



SHAKOPEE FIRE DEPARTMENT

Fire & Life Safety for a Growing Community



Certificate of Completion Fire Sprinkler Systems

This form must be completed and available to the inspector upon their arrival to conduct a final fire sprinkler system performance test.

Location of System

Bus. Name: _____

Address: _____

City/State/Zip: _____

Bus. Phone: _____

Contact Person: _____

System Installer

Bus. Name: _____

Address: _____

City/State/Zip: _____

Bus. Phone: _____

Contact Person: _____

Underground Piping Inspection Dates

Refer to Contractor's Material & Test Certificate for Underground Piping

200 psi hydrostatic: _____

Flushing: _____

Conductivity: _____

Bacteria Sample: _____

Aboveground Piping Inspection

- Copy of Fire Sprinkler Owner's Information Sheet
- Copy of Contractor's Material & Test Certificate for Aboveground Piping
- List of spare sprinklers included in sprinkler head cabinet (NFPA 13 – 6.2.9.7) 2010
- All valves identified (NFPA 13 – 6.7.4.3.1) 2010
- Identification of Inspector's Test and low point drains provided (NFPA 13 – 8.16.2.5.3.7) 2010
- Hydraulic Information Sign(s) provided (NFPA 13 – 24.5) 2010
- General Information Sign(s) provided (NFPA 13 – 24.6) 2010
- Bypass meter provided on sprinkler system check valve (SPUC Local requirement)
- Are all valves secured in an approved manner and have electronic monitoring provided

Comments: _____

System Installer Certification

I, _____, representing the firm _____, have installed the fire alarm system/fire protection monitoring system at the location detailed on this certificate in accordance with the approved plans and nationally recognized standards. I have tested the system in accordance with the manufacturer's specifications and the appropriate NFPA requirements and local ordinances.

System Installer: _____ Date: _____