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FLSA FIRE & LIFE SAFETY AMERICA PROTECTING AMERICA

CAVE SPRING High School 12-23-13

1407 Mill Race Drive, Salem, VA 24153 · (540) 378-6160 · (800) 207-4350 · Fax (540) 378-6171 · www.flsamerica.com

7.

Control Valve Maintenance Table	Number	Type	Open	Secured	Closed	Signs	Tampers	Seal No.	Abnormal Condition
City Connection Control Valve	1	OS&Y	YES	YES	NO	Y/S	NO		
Tank Control Valves									
Pump Control Valves									
Sectional Control Valves									
System Control Valves	2	OS&Y	YES	YES	NO	Y/N	NO		
Other Control Valves									
Test Header Control Valve									
Pressure Reducing Control Valve									

4. Water Supply Data

	YES	N.A.	NO
1. Was a water flow test of main drain made at sprinkler riser?			✓

2. Water supply pressures:
   a. City 100 GAUGE psi
   b. Fire pump N/A psi
   c. Tank N/A psi
   d. _____ psi

3. Water flow test at sprinkler riser (in psi):

	Test Pipe Location	Size Test Pipe	Static	Residual	Static
a	RISER 1	NO MAIN DRAIN			
b	RISER 2	NO MAIN DRAIN			
c					

	Test Pipe Location	Size Test Pipe	Static	Residual	Static
d					
e					
f					

Explain any no answers and comment [see addendum(s) attached if checked ☐]

(1) NO MAIN DRAIN ON 2½" OR 3" RISERS
(2) NO INSPECTORS TEST VALVE ON 2½" OR 3" RISERS
(3) NO GAUGES ON 2½" OR 3" RISERS.
(4) BACKFLOW PREVENTER ON 3" RISER IS DUE FOR TESTING
(5) 5 YEAR MAINTENANCE & INTERNAL PIPING INSPECTION IS DUE
(6) 165° PENDENT HEAD IN WEIGHT ROOM HAS BEEN HIT & DAMAGED, ALSO 2 DROPS ARE TOO LONG.

5. Adjustments or corrections made during this inspection:
NOTE! This a PARTIALLY SPRINKLERED BUILDING.

This inspection was performed substantially in accordance with NFPA Standard: 25(09 13(✓)☐___( )☐___( )☐___( )☐ . Although these comments are not the result of an engineering review, the following desirable improvements are recommended [see addendum(s) attached if checked ☐]

(1) Add MAIN DRAINS TO BOTH SYSTEMS
(2) Add INSPECTORS TEST VALVES TO BOTH SYSTEMS
(3) Add GAUGES TO BOTH SYSTEMS
(4) COMPLETE TEST ON BACKFLOW PREVENTER
(5) COMPLETE 5 yr MAINT. ON 2 WET SYSTEMS
(6) REPLACE DAMAGED HEAD, SHORTEN DROPS AND FULLY SPRINKLER THE WEIGHT ROOM. CURRENTLY ONLY 3 HEADS IN WEIGHT RM.

The information on this form is correct at the time and place of my inspection. The "fire protection system" was left in operational condition upon completion of this inspection except as noted above.

This report was reviewed with:

Paul Hickman		Damon Alley	12-23-13
Print Name	Signature	Technician	Date

Fire & Life Safety America, Inc
1407 Mill Race Drive Salem, VA 24153
Tel: (540)378-6160 Fax: (540)378-6171

FIRE PROTECTION SYSTEM SUMMARY INSPECTION AND TESTING FORM

Date: 12-23-13 Work Order #: 224134

GENERAL INFORMATION

Site Name: Hidden Valley High Owner: Roanoke County Schools
Address: 5000 Titan TR Address:
City: Roanoke State: VA City: State:

Last Inspection Date: 6-13 By: FLSA

This inspection is (check one): ☐ monthly ☐ bi-monthly ☐ quarterly ☑ semi-annual ☐ annual Report to: Dennis Eggerly

PART A EQUIPMENT AND ALARMS

1. Central station notified / alarms silenced 10:40 AM / PM Alarms restored AM / PM
2. Fire Protection System(s) to be inspected (No., Size, Make, Model) (4) wet systems

PART B OWNER'S SECTION (to be answered by owner or occupant)

	Yes	N/A**	No*
1. Is the property occupied?	✓		
2. Has the occupancy classification or hazard of contents remained the same since the last inspection?	✓		
3. Is the "fire protection system' in service?	✓		
4. Has the "fire protection system" remained in service without modification or activation since last inspection?	✓		
5. If "no" to 4, all changes to building or system(s) fully reviewed, documented and properly protected.	✓		
6. Has the system been examined internally for obstructions where conditions exist that could cause obstructed piping? Date: 2005			✓
7. Has the system piping (dry, preaction, deluge) been checked for proper drainage and/or pitch?	✓		
8. Is the "fire protection system" adequately protected from freezing?	✓		
9. Have hazardous locations and materials been identified and safety instructions provided to the technician prior to performing the inspection?	✓		

PART C - TEST NOTIFICATIONS

	PRIOR TO START			UPON COMPLETION		
	Yes	No	Time	Yes	No	Time
Monitoring Entity/Central Station	✓		10:40	✓		
Building Management	✓		10:40	✓		
Building Occupant	✓		10:40	✓		
AHJ/FD						
Other (specify)						
Did alarm central station receive signal properly?				—		
Did alarm panel reset properly?				✓		

PART D - INSPECTION PERFORMED (Copies Attached of Items Checked)

- ☑ Sprinkler System Form
- ☐ Dry Valve Trip Test Report
- ☐ Sprinkler Piping Condition Form
- ☐ Fire Pump Inspection Form
- ☐ _____
- ☐ Standpipe Inspection Form
- ☐ Hydrant Flow Test Form
- ☐ Fire Alarm Detection Form
- ☐ Deluge/Pre-Action Trip Test Report
- ☐ _____
- ☐ Water Storage Tanks Form
- ☐ Private Fire Service Mains Form
- ☐ Backflow Test Form
- ☐ Addendum to Report of Inspection

Fire & Life Safety America, Inc
1407 Mill Race Drive Salem, VA 24153
Tel:(540)378-6160 Fax:(540)378-6171

Fire Protection Systems Report of Inspections

Work Order #: _____ Date: 12-23-13

Site Name	Hidden Valley High School	Owner	Roanoke County Schools		
Address	5000 Titan TR	Address			
City	Roanoke	State	VA	City	State
Zip		Phone		Zip	Phone

PART I INSPECTOR'S SECTION (all responses reference current inspection)	Yes	N/A	No
A. General			
1. Is the hydraulic data plate in place, permanently marked and securely attached?	✓		
2. Is the fire department connection(s) in satisfactory condition, couplings free, caps in place,			
check valves tight and accessible and visible?	✓		
3. Has the system check valve(s) been internally inspected within the last 5 years? (Date 2005)			✓
4. Is the visible exterior of the system piping in good condition and free from damage? (Date checked 6-13)	✓		
5. Are visible hangers in place, securely attached and free of corrosion? (Date checked 6-13)	✓		
6. Are system gauges (water/air) in good condition and showing normal pressures?	✓		
7. Were system gauges (water/air) checked against a calibrated gauge or replaced in the last 5 years? (Date 2005)			✓
B. Wet Systems			
1. Are areas protected by wet systems inside the property properly heated?	✓		
2. There is no leakage from drain pipes indicating problems with relard chambers, alarm drains or main drain?	✓		
3. Are inspection and flow test tags in place and filled out completely?	✓		
4. Was a flow test performed from inspector's test valve and did the alarms operate?	✓		
5. Are cold weather valves in the appropriate (open) / (closed) position?		✓	
6. Are antifreeze test results satisfactory?		✓	
Test Results: Solution Type _____ Freeze Point _____			
C. Dry Systems (see trip test report dated N/A)			
1. Are the air pressure and priming water level in accordance with the manufacturer's instructions?		✓	
2. Is the air (compressor) or nitrogen supply in service and operating properly?		✓	
3. Are quick-opening devices in service? (Semiannual test performed on _____)		✓	
4. Are air maintenance device(s) installed and operating properly?		✓	
5. Is the intermediate chamber free from leakage and the velocity check free & clear?		✓	
6. Were low points drained during this inspection? (Quantity Drained _____) (see Part III.J)		✓	
7. Did the heating equipment in the valve enclosure operate at the time of inspection?		✓	
D. Special Systems (Deluge—Preaction) (see trip test report dated N/A)			
1. Did detection devices test satisfactorily during this inspection?		✓	
2. Did the release/activation devices operate properly during detection testing?		✓	
3. Is the air pressure and priming water level for the preaction system in accordance with manufacturer's instructions?		✓	
E. Alarms (Wet, Dry, Preaction & Deluge)			
1. Are the alarm trim valves in the proper position, sealed and/or locked?	✓		
2. Did the water motor and gong/electrical alarms (pressure and water flow) operate properly during testing?	✓		
3. Did the central station/monitoring system receive all alarms?	✓		
4. Did the low/high air alarms for the system piping/detection operate properly?	✓		
5. Did tamper devices operate properly?	✓		
F. Sprinklers			
1. Is the proper clearance maintained between the top of the storage and sprinkler deflector?	✓		
2. Are all sprinklers free from corrosion, loading or obstruction to spray discharge?	✓		
3. Are standard sprinklers in service for less than 50 years / dated after 1920?	✓		
4. Are fast response sprinklers in service for less than 20 years?	✓		
5. Is a spare head cabinet with spare sprinklers and proper wrenches installed at system riser?	✓		
6. Are sprinklers near heating devices of proper temperature rating?	✓		
G. Control Valves (see item G.7)			
1. Are sprinkler system control valves in the appropriate position?	✓		
2. Were operating stems of all O.S.&Y. valves lubricated, completely closed and reopened? (Date 12-13)	✓		
3. Were all control valves operated through full range and returned to normal position? (Date 12-13)	✓		
4. Are valves free from external leaks?	✓		
5. Are valves properly identified with signs?	✓		
6. Are pressure regulating control valves open, not leaking, maintaining downstream pressure and			
free from physical damage? (Date tested _____)		✓	

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7.

