



Seattle Fire Prevention Division
 220 3rd Avenue South
 Seattle, WA 98104
 SFD_FMO_SystemsTesting@seattle.gov

REPORT OF SYSTEM TESTING

HOOD SUPPRESSION SYSTEM	
Service Date	Report Number [Red or Yellow Tag Icon if Applicable]
AHJ	Status
Phone	Report Type
Reviewed by AHJ	Code Reference
INSPECTION & TESTING AGENCY INFORMATION	
Name	Phone Number:
(includes address)	Emergency Phone:
	Email:
INSPECTOR/TESTER INFORMATION	
Inspector:	Phone Number:
Licenses: License Type	License Number Expiration
OCCUPANCY INFORMATION	
Premises Name:	Premises Address:
Contact Name:	Contact Phone:
Contact Address:	Contact Email:
Central Station Monitoring: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Monitoring Required: <input type="checkbox"/> Yes <input type="checkbox"/> No
Monitoring Company Name:	Monitoring Company Phone:
HOOD SUPPRESSION INVENTORY	
GUIDELINES WHEN TO USE (or Not Use): Only create inventory and reports in TCE for (a) fully accepted new systems or (b) confidence tests/ITM tests of existing systems.	
DOCUMENTS UPLOADED (This information is mandatory for new systems and encouraged for existing systems. Uploaded files shall have a short, descriptive name and date.)	
Attach a diagram of appliances and nozzles. Include date and title naming convention in the file name. <input type="checkbox"/> N/A	
Attach a photo of appliances protected, showing the layout. Include date and title naming convention in the file name. * <input type="checkbox"/> N/A	
PERMITTING (This information is mandatory for new systems and encouraged for existing systems.)	
Mechanical Code/Fire Code Edition (Year):	Permit signed off? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Permit #:	
DESCRIPTION / INVENTORY (This information is mandatory for new systems and encouraged for existing systems.)	
Hood Suppression System ID (one per system): *	
Make:	
Model:	
Is system appliance specific or overlapping*	<input type="checkbox"/> Appliance specific <input type="checkbox"/> Overlapping
Is system UL300 compliant*	<input type="checkbox"/> Yes <input type="checkbox"/> No
Size (gal):	
Style:	
Location of Cylinder(s):	
Last Hydro-test Date (month/year):	
System coverage/location (deli, main line, bakery station) *	
List covered cooking appliances from left to right:*	

Control Head (named by manufacturer):

List the link types/temperatures from left to right:*

PROBLEMS FOUND

Question #	Code Ref(s)	Question	Answer	Corrected
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TEST INFORMATION

Question #	Code Ref(s)	Question	Answer
The items on the checklists below shall be inspected and tested. This list may not constitute all of the required inspecting and testing of the fire and life safety system. Refer to the Fire Code used by the AHJ, NFPA 17, NFPA 17A, and NFPA 96 and manufacturer's recommendations for inspecting and testing requirements.			

PRE-TEST CHECKS

Question #	Code Ref(s)	Question	Answer
AVOID "FALSE ALARMS" TO FIRE DEPARTMENT BY PUTTING THE FIRE ALARM SYSTEM IN TEST MODE. Failure to place the Fire Alarm System (FAS) into test mode and/or taking other precautions to may cause preventable alarms.			
1		The suppression system meets the UL300 standard. IFC 904.13	<input type="checkbox"/> Yes <input type="checkbox"/> No
Select "No" if the system is non-UL300 and any of the following three statements is true (if any of the following is true for a non-UL300 system, it must be replaced and until replacement, this is a deficiency):			
<ul style="list-style-type: none"> • Vegetable oil is the medium used by the cooking appliance. • Parts are no longer available for repair/maintenance of the current system. • Coverage provided by the system is not adequate for the protected appliance. 			

APPLIANCE COVERAGE, NOZZLES, AND PIPING

Question #	Code Ref(s)	Question	Answer
2		All cooking appliances that can produce grease laden vapors are completely under the range hood. 2021 IFC 606.1 refers to IMC 507.4.1	<input type="checkbox"/> Yes <input type="checkbox"/> No
3		All cooking appliances have the required number and type of nozzles to provide adequate fire protection. NFPA 96 10.1.2, 13.1.2.2	<input type="checkbox"/> Yes <input type="checkbox"/> No
4		All nozzles are properly positioned. NFPA 17A 8.2.2	<input type="checkbox"/> Yes <input type="checkbox"/> No
5		All piping and conduit are immobilized with proper hangers and brackets. NFPA 17A 8.3.3	<input type="checkbox"/> Yes <input type="checkbox"/> No
6		Signage is provided on the exhaust hood or system cabinet, indicating the type and arrangement of cooking appliances protected by the automatic fire-extinguishing system. Signage indicates appliances from left to right, is durable (example: laminated), at least 8.5" x 11", not hand written, 12 pt font or larger. 2021 WA FC 904.13.	<input type="checkbox"/> Yes <input type="checkbox"/> No
7		I have reviewed the IFC 904.13 signage on the exhaust hood (and photos uploaded to TCE, if available) and in my professional opinion, it appears that the approved suppression system continues to protect the appliances it was approved to protect (appliances have not be rearranged).	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A

