

Invitation for Bids Number: 16-04

Addendum 1

Date: October 13, 2015

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**Acknowledgment of Addenda**

The undersigned acknowledges receipt of the following addenda to the bidding document:

**THE COMPLETED ACKNOWLEDGEMENT OF ADDENDA FORM  
SHOULD BE RETURNED WITH BID RESPONSE PACKAGE: NOT  
SENT TO RIPTA SEPARATELY**

NOTE: Failure to acknowledge receipt of all addenda may cause the bid to be considered non-responsive to the solicitation. Acknowledged receipt of each addendum must be clearly established and included with the bid.

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Name of Bidder

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Street Address

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City, State, Zip

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Signature of Authorized Official

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Date

Invitation for Bids Number: 16-04

Addendum 1

Date: October 13, 2015

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Attached please find the following:

- Minutes of Pre-bid Meeting held October 8, 2015
- Revised Technical Specifications
- Inspection Reports

**Invitation for Bids Number 16-04**  
**Pre Bid Meeting**  
**October 8, 2015**  
**Page 1 of 1**

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The meeting came to order at 9:05 a.m. Michael J. M<sup>c</sup>Grane, RIPTA Contracts Manager welcomed all those present. Mr. M<sup>c</sup>Grane introduced RIPTA Personnel present. Mr. M<sup>c</sup>Grane gave a brief background of the specifications for the Proposal Package and the purpose of this meeting. Mr. M<sup>c</sup>Grane asked those present to identify themselves when asking questions.

Michael M<sup>c</sup>Grane cautioned prospective bidders to be diligent when completing the required forms, to pay attention to the details such as the required number of copies needed. Vendors need only to submit the required forms listed in the Proposal Package on page 40. Vendors having difficulty completing the required forms are encouraged to contact the Michael M<sup>c</sup>Grane for guidance.

He also cautioned bidders not to procrastinate when filling out the paperwork. RIPTA Staff have busy schedules, therefore may not always be available for last minute questions

Michael M<sup>c</sup>Grane also reminded those present to pay particular attention to the Insurance Requirements listed on Page 62-63 of the Proposal Package. They are not the same requirements utilized by other State Agencies.

This meeting is NOT Mandatory.

The meeting was opened to questions from the various participants:

The following questions were raised by Mr. Steve Lawton of AFA.

- Who is currently providing the services at this time?  
Elco Electric is providing Fire Alarm Inspection and Simplex Grinnell is providing Sprinkler Inspection Services.
- Is a bid bond required for this project.  
No.
- May we have copies of the existing reports.  
RIPTA will review its files and make some reports available. The Authority does not take responsibility for the quantities listed. It is the responsibility of potential bidders to verify device quantities before submitting bids.

There being no further business, the meeting adjourned to a tour of the facilities for interested parties at 9:30 a.m.

Respectfully submitted  
Michael J. M<sup>c</sup>Grane  
Contracts Manager

**RHODE ISLAND PUBLIC TRANSIT AUTHORITY**  
**Invitation for Bids Number 16-04**  
**REVISED TECHNICAL SPECIFICATIONS**  
**Revisions are in RED**

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**XXXII. TECHNICAL SPECIFICATIONS**

**A. Reporting:**

Inspection and test results shall be reported on the Contractor's report form and provided in the form of **EIR Reporting "Electronic Inspection Reporting"**. **EIR Reporting** shall be sole sourced and not to be outsourced to a sub contractor. **Electronic Reporting shall be through a secure portal allowing multiple RIPTA users access to the information.** Copies shall be given to the Authority's designee, to the authority having jurisdiction, and, if requested, to the Authority's insurance company. The Contractor's report will indicate the equipment inspected, tested and the results thereof and any recommendations with respect thereto. The Contractor's report is not intended to warrant or guarantee that any aspects of the system and equipment are free of defects or hazards or that they are in proper operating condition other than at the time of the inspection.

**XXXIV. FIRE SUPPRESSION SYSTEM DESCRIPTION**

**Semi Annually** - test and inspect the Gasoline Fuel Tank Suppression Systems located at 705 Elmwood Ave Providence RI 02907 and 269 Melrose Street Providence, RI 02907 **Also test and inspect the FM-200 Fire Suppression system located in the Computer Room at 269 Melrose Street. This test must be in accordance with NFPA 2001**

**RHODE ISLAND PUBLIC TRANSIT AUTHORITY**  
**Invitation for Bids Number 16-04**  
**REVISED TECHNICAL SPECIFICATIONS**  
**Revisions are in RED**

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**BACKFLOW PREVENTER INSPECTIONS**

Attached please find a list of Backflow Preventers located throughout RIPTA's Facilities. This list is a result of a diligent effort by RIPTA Staff to locate. The Authority reserves the right to amend this list should any errors be discovered.

This testing shall be conducted on an annual basis in accordance with the requirements of the Authority Having Jurisdiction. A copy of the test reports shall be forward to the RIPTA Assistant General Manager of Maintenance or his designee.

Any repairs shall be done in accordance with the this document. Some of the Backflow Preventers listed below may be part of the Domestic Potable Water Supply. It shall be the responsibility of the Vendor to insure Inspections and repairs of Backflow Preventers are performed by properly licensed personnel in accordance with the regulations of the Appropriate Authority Having Jurisdiction for each unit.

<b>Building*</b>	<b>Manufacturer</b>	<b>Type</b>	<b>Model</b>	<b>Size (inches)</b>	<b>Serial Number</b>
Former Administration Building	FEBCO	DC	805	0.750	A014692
Former Administration Building	WATTS	RP	009M2QT	2.00	195704
Newport Garage	Water Combraco		40208A2	Unknown	3169
Newport Garage	WATTS	189	Unknown	Unknown	134776
Maintenance Facility	Watts	RP	909	4.00	198293
Maintenance Facility	FEBCO	DCDA	856	6.00	006081243
Transportation Building	WATTS	RP	M2QT	2.00	162524
DMV Building	WATTS	RP	009M2QT	1.50	127778
Paratransit Maintenance and Administration Facility	WATTS	RP	909	3.00	189785
Paratransit Maintenance and Administration Facility	WATTS	RP	909	3.00	189395
Paratransit Maintenance and Administration Facility	WATTS	RP	909	3.00	188297
Paratransit Maintenance and Administration Facility	Ames	DC	COLT 200A	6.00	JC0859
Kennedy Plaza	WATTS	RP	009M2QT	2.0	174731

**The cost of the Backflow Inspection Services shall be included as part of the Sprinkler Inspection fee for each building**

**REPORT OF INSPECTION**

BUILDING / LOCATION	<u>RIPTA Elmwood Garage</u>	INSPECTOR	<u>Roy Souza/David Souza</u>
STREET	<u>265 MELROSE Ave</u>	DATE	<u>9/10/2015</u>
CITY / STATE / ZIP	<u>Providence, RI 02907</u>		
ATTN:			

**1. GENERAL**

A. (To be answered by the Owner or Owner's representative)

- a. Have there been any changes in the occupancy classification, machinery or operations since the last inspection?
- b. Have there been any changes or repairs to the fire protection systems since the last inspection?
- c. If a fire has occurred since the last inspection, have all damaged sprinkler system components been replaced?
- d. Has the piping in all dry systems been checked for proper pitch within the past five years?  
Date last checked \_\_\_\_\_ (checking is recommended at least every 5 years)
- e. Has the piping in all systems been checked for obstructive materials?  
Date last checked 6/15/2015 (checking is recommended at least every 5 years)
- f. Have all fire pumps been tested to their full capacity through the use of hose streams or flow meters within the past 12 months?
- g. Are gravity, surface or pressure tanks protected from freezing?
- h. Are any of the sprinklers 50 years old or older?
- i. Are any extra high temperature solder sprinklers regularly exposed to temperatures near 300F?

