Morrisette

Print Date: 2023-08-03

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc

MS-14326-SC AL-3693 LA-F1173 FL-873651-

0001-2007

1209C Highway 613 South

Luedale MS 39452

INDUSTRIAL-COMMERCIAL



FIRE PROTECTION, INC.

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - City Hydrant #1

Fire Hydrant Information

Hydrant ID	#1
Description	M&H 5-1/4"
Location	South End Front of School

QUESTIONS

Is there a hydrant wrench that is available and accessible? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are pumper and nozzle caps tight? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Does the operating nut turn with no difficulty? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are all dry barrels which require pumping identified? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have the strainers been cleaned (if possible)? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flow acceptable water? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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Is the Operating nut not worn, twisted or broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have control valves been operated through complete range??	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - City Hydrant #2

Fire Hydrant Information

Hydrant ID	#2
Description	Front of School @ Main Entrance

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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FIRE PROTECTION, INC.

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Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have control valves been operated through complete range??	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
Wet System# 1	65	40	60	3	Yes	Yes

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FIRE PROTECTION, INC.

MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
Wet System# 2	60	45	60	3	Yes	Yes

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
Wet System# 1	Interior Riser room (end of hall 100)	1" Inspectors Test Valve	37	Yes	Yes	Yes	Yes	Yes
Wet System# 2	Interior Riser room (end of hall 100)	1" Inspectors Test Valve	58	Yes	Yes	Yes	Yes	Yes

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
Wet System# 1	Mueller OS&Y Control Valve	Interior Riser room (end of hall 100)	OS&Y	6 "	Monitored	Yes	Yes	Yes	Yes	Yes	20
Wet System# 2	Mueller OS&Y Control Valve	Interior Riser room (end of hall 100)	OS&Y	6 "	Monitored	Yes	Yes	Yes	Yes	Yes	20

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
Wet System# 1	2" Main Drain	@ Riser	Angle Valve	Yes	Yes
Wet System# 2	2" Main Drain	@ Riser	Angle Valve	Yes	Yes

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FIRE PROTECTION, INC.

Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
Interior Riser room (end of hall 100)	System #1	1	Potter	Water Flow Switch			
Interior Riser room (end of hall 100)	System #2	1	Potter	Water Flow Switch			
Interior Riser room (end of hall 100)	System #1	1	Potter	Os&Y Tamper Switch			
Interior Riser room (end of hall 100)	System #2	1	Potter	Os&Y Tamper Switch			
	@ Back-flows by Street	2	FDC	Fire Department Connection			Fail

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Deficiencies - General Questions

Deficiency #1

Is the FDC plainly visible?: No

Notes: Near Football field bathroom- covered in vegetation

Deficiency #1 - Photo #1



Date Taken: August 02, 2023

Deficiency #2

Is the FDC easily accessible?: No

Notes: Near Football field bathroom- covered in vegetation

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Deficiency #2 - Photo #1



Date Taken: August 02, 2023

Deficiency #3

Is the FDC swivels and couplings not damaged?: No

Notes: Main parking entrance- Will not spin

Near Football field bathroom- will not spin

Deficiency #3 - Photo #1



Date Taken: August 02, 2023

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Deficiency #3 - Photo #2



Date Taken: August 02, 2023

Deficiency #4

Are the FDC caps and plugs in place?: No

Notes: Parking entrance- Wrong caps

Deficiency #4 - Photo #1



Date Taken: August 02, 2023

Deficiencies - General Wet System Questions

None

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Deficiencies - Wet System# 1

None

Deficiencies - Wet System# 2

None

Deficiencies - City Hydrant #3

None

Deficiencies - City Hydrant #1

None

Deficiencies - City Hydrant #2

None

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

None

Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

None

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

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Deficiency #5

Address

Location: @ Back-flows by Street

Equipment Type: Fire Department Connection

QTY: 2

Description: Siamese Connection

Status: Fail

Notes:

Deficiencies - Alarm Pressure Switch

None

Deficiencies - PIV Tamper Switch

None

Deficiencies - Inspectors Test Connection

None

Deficiencies - Valves

None

Deficiencies - Drain Valves

None

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FIRE PROTECTION, INC.

Recommendations

System #1 - yellow

System #2- green

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Inspector Signature

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

Inspector Name

Bora Yann
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
153252

Signature

A handwritten signature in black ink, appearing to be 'BY', written in a cursive style.

Date Completed

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Report of Inspection / Test

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2023-08-31

Property

Whitley Elementary School
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528 Captain Leon C. Roberts Street

Prichard AL 36610

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Print Date: 2023-08-31

Conducted by: Bora Yann

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IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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FIRE PROTECTION, INC.

Is the clapper and automatic drain valve in place and properly operating?

Yes
 No
 NA

Is the FDC identification sign(s) in place?

Yes
 No
 NA

SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?

Yes
 No
 NA

Are visible sprinklers in the proper position: upright, pendent, sidewall?

Yes
 No
 NA

Are visible sprinklers free of corrosion and physical damage?

Yes
 No
 NA

Is there proper clearance below the sprinklers?

Yes
 No
 NA

Are visible sprinklers free of foreign materials including paint?

Yes
 No
 NA

Is there liquid in all visible glass bulb sprinklers?

Yes
 No
 NA

Are there spare sprinklers and a sprinkler wrench?

Yes
 No
 NA

Is the information sign attached and legible?

Yes
 No
 NA

Are all the sprinklers dated 1920 or later?

Yes
 No
 NA

Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?

Yes
 No
 NA

Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?

Yes
 No
 NA

Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?

Yes
 No
 NA

Dry-type sprinklers replaced or successfully sample tested within last 10 years?

Yes
 No
 NA

Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?

Yes
 No
 NA

Is the building fully protected by sprinklers?

Yes
 No
 NA

PIPES

Is the visible pipe in good condition with no external corrosion?

