

# NEBRASKA STATE FIRE MARSHAL'S OFFICE

## Contractor's Material and Test Certificate for Underground Piping

**PROCEDURE**

Upon completion of work, inspection and tests shall be made by the contractor's representative and witnessed by an owner's representative. All defects shall be corrected and system left in service before contractor's personnel finally leave the job.

A certificate shall be filled out and signed by both representatives. Copies shall be prepared for approving authorities, owners and contractor. It is understood the owner's representative's signature in no way prejudices any claim against contractor for faulty material, poor workmanship, or failure to comply with approving authority's requirements or local ordinances.

PROPERTY NAME	DATE
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PROPERTY ADDRESS

<b>PLANS</b>	ACCEPTED BY APPROVING AUTHORITIES (NAMES)		
	ADDRESS		
	INSTALLATION CONFORMS TO ACCEPTED PLANS	<input type="checkbox"/> YES	<input type="checkbox"/> NO
	EQUIPMENT USED IS APPROVED IF NO, EXPLAIN DEVIATIONS	<input type="checkbox"/> YES	<input type="checkbox"/> NO
<b>INSTRUCTIONS</b>	HAS PERSON IN CHARGE OF FIRE EQUIPMENT BEEN INSTRUCTED AS TO LOCATION OF CONTROL VALVES AND CARE AND MAINTENANCE OF THIS NEW EQUIPMENT? IF NO, EXPLAIN	<input type="checkbox"/> YES	<input type="checkbox"/> NO
	HAVE COPIES OF APPROPRIATE INSTRUCTIONS AND CARE AND MAINTENANCE CHARTS BEEN LEFT ON PREMISES? IF NO, EXPLAIN	<input type="checkbox"/> YES	<input type="checkbox"/> NO
<b>LOCATION</b>	SUPPLIES BUILDINGS		
<b>UNDERGROUND PIPES AND JOINTS</b>	PIPE TYPES AND CLASS	TYPE JOINT	
	PIPE CONFORMS TO _____ STANDARD	<input type="checkbox"/> YES	<input type="checkbox"/> NO
	FITTINGS CONFORM TO _____ STANDARD IF NO, EXPLAIN	<input type="checkbox"/> YES	<input type="checkbox"/> NO
	JOINTS NEEDING ANCHORAGE CLAMPED, STRAPPED, OR BLOCKED IN ACCORDANCE WITH _____ STANDARD IF NO, EXPLAIN	<input type="checkbox"/> YES	<input type="checkbox"/> NO
<b>TEST DESCRIPTION</b>	<p><b>FLUSHING:</b> Flow the required rate until water is clear as indicated by no collection of foreign material in burlap bags at outlets such as hydrants and blow-offs. Flush at flows not less than 390 GPM (1476 L/min) for 4-inch pipe, 880 GPM (3331 L/min) for 6-inch pipe, 1560 GPM (5905 L/min) for 8-inch pipe, 2440 GPM (9235 L/min) for 10-inch pipe, and 3520 GPM (13323 L/min) for 12-inch pipe. When supply cannot produce stipulated flow rates, obtain maximum available.</p> <p><b>HYDROSTATIC:</b> Hydrostatic tests shall be made at not less than 200 psi (138 bars) for two hours or 50 psi (34 bars) above static pressure in excess of 150 psi (103 bars) for two hours.</p> <p><b>LEAKAGE:</b> New pipe laid with rubber gasketed joints shall, if the workmanship is satisfactory, have little or no leakage at the joints. The amount of leakage at the joints shall not exceed 2 qts. Per hr. (1.89 L/h) per 100 joints irrespective of pipe diameter. The leakage shall be distributed over all joints. If such leakage occurs at a few joints the installation shall be considered unsatisfactory and necessary repairs made. The amount of allowable leakage specified above may be increased by 1 fl oz per in valve diameter per hr (30 mL/25 mmh) for each metal seated valve isolating the test section. If dry barrel hydrants are tested with the main valve open, so the hydrants are under pressure, an additional 5 oz per minute (150 mL/min) leakage is permitted for each hydrant.</p>		
<b>FLUSHING TESTS</b>	NEW UNDERGROUND PIPING FLUSHED ACCORDING TO _____ STANDARD BY (COMPANY) IF NO, EXPLAIN	<input type="checkbox"/> YES	<input type="checkbox"/> NO
	HOW FLUSHING FLOW WAS OBTAINED <input type="checkbox"/> PUBLIC WATER <input type="checkbox"/> TANK OR RESERVOIR <input type="checkbox"/> FIRE PUMP	THROUGH WHAT TYPE OPENING <input type="checkbox"/> HYDRANT BUTT <input type="checkbox"/> OPEN PIPE	
	LEAD-INS FLUSHED ACCORDING TO _____ STANDARD BY (COMPANY) IF NO, EXPLAIN	<input type="checkbox"/> YES	<input type="checkbox"/> NO
	HOW FLUSHING FLOW WAS OBTAINED <input type="checkbox"/> PUBLIC WATER <input type="checkbox"/> TANK OR RESERVOIR <input type="checkbox"/> FIRE PUMP	THROUGH WHAT TYPE OPENING <input type="checkbox"/> Y CONN. TO FLANGE & SPIGOT <input type="checkbox"/> OPEN PIPE	

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HYDROSTATIC TEST	ALL NEW UNDERGROUND PIPING HYDROSTATICALLY TESTED AT _____ PSI FOR _____ HOURS	JOINTS COVERED <input type="checkbox"/> YES <input type="checkbox"/> NO	
LEAKAGE TEST	TOTAL AMOUNT OF LEAKAGE MEASURED _____ GALS FOR _____ HOURS		
	ALLOWABLE LEAKAGE _____ GALS FOR _____ HOURS		
HYDRANTS	NUMBER INSTALLED	TYPE AND MAKE	
		ALL OPERATE SATISFACTORILY <input type="checkbox"/> YES <input type="checkbox"/> NO	
CONTROL VALVES	WATER CONTROL VALVES LEFT WIDE OPEN IF NO, STATE REASON		
		<input type="checkbox"/> YES <input type="checkbox"/> NO	
	HOSE THREADS OF FIRE DEPARTMENT CONNECTIONS AND HYDRANTS INTERCHANGEABLE WITH THOSE OF FIRE DEPARTMENT ANSWERING ALARM		
		<input type="checkbox"/> YES <input type="checkbox"/> NO	
REMARKS	DATE LEFT IN SERVICE		
SIGNATURES	NAME OF INSTALLING CONTRACTOR		
	TESTS WITNESSED BY		
	FOR PROPERTY OWNER (SIGNED)	TITLE	DATE
	FOR INSTALLING CONTRACTOR (SIGNED)	TITLE	DATE
	FOR AUTHORITY HAVING JURISDICTION (IF WITNESSED)	TITLE	DATE
ADDITIONAL EXPLANATION AND NOTES			

SEND TO: Nebraska State Fire Marshal - 246 S 14<sup>th</sup> St, Ste 1 - Lincoln, NE 68508-1804  
A copy of this completed form shall be forwarded to the State Fire Marshal's Office and a duplicate shall be maintained at the system riser.