YES	NA	NO
		X
X		
	X	
	X	
		X
X		
	X	
	X	
X		
	X	
		X
X		
X		
X		

B. (To be answered by the Inspector)

- a. Have the sprinkler systems been extended to all visible areas of the building?
- b. Does there appear to be proper clearance between the top of all storage and the sprinkler deflector?
- c. Are the building areas protected by a wet system, heated, including its blind attics and perimeter areas, where accessible?
- d. Are all visible exterior openings protected against the entrance of cold air?

**2. CONTROL VALVES**

- a. Are all sprinkler system main control valves and all other valves in the appropriate open or closed position?
- b. Are all control valves sealed or supervised in the open position?

x		
x		

Control Valves	# of Valves	Type	Easily Accessible		Signs		Valve Open		Secured? IF YES, HOW?		(Sealed?) (Locked?) (Supvd.?)	Supervision Operational	
			YES	NO	YES	NO	YES	NO	YES	NO		YES	NO
CITY CONNECTION	1	PIV	x		x		x		x		LCK/SUPV	X	
TANK													
PUMP													
SECTIONAL													
SYSTEM	2	OS&Y	x		x		x		x		SUPD	X	
ALARM LINE													

**3. WATER SUPPLIES**

- a. Water supply sources? City: 80 Gravity Tank \_\_\_\_\_

Pressure Fire Pump & Tank NA  
 Pressure Fire Pump & City NA  
 Pressure Fire Pump & Pond NA

Waterflow Test Results Made During This Inspection

Test Pipe Located	Size Test Pipe	Static Pressure Before	Flow Pressure	Static Pressure After	Test Pipe Located	Size Test Pipe	Static Pressure Before	Flow Pressure	Static Pressure After
north west corner	2"	80	75	80	ITV	1/2"			
south west side	2"	80	75	80					
east side	2"	80	75	80					

**4. TANKS, PUMPS, FIRE DEPT. CONNECTIONS**

- a. Do fire pumps, gravity, surface or pressure tanks appear to be in good external conditions?
- b. Are gravity, surface and pressure tanks at the proper pressure and/or water levels?
- c. Are fire dept. connections in satisfactory conditions, couplings free, caps or plugs in place and check valves tight?
- d. Are fire dept. connections visible and accessible?

YES	NA	NO
	X	
	X	
X		
X		

**REPORT OF INSPECTION**

**5. WET SYSTEMS**

- a. No. of systems 3 Make & Model TYCO 6", Grinnell A6", Grinnell A8"  
 b. Are cold weather valves in the appropriate open or closed position?  
 If closed, has piping been drained?  
 c. Has the owner or owner's representative been advised that cold weather valves are not recommended by NFPA?  
 d. Have all the antifreeze systems been tested?  
 e. Date antifreeze systems were tested  
 f. The antifreeze tests indicated protection to:  
 System #1 \_\_\_\_\_ #2 \_\_\_\_\_ #3 \_\_\_\_\_ #4 \_\_\_\_\_ #5 \_\_\_\_\_  
 g. Did alarm valves, waterflow alarm indicators and retards test satisfactorily?

YES	NA	NO
	X	
	X	
	X	
	X	
X		

**6. DRY SYSTEMS**

- a. No. of systems \_\_\_\_\_ Make & Model \_\_\_\_\_  
 Date last trip tested \_\_\_\_\_  
 b. Is the air pressure and priming water levels normal?  
 c. Did the air compressor operate satisfactorily?  
 d. Were all low points drained during this inspection?  
 e. Did all quick opening devices operate satisfactorily?  
 f. Did all the dry valves operate satisfactorily during this inspection?  
 g. Do dry valves appear to be protected from freezing?  
 h. Is the dry valve house heated?

YES	NA	NO
	X	
	X	
	X	
	X	
	X	

**7. SPECIAL SYSTEMS**

- a. No. of systems \_\_\_\_\_ Make & Model \_\_\_\_\_  
 Type \_\_\_\_\_  
 b. Were valves tested as required?  
 c. Did all heat responsive systems operate satisfactorily?  
 d. Did the supervisory features operate during testing?

YES	NA	NO
	X	
	X	
	X	

Heat Responsive Devices: Type \_\_\_\_\_ Type of test \_\_\_\_\_

Valve No. 1 ... 2 ... 3 ... 4 ... 5 ... 6 ...	Valve No. 1 ... 2 ... 3 ... 4 ... 5 ... 6 ...
Valve No. 1 ... 2 ... 3 ... 4 ... 5 ... 6 ...	Valve No. 1 ... 2 ... 3 ... 4 ... 5 ... 6 ...
Valve No. 1 ... 2 ... 3 ... 4 ... 5 ... 6 ...	Valve No. 1 ... 2 ... 3 ... 4 ... 5 ... 6 ...
Valve No. 1 ... 2 ... 3 ... 4 ... 5 ... 6 ...	Valve No. 1 ... 2 ... 3 ... 4 ... 5 ... 6 ...

Auxiliary equipment: No. \_\_\_\_\_ Type \_\_\_\_\_  
 Location \_\_\_\_\_  
 Test results \_\_\_\_\_

**8. ALARMS**

- a. Did the water motors and gong operate during testing?  
 b. Did the electric alarms operate during testing?  
 c. Did the supervisory alarms operate during testing?

YES	NA	NO
	X	
X		
X		

**9. SPRINKLERS - PIPING**

- a. Do sprinklers generally appear to be in good external condition?  
 b. Do sprinklers generally appear to be free of corrosion, paint, or loading and visible obstructions?  
 c. Are extra sprinklers available on the premises?  
 d. Does the exterior condition of piping, drain valves, check valves, hangers, pressure gauges, open sprinklers and strainers appear to be satisfactory?  
 e. Does the hand hose on the sprinkler system appear to be in satisfactory condition?

YES	NA	NO
X		
X		X
X		
X		
	X	

**10. EXPLANATION OF "NO" ANSWERS (For Sections 1B thru 9):**

No Coverage Stairwell  
 painted upright sprinkler Heads 165 degree 1st floor. restroom Approx 375 sprinkler heads over 50 yrs old, portion should be sent out to be sample tested.

