

TELGIAN Work Completion Form

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|------------------------------------|--------------------------------------------------------------------|------------------------|---------------------------------|
| TELGIAN Work Order#: 5183368304 | Customer Name: Chase_Banking Center_UT_Salt Lake City_515514 | Location ID: 184582 | Date of Dispatch: 03-12-2020 |
|------------------------------------|--------------------------------------------------------------------|------------------------|---------------------------------|

Location Information

| | | | |
|--------------------------------------------------------------------|--------------------------------|--------------|---------------|
| Customer Name: Chase_Banking Center_UT_Salt Lake City_515514 | Location ID: 184582 | | |
| Address: 1285 E 3900 S | City: Salt Lake City | State: UT | Zip: 84124 |
| Location Phone Number: 8014815013; | Contact Name: kory.w.balls; | | |

On-Site Verification

MUST BE COMPLETED

Step 1: Upon arrival, call
TELGIAN at 800-306-4122 to
check in.

Arrival Time:

4:00pm

Number of technicians at location:

2

Step 2: Upon departure, call
TELGIAN at 800-306-4122 to
check out.

Departure Time:

5:30

Name of technician(s):

Kory W. Balls

WORK COMPLETED (check all boxes that apply)

| | | | |
|----------------------------------------------|-----------------------------------------|-----------------------------------------------------------|----------------------------------------------|
| <input type="checkbox"/> Annual - Alarm | <input type="checkbox"/> Annual - Pump | <input type="checkbox"/> Annual - Sprinkler | <input type="checkbox"/> Landlord Maintained |
| <input type="checkbox"/> Semi-Annual - Alarm | <input type="checkbox"/> Qtrly - Pump | <input type="checkbox"/> Semi Annual - Sprkler | <input type="checkbox"/> Mall Maintained |
| <input type="checkbox"/> Qtrly - Alarm | <input type="checkbox"/> Mnthly - Pump | <input checked="" type="checkbox"/> Quarterly - Sprinkler | <input type="checkbox"/> Dead Run |
| <input type="checkbox"/> Monthly - Alarm | <input type="checkbox"/> Weekly - Pump | <input type="checkbox"/> Full Dry Trip | <input type="checkbox"/> Pre-action |
| <input type="checkbox"/> Winterization | <input type="checkbox"/> Annual Hydrant | <input type="checkbox"/> Partial Dry Trip | <input type="checkbox"/> Other: |

COMMENTS (1) Quarterly - Wet Pipe Sprinkler Inspection

Is a return trip needed to
complete this job?

☐ Yes

☒ No

Note:

Technician Verification

Signature of Technician:

Kory W. Balls

Date of Service:

3/25/20

Customer Verification

Name of Manager:

Jahel Turner

Store Stamp/Bus Card/Store Receipt

JPMorgan Chase Bank, N.A.
East 39th
1285 E 3900 S
Salt Lake City, Utah 84124

2nd Trip Verification

Name of Manager:

Signature of Manager:

Date:

Signature of Manager:

Jahel Turner

Date:

3.20.20

Issued by Telgian, Inc.

REV. 3/03 - (based on 2002 Ed. of NFPA 25)

Report of Inspection, Testing & Maintenance of Wet Pipe Fire Sprinkler Systems...continued

Inspecting Firm: 7232

Inspection Contract#

Name of Inspected Property: Chase Bank

Inspector Name: Heath J.

