



Department of
Licenses and Inspections
CITY OF PHILADELPHIA

Upload completed forms through the "Submit an Annual Certification Report" option in eCLIPSE www.eclipse.phila.gov.

Sprinkler and Standpipe Systems Annual Certification Form

Use this form to provide results and certify the sprinkler and standpipe systems testing performed.

Submit one certification for each system.

Property Information

Provide the property address where the testing will be performed.

1

Address: _____

Building Owner/Owner's Agent

Provide the contact information for the building owner/owner's agent.

2

Name: _____

Address: _____

Email: _____ Phone: _____

Contractor and Inspector Information

(a) The contractor must provide their contact information and license number, then sign and date.

(b) The sprinkler inspector must provide their contract information as well as license and certification numbers.

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(a) Contractor Information

Contractor Name: _____ Contractor License #: _____

Email: _____ Phone: _____

Contractor Signature: _____ Date: _____

(b) Inspector Information

Inspector Name: _____

Email: _____ Phone: _____

Inspector License #: _____ Certification #: _____

General Information

This section is to be completed by the property owner or agent.

Provide explanation for all "no" answers, except as noted.

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- Is the building occupied? ☐ Yes ☐ No
- Has the building occupancy or hazard or floor layout changed since the last certification? ☐ Yes ☐ No
 - If yes, explain: _____
- Are all systems kept in service? ☐ Yes ☐ No
- Are the test results kept on file? ☐ Yes ☐ No
- Has there been any modifications to the system since the last certification? ☐ Yes ☐ No
 - If yes, explain: _____
- Was there any action of alarm since the last certification? ☐ Yes ☐ No
 - If yes, explain: _____
- Does this certification cover all fire sprinkler and standpipe systems in the building? ☐ Yes ☐ No

Control Equipment

This section is to be completed by the sprinkler inspector.

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- Are sprinklers in good condition and free of obstruction? ☐ Yes ☐ No
- Are spare sprinklers and wrenches available? ☐ Yes ☐ No
- Are areas protected by wet systems properly heated? ☐ Yes ☐ No
- Are hydraulic nameplates in place on risers? ☐ Yes ☐ No
- Are alarm devices provided and in good condition? ☐ Yes ☐ No
- Do any sprinklers need to be tested or replaced? ☐ Yes ☐ No
 - If yes, explain: _____
- Are all sprinkler pipes and fittings in good condition? ☐ Yes ☐ No
- Are gauges on all systems in good condition, indicating the proper pressure? (tested or replaced every 5 years) ☐ Yes ☐ No
- Are all waterflow alarm devices tested satisfactory? ☐ Yes ☐ No
- Are main drains tested on all systems, results recorded, and left at the site? ☐ Yes ☐ No

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Control Equipment
(Continued)

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- Are there any changes in drain tests form last year? ☐Yes ☐No
 - If yes, explain: _____
- Drain Test Location: _____ Size: _____ Before: _____ Flow: _____ After: _____
- Are hangers in good condition and securely attached to structure and piping? ☐Yes ☐No
- Is the type of antifreeze agent listed on the tag? ☐Yes ☐No
- Are the specific gravity test results for antifreeze systems acceptable? ☐Yes ☐No
- Are downstream pressures on pressure reducing valves satisfactory? ☐Yes ☐No
- Are dry pipe system low point drains properly drained? ☐Yes ☐No
- Is air pressure on dry pipe systems adequate? ☐Yes ☐No
- Are dry pipe valve tests conducted with quick operating devices (QOD)? ☐Yes ☐No
- Are tests of QOD's satisfactory? ☐Yes ☐No
- Are dry valves trip tested, results recorded, and left at site? ☐Yes ☐No
- Are dry valves full flow tested, recorded and left at the site (3 year test – 2018, 2011, 2014)? ☐Yes ☐No
- Are air maintenance devices on dry systems tested satisfactory? ☐Yes ☐No
- Are dry pipe valve rooms properly heated? ☐Yes ☐No
- Do air pressure relief valves have the proper rating? ☐Yes ☐No
- Are PV valves opened fully and verified that the pump was running? ☐Yes ☐No
- Are results of full flow tests on pressure regulating valves recorded and left at site (5 year test- 2010-2015-2020)? ☐Yes ☐No
- Are valves in proper open or closed position, and properly supervised? ☐Yes ☐No
- Are valves protected from damage, accessible & operable? ☐Yes ☐No
- Are low air pressure alarms on dry systems tested satisfactorily? ☐Yes ☐No
- Are deluge / preaction valves trip tested by detector satisfactorily and results left at the site? ☐Yes ☐No
- Are the preaction system supervisory air pressures correct? ☐Yes ☐No
- Are strainers checked and cleaned? ☐Yes ☐No
- Are check valves given their 5-year maintenance (Year 2010-2015-2020)? ☐Yes ☐No
- Are the sprinkler piping given its 5-year internal inspection (Year 2010-2015-2020)? ☐Yes ☐No
- Are backflow preventers operational? ☐Yes ☐No
- Are backflow preventers tested per the Plumbing Code? ☐Yes ☐No
- Are there Omega sprinklers on the system? ☐Yes ☐No
 - If yes, describe how many and their location: _____
- Are there O-ring voluntary recall sprinklers on the system? ☐Yes ☐No
 - If yes, describe how many and their location: _____
- Are there Star ME-1 recall sprinklers on the system? ☐Yes ☐No
 - If yes, describe how many and their location: _____
- Are there any other sprinklers on the system that have been recalled? ☐Yes ☐No
 - If yes, describe type, how many and their location: _____