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**REPORT OF INSPECTION**

**11. THE INSPECTOR SUGGESTS THE FOLLOWING NECESSARY IMPROVEMENTS, HOWEVER, THESE SUGGESTIONS ARE NOT THE RESULT OF AN ENGINEERING SURVEY:**

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**12. ADJUSTMENTS OR CORRECTIONS MADE:**

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**13. LIST CHANGES IN THE OCCUPANCY HAZARD OR FIRE PROTECTION EQUIPMENT, AS ADVISED BY THE OWNER IN SECTION 1A:**

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**14. INSPECTION AND SUGGESTED IMPROVEMENTS WERE DISCUSSED WITH THE UNDERSIGNED OWNER OR OWNER'S REPRESENTATIVE?**

YES	NO
X	

Signature of owner or owner's representative \_\_\_\_\_

Date \_\_\_\_\_

9/10/2015

**REPORT OF INSPECTION**

BUILDING / LOCATION	<u>RIPTA Transportation Bldg.</u>	INSPECTOR	<u>Roy Souza/David Souza</u>
STREET	<u>269 Melrose St</u>	DATE	<u>7/20/2015</u>
CITY / STATE / ZIP	<u>Providence, RI 02907 33060070,33066452</u>		
ATTN:			

**1. GENERAL**

A. (To be answered by the Owner or Owner's representative)

- a. Have there been any changes in the occupancy classification, machinery or operations since the last inspection?
- b. Have there been any changes or repairs to the fire protection systems since the last inspection?
- c. If a fire has occurred since the last inspection, have all damaged sprinkler system components been replaced?
- d. Has the piping in all dry systems been checked for proper pitch within the past five years?  
Date last checked \_\_\_\_\_ (checking is recommended at least every 5 years)
- e. Has the piping in all systems been checked for obstructive materials?  
Date last checked 6/15/2015 (checking is recommended at least every 5 years)
- f. Have all fire pumps been tested to their full capacity through the use of hose streams or flow meters within the past 12 months?
- g. Are gravity, surface or pressure tanks protected from freezing?
- h. Are any of the sprinklers 50 years old or older?
- i. Are any extra high temperature solder sprinklers regularly exposed to temperatures near 300F?

YES	NA	NO
		X
X		
	X	
		X
X		X
	X	
	X	
		X
	X	
X		
X		
X		
X		

B. (To be answered by the Inspector)

- a. Have the sprinkler systems been extended to all visible areas of the building?
- b. Does there appear to be proper clearance between the top of all storage and the sprinkler deflector?
- c. Are the building areas protected by a wet system, heated, including its blind attics and perimeter areas, where accessible?
- d. Are all visible exterior openings protected against the entrance of cold air?

**2. CONTROL VALVES**

- a. Are all sprinkler system main control valves and all other valves in the appropriate open or closed position?
- b. Are all control valves sealed or supervised in the open position?

X		
X		

Control Valves	# of Valves	Type	Easily Accessible		Signs		Valve Open		Secured? IF YES, HOW?		(Sealed?) (Locked?) (Supvd.?)	Supervision Operational	
			YES	NO	YES	NO	YES	NO	YES	NO		YES	NO
CITY CONNECTION	1	OS&Y	X		X		X		X		SUPVSD	X	
BACKFLOW	1	OS&Y	X		X		X		X		SUPVSD	X	
PUMP													
SECTIONAL	5	BFLY	X		X		X		X		SUPVSD	X	
SYSTEM	4	BFLY	X		X		X		X		SUPVSD	X	X
ALARM LINE													

**3. WATER SUPPLIES**

- a. Water supply sources? City: 85 Gravity Tank \_\_\_\_\_

Pressure Fire Pump & Tank NA  
 Pressure Fire Pump & City NA  
 Pressure Fire Pump & Pond NA

Waterflow Test Results Made During This Inspection

Test Pipe Located	Size Test Pipe	Static Pressure Before	Flow Pressure	Static Pressure After	Test Pipe Located	Size Test Pipe	Static Pressure Before	Flow Pressure	Static Pressure After
boiler room wet	2"	85	75	85	ITV	1/2"	85	75	85
boiler room wet	2"	85	75	85	ITV	1/2"	85	75	85
boiler room dry	2"	85	75	85	Alarm line	1/2"	85	85	85
boiler room dry	2"	85	75	85	Alarm Line	1/2"	85	85	85

**4. TANKS, PUMPS, FIRE DEPT. CONNECTIONS**

- a. Do fire pumps, gravity, surface or pressure tanks appear to be in good external conditions?
- b. Are gravity, surface and pressure tanks at the proper pressure and/or water levels?
- c. Are fire dept. connections in satisfactory conditions, couplings free, caps or plugs in place and check valves tight?
- d. Are fire dept. connections visible and accessible?

YES	NA	NO
	X	
	X	
X		
X		

**REPORT OF INSPECTION**

**5. WET SYSTEMS**

- a. No. of systems 2 Make & Model Viking H2 4" Viking H2 6"  
 b. Are cold weather valves in the appropriate open or closed position?  
 If closed, has piping been drained?  
 c. Has the owner or owner's representative been advised that cold weather valves are not recommended by NFPA?  
 d. Have all the antifreeze systems been tested?  
 e. Date antifreeze systems were tested  
 f. The antifreeze tests indicated protection to:  
 System #1 \_\_\_\_\_ #2 \_\_\_\_\_ #3 \_\_\_\_\_ #4 \_\_\_\_\_ #5 \_\_\_\_\_  
 g. Did alarm valves, waterflow alarm indicators and retards test satisfactorily?

YES	NA	NO
	X	
	X	
	X	
	X	
X		

**6. DRY SYSTEMS**

- a. No. of systems 2 Make & Model TYCO DPV-1 4"  
 Date last trip tested 9/10/2015  
 b. Is the air pressure and priming water levels normal?  
 c. Did the air compressor operate satisfactorily?  
 d. Were all low points drained during this inspection?  
 e. Did all quick opening devices operate satisfactorily?  
 f. Did all the dry valves operate satisfactorily during this inspection?  
 g. Do dry valves appear to be protected from freezing?  
 h. Is the dry valve house heated?

YES	NA	NO
		X
		X
		X
	X	
		X
		X
X		

**7. SPECIAL SYSTEMS**

- a. No. of systems \_\_\_\_\_ Make & Model \_\_\_\_\_  
 Type \_\_\_\_\_  
 b. Were valves tested as required?  
 c. Did all heat responsive systems operate satisfactorily?  
 d. Did the supervisory features operate during testing?

YES	NA	NO
	X	
	X	
	X	

Heat Responsive Devices: Type \_\_\_\_\_ Type of test \_\_\_\_\_

Valve No.	1 ... 2 ... 3 ... 4 ... 5 ... 6 ...	Valve No.	1 ... 2 ... 3 ... 4 ... 5 ... 6 ...
Valve No.	1 ... 2 ... 3 ... 4 ... 5 ... 6 ...	Valve No.	1 ... 2 ... 3 ... 4 ... 5 ... 6 ...
Valve No.	1 ... 2 ... 3 ... 4 ... 5 ... 6 ...	Valve No.	1 ... 2 ... 3 ... 4 ... 5 ... 6 ...
Valve No.	1 ... 2 ... 3 ... 4 ... 5 ... 6 ...	Valve No.	1 ... 2 ... 3 ... 4 ... 5 ... 6 ...

