

Inspection, Testing and Maintenance of Private Fire Service Mains

Service Company	Date of Service	Time	Last Service Date	
	<input type="checkbox"/> Weekly <input type="checkbox"/> Monthly	<input type="checkbox"/> Quarterly <input type="checkbox"/> Semiannual	<input type="checkbox"/> Annual <input type="checkbox"/> Fifth year	
	Owner:		Phone: Fax:	
	Contact Person:		Phone: Fax:	
Building Name:	Address:	City:	Postal Code:	

“√”Yes - Satisfactory “X” No - Unsatisfactory N/A Not applicable (Explain “X” No answers in comments)

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| <p>Weekly/Monthly</p> <p>_____ Relief port on reduced backflow prevention assembly free of discharge?</p> <p>Sealed control valves and valves on backflow prevention assemblies:</p> <p>_____ Normal position?</p> <p>_____ Accessible with seals in place?</p> <p>_____ Free from external leaks?</p> <p>_____ Provided with appropriate identification?</p> <p>Quarterly</p> <p>_____ Hose hydrant houses accessible & free from damage?</p> <p>Semiannually</p> <p>_____ Monitor nozzles free of leaks, damage and corrosion?</p> <p>Annual</p> <p>Hydrants inspection or after each use:</p> <p>Dry Barrel and Wall Hydrants</p> <p>_____ Accessible & operating wrench available?</p> <p>_____ Outlets lubricated?</p> <p>_____ Free from ice or water in barrel?</p> <p>_____ Free from leaks or cracks?</p> <p>_____ Threads in good condition?</p> <p>_____ Operating nut in good condition?</p> <p>Wet Barrel Hydrants</p> <p>_____ Accessible and operating wrench available?</p> <p>_____ Free from leaks at outlets and top of hydrant?</p> <p>_____ Free from cracks in hydrant barrel?</p> <p>_____ Outlets lubricated?</p> <p>_____ Threads in good condition?</p> <p>_____ Operating nut in good condition?</p> <p>_____ Mainline strainers free from plugging and corrosion?</p> | <p>_____ Exposed piping is free from leaks, physical damage and corrosion?</p> <p>_____ Exposed piping is properly restrained?</p> <p>Fifth Year Inspection Item</p> <p>_____ Check valves internally inspected & operate properly</p> <p>Tests</p> <p>Quarterly</p> <p>_____ Post indicator valves opened until spring or torsion is felt in the rod then closed back one quarter turn?</p> <p>_____ Valve supervisory devices indicate movement?</p> <p>Annual</p> <p>_____ Monitor nozzles move through full range?</p> <p>_____ Monitor nozzles flowed an acceptable amount of water?</p> <p>_____ Hydrants flowed until clear (at least one minute)?</p> <p>_____ Dry barrel hydrants drain in a least one hour?</p> <p>_____ Dry barrel hydrants requiring pumping are identified?</p> <p>_____ All control valves operated through full range and returned to normal?</p> <p>_____ Backflow devices passed backflow test?</p> <p>_____ Backflow devices passed full flow test?</p> <p>Fifth Year Test</p> <p>_____ Exposed and underground piping passed flow test at expected flows?</p> <p>Annual Maintenance</p> <p>_____ Mainline strainers cleaned?</p> <p>_____ Hose/hydrant houses and equipment in usable condition?</p> <p>_____ Hydrant caps, stems, plugs, and threads lubricated?</p> <p>_____ Hydrants free of ice, snow and damage?</p> <p>_____ Monitor nozzles lubricated?</p> |
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Comments:

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

Technician Stamp	Date	Time	Owner or Authorized Agent