



Aberdeen Fire Rescue Department

Serving the community since 1921

910-944-7888

800 HOLLY STREET
ABERDEEN, NC 28315

Fax: 910-944-9755



Sprinkler Systems

Building: _____

Address: _____

Inspector: _____ Date: _____

Date of Last Inspection: _____ Outstanding Violations: Yes No

GENERAL

Date Sprinklers installed: _____

Were building alterations/renovations made since last inspection? Yes No

Was a new sprinkler added since last inspection? Yes No

Any sprinkler system alteration made since last inspection? Yes No

What is system type? Wet Dry Preaction Deluge

Is building fully protected with sprinklers? Yes No

If not, explain:

Sprinkler Valves

Do sprinkler valves appear in good working order? Yes No

Is dry pipe valve in heated enclosure? Yes No

Are spare sprinklers provided? Yes No

Control Valves

Are control valves sealed? Yes No

Are they locked? Yes No N/A

Do they have tamper switches? Yes No N/A

Fire Department Connections

Are fire department connections clear and unobstructed? Yes No N/A

Are protective caps in place? Yes No N/A

Are connections identified? Yes No N/A

Inspections and Tests Recorded

Are quarterly inspections and tests recorded? Yes No N/A

Are semiannual inspections and tests recorded? Yes No N/A

Are annual inspections and tests recorded? Yes No N/A

Inspections and Tests Recorded

Are 3 year dry Pipe full flow trip tests recorded? Yes No N/A

Are 5 year alarm valve internal inspection recorded? Yes No N/A

20 Years – Is sample of fast response sprinklers tested? Yes No N/A

50 Years – Is sample of standard response sprinklers tested? Yes No N/A

Notes:

Fire Inspector _____

Date: _____