Facility	
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## WET & DRY SPRINKLER SYSTEM MONTHLY INSPECTION & TESTING (Jan-Jun)

Visual Inspect	<u>tion - G</u>	iauges: c	heck for No	ormal Pres	sure & Cond	lition, pe	r <b>NFPA 25 (</b> 1	1998 ed) §2	!-2.4.1			
	Record Pressure Readings; If fail, enter Letter P or C to indicate type of problem									Report Abn		
	1	2	3	4	5	6	7	8	9	Conditions	to	
Guage ID						<u> </u>		<u> </u>	1	Supervisor		
Type Sys <sup>4</sup>		1				<u> </u>			1	_		
Bldg Location										_		
Normal PSI		<u></u>								<u>Date</u>	Inspector	
Jan												
Feb												
Mar												
Apr												
May												
Jun												
_												
Visual Inspect	tion - V	<u>'alves</u> : c	heck for No	ormal Posi	tion, <b>A</b> ccess	ible, Leak	s, <b>S</b> upervis	ed, D,	per NFPA 2	5 (1998 ed)§	2-2.7	
	√=Pass	all above cl	necks; If ar	ny fails, ent	er P, A, L, S, c	or I (see ab	ove) to indi	cate type o	f problem	Report Abn	ormal	
	1	2	3	4	5	6	7	8	9	Conditions to		
Valve ID		<u> </u>			<u> </u>	<b></b>	1	<u> </u>		Supervisor		
Type Sys <sup>4</sup>						<u> </u>		<u> </u>	1	_		
Bldg Location		<u> </u>					<u> </u>		1	<u>Date</u>	Inspector	
Jan												
Feb												
Mar												
Apr												
May												
Jun												
<u> </u>		<u> </u>			<u> </u>						<u>.                                    </u>	
Visual Inspect	tion - B	ackflow '	<u>Valves</u> : c	heck for <b>L</b>	eaks, Valve	osition,	per NFPA	25 (1998 e	d)§9-6.1			
		√=Pass all	above ched	cks; If fail	enter Letter	P or L to in	ndicate type	of probler	n			
	1	2	3	4	5	6	7	8	9	Report Ahn	Report Abnormal	
BF Valve ID		†			<u> </u>	1	†	<u> </u>	<del></del>	Conditions		
Type Sys <sup>4</sup>		†			<u> </u>	<del>                                     </del>	<del>                                     </del>	<u> </u>	†	Supervisor		
Bldg Location		†	1		<del>                                     </del>	†	+	†	1	<u>Date</u>	Inspector	
Jan		<del>†                                      </del>	1		<del>                                     </del>	<del>                                     </del>	†	†	<del>†                                      </del>	<u> </u>		
Feb		+			<del>                                     </del>	<del>                                     </del>	+	<del>                                     </del>	+	+	+	
1 60		1	l l	1		1	I	I			1	

Mar Apr May Jun