Yes
 No
 NA

Does visible pipe have no mechanical damage or leaks?

Yes
 No
 NA

Does visible pipe have no external loads?

Yes
 No
 NA

Are visible pipe hangers and seismic braces not damaged or loose?

Yes
 No
 NA

Is the pipe through freezers free if any ice blockage?

Yes
 No
 NA

Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)

Yes
 No
 NA

VALVE AREA

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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
---	---	---	---

ALARMS

Is the alarm valve free from physical damage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

MAINTENANCE

Report of Inspection / Test

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INDUSTRIAL-COMMERCIAL



FIRE PROTECTION, INC.

2023-08-31

Property

Whitley Elementary School
KH

528 Captain Leon C. Roberts Street
Prichard AL 36610

Mario Morrisette

Print Date: 2023-08-31

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc
MS-14326-SC AL-3693 LA-F1173 FL-873651-
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<p>Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>If sprinklers have been replaced, were they proper replacements?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If conditions were found that required flushing, was flushing of the system conducted?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Was a drain test conducted after opening any closed valve?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Operating stem of all OS&Y valves lubricated, completely closed and reopened?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Report of Inspection / Test for Asset - Fire Hydrant #1

Fire Hydrant Information

Hydrant ID	#1
Description	M&H 5-1/4"
Location	N.W Corner of School

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does the hydrant completely shut off?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there no ice or water in the barrel?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

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Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Fire Hydrant #2

Fire Hydrant Information

Hydrant ID	#2
Description	M&H 5-1/4"
Location	S.W Corner of School

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does the hydrant completely shut off?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there no ice or water in the barrel?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Is the Operating nut not worn, twisted or broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Fire Hydrant #3

Fire Hydrant Information

Hydrant ID	#3
Description	M&H 5-1/4"
Location	S.E Corner of School

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does the hydrant completely shut off?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there no ice or water in the barrel?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Fire Hydrant #4

Fire Hydrant Information

Hydrant ID	#4
Description	M&H 5-1/4"

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Location

N.W Corner of School

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does the hydrant completely shut off?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did monitor nozzle flow acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there no ice or water in the barrel?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	N/A	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

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Static Hydrant

Static Pressure	N/A	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
Wet System# 1	65	25	45	5	Yes	Yes
Wet System# 2	65	25	45	5	Yes	Yes
Wet System# 3	65	25	45	5	Yes	Yes

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
Wet System# 1	@ Riser	1" Inspectors Test Valve	47	Yes	Yes	Yes	Yes	Yes
Wet System# 2	@ Riser	1" Inspectors Test Valve	86	Yes	Yes	Yes	Yes	Yes
Wet System# 3	@ Riser	1" Inspectors Test Valve	54	Yes	Yes	Yes	Yes	Yes

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
Wet System# 1	Tyco Control Valve	Exterior Riser Room Westside of School	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	6
Wet System# 2	Tyco Control Valve	Exterior Riser Room Westside of School	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	6
Wet System# 3	Tyco Control Valve	Exterior Riser Room Westside of School	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	6

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
Wet System# 1	2" Main Drain	@ Riser	Angle Valve	Yes	Yes
Wet System# 2	2" Main Drain	@ Riser	Angle Valve	Yes	Yes

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Wet System# 3	2" Main Drain	@ Riser	Angle Valve	Yes	Yes
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FIRE PROTECTION, INC.

Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
	System #1	1	Potter	Water Flow Switch			Pass
	System #2	1	Potter	Water Flow Switch			Pass
	System #3	1	Potter	Water Flow Switch			Pass
	System #1	1	Tyco	Butterfly Tamper Switch			Pass
	System #2	1	Tyco	Butterfly Tamper Switch			Pass
	System #3	1	Tyco	Butterfly Tamper Switch			Pass
	Remote Westside of School	1	FDC	Fire Department Connection			Pass

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Deficiencies - General Questions

Deficiency #1

Are there spare sprinklers and a sprinkler wrench?: No

Notes: Needs concealed wrench

Deficiency #2

Are all escutcheon plates installed on sprinkler heads?: No

Notes: Missing concealed plates @ kitchen ,gym & teachers workroom

Deficiencies - General Wet System Questions

None

Deficiencies - Wet System# 1

None

Deficiencies - Wet System# 2

None

Deficiencies - Wet System# 3

None

Deficiencies - Fire Hydrant #1

None

Deficiencies - Fire Hydrant #2

None

Deficiencies - Fire Hydrant #3

None

Deficiencies - Fire Hydrant #4

None

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

None

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Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

None

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

None

Deficiencies - Alarm Pressure Switch

None

Deficiencies - PIV Tamper Switch

None

Deficiencies - Inspectors Test Connection

None

Deficiencies - Valves

None

Deficiencies - Drain Valves

None

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FIRE PROTECTION, INC.

Recommendations

Hydrants on property are marked PFD.

Did not flow

Systems tagged (1) purple (2) green

Missing plates , head still covered in gym; need lift to access

Report of Inspection / Test

Annual NFPA 25

INDUSTRIAL-COMMERCIAL



2023-08-31

Property

Whitley Elementary School
KH

528 Captain Leon C. Roberts Street
Prichard AL 36610

Mario Morrisette

Print Date: 2023-08-31

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc
MS-14326-SC AL-3693 LA-F1173 FL-873651-
0001-2007

1209C Highway 613 South
Lucedale MS 39452

Inspector Signature

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

Inspector Name

Bora Yann
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
153252

Signature

A handwritten signature in black ink, appearing to be 'BY', is written in the signature field.

Date Completed

2023-08-31

Report of Inspection / Test

Annual NFPA 25

2023-09-13

Property

Williamson High School
KH

1567 East Dublin Street

Mobile AL 36605

Mario Morrisette

Print Date: 2023-09-14

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc

MS-14326-SC AL-3693 LA-F1173 FL-873651-

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FIRE PROTECTION, INC.

IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Is the clapper and automatic drain valve in place and properly operating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
---	---	---	---

SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

VALVE AREA

Report of Inspection / Test

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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
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ALARMS

Is the alarm valve free from physical damage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

MAINTENANCE

Report of Inspection / Test

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NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

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<p>Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>If sprinklers have been replaced, were they proper replacements?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If conditions were found that required flushing, was flushing of the system conducted?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Was a drain test conducted after opening any closed valve?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Operating stem of all OS&Y valves lubricated, completely closed and reopened?</p>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	<p>Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?</p>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

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FIRE PROTECTION, INC.

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NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc

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Lucedale MS 39452

Report of Inspection / Test for Asset - Fire Hydrant #2

Fire Hydrant Information

Hydrant ID	#2
Description	Red AVK
Location	S. Of Gym

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Report of Inspection / Test

Annual NFPA 25

2023-09-13

Property

Williamson High School
KH

1567 East Dublin Street

Mobile AL 36605

Mario Morrisette

Print Date: 2023-09-14

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc

MS-14326-SC AL-3693 LA-F1173 FL-873651-

0001-2007

1209C Highway 613 South

Luedale MS 39452

INDUSTRIAL-COMMERCIAL



FIRE PROTECTION, INC.

Hydrant Flow Test

Static Pressure	65	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	65	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Fire Hydrant #3

Fire Hydrant Information

Hydrant ID	#3
Description	Red Kennedy
Location	South of B-Wing

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

Report of Inspection / Test

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2023-09-13

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Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	65	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	65	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Fire Hydrant #1

Fire Hydrant Information

Hydrant ID	#1
Description	American Darling
Location	Front of Gym

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	65	Residual Pressure	N/A
Pitot Pressure	N/A	Orifice Size	N/A
Orifice Coefficient	N/A	Flow	N/A

Static Hydrant

Static Pressure	66	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
Auditorium	75	50	65	3	Yes	Yes

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FIRE PROTECTION, INC.

MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
Cafe. System	75	50	75	3	Yes	Yes
Gym System	75	50	75	3	Yes	Yes
C Wing System	80	50	70	3	Yes	Yes
B Wing 2nd Floor	80	50	70	3	Yes	Yes
B Wing 1st Floor	80	50	70	3	Yes	Yes

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
Auditorium	Mens Auditorium Restroom	Access Panel	N/A	No	Yes	Yes	Yes	No
Cafe. System	Cafeteria Women's Restroom	Last stall Above ceiling 1" ITV		No	Yes	No	Yes	No
Gym System	Concession stand storage	1" ITV	57	Yes	Yes	Yes	Yes	Yes

VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
Gym System	control valve	Gyms interior Maintenance Rm.	OS&Y	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	16
Auditorium	1st Floor	Interior Storage closet	Butterfly	4 "	Monitored And Locked	Yes	No	Yes	Yes	Yes	16
Cafe. System	Control Valve	Gyms Girls Locker Rm.	OS&Y	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	16
B Wing 1st Floor	Control valve	S. Storage	Butterfly	4 "	Monitored	Yes	No	Yes	Yes	Yes	16
C Wing System	Control Valve	(S. End) Rm. 133 security office	OS&Y	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	16
B Wing 2nd Floor	2nd FI Control Valve	S. storage Rm	Butterfly	4 "	Monitored	Yes	Yes	Yes	Yes	Yes	16
Auditorium	2nd Floor	Interior Storage closet	Sectional	4 "	Monitored And Locked	Yes	No	Yes	Yes	Yes	16

DRAIN VALVES

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Property

Williamson High School
KH

1567 East Dublin Street

Mobile AL 36605

Mario Morrisette

Print Date: 2023-09-14

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
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Industrial Commercial Fire Protection, Inc

MS-14326-SC AL-3693 LA-F1173 FL-873651-

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1209C Highway 613 South

Lucaledale MS 39452

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FIRE PROTECTION, INC.

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
Auditorium	2" main Drain	Riser	Globe Valve	N/A	Yes
Cafe. System	2" main Drain	Riser	Globe Valve	N/A	Yes
Gym System	2" main Drain	Riser	Globe Valve	N/A	Yes
C Wing System	2" main Drain	Riser	Globe Valve	N/A	Yes
B Wing 2nd Floor	2" main Drain	Riser	Globe Valve	N/A	Yes
B Wing 1st Floor	2" main Drain	Riser	Globe Valve	N/A	Yes

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FIRE PROTECTION, INC.

Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
	(6) riser s	6	Potter	Water Flow Switch			
	(3) risers	3	BFV tamper	Butterfly Tamper Switch			
	(3) riser s	3	Potter	Os&Y Tamper Switch			Pass
	Exterior of bldg.	1	FDC	Fire Department Connection			

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Deficiencies - General Questions

Deficiency #1

Are all fire protection systems in service?: No

Notes:

Deficiency #2

Have the mechanical waterflow alarm devices passed tests by opening
inspector's test connection/bypass connection with alarms actuating and flow
observed?: No

Notes: C wing-mechanical bell did not operate

B Wing - mechanical bell missing / inoperative

Deficiency #2 - Photo #1



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Deficiency #2 - Photo #2



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Deficiency #2 - Photo #3



Date Taken: September 13, 2023

Deficiency #3

Do valve supervisory switches indicate movement?: No

Notes: Auditorium , B Bldg 1St & 2nd Fl , C Wing- did not report to F/A panel

Deficiency #4

The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?: No

Notes: Auditorium-PS10 did not activate F/A
Cafeteria- Waterflow did not activate F/A
B Bldg 1st & 2nd Fl -PS10 (2) did not activate F/A
C Wing - PS10 did not activate F/A

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Deficiency #5

Are alarms and supervisory devices not damaged?: No

Notes:

