



CLEMENTON FIRE MARSHAL'S OFFICE

STANDPIPE SYTEM/HOSE CABINET TEST REPORT

Only this document will be accepted by the Borough of Clementon Bureau of Fire Safety for annual testing purposes as required by the New Jersey Uniform Fire Safety Code and applicable N.F.P.A. standards.

NOTE: USE THE TAB BUTTON TO MOVE THE CURSOR

PROPERTY NAME: _____ DATE OF INSPECTION: ____ / ____ /20

PROPERTY ADDRESS: _____ INSPECTOR: _____

TESTING AGENCY NAME: _____

NJ-DFS BUSINESS PERMIT # _____ PHONE NUMBER: _____

****ALL STANDPIPE SYSTEMS SHALL MEETE THE FLOW DEMANDS REQUIRED AT THE TIME OF INSTALLATION**

1. TYPE OF SYSTEM: WET DRY CLASS I CLASS II CLASS III
2. FIRE DEPARTMENT CONNECTION PROPERLY IDENTIFIED: YES NO
LOCATION: _____
3. ARE VALVES IDENTIFIED WITH SIGN? YES NO
4. ALL STANDPIPE VALVES OPERATED AT ALL LOCATIONS: YES NO
5. ALL HOSE STATION VALVES OPERATED AT ALL LOCATIONS: YES NO
6. ANY MISSING STANDPIPE VALVE WHEELS? YES NO WERE MISSING WHEELS REPLACED? YES NO
7. ALL HOSE CABINET DOORS HAVE VISUAL IDENTIFICATION GLASS PANELS? YES NO
8. HOSE CABINET DOORS WITH NO GLASS PANELS HAVE APPROVED SIGN? YES NO
9. STANDPIPE THREADS COMPTIBLE WITH FIRE DEPT (N.S.T.)? YES NO
THREADS FREE OF DAMAGE? YES NO CONNECTIONS ACCESSIBLE? YES NO
10. MAIN DRAIN TEST? YES NO N/A STATIC PRESSURE _____ PSI RESIDUAL PRESSURE _____ PSI
11. HYDROSTATIC TEST PERFORMED? YES NO DATE OF LAST HYDROSTATIC TEST: ____ / ____ /20
12. 5-YEAR FLOW TEST PERFORMED? YES NO IF YES, RECORD RESULTS BELOW:
OUTLET USED: _____ OUTLET SIZE: 1½ 2½
STATIC PRESSURE _____ PSI RESIDUAL PRESSURE _____ PSI FLOW _____ GPM
FLOW & PRESSURE ACCEPTABLE: YES NO GAUGES RECALIBRATED? YES NO

DEFICIENCIES _____

SIGNATURE OF INSPECTION _____ DATE: ____ / ____ /20

SIGNATURE OF OWNERS/REPRESENTATIVE _____ DATE: ____ / ____ /20