Control Valve Maintenance Table	Number	Type	Open	Secured	Closed	Signs	Tamper	Seal No.	Abnormal Condition
City Connection Control Valve	1	OSY	YES	YES	NO	NO	YES		
Tank Control Valves									
Pump Control Valves									
Sectional Control Valves									
System Control Valves									
Other Control Valves	2	OSY	YES	YES	NO	YES	YES		
Test Header Control Valve									
Pressure Reducing Control Valve									

J. Water Supply Data

	YES	N.A.	NO
1. Was a water flow test of main drain made at sprinkler riser?	✓		

2. Water supply pressures:
   a. City 75 psi
   b. Fire pump N/A psi
   c. Tank N/A psi
   d. N/A psi

3. Water flow test at sprinkler riser (in psi):

	Test Pipe Location	Size Test Pipe	Static	Residual	Static
a	WET 1	2"	75	50	75
b	WET 2	2"	75	50	75
c	WET 3	2"	75	50	75

	Test Pipe Location	Size Test Pipe	Static	Residual	Static
d	WET H	2"	75	50	75
e					
f					

Explain any NO answers and comment [see addendum(s) attached if checked ☐]

* 5 YEAR MAINTENANCE IS DUE ALL WET SYSTEMS

J. Adjustments or corrections made during this inspection: NONE

K. This inspection was performed substantially in accordance with NFPA Standard: 25(14)(15)( )☐ ( )☐ ( )☐ ( )☐ . Although these comments are not the result of an engineering review, the following desirable improvements are recommended [see addendum(s) attached if checked ☐]

The information on this form is correct at the time and place of my inspection. The fire protection system was left in operational condition upon completion of this inspection except as noted above.

This report was reviewed with:

By: East Coast Fire Protection, Inc.

Lindsey W. Milam	Lindsey W. Milam	[signature]	12-23-13
Print Name	Signature	Technician	Date

FIRE & LIFE SAFETY AMERICA — PROTECTING AMERICA

Service Authorization Agreement No: 106978

Order Date: 12/23/13 Phone:	Customer PO #
FLSA Job No.	Ordered By:
Job Name: Hidden Valley High School	Bill To:
Job Address: 5000 Titan PR	Billing Address:
Roanoke, VA.	
Contact Name: Penni's Eppard	Pmt Method: Cash/Chk Visa MC Amex Discover Bill To
Phone:	CC No: Exp Date:
Valve Seal #	CC Signature:

Description of Work: FLSA completed quarterly Sprinkler inspection per contract. System was returned to normal operation upon departure.

Qty	Materials	Unit Price	Amount	Tech(s)	Date on Job	ST	OT	Travel
				A. Ruble	12/23/13			
				A. Throm	12/23/13			
							Contract	
					TOTAL			

Return Trip Required: Yes ☐ No ☐

Date Completed: 12/23/13

Office Use Only - Cost Summary	
Total Labor	
Total Materials	
Fuel Charge	
Grand Total	

Limitation of Liability: FLSA's liability to Customer shall extend only to personal injury, death, or property damage arising from performance under this Agreement and shall be limited to the payments made to FLSA under this Agreement. Customer shall hold FLSA harmless from any and all third party claims for personal injury, death or property damage arising from Customer's failure to maintain its premises, including but not limited to damages to the fire protection system or Customer's property caused by water leakage, freezing pipes, loss of power, acts of God or other similar causes beyond the control of FLSA. In no event shall FLSA be liable for any special, indirect, incidental, consequential or any other damages of any character, including but not limited to the loss of use of the Customer's property, lost profits or lost production, whether claimed by Customer or by any third party, irrespective of whether claims or actions for such damages are based upon contract, warranty, negligence, tort, strict liability or otherwise

DISCLAIMER OF WARRANTIES: FLSA HEREBY DISCLAIMS ANY AND ALL WARRANTIES NOT EXPRESSLY STATED HEREIN, INCLUDING WARRANTIES OF MERCHANTIBILITY OR FITNESS FOR A PARTICULAR PURPOSE. UNDER NO CIRCUMSTANCES AND IN NO EVENT SHALL FLSA BE LIABLE FOR ANY SPECIAL, INDIRECT OR CONSEQUENTIAL DAMAGES OR LOST PROFITS INCURRED BY CUSTOMER, WHETHER OR NOT FLSA RECEIVES NOTICE OF THE POTENTIAL FOR SUCH DAMAGES. NOTWITHSTANDING THE FOREGOING, ANY LIABILITY INCURRED BY FLSA SHALL BE LIMITED TO THE AMOUNT OF GOODS AND SERVICES PURCHASED BY CUSTOMER AND CONTAINED WITHIN THIS AGREEMENT.

TERMS AND CONDITIONS ON THE REVERSE SIDE ARE AN INTEGRAL PART OF THIS WORK ORDER. CLIENT ACKNOWLEDGES RECEIPT OF A COPY OF THIS WORK ORDER AND HAS READ THE FRONT AND REVERSE SIDE OF THIS WORK ORDER.

By signing below, the Customer hereby authorizes FLSA to perform the Work described above and certifies that: (i) the information provided above and/or attached to this Agreement is true, accurate, and complete to the best of Customer's knowledge; (ii) the signor has the authority to authorize the Work requested pursuant to this Agreement; and (iii) the Customer has read this entire Agreement and agrees to comply with and by bound by the terms and conditions contained herein.

Customer:

Signature: Kimberly W. Mir

Print Name:

Title:

Date: 12/23/2013

Form 4.5.07

White: Office Yellow: Customer Pink: Technician

Fire & Life Safety America, Inc
1407 Mill Race Drive Salem, VA 24153
Tel: (540)378-6160 Fax: (540)378-6171

FIRE PROTECTION SYSTEM SUMMARY INSPECTION AND TESTING FORM

Date: 12-20-2013 Work Order #: 224184

GENERAL INFORMATION

Site Name: William Byrd High School Owner:
Address: Address:
City: VIENNA State: VA City: State:

Last Inspection Date: 2013 By: FLSA

This inspection is (check one): ☐ monthly ☐ bi-monthly ☐ quarterly ☒ semi-annual ☐ annual Report to:

PART A EQUIPMENT AND ALARMS

1. Central station notified / alarms silenced 1:30 AM / (PM) Alarms restored 2:36 AM / (PM)
2. Fire Protection System(s) to be inspected (No., Size, Make, Model)

PART B OWNER'S SECTION (to be answered by owner or occupant)

	Yes	N/A**	No*
1. Is the property occupied?	✓		
2. Has the occupancy classification or hazard of contents remained the same since the last inspection?	✓		
3. Is the "fire protection system' in service?	✓		
4. Has the "fire protection system" remained in service without modification or activation since last inspection?	✓		
5. If "no" to 4, all changes to building or system(s) fully reviewed, documented and properly protected.			
6. Has the system been examined internally for obstructions where conditions exist that could cause obstructed piping? Date:			✓
7. Has the system piping (dry, preaction, deluge) been checked for proper drainage and/or pitch?		✓	
8. Is the "fire protection system" adequately protected from freezing?	✓		
9. Have hazardous locations and materials been identified and safety instructions provided to the technician prior to performing the inspection?	✓		

PART C - TEST NOTIFICATIONS

	PRIOR TO START			UPON COMPLETION		
	Yes	No	Time	Yes	No	Time
Monitoring Entity/Central Station	✓		1:30	✓		2:30
Building Management	✓		1:40	✓		
Building O ccupant	✓		1:40	✓		
AHJ/FD						
Other (specify)						
Did alarm central station receive signal properly?	✓		2:30	✓		
Did alarm panel reset properly?	✓		2:30	✓		

PART D - INSPECTION PERFORMED (Copies Attached of Items Checked)

- ☐ Sprinkler System Form
- ☐ Dry Valve Trip Test Report
- ☐ Sprinkler Piping Condition Form
- ☐ Fire Pump Inspection Form
- ☐ _____
- ☐ Standpipe Inspection Form
- ☐ Hydrant Flow Test Form
- ☐ Fire Alarm Detection Form
- ☐ Deluge/Pre-Action Trip Test Report
- ☐ _____
- ☐ Water Storage Tanks Form
- ☐ Private Fire Service Mains Form
- ☐ Backflow Test Form
- ☐ Addendum to Report of Inspection

Fire & Life Safety America, Inc
1407 Mill Race Drive Salem, VA 24153
Tel:(540)378-6160 Fax:(540)378-6171

Fire Protection Systems Report of Inspections

Work Order #: _____ Date: 12-20-13

Site Name	William Byrd High School		Owner		
Address			Address		
City	Vinton	State VA	City		State
Zip		Phone	Zip		Phone

PART I INSPECTOR'S SECTION (all responses reference current inspection)	Yes	N/A	No
A. General			
1. Is the hydraulic data plate in place, permanently marked and securely attached?			/
2. Is the fire department connection(s) in satisfactory condition, couplings free, caps in place, check valves light and accessible and visible?			/
3. Has the system check valve(s) been internally inspected within in the last 5 years? (Date _____)			
4. Is the visible exterior of the system piping in good condition and free from damage? (Date checked _____)	/		
5. Are visible hangers in place, securely attached and free of corrosion? (Date checked _____)	/		
6. Are system gauges (water/air) in good condition and showing normal pressures?			/
7. Were system gauges (water/air) checked against a calibrated gauge or replaced in the last 5 years? (Date _____)			/
B. Wet Systems			
1. Are areas protected by wet systems inside the property properly heated?	/		
2. There is no leakage from drain pipes indicating problems with retard chambers, alarm drains or main drain?	/		
3. Are inspection and flow test tags in place and filled out completely?	/		
4. Was a flow test performed from inspector's test valve and did the alarms operate?	/		
5. Are cold weather valves in the appropriate (open) / (closed) position?		/	
6. Are antifreeze test results satisfactory?		/	
Test Results: Solution Type _____ Freeze Point _____			
C. Dry Systems (see trip test report dated _____)			
1. Are the air pressure and priming water level in accordance with the manufacturer's instructions?		/	
2. Is the air (compressor) or nitrogen supply in service and operating properly?		/	
3. Are quick-opening devices in service? (Semiannual test performed on _____)		/	
4. Are air maintenance device(s) installed and operating properly?		/	
5. Is the intermediate chamber free from leakage and the velocity check free & clear?		/	
6. Were low points drained during this inspection? (Quantity Drained _____) (see Part III.J)		/	
7. Did the heating equipment in the valve enclosure operate at the time of inspection?		/	
D. Special Systems (Deluge—Preaction) (see trip test report dated _____)			
1. Did detection devices test satisfactorily during this inspection?		/	
2. Did the release/activation devices operate properly during detection testing?		/	
3. Is the air pressure and priming water level for the preaction system in accordance with manufacturer's instructions?		/	
E. Alarms (Wet, Dry, Preaction & Deluge)			
1. Are the alarm trim valves in the proper position, sealed and/or locked?		/	
2. Did the water motor and gong/electrical alarms (pressure and water flow) operate properly during testing?	/		
3. Did the central station/monitoring system receive all alarms?	/		
4. Did the low/high air alarms for the system piping/detection operate properly?		/	
5. Did tamper devices operate properly?		/	
F. Sprinklers			
1. Is the proper clearance maintained between the top of the storage and sprinkler deflector?	/		
2. Are all sprinklers free from corrosion, loading or obstruction to spray discharge?	/		
3. Are standard sprinklers in service for less than 50 years / dated after 1920?	/		
4. Are fast response sprinklers in service for less than 20 years?	/		
5. Is a spare head cabinet with spare sprinklers and proper wrenches installed at system riser?			/
6. Are sprinklers near heating devices of proper temperature rating?	/		
G. Control Valves (see item G.7)			
1. Are sprinkler system control valves in the appropriate position?	/		
2. Were operating stems of all O.S.&Y. valves lubricated, completely closed and reopened? (Date _____)	/		
3. Were all control valves operated through full range and returned to normal position? (Date _____)	/		
4. Are valves free from external leaks?	/		
5. Are valves properly identified with signs?			/
6. Are pressure regulating control valves open, not leaking, maintaining downstream pressure and free from physical damage? (Date tested _____)		/	