Auditorium-Waterflow did not activate F/A

Cafeteria- Waterflow did not activate F/A

B Bldg 1st & 2nd Fl -PS10 (2) did not activate F/A

Potter Osysu-2 (2) -did not report to F/A panel

C Wing - PS10 did not activate F/A

Potter Osysu-2 - did not report to F/A panel

Deficiency #6

Are there the proper number and type of spare sprinklers?: No

Notes: No spares @ - Auditorium , B Bldg , C Wing

Deficiency #7

Are visible sprinklers free of foreign materials including paint?: No

Notes: Office - loaded heads throughout

Cafeteria- 7loaded

Kitchen 16-20 greased

Deficiency #7 - Photo #1



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Deficiency #7 - Photo #2



Date Taken: September 13, 2023

Deficiency #8

Are there spare sprinklers and a sprinkler wrench?: No

Notes: No spare or wrenches @ - Auditorium , B Bldg , C Wing

Deficiency #9

Operating stem of all OS&Y valves lubricated, completely closed and reopened?: No

Notes: Gym - valves leaking ; needs repacking (2)

Deficiency #10

Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?: No

Notes: Greased heads (20)

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Deficiency #11

Are control valves properly sealed and/or supervised?: No

Notes: Backflow located N. & S. of property . Controls are not secured

Deficiency #11 - Photo #1



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Deficiency #11 - Photo #2



Date Taken: September 13, 2023

Deficiency #12

Are all escutcheon plates installed on sprinkler heads?: No

Notes: Office-missing esc

Gym - missing esc

Deficiencies - General Wet System Questions

None

Deficiencies - Auditorium

None

Deficiencies - Cafe. System

None

Deficiencies - Gym System

None

Deficiencies - C Wing System

None

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Deficiencies - B Wing 2nd Floor

None

Deficiencies - B Wing 1st Floor

None

Deficiencies - Fire Hydrant #2

Deficiency #13

Is the hydrant properly painted and is the paint in good condition?: No

Notes: Needs red paint

Deficiency #14

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - Fire Hydrant #3

Deficiency #15

Is the hydrant properly painted and is the paint in good condition?: No

Notes: Needs red paint

Deficiency #16

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - Fire Hydrant #1

Deficiency #17

Is the Road box and shutoff valve visible and accessible?: No

Notes:

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

None

Deficiencies - High Pressure Switch

None

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Deficiencies - Low Air Pressure Switch

None

Deficiencies - OS&Y Tamper Switch

None

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

None

Deficiencies - Alarm Pressure Switch

None

Deficiencies - PIV Tamper Switch

None

Deficiencies - Inspectors Test Connection

Deficiency #18

Location: Cafeteria Women's Restroom

Description: Last stall Above ceiling 1" ITV

Pass?: No

Was alarm reported?: No

Easily Accessible?: No

Notes: ITV above ceiling- inaccessible.

Waterflow did not activate F/A

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Deficiency #18 - Photo #1



Date Taken: September 13, 2023

Deficiency #19

Location: Mens Auditorium Restroom

Make: 1" ITV

Model: Globe valve

Description: Access Panel

Pass?: No

Was alarm reported?: No

Notes: Did not activate F/A

Deficiencies - Valves

Deficiency #20

Location: (S. End) Rm. 133 security office

Make: Muller

Model: Clow

Valve Type: OS&Y

Size: 4

Description: Control Valve

Notes: Did not report to F/A panel

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Deficiency #21

Location: S. storage Rm

Make: Victaulic

Model: 705W

Valve Type: Butterfly

Size: 4

Description: 2nd FI Control Valve

Notes: Did not report to F/A panel

Deficiency #22

Location: S. Storage

Make: Victaulic

Model: 705W

Valve Type: Butterfly

Size: 4

Description: Control valve

Easily Accessible?: No

Notes: Risers are blocked ; need to be kept accessible

Did not report to F/A panel

Deficiency #22 - Photo #1



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Deficiency #23

Location: Interior Storage closet

Make: Victaulic

Model: 705W

Valve Type: Butterfly

Size: 4

Description: 1st Floor

Easily Accessible?: No

Notes: Riser needs to be kept accessible

Did not report to F/A panel

Deficiency #23 - Photo #1



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FIRE PROTECTION, INC.

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Deficiency #23 - Photo #2



Date Taken: September 13, 2023

Deficiency #24

Location: Interior Storage closet

Make: Victaulic

Model: 705W

Valve Type: Sectional

Size: 4

Description: 2nd Floor

Easily Accessible?: No

Notes: Riser needs to be kept accessible

Did not report to F/A panel

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Deficiency #24 - Photo #1



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Deficiency #24 - Photo #2



Date Taken: September 13, 2023

Deficiencies - Drain Valves

None

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ICFP

FIRE PROTECTION, INC.

Recommendations

All systems are purple tagged . Riser are to be kept clear and accessible

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Inspector Signature

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

Inspector Name

Bora Yann
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
153252

Signature

A handwritten signature in black ink, appearing to be 'Bora Yann', written in a cursive style.

Date Completed

2023-09-13

Inspector Signature

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

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NICET LEVEL II -
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Signature

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Date Completed

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2023-09-06

Property

Wilmer Elementary School
KH

7456 Wilmer Georgetown Road
Wilmer AL 36587

Mario Morrisette

Print Date: 2023-09-07

Conducted by: Bora Yann

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IMPORTANT NOTICES

#1 – DEFICIENCIES: In an effort to enhance public safety and enforce important code requirements, please review your inspection report immediately, paying close attention to all noted Deficiencies. If there are noted Deficiencies you (Owner or Representative) are responsible for scheduling the necessary corrections/repairs. All repairs should be performed by a Licensed Fire Sprinkler Contractor. Please note that your Local Fire Department and/or State Fire Marshal's office may request copies of all inspection reports where deficiencies are noted.

