



Borough of Eatontown
 Department of Construction & Codes
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Installation of Sprinkler System Checklist

Permit #: _____	Date: _____
Project Name: _____	
Address: _____	Block: _____ Lot: _____
Name of Contractor: _____	
Address of Contractor: _____	
Contractor Phone Numbers for Office: _____	Cellular: _____
Contractor License #: _____	Expiration Date: _____

Checklist Legend: **OK = No Problems** **N = Need to Address** **N/A = Not Applicable**

Working Plans	OK	N	N/A	Comments
Name of owner and occupant				
Location, including street address				
Point of compass				
Full height cross section or schematic diagram, including structural member information if required for clarity and including ceiling construction and method of protection for nonmetallic piping				
Location of partitions				
Location of fire walls				
Occupancy class of each area or room				
Location and size of concealed spaces, closets, attics, and bathrooms				
Any small enclosures in which no sprinklers are to be installed				

Size of city main in street and whether dead-end or circulating; if dead end, direction and distance to nearest circulating main; and city main test results and system elevation relative to test hydrant.				
Other sources of water supply, with pressure or elevation.				
Make, type, model, and nominal K-factor of sprinklers, including sprinkler identification number				
Temperature rating and location of high-temperature sprinklers				
Total area protected by each system on each floor				
Number of sprinklers on each riser per floor				
Total number of sprinklers on each dry pipe system, pre-action system, combined dry pipe-preaction system, or deluge system				
Approximate capacity in gallons of each dry pipe system				
Pipe type and schedule of wall thickness				
Nominal pipe size and cutting lengths of pipe (or center-to-center dimensions) Where typical branch lines pre-vail, it shall be necessary to size only one typical line				
Location and size of riser nipples				
Type of fittings and joints and location of all welds and bends. The contractor shall specify on drawing any sections to be shop welded and the type of fittings or formations to be used				
Type and locations of hangers, sleeves, braces, and methods of securing sprinklers when applicable				
All control valves, check valves, drain pipes, and test connections				
Make, type, model, and size of alarm or dry pipe valve				
Make, type, model, and size of preaction or deluge valve				
Kind and location of alarm bells				
Size and location of standpipe risers, hose outlets, hand hose, monitor nozzles, and related equipment				
Private fire service main sizes, lengths, locations, weights, materials, point of connection to city main; the sizes, types and locations of valves, valve indicators, regulators, meters, and valve pits; and the depth that the top of the pipe is laid below grade				
Piping provisions for flushing				
Where the equipment is to be installed as an addition to an existing system, enough of the existing system indicated on the plans to make all conditions clear				
For hydraulically designed systems, the information on the hydraulic data nameplate				

A graphic representation of the scale used on all plans				
Name and address of contractor				
Hydraulic reference points shown on the plan that correspond with comparable reference points on the hydraulic calculation sheets				
The minimum rate of water application (density or flow or discharge pressure), the design area of water application, in-rack sprinkler demand, and the water required for hose streams both inside and outside				
The total quantity of water and the pressure required noted at a common reference point for each system				
Relative elevations of sprinklers, junction points, and supply or reference points				
If room design method is used, all unprotected wall openings throughout the floor protected				
Calculation of loads for sizing and details of sway bracing				
The setting for pressure-reducing valves				
Information about backflow preventers (manufacturer, size, type)				
Information about listed antifreeze solution used (type and amount)				
Size and location of hydrants showing size and number of outlets and if outlets are to be equipped with independent gate valves. Whether hose houses and equipment are to be provided, and by whom, shall be indicated. Static and residual hydrants that were used in flow tests shall be shown				
Size, location, and piping arrangement of fire department connections				
Ceiling/roof heights and slopes not shown in the full height cross section				
Edition year of NFPA 13 to which the sprinkler system is designed				

Additional Comments:

Owner's Information Certificate

Name/Address of property to be protected with sprinkler protection:

Name of Owner: _____

Existing or planned construction is:

- Fire resistive or noncombustible
- Wood frame or ordinary (masonry walls with wood beams)
- Unknown

Is the system installation intended for one of the following special occupancies:

- | | | |
|---------------------------------|------------------------------|-----------------------------|
| Aircraft hangar | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Fixed guideway transit system | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Race track stable | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Marine terminal, pier, or wharf | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Airport terminal | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Aircraft engine test facility | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Power plant | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Water-cooling tower | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

If the answer to any of the above is "yes," the appropriate NFPA standard should be referenced for sprinkler density/area criteria.

Indicate whether any of the following special materials are intended to be present:

- | | | |
|---------------------------------------|------------------------------|-----------------------------|
| Flammable or combustible liquids | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Aerosol products | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Nitrate film | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Pyroxylin plastic | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Compressed or liquefied gas cylinders | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Liquid or solid oxidizers | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Organic peroxide formulations | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Idle pallets | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

If the answer to any of the above is "yes," describe type, location, arrangement, and intended maximum quantities.

FIGURE A.22.1(b) Owner's Information Certificate.

Indicate whether the protection is intended for one of the following specialized occupancies or areas:

- | | | |
|--|---|-----------------------------|
| Spray area or mixing room | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Solvent extraction | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Laboratory using chemicals | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Oxygen-fuel gas system for welding or cutting | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Acetylene cylinder charging | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Production or use of compressed or liquefied gases | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Commercial cooking operation | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Class A hyperbaric chamber | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Cleanroom | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Incinerator or waste handling system | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Linen handling system | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Industrial furnace | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Water-cooling tower | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

If the answer to any of the above is "yes," describe type, location, arrangement, and intended maximum quantities.

Will there be any storage of products over 12 ft (3.6 m) in height?
 Yes No

If the answer is "yes," describe product, intended storage arrangement, and height. _____

Will there be any storage of plastic, rubber, or similar products over 6 ft (1.5 m) high except as described above?
 Yes No

If the answer is "yes," describe product, intended storage arrangement, and height. _____

I certify that I have knowledge of the intended use of the property and that the above information is correct.

Signature of owner's representative or agent: _____

Date: _____

Name of owner's representative or agent completing certificate (print): _____

Relationship and firm of agent (print): _____

FIGURE A.22:1(b) *Continued*