


Property Information			Contractor or Licensed Owner Information		
Building Name			Name		
Address			Address		
City			City	St.	Zip
Contact Person			License #	Phone	
Phone			<input type="checkbox"/> SFM	Job #	
			<input type="checkbox"/> CSLB	Misc.	

Riser Information			Main Drain Test (ANNUAL)				
Riser No.	Location	Riser Diameter	Main Drain Diameter	Initial Static Pressure	Residual Pressure	Final Static Pressure	P, F, N/A

This building has more than 5 risers. See additional AES 2.9 form attached. Number of AES 2.9 forms attached: _____

5-Year Inspection, Testing, and Maintenance
Includes ALL Quarterly and Annual Inspections, Tests, and Maintenance Items

I = Inspection T = Test M = Maintenance				P = Pass F = Fail N/A = Not Applicable		
Item		Description	NFPA 25 CA ed. Reference	Date	Comments Only	P, F, N/A
1.1	I	Control Valves – Identification Sign	13.3.1			
1.2	I	Control Valves – Inspection	13.3.2			
1.3	I	Waterflow Alarm Devices	5.2.5			
1.4	I	Supervisory Alarm Devices	5.2.5			
1.5	I	Gauges (Prection/Deluge Valves) <i>Pass = Normal Pressures</i>	13.4.3.1.3			
1.6	I	Water Supply Pressure	13.4.3.1.3.1			psi
1.7	I	Detection System (Pilot Line) Air Pressure	13.4.3.1.5			psi
1.8	I	Hydraulic Design Information Sign <i>(For Hydraulically Designed Systems)</i>	5.2.6			
1.9	I	General Information Sign <i>(Not Required for System Prior to 2007 Edition NFPA 13)</i>	5.2.8			
1.10	I	Fire Department Connections	13.7			
1.11	I	Deluge Valves – Exterior Inspection	10.2.2 13.4.3.1.6			
1.12	I	Pressure Reducing Valves	13.5.1.1			
1.13	I	Backflow Preventers	13.6.1			
1.14	I	Pipe and Fittings	10.2.4 10.2.4.1			
1.15	I	Drainage	13.2.4			
1.16	I	Detection Systems	10.2.3			
1.17	I	Master Pressure Reducing Valves	13.5.4.1			

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1.18	I	UHSWSS - Detectors	10.4.2				
1.19	I	Buildings (Freeze Protection)	4.1.1.1		Owner's Responsibility		
1.20	I	Low Temperature Alarm	13.4.3.1.2				
1.21	I	Nozzles	10.2.1.6 10.2.5				
1.22	I	Pipe and Fittings	10.2.4.1				
1.23	I	Hangers and Supports	10.2.4.2				
1.24	I	Deluge Valve - Interior inspection	13.4.3.1.7				
2.1	T	Waterflow Alarm Devices 90 sec max. Enter time	5.3.3 13.2.6		sec.		
2.2	T	Main Drain Test (Enter Data on Page 1 of this Form)	13.2.5 13.3.3.4				
2.3	T	Priming Water Level Test	13.4.3.2.1				
2.4	T	Valve Trip Test - Full Flow	10.2.2 13.4.3.2				
2.5	T	Valve Trip Time	10.3.4.2 13.4.3.2.12		sec		
2.6	T	Pressure at the Hydraulically Most Remote Nozzle or Sprinkler	10.3.4.4.1 13.4.3.2.7.1		psi		
2.7	T	Pressure at Deluge Valve	10.3.4.4.2 13.4.3.2.7.2		psi		
2.8	T	Pressure Readings Acceptable	10.3.4.4.3 13.4.3.2.7.3		<input type="checkbox"/> Yes <input type="checkbox"/> No		
2.9	T	Water Discharge Pattern at Nozzle or Sprinkler	10.3.4.3				
2.10	T	Multiple System Test	10.3.5 13.4.3.2.8				
2.11	T	Manual Actuation Device Test	10.3.6 13.4.3.2.6				
2.12	T	Deluge Valve - Interior inspection	13.4.3.1.7				
2.13	T	Low Air Pressure Alarm Test	13.4.3.2.13				
2.14	T	Low Temperature Alarm Test	13.4.3.2.14				
2.15	T	Automatic Air Pressure Maintenance Device Test	13.4.3.2.15				
2.16	T	Control Valve - Position	13.3.3				
2.17	T	Control Valve - Operation	13.3.3				
2.18	T	Valve Supervisory Devices	13.3.3.5				

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Item		Description	NFPA 25 CA ed. Reference	Date	Comments Only	P,F,N/A
2.19	T	Backflow Preventer Assemblies	13.6.2			
2.20	T	Pressure Reducing Valves	13.5.1.2			
2.21	T	Flushing of Connection to Riser <i>(Part of Annual Test)</i>	10.3 Table 10.1.1.2			
2.22	T	Nozzles	10.2.16 10.3.4.3			
2.23	T	Water Spray System Test	10.3 13.4.3.2			
2.24	T	Waterflow Alarm	5.3.3			
2.25	T	UHSWSS	10.4			
2.26	T	Detection Systems	10.2.3			
2.27	T	Check Valves <i>(Includes Detector Check Valves)</i>	13.4.2.1			
3.1	M	Control Valves	10.1.5 13.3.4			
3.2	M	Repair Air Leaks	13.4.3.3.1			
3.3	M	Interior Inspected and Cleaned <i>(All Deluge Valves)</i>	13.4.3.1.7 13.4.3.3.2			
3.4	M	Low Points in System Drained	13.4.3.3.3			
3.5	M	Additional Manufacturer's Maintenance Requirements Satisfied	13.4.3.3.4			
3.6	M	Strainers, Filters, Restricted Orifices, and Diaphragm Chambers <i>(Includes Baskets and Screens)</i>	10.2.1.4 10.2.7 13.4.3.1.8			
3.7	M	Water Spray System/Deluge Valve	10.2.1.4 10.2.2 13.4.3.3			
3.8	M	Detection Systems	10.2.3			
3.9	M	Backflow Preventer	13.6.3			
3.10	M	Check Valves <i>(Includes Detector Check Valves)</i>	13.4.2.2			
3.11	M	FDC - Backflush	14.3.2.3 14.3.2.4			
3.12	M	Obstruction Investigation Required. If "Yes", See Deficiencies and Comments Section for Results	14.3		<input type="checkbox"/> Yes <input type="checkbox"/> No	
3.13	M	System Returned to Service	4.5.3 13.4.3.2.10 15.7		<input type="checkbox"/> Yes <input type="checkbox"/> No	

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D = Deficiency C = Comment (Indicate type)

Item	Date	Riser	D	C	Deficiencies and Comments
<i>Indicate all equipment, devices and parts that were repaired or replaced</i>					

<input type="checkbox"/> Check here if additional Deficiencies and Comments are listed on Form AES 9.	Number attached:
<input type="checkbox"/> See Correction Form AES 10 for corrected deficiencies.	Number attached:

I hereby certify that the fire protection equipment listed above has been fully inspected, tested, and maintained on this date by the company indicated above, in accordance with CCR, Title 19, Sections 901 to 906 and that the equipment is fully operable except as noted in the "Deficiencies and Comments" section of this form.

Print Name			
Signature		Date	