#2 – SYSTEM INSPECTION, TESTING & MAINTENANCE: You as the owner and/or designated representative are responsible for the operating condition of all the systems and components in the building at time of the inspection. The inspection service provided by ICFP is partially limited to performing a visual inspection which does not reveal existing deficiencies. ICFP is not responsible for existing deficiencies in your system that may cause damage to systems or buildings during the course of our work. Damages determined to be caused by an improper installation or lack of Inspection, Testing and Maintenance will be the the owners responsibility. The owner and/or designated representative is responsible for having all systems inspected, tested and maintained on a regular basis as required by NFPA 25 for continuous reliability.

#3 – OWNERS COPY OF NFPA 25: It is the owner's responsibility to possess a copy a copy of NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection Systems. If you do not have a copy you may call NFPA direct at (800) 344.3555 or visit their website at www.nfpa.org or you may contact Industrial Commercial Fire Protection, Inc. at (601) 766-1451

Report of Inspection / Test General Questions

OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification and hazard of contents remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Building Occupancy?	Assembly Buildings
Are all Identification Signs in place?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	Are all escutcheon plates installed on sprinkler heads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC swivels and couplings not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC caps and plugs in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC gaskets in place and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve drip free?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Property

Wilmer Elementary School
KH

7456 Wilmer Georgetown Road
Wilmer AL 36587

Mario Morrisette

Print Date: 2023-09-07

Conducted by: Bora Yann

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FIRE PROTECTION, INC.

Is the clapper and automatic drain valve in place and properly operating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC identification sign(s) in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
---	---	---	---

SPRINKLER HEADS

Are there the proper number and type of spare sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including paint?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the information sign attached and legible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have sprinklers subject to harsh environments been replaced or successfully sample tested in the last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the building fully protected by sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

PIPES

Is the visible pipe in good condition with no external corrosion?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does visible pipe have no mechanical damage or leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free if any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has an internal investigation of the pipe (remove a flushing connection and a sprinkler near the end of a branch line) been performed in the last 5 years? (If no conduct investigation)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

VALVE AREA

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Property

Wilmer Elementary School
KH

7456 Wilmer Georgetown Road

Wilmer AL 36587

Mario Morrisette

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Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc

MS-14326-SC AL-3693 LA-F1173 FL-873651-

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Are the control valves (including valves on backflow preventers) with locks or electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system in good condition and showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are control valves properly sealed and/or supervised?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have backflow devices passed forward flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
---	---	---	---

ALARMS

Is the alarm valve free from physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the trim in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is there no leakage in the retarding chamber or drains?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are alarms and supervisory devices not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do low temperature alarms look ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

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FIRE PROTECTION, INC.

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<p>Perform an obstruction investigation if any of the following were found: defective intake screen on pump supplied from open sources, obstructive material discharged during flow tests, foreign material in dry-type valves, foreign material in water during drain test or plugging of inspector's test connection, plugging of pipe or sprinklers found, failure to flush yard piping or surrounding mains following new installation or repairs, record of broken mains in the vicinity, abnormal frequent false-tripping of dry valves, system has just been returned to service after more than 1 year, there is a reason to think the system contains sodium silicate or its derivatives or highly corrosive fluxes in copper pipe, raw water was pumped into the fire department connection, pinhole leaks</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>If sprinklers have been replaced, were they proper replacements?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>If conditions were found that required flushing, was flushing of the system conducted?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Was a drain test conducted after opening any closed valve?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<p>Operating stem of all OS&Y valves lubricated, completely closed and reopened?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	<p>Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease buildup?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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Report of Inspection / Test for Asset - Fire Pump

Fire Pump Information

Property Name Wilmer elementary

Demand(s) of Fire protection systems supplied by pump: Sprinkler system

Pump (Horizontal or Vertical): Vertical

Pump Manufacturer Patterson

Shop/Serial Number FP-C050814

Model 5x3 VIP

Rated GPM 400

Rated Pressure 47

Rated 150 Pressure 39

Rated 0 Pressure 56

Suction City

If Tank, size and height n/a

Driver, (electric or diesel engine) Electric

Engine Manufacturer Weg

Engine Shop/Serial Number 26JUN04 BN49656

Engine Model 020360S3E254JPV

Rated Horsepower 3529

Rated Speed 20

Rated Voltage 208/230

Operating Voltage 208/230

Rated Amps 51.0/25.5

Phase Cycles 3

Service Factor 1.15

Controller Manufacturer Eaton cutler hammer

Controller Shop/Serial Number 16E3385E

Controller Model FD20-20D-L1-T-P-F

Jockey Pump Manufacturer Baldor

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Jockey Pump Model	84.Z00001
Jockey Pump Serial Number	34F12-232F5
Jockey Controller Manufacturer	Eaton cutler hammer
Jockey Controller Model	FDJP-0.5D
Jockey Controller Serial Number	16E3385J
Transfer Switch Manufacturer	N/a
Transfer Switch Model	N/a
Transfer Switch Serial Number	n/a

OWNER SECTION

Is there a Jockey Pump on system?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Jockey Settings? (on/off)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the fire pump in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the pump remained in service since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

CONTROLLER TEST

Did the pump start at least 6 times from automatic sources?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Was each automatic starting feature tested at least once?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
For electric driven pump controllers: on a simulation of a power failure, while pump is under peak load, did the transfer switch transfer from the normal to emergency source without opening overcurrent protection devices on either line?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	For electric driven pump controllers: when normal power was restored, did retransfer from emergency to normal power occur without overcurrent protection devices opening on either line?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
For electric driven pump controllers: were at least half of the automatic and manual starts required performed with the pump connected to the alternate source?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Were all signal conditions simulated demonstrating workable operation?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

