

27142

3802 South 2300 East
Salt Lake City, Utah 84109-3421
Contractor License No. 92-252208-5501
801.277.6464 • 800.273.6465 • 801.278.2199 - FAX

DATE 5/17/2019

Capitol Reef Resort
2600 East Highway 24
Torrey, UT 84775

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2600 East Highway 24
Torrey, UT 84775

[illegible]

INTEREST WILL BE CHARGED ON OVERDUE ACCOUNTS

3% PER MONTH

MINIMUM BILLING OF \$35.00

"THIS INVOICE IS ALSO YOUR STATEMENT"

THANK YOU



Fire Suppression Services, Inc.

3802 South 2300 East
Salt Lake City, Utah 84109-3421
(801) 277-6464 Fax (801) 278-2199
(800) 273-6465

WORK AUTHORIZATION

JOB NO: **30815**

DATE: 5/17/19

SALESMAN: Walt Lyford

CUST. P.O.: _____

INVOICE: _____

JOB Capitol Reef Resort
2600 Highway 24
Torrey, Ut. 84775

DESCRIPTION OF WORK Annual Inspection

PERSON TO CONTACT AT JOB SITE

T & M ☐ CONTRACT ☐ AMOUNT \$

- (1) Annual - Wet Fine Sprinkler Inspection
- (1) A.F. Solution Test
- (2) Annual - Backflow Preventer Inspection

SUBSISTENCE AND MILEAGE _____

SUBCONTRACTS AND MISC. _____

REMARKS: _____

WORK AUTHORIZED BY [Signature]

NAME (PRINTED) Tyler

TITLE head of maint

SUBJECT TO TERMS AND CONDITIONS ON REVERSE SIDE



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Service # #30815
Date 5/17/2019

BACKFLOW ASSEMBLY TEST FORM

Job Site	<u>Capitol Reef Resort</u> <u>2600 Highway 24</u> <u>Torrey, Utah 84775</u>	Make	<u>Ames</u>	Protection	Zone <input type="checkbox"/>	Assembly	SVB <input type="checkbox"/>
		Model	<u>Colt 200</u>		Domestic <input type="checkbox"/>		PVB <input type="checkbox"/>
		Size	<u>4" inch</u>		Individual <input type="checkbox"/>		DC <input checked="" type="checkbox"/>
		Serial Number	<u>MK0378</u>		Containment <input type="checkbox"/>		RP <input type="checkbox"/>
					Fire Protection <input checked="" type="checkbox"/>		DDC <input type="checkbox"/>
Replacement	<input type="checkbox"/>	Location Of Assembly	<u>Hot Water Heater Room</u>				
Existing	<input checked="" type="checkbox"/>	Assembly Connected To What Equipment	<u>Fire Riser</u>				
New	<input type="checkbox"/>						

INITIAL TEST	CHECK VALVE #1	CHECK VALVE #2	DP RELIEF VALVE	SVB & PVB AIR INLET
	PSI Across <u>4.0</u>	PSI Across <u>4.2</u>	Opened @ <u> </u> PSI	Opened @ <u> </u> PSI
	Close Tight <input checked="" type="checkbox"/>	Close Tight <input checked="" type="checkbox"/>	Close Tight <input type="checkbox"/>	Close Tight <input type="checkbox"/>
	Leaked <input type="checkbox"/>	Leaked <input type="checkbox"/>	Did Not Open <input type="checkbox"/>	Did Not Open <input type="checkbox"/>
			Leaked <input type="checkbox"/>	Leaked <input type="checkbox"/>

REPAIRS	Parts Cleaned	Installed	Parts Cleaned	Installed	Parts Cleaned	Installed	Parts Cleaned	Installed
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Describe:	Describe:	Describe:	Describe:				