Date: 3/30/20

Inspection Frequency: ☐ Monthly

☒ Quarterly

☐ Annually

☐ Other

| Quarterly Inspection for Wet Pipe Sprinkler Systems | | | |
|-----------------------------------------------------------------|-------------------------------------|-------------------------------------|---|
| | Y | N/A | N |
| B.1.0 System in service on inspection | <input checked="" type="checkbox"/> | | |
| B.2.0 Hydraulic nameplate attached and legible | <input checked="" type="checkbox"/> | | |
| B.2.1 Alarm device free from physical damage | <input checked="" type="checkbox"/> | | |
| B.3.0 FDC is visible | <input checked="" type="checkbox"/> | | |
| B.3.1 FDC is accessible | <input checked="" type="checkbox"/> | | |
| B.3.2 FDC swivels/couplings undamaged/rotate smoothly | <input checked="" type="checkbox"/> | | |
| B.3.3 FDC plugs/caps in place/undamaged | <input checked="" type="checkbox"/> | | |
| B.3.4 FDC gaskets in place and in good condition | <input checked="" type="checkbox"/> | | |
| B.3.5 FDC identification sign in place | <input checked="" type="checkbox"/> | | |
| B.3.6 FDC check valve not leaking | <input checked="" type="checkbox"/> | | |
| B.3.7 FDC automatic drain valve in place and operating properly | <input checked="" type="checkbox"/> | | |
| B.3.8 FDC clapper is in place and operating properly | <input checked="" type="checkbox"/> | | |
| B.3.9 FDC interior inspected where caps missing | <input checked="" type="checkbox"/> | | |
| B.3.10 FDC obstructions removed as necessary | <input checked="" type="checkbox"/> | | |
| B.4.0 Pressure reducing control valves (PRV) indicate open | | <input checked="" type="checkbox"/> | |
| B.4.1 PRV not leaking | | <input checked="" type="checkbox"/> | |
| B.4.2 PRV maintaining downstream pressure per design | | <input checked="" type="checkbox"/> | |
| B.4.3 PRV in good condition | | <input checked="" type="checkbox"/> | |
| B.4.4 PRV handwheel installed and not broken | | <input checked="" type="checkbox"/> | |
| B.5.0 ALARM PANEL CLEAR | <input checked="" type="checkbox"/> | | |
| B.6.0 COMMENTS: | | | |
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| Quarterly Testing for Wet Pipe Sprinkler Systems | | | |
|---------------------------------------------------------------------------|-------------------------------------|-------------------------------------|-----|
| | Y | N/A | N |
| C.1.0 System in service before testing | <input checked="" type="checkbox"/> | | |
| C.1.1 Pertinent parties notified before testing | <input checked="" type="checkbox"/> | | |
| C.1.2 Adequate drainage provided before flow testing | <input checked="" type="checkbox"/> | | |
| C.2.0 Water flow alarm (other than vane type) tested and is operational | <input checked="" type="checkbox"/> | | |
| C.2.1 Test conducted with inspector's test connection | <input checked="" type="checkbox"/> | | |
| C.2.2 Test conducted with bypass connection (freezing weather) | | <input checked="" type="checkbox"/> | |
| C.2.3 Test conducted per manufacturer's instructions | <input checked="" type="checkbox"/> | | |
| C.2.4 Alarm devices appear free of physical damage | <input checked="" type="checkbox"/> | | |
| C.3.0 Adequate drainage provided before flow testing | <input checked="" type="checkbox"/> | | |
| C.3.1 A main drain test conducted downstream from backflow preventer | <input checked="" type="checkbox"/> | | |
| C.3.2 A main drain test conducted downstream from pressure reducing valve | <input checked="" type="checkbox"/> | | |
| C.3.3 Supply water gauge reading before flow (static) | | <u>110</u> | psi |
| C.3.4 Gauge reading during stable flow (residual) | | <u>100</u> | psi |
| C.3.5 Time for supply pressure to return to normal | | <u>—</u> | sec |
| C.4.0 Pertinent parties notified of test conclusion | <input checked="" type="checkbox"/> | | |
| C.5.0 ALARM PANEL CLEAR | <input checked="" type="checkbox"/> | | |
| C.6.0 SYSTEM RETURNED TO SERVICE | <input checked="" type="checkbox"/> | | |
| C.7.0 COMMENTS: | | | |
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| Semi-Annual Testing for Wet Pipe Sprinkler Systems | | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------|-----|
| | Y | N/A | N |
| D.1.0 System in service before testing | <input checked="" type="checkbox"/> | | |
| D.1.1 Pertinent parties notified before testing | <input checked="" type="checkbox"/> | | |
| D.2.0 Supervisory switch initiates distinct signal during first two hand wheel revolutions or before valve stem moved one-fifth from normal position | | <input checked="" type="checkbox"/> | |
| D.2.1 Signal restored only when valve returned to normal position | | <input checked="" type="checkbox"/> | |
| D.3.0 Adequate drainage provided before flow testing | <input checked="" type="checkbox"/> | | |
| D.3.1 Main drain test conducted | <input checked="" type="checkbox"/> | | |
| D.3.2 Supply water gauge reading before flow (static) | | <u>110</u> | psi |
| D.3.3 Gauge reading during stable flow (residual) | | <u>105</u> | psi |
| D.3.4 Time for supply pressure to return to normal | | <u>—</u> | sec |
| D.4.0 Pertinent parties notified of test conclusion | <input checked="" type="checkbox"/> | | |
| D.5.0 ALARM PANEL CLEAR | <input checked="" type="checkbox"/> | | |
| D.6.0 SYSTEM RETURNED TO SERVICE | <input checked="" type="checkbox"/> | | |
| D.7.0 COMMENTS: | | | |
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INSPECTOR'S INITIAL HL (All "NO" answers to be explained.) OWNER/DESIGNATED REP. INITIAL JT DATE 3.30.20

(AFSA Form 106A)

Telgian Inventory Sheet - Sprinkler

| Telgian WO#: | | N/A | | Total Count | Tested Count | Make/Model (If Applicable) | Pass/Fail |
|------------------------------------|--|-----|--|-------------|--------------|----------------------------|-----------|
| Component Name | | | | | | | |
| Wet Riser | | | | 1 | 1 | Kuhn's | Pass |
| Dry Riser | | | | | | | |
| Pre-Action Riser | | | | | | | |
| Deluge Riser | | | | | | | |
| Antifreeze Loop | | | | | | | |
| Water flow Switch | | | | 1 | 1 | Potter | Pass |
| Tamper Switch (Supervisory Switch) | | | | | | | |
| Pressure Switch | | | | | | | |
| Low Air Switch | | | | | | | |
| Fire Pump | | | | | | | |
| Hose Re-rack | | | | | | | |
| Hydrant | | | | | | | |
| Standpipe Valve | | | | | | | |
| Sectional Control Valve | | | | | | | |
| MIC Probe Testing ??? | | | | | | | |