Auxiliary equipment: No. \_\_\_\_\_ Type \_\_\_\_\_  
 Location \_\_\_\_\_  
 Test results \_\_\_\_\_

**8. ALARMS**

- a. Did the water motors and gong operate during testing?  
 b. Did the electric alarms operate during testing?  
 c. Did the supervisory alarms operate during testing?

YES	NA	NO
	X	
X		
X		

**9. SPRINKLERS - PIPING**

- a. Do sprinklers generally appear to be in good external condition?  
 b. Do sprinklers generally appear to be free of corrosion, paint, or loading and visible obstructions?  
 c. Are extra sprinklers available on the premises?  
 d. Does the exterior condition of piping, drain valves, check valves, hangers, pressure gauges, open sprinklers and strainers appear to be satisfactory?  
 e. Does the hand hose on the sprinkler system appear to be in satisfactory condition?

YES	NA	NO
X		
X		
X		
X		
	X	

**10. EXPLANATION OF "NO" ANSWERS (For Sections 1B thru 9):**

No Coverage: Pump Room, Janitors Closet Terminal, Garage office and Supervisors Room.

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**REPORT OF INSPECTION**

**11. THE INSPECTOR SUGGESTS THE FOLLOWING NECESSARY IMPROVEMENTS, HOWEVER, THESE SUGGESTIONS ARE NOT THE RESULT OF AN ENGINEERING SURVEY:**

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\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**12. ADJUSTMENTS OR CORRECTIONS MADE:**

(2) LOW POINTS WERE DRAINED COMPLETELY UPON COMPLETION OF THIS INSPECTION. CONFIRMED WITH CUSTOMER THAT THERE ARE NO ADDITIONAL LOW POINT DRAINS BEYOND THOSE NOTED ON THIS INSPECTION AND THAT THEY WILL NOTIFY US IMMEDIATELY IF ADDITIONAL LOW POINT DRAINS ARE IDENTIFIED OR ADDED. CUSTOMER IS RESPONSIBLE FOR ENSURING SYSTEM LOW POINTS ARE DRAINED ON A REGULAR BASIS BETWEEN EACH INSPECTION  
low points bus storage area

**13. LIST CHANGES IN THE OCCUPANCY HAZARD OR FIRE PROTECTION EQUIPMENT, AS ADVISED BY THE OWNER IN SECTION 1A:**

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\_\_\_\_\_

**14. INSPECTION AND SUGGESTED IMPROVEMENTS WERE DISCUSSED WITH THE UNDERSIGNED OWNER OR OWNER'S REPRESENTATIVE?**

YES	NO
X	

Signature of owner or owner's representative \_\_\_\_\_ Date 9/10/2015



**REPORT OF INSPECTION**

**5. WET SYSTEMS**

- a. No. of systems 1 Make & Model 2 1/2" Central  
 b. Are cold weather valves in the appropriate open or closed position?  
 If closed, has piping been drained?  
 c. Has the owner or owner's representative been advised that cold weather valves are not recommended by NFPA?  
 d. Have all the antifreeze systems been tested?  
 e. Date antifreeze systems were tested  
 f. The antifreeze tests indicated protection to:  
 System #1 \_\_\_\_\_ #2 \_\_\_\_\_ #3 \_\_\_\_\_ #4 \_\_\_\_\_ #5 \_\_\_\_\_  
 g. Did alarm valves, waterflow alarm indicators and retards test satisfactorily?

YES	NA	NO
	X	
	X	
	X	
	X	
X		

**6. DRY SYSTEMS**

- a. No. of systems \_\_\_\_\_ Make & Model \_\_\_\_\_  
 Date last trip tested \_\_\_\_\_  
 b. Is the air pressure and priming water levels normal?  
 c. Did the air compressor operate satisfactorily?  
 d. Were all low points drained during this inspection?  
 e. Did all quick opening devices operate satisfactorily?  
 f. Did all the dry valves operate satisfactorily during this inspection?  
 g. Do dry valves appear to be protected from freezing?  
 h. Is the dry valve house heated?

YES	NA	NO
	X	
	X	
	X	
	X	
	X	

**7. SPECIAL SYSTEMS**

- a. No. of systems 1 Make & Model TYCO Preaction  
 Type \_\_\_\_\_  
 b. Were valves tested as required?  
 c. Did all heat responsive systems operate satisfactorily?  
 d. Did the supervisory features operate during testing?  
 Heat Responsive Devices: Type \_\_\_\_\_ Type of test \_\_\_\_\_  
 Valve No. 1... 2... 3... 4... 5... 6... Valve No. 1... 2... 3... 4... 5... 6...  
 Valve No. 1... 2... 3... 4... 5... 6... Valve No. 1... 2... 3... 4... 5... 6...  
 Valve No. 1... 2... 3... 4... 5... 6... Valve No. 1... 2... 3... 4... 5... 6...  
 Valve No. 1... 2... 3... 4... 5... 6... Valve No. 1... 2... 3... 4... 5... 6...  
 Auxiliary equipment: No. \_\_\_\_\_ Type \_\_\_\_\_  
 Location \_\_\_\_\_  
 Test results \_\_\_\_\_

YES	NA	NO
	X	
	X	
	X	

**8. ALARMS**

- a. Did the water motors and gong operate during testing?  
 b. Did the electric alarms operate during testing?  
 c. Did the supervisory alarms operate during testing?

YES	NA	NO
	X	
X		
X		

**9. SPRINKLERS - PIPING**

- a. Do sprinklers generally appear to be in good external condition?  
 b. Do sprinklers generally appear to be free of corrosion, paint, or loading and visible obstructions?  
 c. Are extra sprinklers available on the premises?  
 d. Does the exterior condition of piping, drain valves, check valves, hangers, pressure gauges, open sprinklers and strainers appear to be satisfactory?  
 e. Does the hand hose on the sprinkler system appear to be in satisfactory condition?

YES	NA	NO
X		
		X
X		
X		
	X	

**10. EXPLANATION OF "NO" ANSWERS (For Sections 1B thru 9):**

Sprinklers obstructed in Attic HVAC and boiler room. 2 painted escution in restaurant

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**REPORT OF INSPECTION**

**11. THE INSPECTOR SUGGESTS THE FOLLOWING NECESSARY IMPROVEMENTS, HOWEVER, THESE SUGGESTIONS ARE NOT THE RESULT OF AN ENGINEERING SURVEY:**

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**12. ADJUSTMENTS OR CORRECTIONS MADE:**

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**13. LIST CHANGES IN THE OCCUPANCY HAZARD OR FIRE PROTECTION EQUIPMENT, AS ADVISED BY THE OWNER IN SECTION 1A:**

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**14. INSPECTION AND SUGGESTED IMPROVEMENTS WERE DISCUSSED WITH THE UNDERSIGNED OWNER OR OWNER'S REPRESENTATIVE?**