FINAL TEST	PSI Across <u> </u>	PSI Across <u> </u>	Opened @ <u> </u> PSI	Opened @ <u> </u> PSI
	Close Tight <input type="checkbox"/>	Close Tight <input type="checkbox"/>	Close Tight <input type="checkbox"/>	Close Tight <input type="checkbox"/>
	Leaked <input type="checkbox"/>	Leaked <input type="checkbox"/>	Did Not Open <input type="checkbox"/>	Did Not Open <input type="checkbox"/>
			Leaked <input type="checkbox"/>	Leaked <input type="checkbox"/>

Assembly Passed Date : 5/17/2019 Failed Date :

Comments:

Initial Test By : Heath Dangerfield Final Test By : Heath Dangerfield
Repaired By : Date :

TEST KIT INFORMATION	
Make Of The Test Kit	<u>Mid-West Instrument</u>
Model :	<u>845</u>
Serial Number :	<u>05081169</u>
Calibration Date :	<u>9/19/2018</u>

Facility Representative: Duane Dasse
Back Flow
Inspectors Signature : Heath Dangerfield
Ut. Inspectors Number : #08065
Inspectors Number : 45-01369

I Certify the above has been performed and I am aware of the final performance



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Service # #30815
Date 5/17/2019

BACKFLOW ASSEMBLY TEST FORM

Job Site	<u>Capitol Reef Resort</u> <u>2600 Highway 24</u> <u>Torrey, Utah 84775</u>	Make	<u>Watts</u>	Protection	Zone	SVB	
		Model	<u>709</u>		Domestic	PVB	
		Size	<u>3" inch</u>		Individual	DC	<u>X</u>
		Serial Number	<u>130425</u>		Containment	RP	
					Fire Protection	DDC	
Replacement	<input type="checkbox"/>	Location Of Assembly	<u>Hot Water Heater Room</u>				
Existing	<input checked="" type="checkbox"/>	Assembly Connected To What Equipment	<u>Domestic Water</u>				
New	<input type="checkbox"/>						

	CHECK VALVE #1	CHECK VALVE #2	DP RELIEF VALVE	SVB & PVB AIR INLET
INITIAL TEST	PSI Across <u>2.8</u>	PSI Across <u>2.6</u>	Opened @ <u> </u> PSI	Opened @ <u> </u> PSI
	Close Tight <input checked="" type="checkbox"/>	Close Tight <input checked="" type="checkbox"/>	Close Tight <input type="checkbox"/>	Close Tight <input type="checkbox"/>
	Leaked <input type="checkbox"/>	Leaked <input type="checkbox"/>	Did Not Open <input type="checkbox"/>	Did Not Open <input type="checkbox"/>
			Leaked <input type="checkbox"/>	Leaked <input type="checkbox"/>

	Parts Cleaned	Installed	Parts Cleaned	Installed	Parts Cleaned	Installed	Parts Cleaned	Installed
REPAIRS		Disk		Disk		Disk Diaphragm		Air Inlet
		Spring		Spring		Spring		Disk
		Guide		Guide		Guide		Air Inlet
		Seat		Seat		Seat		Spring
		O-Rings		O-Rings		O-Rings		
		All Parts		All Parts		All Parts		All Parts
		OTHER		OTHER		OTHER		OTHER
	Describe:		Describe:		Describe:		Describe:	

FINAL TEST	PSI Across <u> </u>	PSI Across <u> </u>	Opened @ <u> </u> PSI	Opened @ <u> </u> PSI
	Close Tight <input type="checkbox"/>	Close Tight <input type="checkbox"/>	Close Tight <input type="checkbox"/>	Close Tight <input type="checkbox"/>
	Leaked <input type="checkbox"/>	Leaked <input type="checkbox"/>	Did Not Open <input type="checkbox"/>	Did Not Open <input type="checkbox"/>
			Leaked <input type="checkbox"/>	Leaked <input type="checkbox"/>

Assembly Passed Date : 5/17/2019

Failed Date :

Comments:

Initial Test By : Heath Dangerfield

Final Test By :

Repaired By : Date :