INSPECTION

Pump house/room proper temperature?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Ventilating louvers free to operate?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are suction, discharge and bypass valves open?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Piping free from leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Suction and system pressure gauges normal?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Suction reservoir, if provided, full?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Wet pit suction screens are clean and in place?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Waterflow test valves in closed position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Controller indicating power on?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Transfer switch indicating normal situation?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Isolation switch closed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Pump in correct phase?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Oil level in motor sight glass in correct range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Circulation relief valve flowing water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Pressure relief valves operating with proper pressure downstream while pump is operational?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

TESTING

Electric pump started automatically?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Electric motor driven pump ran for 10 min?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Packing gland showing slight discharge? (Adjust if necessary)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Packing boxes, bearing and pump casing free from overheating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Time for engine motor to reach full speed:	N/A	For automatic stop controllers, record time pump runs after starting:	N/A
Electric motor driven pumps with reduced voltage or reduced current starting, record the time the controller is in the 1st step:	N/A	Are all above times and pressures and results acceptable?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Circulation and pressure relief valves operated properly during all flow tests?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	No alarm indicators or other visible abnormalities observed during no-flow test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Were Suction screens cleaned after flow?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Automatic transfer switch test: Power failure simulated during peak flow?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Automatic transfer switch test: Connection made to alternate source?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Automatic transfer switch test: After termination of simulated power failure did motor reconnect to source?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
All alarm conditions simulated?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	All alarms operated?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Fuel tank level, tank float switch, and solenoid valve operation acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Flexible hoses and connectors in fuel and coolant systems acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Oil Level and lube oil heater acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Coolant level acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Water pump for coolant system operating?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Jacket water heater for coolant system okay?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Exhaust system free of leakage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Drain condensate trap on exhaust system operational?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Connections to electrical system acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Cranking voltage acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Isolation switch and circuit breaker exercised?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Battery case clean, dry and free of corrosion?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Charger and charge rate passed inspection and battery charge being equalized?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Do Circuit breakers appear clean?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Cleaned or replaced crank case breather in lubrication systems?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Cleaned water strainer in coolant system?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Battery terminals clean and tight?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Electrical systems free of wire chafing?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Manual starting means on electrical systems operated and boxes, panels and cabinets cleaned?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Antifreeze tested in coolant system?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Flexible exhaust section acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Changed pump bearing lubrication?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Shaft end play acceptable?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Pressure gauges and sensors accurate?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Coupling alignment acceptable?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Transmission coupling, right angle gear drive and mechanical moving parts lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Circuit breakers passed trip test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Emergency manual starting means operated without power?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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Electrical connections secure?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the volt meter and ammeter accurate?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Pressure switch settings calibrated?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Motor bearing greased?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Fuel tank free of water and foreign material?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Fuel tank vents and overflow pipes free of obstructions?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Fuel piping acceptable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Antifreeze changed in coolant system?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Heater exchange cleaned out?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Ducts and louvers for combustion air okay?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Exhaust system hanged in supports acceptable and system free of back pressure?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Control and power wiring tight?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
No corrosion on circuit boards?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	No cracked cable wire insulation?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
No leaks in plumbing parts?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	No sign or water on electrical parts?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

FLOW TEST

Run the pump at no-load, rated load and peak load (usually 150% of the rated load) conditions. For variable speed drivers, run the test with pressure limiting control "on" at 25, 50, 75, 100, 125, and 150% of rated load and then again rated speed w/ the pump isolated from the fire protection system and the relief valve closed.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Was equipment and gauges calibrated?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Date of last calibration	01/31/24	For electric motors operating at the rated voltage and frequency, is the ampere demand on each phase less than or equal to the product of the full load ampere rating times the allowable service factor as stamped on the motor nameplate?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
For electric motors operating under varying voltage, was the product of the actual voltage and current demand on each phase less than or equal to the product of the rated full load current times the rated voltage times the allowable service factor?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	For electric motors operating under varying voltage, did the voltage stay within the range of 95% to 110% of the rated voltage during the test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Did engine-drive unit show no signs of overload or stress?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Was the governor set to properly regulate the engine speed at rated pump speed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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Did the gear drive assembly operate without excessive objectionable noise, vibration, or heating?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Was the unit started and brought up to rated speed without interruption under discharge conditions equal to peak load?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Did the pump perform equal to the manufacturer's curve within the accuracy limits of the test equipment?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the unadjusted performance discharge curve meet or exceed the fire protection system demands?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Were there no vibrations that could damage any fire pump component?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the pump perform at all conditions without objectionable overheating of any component?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have electric motor pumps pass the phase reversal test on normal and alternate (if provided) power?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	For vertical turbine pumps taking the suction from wells, is the water level capable of being recorded?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

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PERFORMANCE

Rated %	Driver speed: RPM	Total Flow	Net Pressure: PSI	Discharge Pressure: PSI	Suction Pressure: PSI
0%	N/A	No Flow / Churn Only	52.0	95.0	43.0
100%	N/A	412	48.0	80.0	32.0
150%	N/A	618	45.0	73.0	28.0
Roof Shot	N/A	N/A	0.0	0.0	0.0

ELECTRIC MOTOR

	L1 Voltage	L1 Amperes	L2 Voltage	L2 Amperes	L3 Voltage	L3 Amperes
0%	N/A	N/A	N/A	N/A	N/A	N/A
100%	N/A	N/A	N/A	N/A	N/A	N/A
150%	N/A	N/A	N/A	N/A	N/A	N/A
Roof Shot	N/A	N/A	N/A	N/A	N/A	N/A

Pump Flow Detail

Coefficient (same for all): .97

Nozzle/Orifice Size: 1.75 (inches)

	PITOT					
	1	2	3	4	5	6
0%	N/A	N/A	N/A	N/A	N/A	N/A
100%	17	N/A	N/A	N/A	N/A	N/A
150%	9.5	9.5	N/A	N/A	N/A	N/A
Roof Shot	N/A	N/A	N/A	N/A	N/A	N/A