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7.

Control Valve Maintenance Table	Number	Type	Open	Secured	Closed	Signs	Tampers	Seal No.	Abnormal Condition
City Connection Control Valve									
Tank Control Valves									
Pump Control Valves									
Sectional Control Valves	3	OSY	yes	yes	no	yes	yes		
System Control Valves	12	Bell	yes	yes	no	no	no		
Other Control Valves									
Test Header Control Valve									
Pressure Reducing Control Valve									

4. Water Supply Data

	YES	N.A.	NO
1. Was a water flow test of main drain made at sprinkler riser?			X

2. Water supply pressures:
   a. City _____ psi
   b. Fire pump _____ psi
   c. Tank _____ psi
   d. _____ psi

3. Water flow test at sprinkler riser (in psi):

	Test Pipe Location	Size Test Pipe	Static	Residual	Static
a					
b			N/A		
c					

	Test Pipe Location	Size Test Pipe	Static	Residual	Static
d					
e					
f					

Explain any no answers and comment [see addendum(s) attached if checked ☐]

5. Adjustments or corrections made during this inspection: none

6. This inspection was performed substantially in accordance with NFPA Standard: 25(2011) ☐ 13( ) ☐ ___( ) ☐ ___( ) ☐ ___( ) ☐ . Although these comments are not the result of an engineering review, the following desirable improvements are recommended [see addendum(s) attached if checked ☐]

none

The information on this form is correct at the time and place of my inspection. The "fire protection system" was left in operational condition upon completion of this inspection except as noted above.

This report was reviewed with:

Vicky J Carrell	Vicky J. Carrell	Barry Hensley	12-20-15
Print Name	Signature	Technician	Date

FLSA
FIRE & LIFE SAFETY AMERICA — PROTECTING AMERICA

Service Authorization Agreement No: 106903

Order Date: 12/23/13 Phone:	Customer PO #
FLSA Job No.	Ordered By:
Job Name: NORTHSIDE High School	Bill To:
Job Address:	Billing Address:
Contact Name:	Pmt Method: Cash/Chk Visa MC Amex Discover Bill To
Phone:	CC No: Exp Date:
Valve Seal #	CC Signature:

Description of Work: FSA will reschedule inspection due to MGT.

[redacted] Horsley 540-537-2461

Qty	Materials	Unit Price	Amount	Tech(s)	Date on Job	ST	OT	Travel
					TOTAL			

Return Trip Required: Yes ☐ No ☐

Date Completed: / /

Office Use Only - Cost Summary

Total Labor	
Total Materials	
Fuel Charge	
Grand Total	

Limitation of Liability: FLSA's liability to Customer shall extend only to personal injury, death, or property damage arising from performance under this Agreement and shall be limited to the payments made to FLSA under this Agreement. Customer shall hold FLSA harmless from any and all third party claims for personal injury, death or property damage arising from Customer's failure to maintain its premises, including but not limited to damages to the fire protection system or Customer's property caused by water leakage, freezing pipes, loss of power, acts of God or other similar causes beyond the control of FLSA. In no event shall FLSA be liable for any special, indirect, incidental, consequential or any other damages of any character, including but not limited to the loss of use of the Customer's property, lost profits or lost production, whether claimed by Customer or by any third party, irrespective of whether claims or actions for such damages are based upon contract, warranty, negligence, tort, strict liability or otherwise

DISCLAIMER OF WARRANTIES: FLSA HEREBY DISCLAIMS ANY AND ALL WARRANTIES NOT EXPRESSLY STATED HEREIN, INCLUDING WARRANTIES OF MERCHANTIBILITY OR FITNESS FOR A PARTICULAR PURPOSE. UNDER NO CIRCUMSTANCES AND IN NO EVENT SHALL FLSA BE LIABLE FOR ANY SPECIAL, INDIRECT OR CONSEQUENTIAL DAMAGES OR LOST PROFITS INCURRED BY CUSTOMER, WHETHER OR NOT FLSA RECEIVES NOTICE OF THE POTENTIAL FOR SUCH DAMAGES. NOTWITHSTANDING THE FOREGOING, ANY LIABILITY INCURRED BY FLSA SHALL BE LIMITED TO THE AMOUNT OF GOODS AND SERVICES PURCHASED BY CUSTOMER AND CONTAINED WITHIN THIS AGREEMENT.

TERMS AND CONDITIONS ON THE REVERSE SIDE ARE AN INTEGRAL PART OF THIS WORK ORDER. CLIENT ACKNOWLEDGES RECEIPT OF A COPY OF THIS WORK ORDER AND HAS READ THE FRONT AND REVERSE SIDE OF THIS WORK ORDER.

By signing below, the Customer hereby authorizes FLSA to perform the Work described above and certifies that: (i) the information provided above and/or attached to this Agreement is true, accurate, and complete to the best of Customer's knowledge; (ii) the signor has the authority to authorize the Work requested pursuant to this Agreement; and (iii) the Customer has read this entire Agreement and agrees to comply with and by bound by the terms and conditions contained herein.

Customer:

Signature: Rhonda Kay

Print Name:

Title:

Date:

Form 4.5.07

White - Office Yellow - Customer Pink - Technician

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FLSA FIRE & LIFE SAFETY AMERICA PROTECTING AMERICA

Fire & Life Safety America, Inc
1407 Mill Race Drive Salem, VA 24153
Tel: (540)378-6160 Fax: (540)378-6171

FIRE PROTECTION SYSTEM SUMMARY INSPECTION AND TESTING FORM

Date: 1/20/13 Work Order #:

GENERAL INFORMATION

Site Name: Northside Middle School Owner: SAME

Address: Address:

City: Roanoke State: VA City: State:

Last Inspection Date: 7/13 By: FLSA

This inspection is (check one): ☐ monthly ☐ bi-monthly ☒ quarterly ☐ semi-annual ☐ annual Report to: Office

PART A EQUIPMENT AND ALARMS

1. Central station notified / alarms silenced 11:00 (AM) / PM Alarms restored 12:00 AM / (PM)
2. Fire Protection System(s) to be inspected (No., Size, Make, Model) (1) 4" Wet System (1) 500 GPM
   (1) Preaction System Fire Pump

PART B OWNER'S SECTION (to be answered by owner or occupant)

		Yes	N/A**	No*
1.	Is the property occupied?	✓		
2.	Has the occupancy classification or hazard of contents remained the same since the last inspection?	✓		
3.	Is the "fire protection system" in service?	✓		
4.	Has the "fire protection system" remained in service without modification or activation since last inspection?	✓		
5.	If "no" to 4, all changes to building or system(s) fully reviewed, documented and properly protected.	✓		
6.	Has the system been examined internally for obstructions where conditions exist that could cause obstructed piping? Date: 2003			✓
7.	Has the system piping (dry, preaction, deluge) been checked for proper drainage and/or pitch?	✓		
8.	Is the "fire protection system" adequately protected from freezing?	✓		
9.	Have hazardous locations and materials been identified and safety instructions provided to the technician prior to performing the inspection?		✓	

PART C - TEST NOTIFICATIONS

	PRIOR TO START			UPON COMPLETION		
	Yes	No	Time	Yes	No	Time
Monitoring Entity/Central Station	✓		11:00	✓		12:00
Building Management	✓		11:00	✓		12:00
Building Occupant	✓		11:00	✓		12:00
AHJ/FD						
Other (specify)						
Did alarm central station receive signal properly?				✓		11:30
Did alarm panel reset properly?				✓		11:45

PART D - INSPECTION PERFORMED (Copies Attached of Items Checked)

- ☒ Sprinkler System Form
- ☐ Dry Valve Trip Test Report
- ☐ Sprinkler Piping Condition Form
- ☐ Fire Pump Inspection Form
- ☐ _____
- ☐ Standpipe Inspection Form
- ☐ Hydrant Flow Test Form
- ☐ Fire Alarm Detection Form
- ☐ Deluge/Pre-Action Trip Test Report
- ☐ _____
- ☐ Water Storage Tanks Form
- ☐ Private Fire Service Mains Form
- ☐ Backflow Test Form
- ☐ Addendum to Report of Inspection

Fire & Life Safety America, Inc
1407 Mill Race Drive Salem, VA 24153
Tel:(540)378-6160 Fax:(540)378-6171

Fire Protection Systems Report of Inspections

Work Order #: _____ Date: 1/20/14

Site Name	Northside middle School	Owner	SAME
Address		Address	
City	State	City	State
Zip	Roanoke Phone VA	Zip	Phone