YES	NO
X	

Signature of owner or owner's representative \_\_\_\_\_

Date \_\_\_\_\_

9/10/2015

**REPORT OF INSPECTION**

BUILDING / LOCATION	<u>RIPTA Ride Bldg.</u>	INSPECTOR	<u>Roy Souza/David Souza</u>
STREET	<u>335 Melrose St</u>	DATE	<u>9/10/2015</u>
CITY / STATE / ZIP	<u>Providence, RI 02907</u>		
ATTN:			

**1. GENERAL**

A. (To be answered by the Owner or Owner's representative)

- a. Have there been any changes in the occupancy classification, machinery or operations since the last inspection?
- b. Have there been any changes or repairs to the fire protection systems since the last inspection?
- c. If a fire has occurred since the last inspection, have all damaged sprinkler system components been replaced?
- d. Has the piping in all dry systems been checked for proper pitch within the past five years?  
Date last checked \_\_\_\_\_ (checking is recommended at least every 5 years)
- e. Has the piping in all systems been checked for obstructive materials?  
Date last checked 6/15/2015 (checking is recommended at least every 5 years)
- f. Have all fire pumps been tested to their full capacity through the use of hose streams or flow meters within the past 12 months?
- g. Are gravity, surface or pressure tanks protected from freezing?
- h. Are any of the sprinklers 50 years old or older?
- i. Are any extra high temperature solder sprinklers regularly exposed to temperatures near 300F?

YES	NA	NO
		X
		X
	X	
	X	
X		X
	X	
	X	
		X
	X	
		X

B. (To be answered by the Inspector)

- a. Have the sprinkler systems been extended to all visible areas of the building?
- b. Does there appear to be proper clearance between the top of all storage and the sprinkler deflector?
- c. Are the building areas protected by a wet system, heated, including its blind attics and perimeter areas, where accessible?
- d. Are all visible exterior openings protected against the entrance of cold air?

X		
X		

**2. CONTROL VALVES**

- a. Are all sprinkler system main control valves and all other valves in the appropriate open or closed position?
- b. Are all control valves sealed or supervised in the open position?

Control Valves	# of Valves	Type	Easily Accessible		Signs		Valve Open		Secured? IF YES, HOW?		(Sealed?) (Locked?) (Supvd.?)	Supervision Operational	
			YES	NO	YES	NO	YES	NO	YES	NO		YES	NO
CITY CONNECTION	1	OSY	X			X	X		X		SUPVD	X	
TANK													
PUMP													
SECTIONAL													
SYSTEM	1	OSY	X			X	X		X		SUPVD	X	
ALARM LINE													

**3. WATER SUPPLIES**

- a. Water supply sources? City: 80 Gravity Tank \_\_\_\_\_

Pressure Fire Pump & Tank NA  
 Pressure Fire Pump & City NA  
 Pressure Fire Pump & Pond NA

Waterflow Test Results Made During This Inspection

Test Pipe Located	Size Test Pipe	Static Pressure Before	Flow Pressure	Static Pressure After	Test Pipe Located	Size Test Pipe	Static Pressure Before	Flow Pressure	Static Pressure After
MAIN DRAIN	2"	80	70	80					
ITV	1/2"	80	75	80					

**4. TANKS, PUMPS, FIRE DEPT. CONNECTIONS**

- a. Do fire pumps, gravity, surface or pressure tanks appear to be in good external conditions?
- b. Are gravity, surface and pressure tanks at the proper pressure and/or water levels?
- c. Are fire dept. connections in satisfactory conditions, couplings free, caps or plugs in place and check valves tight?
- d. Are fire dept. connections visible and accessible?

YES	NA	NO
	X	
	X	
X		
X		

**REPORT OF INSPECTION**

**5. WET SYSTEMS**

- a. No. of systems 1 Make & Model 4" HODGMAN
- b. Are cold weather valves in the appropriate open or closed position?  
If closed, has piping been drained?
- c. Has the owner or owner's representative been advised that cold weather valves are not recommended by NFPA?
- d. Have all the antifreeze systems been tested?
- e. Date antifreeze systems were tested
- f. The antifreeze tests indicated protection to:  
System #1 \_\_\_\_\_ #2 \_\_\_\_\_ #3 \_\_\_\_\_ #4 \_\_\_\_\_ #5 \_\_\_\_\_
- g. Did alarm valves, waterflow alarm indicators and retards test satisfactorily?

YES	NA	NO
	X	
	X	
	X	
	X	
X		

**6. DRY SYSTEMS**

- a. No. of systems \_\_\_\_\_ Make & Model \_\_\_\_\_  
Date last trip tested \_\_\_\_\_
- b. Is the air pressure and priming water levels normal?
- c. Did the air compressor operate satisfactorily?
- d. Were all low points drained during this inspection?
- e. Did all quick opening devices operate satisfactorily?
- f. Did all the dry valves operate satisfactorily during this inspection?
- g. Do dry valves appear to be protected from freezing?
- h. Is the dry valve house heated?

YES	NA	NO
	X	
	X	
	X	
	X	
	X	

**7. SPECIAL SYSTEMS**

- a. No. of systems \_\_\_\_\_ Make & Model \_\_\_\_\_  
Type \_\_\_\_\_
- b. Were valves tested as required?
- c. Did all heat responsive systems operate satisfactorily?
- d. Did the supervisory features operate during testing?

YES	NA	NO
	X	
	X	
	X	

Heat Responsive Devices:

Type	Type of test
Valve No. 1... 2... 3... 4... 5... 6...	Valve No. 1... 2... 3... 4... 5... 6...
Valve No. 1... 2... 3... 4... 5... 6...	Valve No. 1... 2... 3... 4... 5... 6...
Valve No. 1... 2... 3... 4... 5... 6...	Valve No. 1... 2... 3... 4... 5... 6...
Valve No. 1... 2... 3... 4... 5... 6...	Valve No. 1... 2... 3... 4... 5... 6...

Auxiliary equipment: No. \_\_\_\_\_ Type \_\_\_\_\_  
Location \_\_\_\_\_  
Test results \_\_\_\_\_

**8. ALARMS**

- a. Did the water motors and gong operate during testing?
- b. Did the electric alarms operate during testing?
- c. Did the supervisory alarms operate during testing?

YES	NA	NO
		X
X		
X		

**9. SPRINKLERS - PIPING**

- a. Do sprinklers generally appear to be in good external condition?
- b. Do sprinklers generally appear to be free of corrosion, paint, or loading and visible obstructions?
- c. Are extra sprinklers available on the premises?
- d. Does the exterior condition of piping, drain valves, check valves, hangers, pressure gauges, open sprinklers and strainers appear to be satisfactory?
- e. Does the hand hose on the sprinkler system appear to be in satisfactory condition?