Fire Department Connections

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- Are Fire Department connections visible and accessible with caps and plugs in place? ☐Yes ☐No
- Are proper signs in place per the Philadelphia Fire Code? ☐Yes ☐No
- Are automatic drain valves / ball drips operating? ☐Yes ☐No
- Are piping backflushed? ☐Yes ☐No



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Standpipes

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Standpipes: ☐ Yes ☐ No Type: ☐ Wet ☐ Dry

Class and quantity of each: Class I: _____ Class II: _____ Class III: _____

Static pressure at gauge: _____ psi Flow condition at highest outlet: _____ gpm (Every 5 years – 2015-2020)

- Are fittings and piping in good condition? ☐ Yes ☐ No
- Are supports and hangers in good condition and well secured to piping and structure? ☐ Yes ☐ No
- Are hose valve handles in place? ☐ Yes ☐ No
- Are outlet caps and gaskets in place? ☐ Yes ☐ No
- Are restricting devices in proper locations? ☐ Yes ☐ No
- Is pressure regulating valves properly set? ☐ Yes ☐ No
- Is a full flow test conducted by a method resulting in a documented minimum flow of 250 gallons and a minimum rate of 250 gpm (5 year test – 2015-2020)? ☐ Yes ☐ No
- Are hose threads correct to national standards? ☐ Yes ☐ No
- Are hose cabinet doors, glazing and latches in good condition? ☐ Yes ☐ No
- Are hose cabinets identified, free of obstructions and accessible? ☐ Yes ☐ No
- Are hoses removed, inspected and re-racked? ☐ Yes ☐ No
- Are hose test dates current (maximum 3 years, 5 years if new)? ☐ Yes ☐ No
- Are hose nozzles and gaskets in place? ☐ Yes ☐ No
- Are hose nozzles operable and free of obstruction? ☐ Yes ☐ No
- Are dry standpipes given their hydrostatic test (5 year test – 2015-2020)? ☐ Yes ☐ No

Fire Pump

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Fire Pump: ☐ Yes ☐ No Type: ☐ Diesel ☐ Electric

- Are fire pumps flow tested with the results recorded and left at the site? ☐ Yes ☐ No
- Do fire pumps operate per specification at chum, 100% and 150% flow? ☐ Yes ☐ No
- Are all relief valves functioning properly? ☐ Yes ☐ No
- Are packing glands adjusted? ☐ Yes ☐ No
- Are motor and pump bearings lubricated? ☐ Yes ☐ No
- Are pump alarms functioning properly? ☐ Yes ☐ No
- Are engine coolant systems operating satisfactorily? ☐ Yes ☐ No
- Are pump controllers functioning properly and left in automatic mode? ☐ Yes ☐ No
- Are batteries and cables in good condition? ☐ Yes ☐ No
- Are fuel tanks full? ☐ Yes ☐ No
- Is pump room ventilation operating properly? ☐ Yes ☐ No
- Are exhaust systems in good condition and properly insulated? ☐ Yes ☐ No
- Where the fire pump is connected to standby power, is the automatic transfer switch tested? ☐ Yes ☐ No

Declaration & Signature

By accepting this statement, I, the certified technician shown on this form, certify that this fire sprinkler and standpipe 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/owner's agent for corrective action.

The certification must be presented by the Contractor to the building owner/owner's agent upon completion and shall be maintained on the property and made available for inspection upon request

The Deficiency Form (TP_013_F) shall be submitted to the Department of Licenses and Inspections when deficiencies are not corrected within 45 days.

Signature of Inspector: _____ Date: _____

Signature of Building Owner/Owner's Agent: _____ Date: _____