PART I INSPECTOR'S SECTION (all responses reference current inspection)	Yes	N/A	No
A. General			
1. Is the hydraulic data plate in place, permanently marked and securely attached?	✓		
2. Is the fire department connection(s) in satisfactory condition, couplings free, caps in place,			
check valves light and accessible and visible?	✓		
3. Has the system check valve(s) been internally inspected within in the last 5 years? (Date 03)			✓
4. Is the visible exterior of the system piping in good condition and free from damage? (Date checked 7/13)	✓		
5. Are visible hangers in place, securely attached and free of corrosion? (Date checked 7/13)	✓		
6. Are system gauges (water/air) in good condition and showing normal pressures?	✓		
7. Were system gauges (water/air) checked against a calibrated gauge or replaced in the last 5 years? (Date 03)			✓
B. Wet Systems			
1. Are areas protected by wet systems inside the property properly heated?	✓		
2. There is no leakage from drain pipes indicating problems with retard chambers, alarm drains or main drain?	✓		
3. Are inspection and flow test tags in place and filled out completely?	✓		
4. Was a flow test performed from inspector's test valve and did the alarms operate?	✓		
5. Are cold weather valves in the appropriate (open) / (closed) position?		✓	
6. Are antifreeze test results satisfactory?		✓	
Test Results: Solution Type _____ Freeze Point _____			
C. Dry Systems (see trip test report dated _____)			
1. Are the air pressure and priming water level in accordance with the manufacturer's instructions?		✓	
2. Is the air (compressor) or nitrogen supply in service and operating properly?		✓	
3. Are quick-opening devices in service? (Semiannual test performed on _____)		✓	
4. Are air maintenance device(s) installed and operating properly?		✓	
5. Is the intermediate chamber free from leakage and the velocity check free & clear?		✓	
6. Were low points drained during this inspection? (Quantity Drained _____) (see Part III.J)		✓	
7. Did the heating equipment in the valve enclosure operate at the time of inspection?		✓	
D. Special Systems (Deluge—Preaction) (see trip test report dated _____)			
1. Did detection devices test satisfactorily during this inspection?	✓		
2. Did the release/activation devices operate properly during detection testing?	✓		
3. Is the air pressure and priming water level for the preaction system in accordance with manufacturer's instructions?	✓		
E. Alarms (Wet, Dry, Preaction & Deluge)			
1. Are the alarm trim valves in the proper position, sealed and/or locked?	✓		
2. Did the water motor and gong/electrical alarms (pressure and water flow) operate properly during testing?	✓		
3. Did the central station/monitoring system receive all alarms?	✓		
4. Did the low/high air alarms for the system piping/detection operate properly?	✓		
5. Did tamper devices operate properly?	✓		
F. Sprinklers			
1. Is the proper clearance maintained between the top of the storage and sprinkler deflector?	✓		
2. Are all sprinklers free from corrosion, loading or obstruction to spray discharge?	✓		
3. Are standard sprinklers in service for less than 50 years / dated after 1920?	✓		
4. Are fast response sprinklers in service for less than 20 years?	✓		
5. Is a spare head cabinet with spare sprinklers and proper wrenches installed at system riser?	✓		
6. Are sprinklers near heating devices of proper temperature rating?			
G. Control Valves (see item G.7)			
1. Are sprinkler system control valves in the appropriate position?	✓		
2. Were operating stems of all O.S.&Y. valves lubricated, completely closed and reopened? (Date 7/13)	✓		
3. Were all control valves operated through full range and returned to normal position? (Date 7/13)	✓		
4. Are valves free from external leaks?	✓		
5. Are valves properly identified with signs?	✓		
6. Are pressure regulating control valves open, not leaking, maintaining downstream pressure and			
free from physical damage? (Date tested _____)		✓	

Fire & Life Safety America, Inc

Fire Protection Systems Report of Inspections

 Work Order #: _____ Date: 1/20/14

G. 7.

Control Valve Maintenance Table	Number	Type	Open	Secured	Closed	Signs	Tampers	Seal No.	Abnormal Condition
City Connection Control Valve	1	OSY	yes	yes	no	yes	yes		
Tank Control Valves									
Pump Control Valves	2	BF	yes	yes	no	yes	yes		
Sectional Control Valves									
System Control Valves	2	BF	yes	yes	no	yes	yes		
Other Control Valves									
Test Header Control Valve	1	BF	no	yes	yes	yes	yes		
Pressure Reducing Control Valve									

H. Water Supply Data

	YES	N.A.	NO
1. Was a water flow test of main drain made at sprinkler riser?	☒	☐	☐

2. Water supply pressures:

a. City 35 psi c. Tank N/A psi

b. Fire pump 115 psi d. N/A N/A psi

3. Water flow test at sprinkler riser (in psi):

	Test Pipe Location	Size Test Pipe	Static	Residual	Static
a.	wet	2"	105	80	105
b.	Preaction	1"	105	100	105
c.					

	Test Pipe Location	Size Test Pipe	Static	Residual	Static
d.					
e.					
f.					

I. Explain any no answers and comment (see addendum(s) attached if checked ☐)

① 5 year Maintaince & Internal Piping Inspection is due on (1) wet system & (1) Preaction system.

J. Adjustments or corrections made during this inspection:

K. This inspection was performed substantially in accordance with NFPA Standard: ☒ 25(11) ☐ 13( ) ☐ ___( ) ☐ ___( )

Although these comments are not the result of an engineering review, the following desirable improvements are recommended (see addendum(s) attached if checked ☐)

① Complete 5 year Maintaince & Internal Piping Inspection

The information on this form is correct at the time and place of my inspection. The "fire protection system" was left in operational condition upon completion of this inspection except as noted above.

This report was reviewed with:

James Robertson
Print Name

Signature

By: Fire & Life Safety America, Inc.

Technician

1/20/14
Date

Form SR14, Rev Level 2, 1/10/2001

ISO 9001: 2008 Certified

FLSA FIRE & LIFE SAFETY AMERICA PROTECTING AMERICA

Fire & Life Safety America, Inc
1407 Mill Race Drive Salem, VA 24153
Tel: (540)378-6160 Fax: (540)378-6171

FIRE PROTECTION SYSTEM SUMMARY INSPECTION AND TESTING FORM

Date: 1/20/14 Work Order #:

GENERAL INFORMATION

Site Name: Northside High School Owner: Roanoke County Schools
Address: Address:
City: Roanoke State: VA City: State:

Last Inspection Date: 7/13 By: FLSA

This inspection is (check one): ☐ monthly ☐ bi-monthly ☒ quarterly ☐ semi-annual ☐ annual Report to: Office

PART A EQUIPMENT AND ALARMS

1. Central station notified / alarms silenced 9:00 (AM) / PM Alarms restored 11:00 AM / (PM)
2. Fire Protection System(s) to be inspected (No., Size, Make, Model) (1 Preaction (4) wet Systems (1) 250 GPM Fire Pump

PART B OWNER'S SECTION (to be answered by owner or occupant)

		Yes	N/A**	No*
1.	Is the property occupied?	✓		
2.	Has the occupancy classification or hazard of contents remained the same since the last inspection?	✓		
3.	Is the "fire protection system' in service?	✓		
4.	Has the "fire protection system" remained in service without modification or activation since last inspection?	✓		
5.	If "no" to 4, all changes to building or system(s) fully reviewed, documented and properly protected.	✓		
6.	Has the system been examined internally for obstructions where conditions exist that could cause obstructed piping? Date: 2008 new			✓
7.	Has the system piping (dry, preaction, deluge) been checked for proper drainage and/or pitch?	✓		
8.	Is the "fire protection system" adequately protected from freezing?	✓		
9.	Have hazardous locations and materials been identified and safety instructions provided to the technician prior to performing the inspection?	✓		

PART C - TEST NOTIFICATIONS

	PRIOR TO START			UPON COMPLETION		
	Yes	No	Time	Yes	No	Time
Monitoring Entity/Central Station	✓		9:00	✓		11:00
Building Management	✓		9:00	✓		11:00
Building O ccupant	✓		9:00	✓		11:00
AHJ/FD						
Other (specify)						
Did alarm central station receive signal properly?				✓		10:00
Did alarm panel reset properly?				✓		10:30

PART D - INSPECTION PERFORMED (Copies Attached of Items Checked)

- ☒ Sprinkler System Form
- ☐ Dry Valve Trip Test Report
- ☐ Sprinkler Piping Condition Form
- ☐ Fire Pump Inspection Form
- ☐ _____
- ☐ Standpipe Inspection Form
- ☐ Hydrant Flow Test Form
- ☐ Fire Alarm Detection Form
- ☐ Deluge/Pre-Action Trip Test Report
- ☐ _____
- ☐ Water Storage Tanks Form
- ☐ Private Fire Service Mains Form
- ☐ Backflow Test Form
- ☐ Addendum to Report of Inspection

Fire & Life Safety America, Inc
1407 Mill Race Drive Salem, VA 24153
Tel:(540)378-6160 Fax:(540)378-6171

Fire Protection Systems Report of Inspections

Work Order #: _____ Date: 1/20/14

Site Name	Northside High School		Owner	SAME	
Address			Address		
City	Roanoke	State VA	City		State
Zip		Phone	Zip		Phone