YES	NA	NO
X		
X		
X		
X		
	X	

**10. EXPLANATION OF "NO" ANSWERS (For Sections 1B thru 9):**

No Coverage RIPTA offices and Compressor Room

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**REPORT OF INSPECTION**

**11. THE INSPECTOR SUGGESTS THE FOLLOWING NECESSARY IMPROVEMENTS, HOWEVER, THESE SUGGESTIONS ARE NOT THE RESULT OF AN ENGINEERING SURVEY:**

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**12. ADJUSTMENTS OR CORRECTIONS MADE:**

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**13. LIST CHANGES IN THE OCCUPANCY HAZARD OR FIRE PROTECTION EQUIPMENT, AS ADVISED BY THE OWNER IN SECTION 1A:**

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**14. INSPECTION AND SUGGESTED IMPROVEMENTS WERE DISCUSSED WITH THE UNDERSIGNED OWNER OR OWNER'S REPRESENTATIVE?**

YES	NO
X	

Signature of owner or owner's representative \_\_\_\_\_

Date \_\_\_\_\_

9/10/2015

**REPORT OF INSPECTION**

BUILDING / LOCATION	<u>RIPTA Maintenance Bldg.</u>	INSPECTOR	<u>Roy Souza Dave Souza</u>
STREET	<u>705 Elmwood Ave</u>	DATE	<u>9/10/2015</u>
CITY / STATE / ZIP	<u>Providence, RI 02907</u>		
ATTN:			

**1. GENERAL**

A. (To be answered by the Owner or Owner's representative)

- a. Have there been any changes in the occupancy classification, machinery or operations since the last inspection?
- b. Have there been any changes or repairs to the fire protection systems since the last inspection?
- c. If a fire has occurred since the last inspection, have all damaged sprinkler system components been replaced?
- d. Has the piping in all dry systems been checked for proper pitch within the past five years?  
Date last checked \_\_\_\_\_ (checking is recommended at least every 5 years)
- e. Has the piping in all systems been checked for obstructive materials?  
Date last checked 6/1/2015 (checking is recommended at least every 5 years)
- f. Have all fire pumps been tested to their full capacity through the use of hose streams or flow meters within the past 12 months?
- g. Are gravity, surface or pressure tanks protected from freezing?
- h. Are any of the sprinklers 50 years old or older?
- i. Are any extra high temperature solder sprinklers regularly exposed to temperatures near 300F?

YES	NA	NO
		X
		X
	X	
	X	
X		
	X	
	X	
		X
	X	
		X
	X	
X		
X		

B. (To be answered by the Inspector)

- a. Have the sprinkler systems been extended to all visible areas of the building?
- b. Does there appear to be proper clearance between the top of all storage and the sprinkler deflector?
- c. Are the building areas protected by a wet system, heated, including its blind attics and perimeter areas, where accessible?
- d. Are all visible exterior openings protected against the entrance of cold air?

x		
x		

**2. CONTROL VALVES**

- a. Are all sprinkler system main control valves and all other valves in the appropriate open or closed position?
- b. Are all control valves sealed or supervised in the open position?

Control Valves	# of Valves	Type	Easily Accessible		Signs		Valve Open		Secured? IF YES, HOW?		(Sealed?) (Locked?) (Supvd.?)	Supervision Operational	
			YES	NO	YES	NO	YES	NO	YES	NO		YES	NO
CITY CONNECTION	2	OSYPIV	x		X		x		X		supvd	X	
BackFlow	1	BFV	X		X		x		X		supvd	X	
PUMP													
SECTIONAL	2	BFV Wall	X		X		X		X		supvd	X	
SYSTEM	5	BFV	X		X		X		X		supvd	X	
ALARM LINE													

**3. WATER SUPPLIES**

- a. Water supply sources? City: 75 Gravity Tank \_\_\_\_\_

Pressure Fire Pump & Tank NA  
 Pressure Fire Pump & City NA  
 Pressure Fire Pump & Pond NA

Waterflow Test Results Made During This Inspection

Test Pipe Located	Size Test Pipe	Static Pressure Before	Flow Pressure	Static Pressure After	Test Pipe Located	Size Test Pipe	Static Pressure Before	Flow Pressure	Static Pressure After
MAIN DRAIN 1	2"	75	65	75	ITV	1/2"	75	70	75
MAIN DRAIN 2	2"	75	65	75	ITV	1/2"	75	70	75
MAIN DRAIN 3	2"	75	65	75	ITV	1/2"	75	70	75
MAIN DRAIN 4	2"	75	65	75	ITV	1/2"	75	70	75
Main Drain	2"	75	65	75	ITV	1/2"	75	70	75

**4. TANKS, PUMPS, FIRE DEPT. CONNECTIONS**

- a. Do fire pumps, gravity, surface or pressure tanks appear to be in good external conditions?
- b. Are gravity, surface and pressure tanks at the proper pressure and/or water levels?
- c. Are fire dept. connections in satisfactory conditions, couplings free, caps or plugs in place and check valves tight?
- d. Are fire dept. connections visible and accessible?

YES	NA	NO
	X	
	X	
X		
X		

**REPORT OF INSPECTION**

**5. WET SYSTEMS**

- a. No. of systems 4 Make & Model (2) 6" TYCO, 3" TYCO, 4" VictaulicCHECK VALVES 8" Tyco
- b. Are cold weather valves in the appropriate open or closed position?  
If closed, has piping been drained?
- c. Has the owner or owner's representative been advised that cold weather valves are not recommended by NFPA?
- d. Have all the antifreeze systems been tested?
- e. Date antifreeze systems were tested
- f. The antifreeze tests indicated protection to:  
System #1 \_\_\_\_\_ #2 \_\_\_\_\_ #3 \_\_\_\_\_ #4 \_\_\_\_\_ #5 \_\_\_\_\_
- g. Did alarm valves, waterflow alarm indicators and retards test satisfactorily?

YES	NA	NO
	X	
	X	
	X	
	X	
X		

**6. DRY SYSTEMS**

- a. No. of systems \_\_\_\_\_ Make & Model \_\_\_\_\_  
Date last trip tested \_\_\_\_\_
- b. Is the air pressure and priming water levels normal?
- c. Did the air compressor operate satisfactorily?
- d. Were all low points drained during this inspection?
- e. Did all quick opening devices operate satisfactorily?
- f. Did all the dry valves operate satisfactorily during this inspection?
- g. Do dry valves appear to be protected from freezing?
- h. Is the dry valve house heated?

YES	NA	NO
	X	
	X	
	X	
	X	
	X	

**7. SPECIAL SYSTEMS**

- a. No. of systems \_\_\_\_\_ Make & Model \_\_\_\_\_  
Type \_\_\_\_\_
- b. Were valves tested as required?
- c. Did all heat responsive systems operate satisfactorily?
- d. Did the supervisory features operate during testing?

YES	NA	NO
	X	
	X	
	X	

Heat Responsive Devices:

Type	Type of test
Valve No. 1... 2... 3... 4... 5... 6...	Valve No. 1... 2... 3... 4... 5... 6...
Valve No. 1... 2... 3... 4... 5... 6...	Valve No. 1... 2... 3... 4... 5... 6...
Valve No. 1... 2... 3... 4... 5... 6...	Valve No. 1... 2... 3... 4... 5... 6...
Valve No. 1... 2... 3... 4... 5... 6...	Valve No. 1... 2... 3... 4... 5... 6...