SYSTEM CONTROLS

Question #	Code Ref(s)	Question	Answer
8		All system controls and components are accessible and free from obstructions. NFPA 17A 8.2.2	<input type="checkbox"/> Yes <input type="checkbox"/> No
9		The system is operational from the terminal link (last fusible link). NFPA 96 12.2.2	<input type="checkbox"/> Yes <input type="checkbox"/> No
10		The fusible links were replaced. (Annually) NFPA 96 12.2.4	<input type="checkbox"/> Yes <input type="checkbox"/> No
11		The manual (remote) pull is configured correctly and is operational. NFPA 96 12.2.2	<input type="checkbox"/> Yes <input type="checkbox"/> No
12		The operation of the fusible link line is not impaired by grease. NFPA 96 12.2.6	<input type="checkbox"/> Yes <input type="checkbox"/> No

13	The micro switch that controls the gas and/or electrical power to the appliances functions properly. NFPA 96 12.2.2	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
14	The gas shuts down upon system activation. 2021 IFC 904.13.2	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
15	All sources of cooking heat shut down properly. Makeup air shuts down if present. NFPA 96 12.2.2	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
CYLINDERS AND EXTINGUISHING AGENT				
Question #	Code Ref(s)	Question	Answer	
16		The extinguishing agent in the cylinders conforms to the manufacturer's requirements for this system. NFPA 96 12.2.3	<input type="checkbox"/> Yes	<input type="checkbox"/> No
17		The system has adequate supply of extinguishing agent as required to meet the demand for complete coverage of the cooking appliances. NFPA 96 12.2.3	<input type="checkbox"/> Yes	<input type="checkbox"/> No
18		The cylinders are filled with the correct volume of extinguishing agent. NFPA 96 12.2.3	<input type="checkbox"/> Yes	<input type="checkbox"/> No
19		If present, the cylinder gauge is in the operational range. NFPA 96 12.2.3	<input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> N/A
20		If present, the CO2 or Nitrogen cylinder is fully charged. (According to weight) NFPA 96 12.2.3	<input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> N/A
21		The hydrostatic testing of the agent cylinder(s) is up-to-date. NFPA 17A 8.5.1.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
SYSTEM SECURITY AND MONITORING				
Question #	Code Ref(s)	Question	Answer	
22		The tamper seals on the suppression system were replaced. NFPA 17A 8.2.2	<input type="checkbox"/> Yes	<input type="checkbox"/> No
23		The suppression system is connected to the fire alarm panel. (Only select N/A if there is no fire alarm system) 2021 IFC 904.3.5	<input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> N/A
24		The fire alarm panel receives the proper signals upon suppression system activation. (Only select N/A if there is no fire alarm system). 2021 IFC 904.3.5	<input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> N/A
25		The alarm monitoring company received the alarm signal. (Only select N/A if there is no fire alarm system.) 2021 IFC 904.3.5	<input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> N/A
INSPECTION FOR GREASE BUILDUP AND CLEANING				
Question #	Code Ref(s)	Question	Answer	
26		The commercial cooking fire suppression hood and exhaust system appears: 2021 IFC 606.3.3.2	<input type="checkbox"/> Clean	<input type="checkbox"/> Dirty - Cleaning required
27		Advised responsible party or their representative on the importance of keeping hood, ducts, and filters clean and the requirement to inspect them and clean them when dirty. NFPA 96 12.6.1	<input type="checkbox"/> Yes	<input type="checkbox"/> No
FINAL CHECKS, TAGGING, AND REPORTS				
Question #	Code Ref(s)	Question	Answer	
		Put the Fire Alarm/monitoring system back into service and/or other precautionary measures that were made to restore fire alarm system to normal operation (includes removal of protective coverings.)		
28		Class K-rated portable fire extinguisher provided no more than 30' distance of travel from the cooking equipment, along path of egress, in conspicuous location, at proper height (21 IFC 906.9), with current inspection tag or with receipt showing purchase within last 12 months.	<input type="checkbox"/> YES	
29		A current red (impaired), yellow (deficient) or white (normal operations) tag was placed on the agent cylinder or pull device indicating the system's status consistent with my inspection today. NFPA 96 12.1.6.1	<input type="checkbox"/> Yes	<input type="checkbox"/> No
		The color of the tag is:	<input type="checkbox"/> Red	<input type="checkbox"/> Yellow <input type="checkbox"/> White
30		I will provide a copy of the confidence test report to the owner.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
31		I will submit this test report to the fire department through TCE.	<input type="checkbox"/> Yes	<input type="checkbox"/> No

ATTESTATION

By accepting this statement I, the certified technician shown on this form, certify that this fire protection system(s) has been properly inspected for functional operation in accordance with the listing, the manufacturer's manual and service bulletins, and the current current Fire Code (FC) used by the department that has jurisdiction and NFPA Standards adopted by the FC for this system. Under penalty of perjury I attest that I have access to the current manufacturer's installation, maintenance and testing instructions manual and service bulletins for this system. Any deficiencies found are noted in the report and have been reported to the building Owner/Manager for corrective action. By accepting this statement, I further attest that I am properly certified by the State of Washington to perform the work documented in this report, or exempt from those requirements. Finally, by accepting this statement I attest that the contractor on whose behalf this report is submitted holds the appropriate Washington State licenses should any be required for the work documented in this report.

☐ I accept.

I am authorized to submit this report for the certified technician
who has accepted this statement.

(Initials of Employee)

SIGNATURE (OPTIONAL)

Signature of Technician

Signature of Building Representative

This Document Is For Informational Purposes Only - All reports must be submitted online
through our third-party vendor, The Compliance Engine (TCE)
<http://www.thecomplianceengine.com/>

Reports must be filled out on the TCE website. This document is provided for information purposes to share the content of certain annual testing and maintenance reports required by the Seattle Fire Code.