	FLOW					
	No Flow / Churn Only	No Flow / Churn Only	No Flow / Churn Only	No Flow / Churn Only	No Flow / Churn Only	No Flow / Churn Only
0%	No Flow / Churn Only	No Flow / Churn Only	No Flow / Churn Only	No Flow / Churn Only	No Flow / Churn Only	No Flow / Churn Only
100%	412	N/A	N/A	N/A	N/A	N/A
150%	309	309	N/A	N/A	N/A	N/A
Roof Shot	N/A	N/A	N/A	N/A	N/A	N/A

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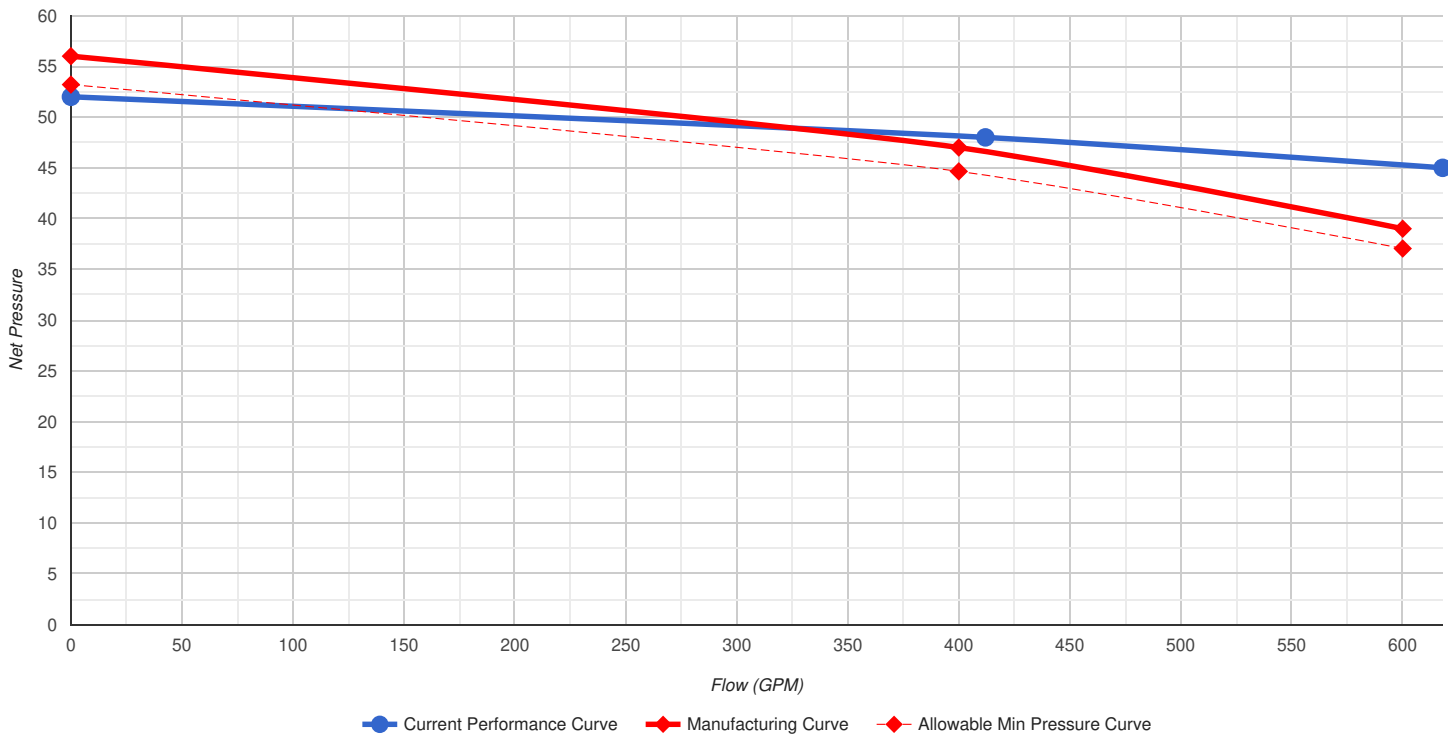
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INDUSTRIAL-COMMERCIAL



FIRE PROTECTION, INC.



Report of Inspection / Test

Annual NFPA 25

INDUSTRIAL-COMMERCIAL



2023-09-06

Property

Wilmer Elementary School
KH

7456 Wilmer Georgetown Road
Wilmer AL 36587

Mario Morrisette

Print Date: 2023-09-07

Conducted by: Bora Yann

NICET LEVEL II - Inspection & Testing of
Water-Based Systems # 153252

Industrial Commercial Fire Protection, Inc
MS-14326-SC AL-3693 LA-F1173 FL-873651-
0001-2007

1209C Highway 613 South
Lucaledale MS 39452

Report of Inspection / Test for Asset - Fire Hydrant #1

Fire Hydrant Information

Hydrant ID	#1
Description	American Darling 5-1/4" B84B
Location	North side of School

QUESTIONS

Is there a hydrant wrench that is available and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

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FIRE PROTECTION, INC.