PART I INSPECTOR'S SECTION (all responses reference current inspection)	Yes	N/A	No
A. General			
1. Is the hydraulic data plate in place, permanently marked and securely attached?	✓		
2. Is the fire department connection(s) in satisfactory condition, couplings free, caps in place,	✓		
check valves tight and accessible and visible?	✓		
3. Has the system check valve(s) been internally inspected within in the last 5 years? (Date 08 (New))			✓
4. Is the visible exterior of the system piping in good condition and free from damage? (Date checked 7/13)	✓		
5. Are visible hangers in place, securely attached and free of corrosion? (Date checked 7/13)	✓		
6. Are system gauges (water/air) in good condition and showing normal pressures?	✓		
7. Were system gauges (water/air) checked against a calibrated gauge or replaced in the last 5 years? (Date 08 (New))			✓
B. Wet Systems			
1. Are areas protected by wet systems inside the property properly heated?	✓		
2. There is no leakage from drain pipes indicating problems with retard chambers, alarm drains or main drain?	✓		
3. Are inspection and flow test tags in place and filled out completely?	✓		
4. Was a flow test performed from Inspector's test valve and did the alarms operate?	✓		
5. Are cold weather valves in the appropriate (open) / (closed) position?		✓	
6. Are antifreeze test results satisfactory?		✓	
Test Results: Solution Type _____ Freeze Point _____			
C. Dry Systems (see trip test report dated _____)			
1. Are the air pressure and priming water level in accordance with the manufacturer's instructions?		✓	
2. Is the air (compressor) or nitrogen supply in service and operating properly?	✓	for Preaction	
3. Are quick-opening devices in service? (Semiannual test performed on _____)		✓	
4. Are air maintenance device(s) installed and operating properly?		✓	
5. Is the intermediate chamber free from leakage and the velocity check free & clear?		✓	
6. Were low points drained during this inspection? (Quantity Drained _____) (see Part III.J)		✓	
7. Did the heating equipment in the valve enclosure operate at the time of inspection?		✓	
D. Special Systems (Deluge—Preaction) (see trip test report dated _____)			
1. Did detection devices test satisfactorily during this inspection?	✓		
2. Did the release/activation devices operate properly during detection testing?	✓		
3. Is the air pressure and priming water level for the preaction system in accordance with manufacturer's instructions?	✓		
E. Alarms (Wet, Dry, Preaction & Deluge)			
1. Are the alarm trim valves in the proper position, sealed and/or locked?	✓		
2. Did the water motor and gong/electrical alarms (pressure and water flow) operate properly during testing?	✓		
3. Did the central station/monitoring system receive all alarms?	✓		
4. Did the low/high air alarms for the system piping/detection operate properly?	✓		
5. Did tamper devices operate properly?	✓		
F. Sprinklers			
1. Is the proper clearance maintained between the top of the storage and sprinkler deflector?	✓		
2. Are all sprinklers free from corrosion, loading or obstruction to spray discharge?	✓		
3. Are standard sprinklers in service for less than 50 years / dated after 1920?	✓		
4. Are fast response sprinklers in service for less than 20 years?	✓		
5. Is a spare head cabinet with spare sprinklers and proper wrenches installed at system riser?	✓		
6. Are sprinklers near heating devices of proper temperature rating?	✓		
G. Control Valves (see item G.7)			
1. Are sprinkler system control valves in the appropriate position?	✓		
2. Were operating stems of all O.S.&Y. valves lubricated, completely closed and reopened? (Date 7/13)	✓		
3. Were all control valves operated through full range and returned to normal position? (Date 7/13)	✓		
4. Are valves free from external leaks?	✓		
5. Are valves properly identified with signs?	✓		
6. Are pressure regulating control valves open, not leaking, maintaining downstream pressure and			
free from physical damage? (Date tested _____)		✓	

Fire & Life Safety America, Inc

Fire Protection Systems Report of Inspections

Page ____ of ____ Work Order #: _____ Date: 1/20/14

G. 7.

Control Valve Maintenance Table	Number	Type	Open	Secured	Closes	Signs	Tampers	Seal No.	Abnormal Condition
City Connection Control Valve	1	PIV	yes	yes	no	yes	yes		
Tank Control Valves									
Pump Control Valves	(1) OSY (3) BF		yes	yes	no	yes	yes		
Sectional Control Valves									
System Control Valves	5	BF	yes	yes	no	yes	yes		
Other Control Valves									
Test Header Control Valve	1	BF	no	yes	yes	yes	yes		
Pressure Reducing Control Valve									

H. Water Supply Data

	YES	N.A.	NO
1. Was a water flow test of main drain made at sprinkler riser?	☒	☐	☐

2. Water supply pressures:

a. City 55 psi c. Tank N/A psi

b. Fire pump _____ psi d. N/A N/A psi

3. Water flow test at sprinkler riser (in psi):

	Test Pipe Location	Size Test Pipe	Static	Residual	Static
a.	wet # 1	2"	105	85	105
b.	wet # 2	2"	105	85	105
c.	Wet # 3	2"	105	85	105

	Test Pipe Location	Size Test Pipe	Static	Residual	Static
d.	wet # 4	2"	105	85	105
e.	Re Action	1 1/4"	105	90	150
f.					

I. Explain any no answers and comment (see addendum(s) attached if checked ☐)

① 5 year Maintaince & Internal Piping is due on (4) wet systems & (1) AA system. (1) Fire Pump.

② Fire Department does not have a ball drip.

J. Adjustments or corrections made during this inspection:

K. This inspection was performed substantially in accordance with NFPA Standard: ☒ 25(11) ☐ 13( ) ☐ ___( ) ☐ ___( )

Although these comments are not the result of an engineering review, the following desirable improvements are recommended (see addendum(s) attached if checked ☐)

① Complete 5 year Maintaince & Internal Piping Inspection.

② Add Ball drip to Fire Dept. connection.

The information on this form is correct at the time and place of my inspection. The "fire protection system" was left in operational condition upon completion of this inspection except as noted above.

This report was reviewed with:

Dennis Thomas — Print Name

Dennis Thomas — Signature

By: Fire & Life Safety America, Inc.

Technician

1/20/14 — Date

Form SR14, Rev Level 2, 1/19/2001

ISO 9001: 2008 Certified

FLSA FIRE & LIFE SAFETY AMERICA PROTECTING AMERICA

Fire & Life Safety America, Inc
1407 Mill Race Drive Salem, VA 24153
Tel: (540)378-6160 Fax: (540)378-6171

FIRE PROTECTION SYSTEM SUMMARY INSPECTION AND TESTING FORM

Date: 1/20/14 Work Order #:

GENERAL INFORMATION

Site Name: Masons Cove Elem. Owner: Roanoke County Schools
Address: Address:
City: Roanoke State: VA City: State:

Last Inspection Date: 6/13 By: FLSA

This inspection is (check one): ☐ monthly ☐ bi-monthly ☒ quarterly ☐ semi-annual ☐ annual Report to:

PART A EQUIPMENT AND ALARMS

1. Central station notified / alarms silenced 1:00 AM / (PM) Alarms restored AM / PM
2. Fire Protection System(s) to be inspected (No., Size, Make, Model) (1) - wet System (1) 500 GPM Fire Pump

PART B OWNER'S SECTION (to be answered by owner or occupant)

		Yes	N/A**	No*
1.	Is the property occupied?	✓		
2.	Has the occupancy classification or hazard of contents remained the same since the last inspection?	✓		
3.	Is the "fire protection system' in service?	✓		
4.	Has the "fire protection system" remained in service without modification or activation since last inspection?	✓		
5.	If "no" to 4, all changes to building or system(s) fully reviewed, documented and properly protected.	✓		
6.	Has the system been examined internally for obstructions where conditions exist that could cause obstructed piping? Date: New 2010		✓	
7.	Has the system piping (dry, preaction, deluge) been checked for proper drainage and/or pitch?		✓	
8.	Is the "fire protection system" adequately protected from freezing?	✓		
9.	Have hazardous locations and materials been identified and safety instructions provided to the technician prior to performing the inspection?		✓	

PART C - TEST NOTIFICATIONS

	PRIOR TO START			UPON COMPLETION		
	Yes	No	Time	Yes	No	Time
Monitoring Entity/Central Station	✓		1:00	✓		3:00
Building Management	✓		1:00	✓		3:00
Building O ccupant	✓		1:00	✓		3:00
AHJ/FD						
Other (specify)						
Did alarm central station receive signal properly?				✓		1:30
Did alarm panel reset properly?				✓		2:30

PART D - INSPECTION PERFORMED (Copies Attached of Items Checked)

- ☒ Sprinkler System Form
- ☐ Dry Valve Trip Test Report
- ☐ Sprinkler Piping Condition Form
- ☐ Fire Pump Inspection Form
- ☐ _____
- ☐ Standpipe Inspection Form
- ☐ Hydrant Flow Test Form
- ☐ Fire Alarm Detection Form
- ☐ Deluge/Pre-Action Trip Test Report
- ☐ _____
- ☐ Water Storage Tanks Form
- ☐ Private Fire Service Mains Form
- ☐ Backflow Test Form
- ☐ Addendum to Report of Inspection

Fire & Life Safety America, Inc
1407 Mill Race Drive Salem, VA 24153
Tel:(540)378-6160 Fax:(540)378-6171

Fire Protection Systems Report of Inspections

Work Order #: _____ Date: 1/20/14

Site Name	Masons Cove Elem	Owner	Roanoke County Schools
Address		Address	
City	Roanoke State VA	City	State
Zip	Phone	Zip	Phone