TEST KIT INFORMATION	
Make Of The Test Kit	<u>Mid-West Instrument</u>
Model :	<u>845</u>
Serial Number :	<u>05081169</u>
Calibration Date :	<u>9/19/2018</u>

Facility Representative: Duane Dasse
Back Flow
Inspectors Signature : Heath Dangerfield
Ut. Inspectors Number : #08065
Inspectors Number : 45-01369

I Certify the above has been performed and I am aware of the final performance

[illegible]

a. Did the deluge or pre-action valves operate properly during testing?.....

b. Did the heat-responsive devices operate properly during testing?.....

c. Did the supervisory devices operate during testing?.....

PASS	N/A	FAIL
	X	
	X	
	X	

a. Did the water motor and gong test satisfactorily?.....

b. Did electric alarm test satisfactorily?.....

c. Did supervisory devices operate during testing?.....

d. Monitoring Co. Emergency 24 Code

	X	
X		
X		

- Are all sprinklers free from corrosion, loading or obstruction to spray discharge?
- Are sprinklers less than 50 years old? (Sample testing required after 50 years)
- Is stock of spare sprinklers available?
- Is spare head wrench available?
- Does the exterior condition of sprinkler system appear to be satisfactory?
- Temperature. Are sprinklers of proper temperature ratings for their locations?

X		
X		
X		
X		
X		
X		

10. Date Dry-Pipe Valve trip tested (control valve partially open)*

	X	
--	---	--

11. Date Dry-Pipe Valve trip tested (control valve fully open)*

	X	
--	---	--

12. Date quick-opening devices tested*

	X	
--	---	--

13. Date Deluge or Pre-action Valve tested*

	X	
--	---	--

TRIP TEST TABLE

DRY PIPE OPERATING TEST N/A	Dry Valve				Quick opening device						
	Make	Model	Serial #		Make	Model	Serial #				
		Time to trip thru test pipe		Water Pressure PSI	Air Pressure PSI	Trip Point Air Pressure PSI	Time water reached test outlet		Alarm operated properly?		
		Minutes	Seconds				Min	Sec.	Yes	No	
	Without QOD										
	With QOD										
If no, explain:											

[illegible]

14. SPECIAL SYSTEMS

Control Valves	Number	Type	Size	Tamper	Open	Signs	Exercised
City connection control valves	1	GATE				X	X
Tank control valves							
Pump control valves							
Sectional control valves	1	BFV	2 1/2"	X	X	X	X
System control valves	2	BFV	4"	X	X	X	X
Other control valves							

15. EQUIPMENT

- a. Make & model number of sprinkler valve: Ames Coll200 4" inch DC
- b. Type of heads: TY3131 200° brass upright, TY3231 155° white pendant
- c. Type of canopies: 401 white, Semi-recessed white

16. MAIN DRAIN TEST AT SPRINKLER RISER

Water supply source City ☒ Tank ☐ Pump ☐ MIN PSI ☐ N/A

Last Main	Date	Test pipe location	Size Test Pipe	Pressure	Static Pressure	Residual Pressure
Drain Test	5/18/2018	Riser	2" inch	130	95	80
This Main	Date	Test pipe location	Size Test Pipe	Pressure	Static Pressure	Residual Pressure
Drain Test	5/17/2019	Riser	2" inch	130	95	80

a. Did water pressure return to normal with in 90 seconds?..... ☒ Pass ☐ Fail

17. Explain any "NO" answers & comments: System past due for 5 year inspection. During main drain test flakes of piping were expelled from system piping. Recommend running bacteria test on water so system can be treated properly. No head wrench in spare head box, need to add. Antifreeze levels tested low, recommend recharging.

18. Adjustments or corrections made during this inspection: _____

19. Although these comments are not the result of an engineering review, the following desirable improvements are recommended: _____

Signature: Heath Dangerfield
Utah State License Number: 61931

Date: 5/17/2019