Hydrant Flow Test

Static Pressure	100	Residual Pressure	N/A
Pitot Pressure	16	Orifice Size	2.5
Orifice Coefficient	.77	Flow	870

Static Hydrant

Static Pressure	100	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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Report of Inspection / Test for Asset - Fire Hydrant #2

Fire Hydrant Information

Hydrant ID	#2
Description	American Darling 5-1/4" B84B
Location	South side of School

QUESTIONS

Is there a hydrant wrench that is available and accessible? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is the hydrant free from cracks or leaks at outlets and on the top? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are pumper and nozzle caps tight? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydrant properly painted and is the paint in good condition? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the operating nut turn with no difficulty? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Did the hydrant flow until clear (minimum of 1 minute)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all dry barrels which require pumping identified? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the hydrant completely shut off? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers been cleaned (if possible)? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzle flowed acceptable water? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have backflow devices, if installed, passed full flow test? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Is there no ice or water in the barrel? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are hydrant caps, stems, outlets, and threads lubricated and in good condition? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is Exposed piping properly secured and free from leaks or physical damage? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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Is the Operating nut not worn, twisted or broken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the Road box and shutoff valve visible and accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have dry barrels drained in at least 1 hour?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have control valves been operated through complete range??	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are strainers, if installed, free from corrosion and not blocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Did monitor nozzles move through complete range?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are monitor nozzles lubricated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

Hydrant Flow Test

Static Pressure	100	Residual Pressure	N/A
Pitot Pressure	16	Orifice Size	2.5
Orifice Coefficient	0.77	Flow	870

Static Hydrant

Static Pressure	100	Residual Pressure	N/A
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Final Hydrant Flow Test

Flow at 20 psi residual pressure:	N/A	Total Flow	N/A
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MAIN DRAIN FLOW TESTS

System	Initial Static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Are the results within 10% of the last test?
System #1	95	80	100	.1	Yes	Yes
System #2	95	80	100	.1	Yes	Yes

INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
System #1	@ Riser	1" Test & Drain	15	Yes	Yes	Yes	Yes	Yes
System #2	@ Riser	1" Test & Drain	51	Yes	Yes	Yes	Yes	Yes

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VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
System #1	System Control	W. Exterior Mech Rm.	OS&Y	2-1/2 "	Monitored And Locked	Yes	Yes	Yes	Yes	Yes	10
	Fire Pump Supply	W. Exterior Mech Rm.	OS&Y	5 "	Monitored And Locked	Yes	Yes	No	Yes	Yes	10
System #2	System Control	W. Exterior Mech Rm.	OS&Y	2-1/2 "	Monitored And Locked	Yes	Yes	Yes	Yes	Yes	10
	Fire Pump Dead Head	W. Exterior Mech Rm.	Butterfly	4 "	Monitored And Locked	Yes	Yes	No	Yes	Yes	6
	Fire Pump Bypass City	W. Exterior Mech Rm.	Butterfly	4 "	Monitored And Locked	Yes	Yes	No	Yes	Yes	6
	Pump ByPass System	W. Exterior Mech Rm.	Butterfly	4 "	Monitored And Locked	Yes	Yes	No	Yes	Yes	6
	Jockey pump suction	W. Exterior Mech Rm.	Butterfly	1-1/4 "	Monitored And Locked	Yes	Yes	No	Yes	Yes	7
	Jockey pump Discharge valve	W. Exterior Mech Rm.	Butterfly	1-1/4 "	Monitored And Locked	Yes	Yes	No	Yes	Yes	7
	New Valve 3					Yes	Yes	Yes	Yes	Yes	
	New Valve 4					Yes	Yes	Yes	Yes	Yes	
	New Valve 5					Yes	Yes	Yes	Yes	Yes	
	New Valve 6					Yes	Yes	Yes	Yes	Yes	

DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
System #1	1-1/4" Main Drain	West Mech Room	Angle Valve	Yes	Yes
System #2	1-1/4" Main Drain	West Mech Room	Angle Valve	Yes	Yes

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FIRE PROTECTION, INC.

Equipment

Address	Location	QTY	Name	Type	Status	Notes	Pass/Fail
System #1	W. Exterior Mech Rm.	1	System Sensor	Water Flow Switch			
System #2	W. Exterior Mech Rm.	1	System Sensor	Water Flow Switch			Pass
System #1	W. Exterior Mech Rm.	1	Potter	Os&Y Tamper Switch			Pass
System #2	W. Exterior Mech Rm.	1	Potter	Os&Y Tamper Switch			Pass
	W. Exterior Mech Rm.	1	FDC	Fire Department Connection			Pass
Delete	Riser Room	1	Tamper Switch	Butterfly Tamper Switch			
Delete	Riser Room	1	Tamper Switch	Butterfly Tamper Switch			
Pump suction	W. Exterior Mech Rm.	1	Potter	Os&Y Tamper Switch			Pass
Delete	Riser Room	1	Tamper Switch	Os&Y Tamper Switch			
Delete	Riser Room	2	Tamper Switch	Butterfly Tamper Switch			
Delete	Riser Room	1	Tamper Switch	Butterfly Tamper Switch			

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Deficiencies - General Questions

Deficiency #1

Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?: No

Notes: Did not visually see one data plaque

Deficiency #2

Are all Identification Signs in place?: No

Notes: missing FP Control signs , no Data plaque

Deficiencies - General Wet System Questions

None

Deficiencies - System #1

None

Deficiencies - System #2

None

Deficiencies - Fire Pump

None

Deficiencies - Fire Hydrant #1

None

Deficiencies - Fire Hydrant #2

None

Deficiencies - Air Compressor

None

Deficiencies - Water Flow Switch

None

Deficiencies - High Pressure Switch

None

Deficiencies - Low Air Pressure Switch

None

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Deficiencies - OS&Y Tamper Switch

None

Deficiencies - Butterfly Tamper Switch

None

Deficiencies - Mechanical Water Motor Bell

None

Deficiencies - Fire Department Connection

None

Deficiencies - Alarm Pressure Switch

None

Deficiencies - PIV Tamper Switch

None

Deficiencies - Inspectors Test Connection

None

Deficiencies - Valves

Deficiency #3

Location: W. Exterior Mech Rm.

Valve Type: Butterfly

Size: 4

Description: Pump ByPass System

Signs: No

Notes:

Deficiencies - Drain Valves

None

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Inspector Signature

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

Inspector Name

Bora Yann
NICET LEVEL II -
Inspection & Testing of
Water-Based Systems #
153252

Signature

A handwritten signature in black ink, appearing to be 'BY', is written in the signature field.

Date Completed

2023-09-06