PART I INSPECTOR'S SECTION (all responses reference current inspection)	Yes	N/A	No
A. General			
1. Is the hydraulic data plate in place, permanently marked and securely attached?	✓		
2. Is the fire department connection(s) in satisfactory condition, couplings free, caps in place,			
check valves tight and accessible and visible?	✓		
3. Has the system check valve(s) been internally inspected within in the last 5 years? (Date New 10)	✓		
4. Is the visible exterior of the system piping in good condition and free from damage? (Date checked 6/13)	✓		
5. Are visible hangers in place, securely attached and free of corrosion? (Date checked 6/13)	✓		
6. Are system gauges (water/air) in good condition and showing normal pressures?	✓		
7. Were system gauges (water/air) checked against a calibrated gauge or replaced in the last 5 years? (Date New 10)	✓		
B. Wet Systems			
1. Are areas protected by wet systems inside the property properly heated?	✓		
2. There is no leakage from drain pipes indicating problems with retard chambers, alarm drains or main drain?	✓		
3. Are inspection and flow test tags in place and filled out completely?	✓		
4. Was a flow test performed from inspector's test valve and did the alarms operate?	✓		
5. Are cold weather valves in the appropriate (open) / (closed) position?		✓	
6. Are antifreeze test results satisfactory?		✓	
Test Results: Splution Type _____ Freeze Point _____			
C. Dry Systems (see trip test report dated _____)			
1. Are the air pressure and priming water level in accordance with the manufacturer's instructions?		✓	
2. Is the air (compressor) or nitrogen supply in service and operating properly?		✓	
3. Are quick-opening devices in service? (Semiannual test performed on _____)		✓	
4. Are air maintenance device(s) installed and operating properly?		✓	
5. Is the intermediate chamber free from leakage and the velocity check free & clear?		✓	
6. Were low points drained during this inspection? (Quantity Drained _____) (see Part III.J)		✓	
7. Did the heating equipment in the valve enclosure operate at the time of inspection?		✓	
D. Special Systems (Deluge—Preaction) (see trip test report dated _____)			
1. Did detection devices test satisfactorily during this inspection?		✓	
2. Did the release/activation devices operate properly during detection testing?		✓	
3. Is the air pressure and priming water level for the preaction system in accordance with manufacturer's instructions?		✓	
E. Alarms (Wet, Dry, Preaction & Deluge)			
1. Are the alarm trim valves in the proper position, sealed and/or locked?	✓		
2. Did the water motor and gong/electrical alarms (pressure and water flow) operate properly during testing?	✓		
3. Did the central station/monitoring system receive all alarms?	✓		
4. Did the low/high air alarms for the system piping/detection operate properly?		✓	
5. Did tamper devices operate properly?	✓		
F. Sprinklers			
1. Is the proper clearance maintained between the top of the storage and sprinkler deflector?	✓		
2. Are all sprinklers free from corrosion, loading or obstruction to spray discharge?	✓		
3. Are standard sprinklers in service for less than 50 years / dated after 1920?	✓		
4. Are fast response sprinklers in service for less than 20 years?	✓		
5. Is a spare head cabinet with spare sprinklers and proper wrenches installed at system riser?	✓		
6. Are sprinklers near heating devices of proper temperature rating?	✓		
G. Control Valves (see item G.7)			
1. Are sprinkler system control valves in the appropriate position?	✓		
2. Were operating stems of all O.S.&Y. valves lubricated, completely closed and reopened? (Date 6/13)	✓		
3. Were all control valves operated through full range and returned to normal position? (Date 6/13)	✓		
4. Are valves free from external leaks?	✓		
5. Are valves properly identified with signs?	✓		
6. Are pressure regulating control valves open, not leaking, maintaining downstream pressure and			
free from physical damage? (Date tested _____)		✓	

Fire & Life Safety America, Inc

Fire Protection Systems Report of Inspections

 Work Order #: _____ Date: 1/20/14

G. 7.

Control Valve Maintenance Table	Number	Type	Open	Secured	Closes	Signs	Tampers	Seal No.	Abnormal Condition
City Connection Control Valve	1	PIV	yes	NO	NO	NO	yes		
Tank Control Valves									
Pump Control Valves	1	OSY	yes	yes	NO	yes	yes		
Sectional Control Valves	2	OSY	yes	yes	NO	yes	yes		
System Control Valves	1	BF	yes	NO	NO	yes	yes		
Other Control Valves	1	BF	yes	NO	NO	yes	yes		
Test Header Control Valve	1	BF	NO	NO	yes	yes	yes		
Pressure Reducing Control Valve									

H. Water Supply Data

	YES	N/A	NO
1. Was a water flow test of main drain made at sprinkler riser?	☒	☐	☐

2. Water supply pressures:

a. City 50 psi c. Tank N/A psi

b. Fire pump 120 psi d. N/A N/A psi

3. Water flow test at sprinkler riser (in psi):

	Test Pipe Location	Size Test Pipe	Static	Residual	Static
a.	Wet System	2"	120	100	120
b.					
c.					

	Test Pipe Location	Size Test Pipe	Static	Residual	Static
d.					
e.					
f.					

I. Explain any no answers and comment (see addendum(s) attached if checked ☐)

J. Adjustments or corrections made during this inspection:

K. This inspection was performed substantially in accordance with NFPA Standard: ☒ 25(11) ☐ 13( ) ☐ ___( ) ☐ ___( )

Although these comments are not the result of an engineering review, the following desirable improvements are recommended (see addendum(s) attached if checked ☐)

The information on this form is correct at the time and place of my inspection. The "fire protection system" was left in operational condition upon completion of this inspection except as noted above.

This report was reviewed with:

Loretta Martin — Print Name

Signature

By: Fire & Life Safety America, Inc.

Technician

1/20/14 — Date

Fire & Life Safety America, Inc
1407 Mill Race Drive Salem, VA 24153
Tel: (540)378-6160 Fax: (540)378-6171

FIRE PROTECTION SYSTEM SUMMARY INSPECTION AND TESTING FORM

Date: 1-20-14 Work Order #: 224134

GENERAL INFORMATION

Site Name: Herman Horn Elementary Owner:
Address: 1002 Riddell RD Address:
City: VINTON State: VA City: State:

Last Inspection Date: 6-13-13 By: FLSA

This inspection is (check one): ☐ monthly ☐ bi-monthly ☐ quarterly ☒ semi-annual ☐ annual Report to:

PART A EQUIPMENT AND ALARMS

1. Central station notified / alarms silenced 8:00 AM / PM Alarms restored 8:30 AM / PM
2. Fire Protection System(s) to be inspected (No., Size, Make, Model) 1 1/4" shotgun, 1 1/4 shotgun, 1 1/4 shotgun wet

PART B OWNER'S SECTION (to be answered by owner or occupant)

	Yes	N/A**	No*
1. Is the property occupied?	✓		
2. Has the occupancy classification or hazard of contents remained the same since the last inspection?	✓		
3. Is the "fire protection system' in service?	✓		
4. Has the "fire protection system" remained in service without modification or activation since last inspection?	✓		
5. If "no" to 4, all changes to building or system(s) fully reviewed, documented and properly protected.	✓		
6. Has the system been examined internally for obstructions where conditions exist that could cause obstructed piping? Date:			✓
7. Has the system piping (dry, preaction, deluge) been checked for proper drainage and/or pitch?	-	✓	
8. Is the "fire protection system" adequately protected from freezing?	✓		
9. Have hazardous locations and materials been identified and safety instructions provided to the technician prior to performing the inspection?	✓		

PART C - TEST NOTIFICATIONS

	PRIOR TO START			UPON COMPLETION		
	Yes	No	Time	Yes	No	Time
Monitoring Entity/Central Station	✓		8:00	✓		8:30
Building Management	✓		8:05	✓		
Building Occupant	✓		8:05	✓		
AHJ/FD						
Other (specify)						
Did alarm central station receive signal properly?	✓		8:30	✓		
Did alarm panel reset properly?	✓		8:30	✓		

PART D - INSPECTION PERFORMED (Copies Attached of Items Checked)

- ☒ Sprinkler System Form
- ☐ Dry Valve Trip Test Report
- ☐ Sprinkler Piping Condition Form
- ☐ Fire Pump Inspection Form
- ☐ _____
- ☐ Standpipe Inspection Form
- ☐ Hydrant Flow Test Form
- ☐ Fire Alarm Detection Form
- ☐ Deluge/Pre-Action Trip Test Report
- ☐ _____
- ☐ Water Storage Tanks Form
- ☐ Private Fire Service Mains Form
- ☐ Backflow Test Form
- ☐ Addendum to Report of Inspection

Fire & Life Safety America, Inc
1407 Mill Race Drive Salem, VA 24153
Tel:(540)378-6160 Fax:(540)378-6171

Fire Protection Systems Report of Inspections

Work Order #: _____ Date: 1-20-14

Site Name	Herman Horn Elementary	Owner	
Address	1004 Riddell RD	Address	
City	VINTON State VA	City	State
Zip	Phone	Zip	Phone

PART I INSPECTOR'S SECTION (all responses reference current inspection)	Yes	N/A	No
A. General			
1. Is the hydraulic data plate in place, permanently marked and securely attached?			X
2. Is the fire department connection(s) in satisfactory condition, couplings free, caps in place,			X
check valves tight and accessible and visible?			X
3. Has the system check valve(s) been internally inspected within the last 5 years? (Date _____)			X
4. Is the visible exterior of the system piping in good condition and free from damage? (Date checked _____)	X		
5. Are visible hangers in place, securely attached and free of corrosion? (Date checked _____)	X		
6. Are system gauges (water/air) in good condition and showing normal pressures?	X		
7. Were system gauges (water/air) checked against a calibrated gauge or replaced in the last 5 years? (Date _____)			X
B. Wet Systems			
1. Are areas protected by wet systems inside the property properly heated?	X		
2. There is no leakage from drain pipes indicating problems with retard chambers, alarm drains or main drain?	X		
3. Are inspection and flow test tags in place and filled out completely?	X		
4. Was a flow test performed from Inspector's test valve and did the alarms operate?	X		
5. Are cold weather valves in the appropriate (open) / (closed) position?		X	
6. Are antifreeze test results satisfactory?		X	
Test Results: Solution Type _____ Freeze Point _____			
C. Dry Systems (see trip test report dated _____)			
1. Are the air pressure and priming water level in accordance with the manufacturer's instructions?		X	
2. Is the air (compressor) or nitrogen supply in service and operating properly?		X	
3. Are quick-opening devices in service? (Semiannual test performed on _____)		X	
4. Are air maintenance device(s) installed and operating properly?		X	
5. Is the intermediate chamber free from leakage and the velocity check free & clear?		X	
6. Were low points drained during this inspection? (Quantity Drained _____) (see Part III.J)		X	
7. Did the heating equipment in the valve enclosure operate at the time of inspection?		X	
D. Special Systems (Deluge—Preaction) (see trip test report dated _____)			
1. Did detection devices test satisfactorily during this inspection?		X	
2. Did the release/activation devices operate properly during detection testing?		X	
3. Is the air pressure and priming water level for the preaction system in accordance with manufacturer's instructions?		X	
E. Alarms (Wet, Dry, Preaction & Deluge)			
1. Are the alarm trim valves in the proper position, sealed and/or locked?	X		
2. Did the water motor and gong/electrical alarms (pressure and water flow) operate properly during testing?	X		
3. Did the central station/monitoring system receive all alarms?	X		
4. Did the low/high air alarms for the system piping/detection operate properly?		X	
5. Did tamper devices operate properly?	X		
F. Sprinklers			
1. Is the proper clearance maintained between the top of the storage and sprinkler deflector?	X		
2. Are all sprinklers free from corrosion, loading or obstruction to spray discharge?	X		
3. Are standard sprinklers in service for less than 50 years / dated after 1920?		X	
4. Are fast response sprinklers in service for less than 20 years?	X		
5. Is a spare head cabinet with spare sprinklers and proper wrenches installed at system riser?	X		
6. Are sprinklers near heating devices of proper temperature rating?	X		
G. Control Valves (see item G.7)			
1. Are sprinkler system control valves in the appropriate position?	X		
2. Were operating stems of all O.S.&Y. valves lubricated, completely closed and reopened? (Date _____)	X		
3. Were all control valves operated through full range and returned to normal position? (Date _____)	X		
4. Are valves free from external leaks?	X		
5. Are valves properly identified with signs?			X
6. Are pressure regulating control valves open, not leaking, maintaining downstream pressure and free from physical damage? (Date tested _____)		X	

ISO 9001:2008 Certified

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7.