Auxiliary equipment: No. \_\_\_\_\_ Type \_\_\_\_\_  
Location \_\_\_\_\_  
Test results \_\_\_\_\_

**8. ALARMS**

- a. Did the water motors and gong operate during testing?
- b. Did the electric alarms operate during testing?
- c. Did the supervisory alarms operate during testing?

YES	NA	NO
	X	
	X	
X		

**9. SPRINKLERS - PIPING**

- a. Do sprinklers generally appear to be in good external condition?
- b. Do sprinklers generally appear to be free of corrosion, paint, or loading and visible obstructions?
- c. Are extra sprinklers available on the premises?
- d. Does the exterior condition of piping, drain valves, check valves, hangers, pressure gauges, open sprinklers and strainers appear to be satisfactory?
- e. Does the hand hose on the sprinkler system appear to be in satisfactory condition?

YES	NA	NO
X		
X		X
X		
X		
	X	

**10. EXPLANATION OF "NO" ANSWERS (For Sections 1B thru 9):**

No Coverage: Server Room, Elevator Machine Room and Electric Room. (9B) Drop Upright Brass 165 degree head below HVAC near M114.

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**REPORT OF INSPECTION**

**11. THE INSPECTOR SUGGESTS THE FOLLOWING NECESSARY IMPROVEMENTS, HOWEVER, THESE SUGGESTIONS ARE NOT THE RESULT OF AN ENGINEERING SURVEY:**

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**12. ADJUSTMENTS OR CORRECTIONS MADE:**

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**13. LIST CHANGES IN THE OCCUPANCY HAZARD OR FIRE PROTECTION EQUIPMENT, AS ADVISED BY THE OWNER IN SECTION 1A:**

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**14. INSPECTION AND SUGGESTED IMPROVEMENTS WERE DISCUSSED WITH THE UNDERSIGNED OWNER OR OWNER'S REPRESENTATIVE?**

YES	NO
X	

Signature of owner or owner's representative \_\_\_\_\_

Date \_\_\_\_\_

9/10/2015

**REPORT OF INSPECTION**

BUILDING / LOCATION	<u>RIPTA Maintenance Bldg.</u>	INSPECTOR	<u>Roy Souza/David Souza</u>
STREET	<u>750 Elmwood Ave</u>	DATE	<u>9/10/2015</u>
CITY / STATE / ZIP	<u>Providence, RI 02907</u>		
ATTN:			

**1. GENERAL**

A. (To be answered by the Owner or Owner's representative)

- a. Have there been any changes in the occupancy classification, machinery or operations since the last inspection?
- b. Have there been any changes or repairs to the fire protection systems since the last inspection?
- c. If a fire has occurred since the last inspection, have all damaged sprinkler system components been replaced?
- d. Has the piping in all dry systems been checked for proper pitch within the past five years?  
Date last checked \_\_\_\_\_ (checking is recommended at least every 5 years)
- e. Has the piping in all systems been checked for obstructive materials?  
Date last checked 6/1/2015 (checking is recommended at least every 5 years)
- f. Have all fire pumps been tested to their full capacity through the use of hose streams or flow meters within the past 12 months?
- g. Are gravity, surface or pressure tanks protected from freezing?
- h. Are any of the sprinklers 50 years old or older?
- i. Are any extra high temperature solder sprinklers regularly exposed to temperatures near 300F?

YES	NA	NO
		X
		X
	X	
	X	
X		
X		
	X	
		X
	X	
		X
X		
X		
X		

B. (To be answered by the Inspector)

- a. Have the sprinkler systems been extended to all visible areas of the building?
- b. Does there appear to be proper clearance between the top of all storage and the sprinkler deflector?
- c. Are the building areas protected by a wet system, heated, including its blind attics and perimeter areas, where accessible?
- d. Are all visible exterior openings protected against the entrance of cold air?

**2. CONTROL VALVES**

- a. Are all sprinkler system main control valves and all other valves in the appropriate open or closed position?
- b. Are all control valves sealed or supervised in the open position?

x		
x		

Control Valves	# of Valves	Type	Easily Accessible		Signs		Valve Open		Secured? IF YES, HOW?		(Sealed?) (Locked?) (Supvd.?)	Supervision Operational	
			YES	NO	YES	NO	YES	NO	YES	NO		YES	NO
CITY CONNECTION	1	OS&Y	X			X	X		X		SUPVD	X	
TANK													
PUMP	4	OSY/3 BFY	X			X	X		X		SUPVD	X	
SECTIONAL	3	BFY	X			X	X		X		SUPVD	X	
SYSTEM	2	BFLY	X			X	X		X		SUPVD	X	
ALARM LINE													

**3. WATER SUPPLIES**

- a. Water supply sources? City: 160 Gravity Tank \_\_\_\_\_

Pressure Fire Pump & Tank NA  
 Pressure Fire Pump & City NA  
 Pressure Fire Pump & Pond NA

Waterflow Test Results Made During This Inspection

Test Pipe Located	Size Test Pipe	Static Pressure Before	Flow Pressure	Static Pressure After	Test Pipe Located	Size Test Pipe	Static Pressure Before	Flow Pressure	Static Pressure After
MAIN DRAIN 1	2"	160	140	160	ITV	1/2"	160	140	160
MAIN DRAIN 2	2"	160	140	160	ITV	1/2"	160	140	160

**4. TANKS, PUMPS, FIRE DEPT. CONNECTIONS**

- a. Do fire pumps, gravity, surface or pressure tanks appear to be in good external conditions?
- b. Are gravity, surface and pressure tanks at the proper pressure and/or water levels?
- c. Are fire dept. connections in satisfactory conditions, couplings free, caps or plugs in place and check valves tight?
- d. Are fire dept. connections visible and accessible?

YES	NA	NO
X		
	X	
X		
X		

**REPORT OF INSPECTION**

**5. WET SYSTEMS**

- a. No. of systems 2 Make & Model victaulic
- b. Are cold weather valves in the appropriate open or closed position?  
If closed, has piping been drained?
- c. Has the owner or owner's representative been advised that cold weather valves are not recommended by NFPA?
- d. Have all the antifreeze systems been tested?
- e. Date antifreeze systems were tested
- f. The antifreeze tests indicated protection to:  
System #1 \_\_\_\_\_ #2 \_\_\_\_\_ #3 \_\_\_\_\_ #4 \_\_\_\_\_ #5 \_\_\_\_\_
- g. Did alarm valves, waterflow alarm indicators and retards test satisfactorily?

YES	NA	NO
	X	
	X	
	X	
	X	
		X

**6. DRY SYSTEMS**

- a. No. of systems \_\_\_\_\_ Make & Model \_\_\_\_\_  
Date last trip tested \_\_\_\_\_
- b. Is the air pressure and priming water levels normal?
- c. Did the air compressor operate satisfactorily?
- d. Were all low points drained during this inspection?
- e. Did all quick opening devices operate satisfactorily?
- f. Did all the dry valves operate satisfactorily during this inspection?
- g. Do dry valves appear to be protected from freezing?
- h. Is the dry valve house heated?

