

Seattle Fire Prevention Division

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Seattle, WA 98104-2608

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System Test Report

CLEAN AGENT		STATUS		
<input type="checkbox"/> Confidence Test	<input type="checkbox"/> Deficiency Repair Test	<input type="checkbox"/> Red	<input type="checkbox"/> Yellow	<input type="checkbox"/> White

Occupancy Information

Occupancy Name:	
Occupancy Address:	
Contact Name:	Contact Phone:
Contact Address:	Contact Email:
Central Station Monitoring: <input type="checkbox"/> Yes <input type="checkbox"/> No	Monitoring Required: <input type="checkbox"/> Yes <input type="checkbox"/> No
Monitoring Company Name:	Monitoring Company Phone:

Inspection & Testing Agency Information

Name:	Phone:
Address:	Emergency Phone:
	Email:

Inspector/Tester Information

Name:	Phone:
SFD Certification No.: SCP-_____	

Clean Agent System

Date of Test:

The items on the checklists below shall be inspected and tested. This list does 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 and adopted NFPA standards 2001: Clean Agent and 12: CO2 for inspecting and testing requirements.

GENERAL

AVOID UNNECESSARY ALARMS 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. All signs, placards, and labels are provided on doors, system controls, and electrical circuits. Yes No
2. No significant changes or unrepaired penetrations were found in the enclosure protected by the system. Yes No

RECALLS

3. The inspector did not find recalled devices during the visual inspection. Note: the inspector's inspection is a visual cursory inspection from the floor level in accessible areas. Yes No

If no, identify type and location:

NOZZLES, PIPING, AND HOSE

- | | | |
|---|------------------------------|-----------------------------|
| 4. All nozzles, piping, and brackets are properly placed and are secured. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 5. All end-of-line resistors are in place | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 6. All hose was visually inspected and does not have visual defects. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 7. All hose five years old and older has been tested in 5-year intervals in accordance with NFPA 2001 | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

CYLINDERS AND EXTINGUISHING AGENT

- | | | |
|--|------------------------------|-----------------------------|
| 8. The quantity loss is <5% and the pressure loss is <10% in each cylinder from the required quantity and pressure of the extinguishing agent. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 9. There is an up-to-date log containing a record of semi-annual checks for the agent quantity and pressure on each cylinder | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 10. All cylinders with an unacceptable quantity loss were refilled or replaced. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 11. All cylinders are tested according to NFPA 2001 at the proper intervals. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

INITIATING AND ALERTING COMPONENTS

- | | | |
|---|------------------------------|-----------------------------|
| 12. All detection/initiating devices respond properly when tested. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 13. All alarm functions take place upon receipt of a signal from the detection devices. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 14. All alerting devices work properly. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 15. All supervised circuits send the proper signals to the control panel. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 16. All Manual pull stations are readily accessible, accurately identified, and properly protected to prevent damage. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

RELEASE DEVICES

- | | | |
|---|------------------------------|-----------------------------|
| 17. The automatic release device(s) work properly, including pre-discharge time delays. (Note: Confidence testing of the release device does not require release of the clean agent after the initial full discharge acceptance test. However, full discharge tests may be required after changes to the protected area or system.) | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 18. All manual stations used to release agents work properly and require two separate and distinct actions for operation. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

ABORT DEVICES

- | | | |
|---|------------------------------|-----------------------------|
| 19. The manual abort switch is a dead-man type switch and functions properly. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
|---|------------------------------|-----------------------------|

AUXILIARY FUNCTIONS

- | | | |
|---|------------------------------|-----------------------------|
| 20. All auxiliary functions such as alarm-sounding or displaying devices, remote annunciators, air-handling shutdown, damper operation, and power shutdown operate properly in accordance with system requirements and design specifications. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 21. The alarms can be silenced, when allowed, without affecting other system functions. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

SYSTEM MONITORING

- | | | |
|--|------------------------------|-----------------------------|
| 22. The control panel sends the proper signals to the remote FAP. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 23. The fire protection system, including the alarm system, works correctly on standby power during a simulated power failure. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 24. A signal was received at the Central Station monitoring company. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

TRAINING

- | | | |
|--|------------------------------|-----------------------------|
| 25. There is documentation that all personnel working in enclosures protected by a clean agent system have received up-to-date training regarding clean agent safety issues. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
|--|------------------------------|-----------------------------|

FINAL CHECKS

- Put the Fire Alarm back into service and/or other precautionary measures that were made to restore fire alarm system to normal operation (includes removal of protective coverings)
- | | | |
|---|------------------------------|-----------------------------|
| 26. The system was left in service. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 27. The confidence test report will be given to the owner in either electronic or paper form and a status tag was posted on the clean agent system. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

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 current Fire Code (FC) used by the department that has jurisdiction and NFPA Standards adopted by the FC for this system. Any deficiencies found are noted in the report and have been reported to the building Owner/Manager for corrective action.

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

SIGNATURE (OPTIONAL)

Signature of Technician

Signature of Building Representative

System Testing Reports Must Be Submitted Online

Submit reports to <http://www.thecomplianceengine.com/>