Control Valve Maintenance Table	Number	Type	Open	Secured	Closed	Signs	Tampers	Seal No.	Abnormal Condition
City Connection Control Valve									
Tank Control Valves	—								
Pump Control Valves	—								
Sectional Control Valves									
System Control Valves	3	OSY	yes	yes	NO	NO	yes		
Other Control Valves	3	OSY	yes	yes	NO	NO	yes		
Test Header Control Valve	—								
Pressure Reducing Control Valve	—								

4. Water Supply Data

	YES	N.A.	NO
1. Was a water flow test of main drain made at sprinkler riser?			✓

2. Water supply pressures:

a. City ______ psi c. Tank — psi

b. Fire pump — psi d. ______ psi

3. Water flow test at sprinkler riser (in psi):

	Test Pipe Location	Size Test Pipe	Static	Residual	Static		Test Pipe Location	Size Test Pipe	Static	Residual	Static
a	Riser 1	1"	100	No Flow	100	d					
b	Riser 2	1"	95	No Flow	95	e					
c	Riser 3	1"	95	No Flow	95	f					

Explain any "no" answers and comment (see addendum(s) attached if checked ☐)

(1) FLSA couldn't preform Drain TEST DUE TO Drain isn't Piped out.
(2) FLSA couldn't preform Flow switch TEST DUE TO NO inspectors TEST FLSA Tested switch manual.

1. Adjustments or corrections made during this inspection: NONE

(This inspection was performed substantially in accordance with NFPA Standard: 25( )☐ 13( )☐ ___( )☐ ___( )☐ ___( )☐. Although these comments are not the result of an engineering review, the following desirable improvements are recommended (see addendum(s) attached if checked ☐)

None

The information on this form is correct at the time and place of my inspection. The "fire protection system" was left in operational condition upon completion of this inspection except as noted above.

This report was reviewed with:

STEVEN W. KENNEDY — Print Name | [signature] — Signature | [signature] — Technician | 1-20-14 — Date

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FLSA FIRE & LIFE SAFETY AMERICA PROTECTING AMERICA

Fire & Life Safety America, Inc
1407 Mill Race Drive Salem, VA 24153
Tel: (540)378-6160 Fax: (540)378-6171

FIRE PROTECTION SYSTEM SUMMARY INSPECTION AND TESTING FORM

Date: 2/3/14 Work Order #:

GENERAL INFORMATION

Site Name: William Byrd Middle School Owner: SAME
Address: 2910 E. Washington Ave. Address:
City: Vinton State: VA City: State:

Last Inspection Date: 6-13 By: FLSA

This inspection is (check one): ☐ monthly ☐ bi-monthly ☒ quarterly ☐ semi-annual ☐ annual Report to:

PART A EQUIPMENT AND ALARMS

1. Central station notified / alarms silenced 9:30 (AM) / PM Alarms restored 11:00 (AM) / PM
2. Fire Protection System(s) to be inspected (No., Size, Make, Model) 1- 6" Alarm Valve

PART B OWNER'S SECTION (to be answered by owner or occupant)

		Yes	N/A**	No*
1.	Is the property occupied?	✓		
2.	Has the occupancy classification or hazard of contents remained the same since the last inspection?	✓		
3.	Is the "fire protection system" in service?	✓		
4.	Has the "fire protection system" remained in service without modification or activation since last inspection?	✓		
5.	If "no" to 4, all changes to building or system(s) fully reviewed, documented and properly protected.		✓	
6.	Has the system been examined internally for obstructions where conditions exist that could cause obstructed piping? Date: 2008			✓
7.	Has the system piping (dry, preaction, deluge) been checked for proper drainage and/or pitch?		✓	
8.	Is the "fire protection system" adequately protected from freezing?	✓		
9.	Have hazardous locations and materials been identified and safety instructions provided to the technician prior to performing the inspection?		✓	

PART C - TEST NOTIFICATIONS

	PRIOR TO START			UPON COMPLETION		
	Yes	No	Time	Yes	No	Time
Monitoring Entity/Central Station	✓		9:30	✓		11:00
Building Management	✓		9:30	✓		11:00
Building Occupant	✓		9:30	✓		11:00
AHJ/FD						
Other (specify)						
Did alarm central station receive signal properly?				✓		10:30
Did alarm panel reset properly?				✓		10:45

PART D - INSPECTION PERFORMED (Copies Attached of Items Checked)

- ☒ Sprinkler System Form
- ☐ Dry Valve Trip Test Report
- ☐ Sprinkler Piping Condition Form
- ☐ Fire Pump Inspection Form
- ☐ _____
- ☐ Standpipe Inspection Form
- ☐ Hydrant Flow Test Form
- ☐ Fire Alarm Detection Form
- ☐ Deluge/Pre-Action Trip Test Report
- ☐ _____
- ☐ Water Storage Tanks Form
- ☐ Private Fire Service Mains Form
- ☐ Backflow Test Form
- ☐ Addendum to Report of Inspection

Fire & Life Safety America, Inc
1407 Mill Race Drive Salem, VA 24153
Tel:(540)378-6160 Fax:(540)378-6171

Fire Protection Systems Report of Inspections

Work Order #: _____ Date: 2/3/14

Site Name	William Byrd Middle School	Owner	SAME		
Address	2910 E. Washington Ave.	Address			
City	Vinton	State VA	City	State	
Zip		Phone	Zip	Phone	

PART I INSPECTOR'S SECTION (all responses reference current inspection)	Yes	N/A	No
A. General			
1. Is the hydraulic data plate in place, permanently marked and securely attached?	✓		
2. Is the fire department connection(s) in satisfactory condition, couplings free, caps in place, check valves tight and accessible and visible?	✓		
3. Has the system check valve(s) been internally inspected within in the last 5 years? (Date 08)			✓
4. Is the visible exterior of the system piping in good condition and free from damage? (Date checked 6-13)	✓		
5. Are visible hangers in place, securely attached and free of corrosion? (Date checked 6-13)	✓		
6. Are system gauges (water/air) in good condition and showing normal pressures?	✓		
7. Were system gauges (water/air) checked against a calibrated gauge or replaced in the last 5 years? (Date 08)			✓
B. Wet Systems			
1. Are areas protected by wet systems inside the property properly heated?	✓		
2. There is no leakage from drain pipes indicating problems with retard chambers, alarm drains or main drain?	✓		
3. Are inspection and flow test tags in place and filled out completely?	✓		
4. Was a flow test performed from Inspector's test valve and did the alarms operate?	✓		
5. Are cold weather valves in the appropriate (open) / (closed) position?		✓	
6. Are antifreeze test results satisfactory?		✓	
Test Results: Solution Type _____ Freeze Point _____			
C. Dry Systems (see trip test report dated _____)			
1. Are the air pressure and priming water level in accordance with the manufacturer's instructions?		✓	
2. Is the air (compressor) or nitrogen supply in service and operating properly?		✓	
3. Are quick-opening devices in service? (Semiannual test performed on _____)		✓	
4. Are air maintenance device(s) installed and operating properly?		✓	
5. Is the intermediate chamber free from leakage and the velocity check free & clear?		✓	
6. Were low points drained during this inspection? (Quantity Drained _____) (see Part III.J)		✓	
7. Did the heating equipment in the valve enclosure operate at the time of inspection?		✓	
D. Special Systems (Deluge—Preaction) (see trip test report dated _____)			
1. Did detection devices test satisfactorily during this inspection?		✓	
2. Did the release/activation devices operate properly during detection testing?		✓	
3. Is the air pressure and priming water level for the preaction system in accordance with manufacturer's instructions?		✓	
E. Alarms (Wet, Dry, Preaction & Deluge)			
1. Are the alarm trim valves in the proper position, sealed and/or locked?	✓		
2. Did the water motor and gong/electrical alarms (pressure and water flow) operate properly during testing?	✓		
3. Did the central station/monitoring system receive all alarms?	✓		
4. Did the low/high air alarms for the system piping/detection operate properly?		✓	
5. Did tamper devices operate properly?	✓		
F. Sprinklers			
1. Is the proper clearance maintained between the top of the storage and sprinkler deflector?	✓		
2. Are all sprinklers free from corrosion, loading or obstruction to spray discharge?	✓		
3. Are standard sprinklers in service for less than 50 years / dated after 1920?	✓		
4. Are fast response sprinklers in service for less than 20 years?	✓		
5. Is a spare head cabinet with spare sprinklers and proper wrenches installed at system riser?	✓		
6. Are sprinklers near heating devices of proper temperature rating?	✓		
G. Control Valves (see item G.7)			
1. Are sprinkler system control valves in the appropriate position?	✓		
2. Were operating stems of all O.S.&Y. valves lubricated, completely closed and reopened? (Date 6-13)	✓		
3. Were all control valves operated through full range and returned to normal position? (Date 6-13)	✓		
4. Are valves free from external leaks?	✓		
5. Are valves properly identified with signs?	✓		
6. Are pressure regulating control valves open, not leaking, maintaining downstream pressure and free from physical damage? (Date tested _____)		✓	

Fire & Life Safety America, Inc

Fire Protection Systems Report of Inspections

 Work Order #: _____ Date: 2/3/14

G. 7.

Control Valve Maintenance Table	Number	Type	Open	Secured	Closed	Signs	Tampers	Seal No.	Abnormal Condition
City Connection Control Valve									
Tank Control Valves									
Pump Control Valves									
Sectional Control Valves									
System Control Valves									
Other Control Valves									
Test Header Control Valve									
Pressure Reducing Control Valve									

H. Water Supply Data

	YES	N.A.	NO
1. Was a water flow test of main drain made at sprinkler riser?	☒	☐	☐

2. Water supply pressures:

a. City 85 psi c. Tank N/A psi

b. Fire pump N/A psi d. N/A N/A psi

3. Water flow test at sprinkler riser (in psi):

	Test Pipe Location	Size Test Pipe	Static	Residual	Static
a.					
b.					
c.					

	Test Pipe Location	Size Test Pipe	Static	Residual	Static
d.					
e.					
f.					

I. Explain any no answers and comment (see addendum(s) attached if checked ☐)

NOTE: Building is partially sprinkled. FLSA recommends adding sprinklers in Parts of Building that not sprinkled.

J. Adjustments or corrections made during this inspection:

K. This inspection was performed substantially in accordance with NFPA Standard: ☒ 25(14) ☐ 13( ) ☐ ___( ) ☐ ___( )

Although these comments are not the result of an engineering review, the following desirable improvements are recommended (see addendum(s) attached if checked ☐)

The information on this form is correct at the time and place of my inspection. The "fire protection system" was left in operational condition upon completion of this inspection except as noted above.

This report was reviewed with:

Edrow Lewis — Print Name

Edrow Lewis — Signature

By: Fire & Life Safety America, Inc.

Technician

2/5/14 — Date

ISO 9001:2008 Certified

FLSA FIRE & LIFE SAFETY AMERICA PROTECTING AMERICA

Fire & Life Safety America, Inc
1407 Mill Race Drive Salem, VA 24153
Tel: (540)378-6160 Fax: (540)378-6171

FIRE PROTECTION SYSTEM SUMMARY INSPECTION AND TESTING FORM

Date: 2/3/14 Work Order #:

GENERAL INFORMATION

Site Name: Bonsack Elem. School Owner: SAME
Address: 5437 Crumpacker Drive Address:
City: Roanoke State: VA City: State:

Last Inspection Date: 6-2013 By: FLSA

This inspection is (check one): ☐ monthly ☐ bi-monthly ☑ quarterly ☐ semi-annual ☐ annual Report to:

PART A EQUIPMENT AND ALARMS

1. Central station notified / alarms silenced 8:00 (AM) / PM Alarms restored 9:15 (AM) / PM
2. Fire Protection System(s) to be inspected (No., Size, Make, Model) 2 - 3" Wet Systems

PART B OWNER'S SECTION (to be answered by owner or occupant)

		Yes	N/A**	No*
1.	Is the property occupied?	✓		
2.	Has the occupancy classification or hazard of contents remained the same since the last inspection?	✓		
3.	Is the "fire protection system' in service?	✓		
4.	Has the "fire protection system" remained in service without modification or activation since last inspection?	✓		
5.	If "no" to 4, all changes to building or system(s) fully reviewed, documented and properly protected.		✓	
6.	Has the system been examined internally for obstructions where conditions exist that could cause obstructed piping? Date: 2009			✓
7.	Has the system piping (dry, preaction, deluge) been checked for proper drainage and/or pitch?		✓	
8.	Is the "fire protection system" adequately protected from freezing?	✓		
9.	Have hazardous locations and materials been identified and safety instructions provided to the technician prior to performing the inspection?		✓	

PART C - TEST NOTIFICATIONS

	PRIOR TO START			UPON COMPLETION		
	Yes	No	Time	Yes	No	Time
Monitoring Entity/Central Station	✓		8:00	✓		9:15
Building Management	✓		8:00	✓		9:15
Building Occupant	✓		8:00	✓		9:15
AHJ/FD						
Other (specify)						
Did alarm central station receive signal properly?				✓		845
Did alarm panel reset properly?				✓		900

PART D - INSPECTION PERFORMED (Copies Attached of Items Checked)

- ☑ Sprinkler System Form
- ☐ Dry Valve Trip Test Report
- ☐ Sprinkler Piping Condition Form
- ☐ Fire Pump Inspection Form
- ☐ _____
- ☐ Standpipe Inspection Form
- ☐ Hydrant Flow Test Form
- ☐ Fire Alarm Detection Form
- ☐ Deluge/Pre-Action Trip Test Report
- ☐ _____
- ☐ Water Storage Tanks Form
- ☐ Private Fire Service Mains Form
- ☐ Backflow Test Form
- ☐ Addendum to Report of Inspection

Fire & Life Safety America, Inc
1407 Mill Race Drive Salem, VA 24153
Tel:(540)378-6160 Fax:(540)378-6171

Fire Protection Systems Report of Inspections

Work Order #: _____ Date: 2/3/14

Site Name	Bonsack Elem. School	Owner	SAME
Address	5437 Crumpacker Drive	Address	
City	Roanoke State VA	City	State
Zip	24019 Phone	Zip	Phone

PART I INSPECTOR'S SECTION (all responses reference current inspection)	Yes	N/A	No
A. General			
1. Is the hydraulic data plate in place, permanently marked and securely attached?	✓		
2. Is the fire department connection(s) in satisfactory condition, couplings free, caps in place, check valves tight and accessible and visible?	✓		
3. Has the system check valve(s) been internally inspected within in the last 5 years? (Date 09)			✓
4. Is the visible exterior of the system piping in good condition and free from damage? (Date checked 6-13)	✓		
5. Are visible hangers in place, securely attached and free of corrosion? (Date checked 6-13)	✓		
6. Are system gauges (water/air) in good condition and showing normal pressures?	✓		
7. Were system gauges (water/air) checked against a calibrated gauge or replaced in the last 5 years? (Date 09)			✓
B. Wet Systems			
1. Are areas protected by wet systems inside the property properly heated?	✓		
2. There is no leakage from drain pipes indicating problems with retard chambers, alarm drains or main drain?	✓		
3. Are inspection and flow test tags in place and filled out completely?	✓		
4. Was a flow test performed from inspector's test valve and did the alarms operate?	✓		
5. Are cold weather valves in the appropriate (open) / (closed) position?		✓	
6. Are antifreeze test results satisfactory?		✓	
Test Results: Solution Type _____ Freeze Point _____			
C. Dry Systems (see trip test report dated _____)			
1. Are the air pressure and priming water level in accordance with the manufacturer's instructions?		✓	
2. Is the air (compressor) or nitrogen supply in service and operating properly?		✓	
3. Are quick-opening devices in service? (Semiannual test performed on _____)		✓	
4. Are air maintenance device(s) installed and operating properly?		✓	
5. Is the intermediate chamber free from leakage and the velocity check free & clear?		✓	
6. Were low points drained during this inspection? (Quantity Drained _____) (see Part III.J)		✓	
7. Did the heating equipment in the valve enclosure operate at the time of inspection?		✓	
D. Special Systems (Deluge—Preaction) (see trip test report dated _____)			
1. Did detection devices test satisfactorily during this inspection?		✓	
2. Did the release/activation devices operate properly during detection testing?		✓	
3. Is the air pressure and priming water level for the preaction system in accordance with manufacturer's instructions?		✓	
E. Alarms (Wet, Dry, Preaction & Deluge)			
1. Are the alarm trim valves in the proper position, sealed and/or locked?	✓		
2. Did the water motor and gong/electrical alarms (pressure and water flow) operate properly during testing?	✓		
3. Did the central station/monitoring system receive all alarms?	✓	✓	
4. Did the low/high air alarms for the system piping/detection operate properly?	✓	✓	
5. Did tamper devices operate properly?	✓		
F. Sprinklers			
1. Is the proper clearance maintained between the top of the storage and sprinkler deflector?	✓		
2. Are all sprinklers free from corrosion, loading or obstruction to spray discharge?	✓		
3. Are standard sprinklers in service for less than 50 years / dated after 1920?	✓		
4. Are fast response sprinklers in service for less than 20 years?	✓		
5. Is a spare head cabinet with spare sprinklers and proper wrenches installed at system riser?	✓		
6. Are sprinklers near heating devices of proper temperature rating?	✓		
G. Control Valves (see item G.7)			
1. Are sprinkler system control valves in the appropriate position?	✓		
2. Were operating stems of all O.S.&Y. valves lubricated, completely closed and reopened? (Date 6-13)	✓		
3. Were all control valves operated through full range and returned to normal position? (Date 6-13)	✓		
4. Are valves free from external leaks?	✓		
5. Are valves properly identified with signs?	✓		
6. Are pressure regulating control valves open, not leaking, maintaining downstream pressure and free from physical damage? (Date tested _____)		✓	

Fire & Life Safety America, Inc

Fire Protection Systems Report of Inspections

 Work Order #: _____ Date: 2/3/14

G. 7.

Control Valve Maintenance Table	Number	Type	Open	Secured	Closed	Signs	Tampers	Seal No.	Abnormal Condition
City Connection Control Valve	1	PIV	yes	yes	no	yes	yes		
Tank Control Valves									
Pump Control Valves									
Sectional Control Valves									
System Control Valves	2	OS&Y	yes	yes	no	yes	yes		
Other Control Valves	Backflow 2	OS&Y	yes	yes	no	yes	yes		
Test Header Control Valve									
Pressure Reducing Control Valve									

H. Water Supply Data

	YES	NA	NO
1. Was a water flow test of main drain made at sprinkler riser?	☑	☐	☐

2. Water supply pressures:

a. City 120 psi c. Tank N/A psi

b. Fire pump N/A psi d. N/A N/A psi

3. Water flow test at sprinkler riser (in psi):

	Test Pipe Location	Size Test Pipe	Static	Residual	Static
a.	@ Wet	1¼"	120	100	115
b.	@ Wet	1¼"	120	100	115
c.					

	Test Pipe Location	Size Test Pipe	Static	Residual	Static
d.					
e.					
f.					

I. Explain any no answers and comment (see addendum(s) attached if checked ☐)

① 5 year Maintaince & Internal Piping Inspection is due this year. Completed last 2009.

J. Adjustments or corrections made during this inspection:

K. This inspection was performed substantially in accordance with NFPA Standard: ☐ 25( ) ☐ 13( ) ☐ ___( ) ☐ ___( )

Although these comments are not the result of an engineering review, the following desirable improvements are recommended (see addendum(s) attached if checked ☐)

① Complete 5 year Maintaince & Internal Piping Inspection.

The information on this form is correct at the time and place of my inspection. The "fire protection system" was left in operational condition upon completion of this inspection except as noted above.

This report was reviewed with:

Penny Slusher — Print Name

Penny Slusher — Signature

By: Fire & Life Safety America, Inc.

Technician

2/3/14 — Date

Form SR14, Rev Level 2, 1/10/2001