YES	NA	NO
	X	
	X	
	X	
	X	
	X	

**7. SPECIAL SYSTEMS**

- a. No. of systems \_\_\_\_\_ Make & Model \_\_\_\_\_  
Type \_\_\_\_\_
- b. Were valves tested as required?
- c. Did all heat responsive systems operate satisfactorily?
- d. Did the supervisory features operate during testing?

YES	NA	NO
	X	
	X	
	X	

Heat Responsive Devices:

Type	Type of test
Valve No. 1... 2... 3... 4... 5... 6...	Valve No. 1... 2... 3... 4... 5... 6...
Valve No. 1... 2... 3... 4... 5... 6...	Valve No. 1... 2... 3... 4... 5... 6...
Valve No. 1... 2... 3... 4... 5... 6...	Valve No. 1... 2... 3... 4... 5... 6...
Valve No. 1... 2... 3... 4... 5... 6...	Valve No. 1... 2... 3... 4... 5... 6...

Auxiliary equipment: No. \_\_\_\_\_ Type \_\_\_\_\_  
Location \_\_\_\_\_  
Test results \_\_\_\_\_

**8. ALARMS**

- a. Did the water motors and gong operate during testing?
- b. Did the electric alarms operate during testing?
- c. Did the supervisory alarms operate during testing?

YES	NA	NO
	X	
	X	
	x	

**9. SPRINKLERS - PIPING**

- a. Do sprinklers generally appear to be in good external condition?
- b. Do sprinklers generally appear to be free of corrosion, paint, or loading and visible obstructions?
- c. Are extra sprinklers available on the premises?
- d. Does the exterior condition of piping, drain valves, check valves, hangers, pressure gauges, open sprinklers and strainers appear to be satisfactory?
- e. Does the hand hose on the sprinkler system appear to be in satisfactory condition?

YES	NA	NO
X		
X		
X		
X		
	X	

**10. EXPLANATION OF "NO" ANSWERS (For Sections 1B thru 9):**

No Coverage: Telecom Room 100. (9B) Obstructed sprinkler Janitors closet room 204 and Mechanical Room room 203( 165 degree brass uprights). Missing escution buildings ground office.

FIRE PUMP TEST PERFORMED 6/2015

**REPORT OF INSPECTION**

**11. THE INSPECTOR SUGGESTS THE FOLLOWING NECESSARY IMPROVEMENTS, HOWEVER, THESE SUGGESTIONS ARE NOT THE RESULT OF AN ENGINEERING SURVEY:**

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**12. ADJUSTMENTS OR CORRECTIONS MADE:**

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**13. LIST CHANGES IN THE OCCUPANCY HAZARD OR FIRE PROTECTION EQUIPMENT, AS ADVISED BY THE OWNER IN SECTION 1A:**

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**14. INSPECTION AND SUGGESTED IMPROVEMENTS WERE DISCUSSED WITH THE UNDERSIGNED OWNER OR OWNER'S REPRESENTATIVE?**

YES	NO
X	

Signature of owner or owner's representative \_\_\_\_\_

Date \_\_\_\_\_

9/10/2015

**REPORT OF INSPECTION**

BUILDING / LOCATION	<u>RIPTA Maintenance Bldg.</u>	INSPECTOR	<u>Roy Souza/David Souza</u>
STREET	<u>750 Elmwood Ave</u>	DATE	<u>9/10/2015</u>
CITY / STATE / ZIP	<u>Providence, RI 02907</u>		
ATTN:			

**1. GENERAL**

A. (To be answered by the Owner or Owner's representative)

- a. Have there been any changes in the occupancy classification, machinery or operations since the last inspection?
- b. Have there been any changes or repairs to the fire protection systems since the last inspection?
- c. If a fire has occurred since the last inspection, have all damaged sprinkler system components been replaced?
- d. Has the piping in all dry systems been checked for proper pitch within the past five years?  
Date last checked \_\_\_\_\_ (checking is recommended at least every 5 years)
- e. Has the piping in all systems been checked for obstructive materials?  
Date last checked 6/1/2015 (checking is recommended at least every 5 years)
- f. Have all fire pumps been tested to their full capacity through the use of hose streams or flow meters within the past 12 months?
- g. Are gravity, surface or pressure tanks protected from freezing?
- h. Are any of the sprinklers 50 years old or older?
- i. Are any extra high temperature solder sprinklers regularly exposed to temperatures near 300F?

YES	NA	NO
		X
		X
	X	
	X	
X		
X		
	X	
		X
	X	
		X
X		
X		
X		

B. (To be answered by the Inspector)

- a. Have the sprinkler systems been extended to all visible areas of the building?
- b. Does there appear to be proper clearance between the top of all storage and the sprinkler deflector?
- c. Are the building areas protected by a wet system, heated, including its blind attics and perimeter areas, where accessible?
- d. Are all visible exterior openings protected against the entrance of cold air?

**2. CONTROL VALVES**

- a. Are all sprinkler system main control valves and all other valves in the appropriate open or closed position?
- b. Are all control valves sealed or supervised in the open position?

x		
x		

Control Valves	# of Valves	Type	Easily Accessible		Signs		Valve Open		Secured? IF YES, HOW?		(Sealed?) (Locked?) (Supvd.?)	Supervision Operational	
			YES	NO	YES	NO	YES	NO	YES	NO		YES	NO
CITY CONNECTION	1	OS&Y	X			X	X		X		SUPVD	X	
TANK													
PUMP	4	OSY/3 BFY	X			X	X		X		SUPVD	X	
SECTIONAL	3	BFY	X			X	X		X		SUPVD	X	
SYSTEM	2	BFLY	X			X	X		X		SUPVD	X	
ALARM LINE													

**3. WATER SUPPLIES**

- a. Water supply sources? City: 160 Gravity Tank \_\_\_\_\_

Pressure Fire Pump & Tank NA  
 Pressure Fire Pump & City NA  
 Pressure Fire Pump & Pond NA

Waterflow Test Results Made During This Inspection

Test Pipe Located	Size Test Pipe	Static Pressure Before	Flow Pressure	Static Pressure After	Test Pipe Located	Size Test Pipe	Static Pressure Before	Flow Pressure	Static Pressure After
MAIN DRAIN 1	2"	160	140	160	ITV	1/2"	160	140	160
MAIN DRAIN 2	2"	160	140	160	ITV	1/2"	160	140	160

**4. TANKS, PUMPS, FIRE DEPT. CONNECTIONS**

- a. Do fire pumps, gravity, surface or pressure tanks appear to be in good external conditions?
- b. Are gravity, surface and pressure tanks at the proper pressure and/or water levels?
- c. Are fire dept. connections in satisfactory conditions, couplings free, caps or plugs in place and check valves tight?
- d. Are fire dept. connections visible and accessible?

YES	NA	NO
X		
	X	
X		
X		

**REPORT OF INSPECTION**

**5. WET SYSTEMS**

- a. No. of systems 2 Make & Model victaulic
- b. Are cold weather valves in the appropriate open or closed position?  
If closed, has piping been drained?
- c. Has the owner or owner's representative been advised that cold weather valves are not recommended by NFPA?
- d. Have all the antifreeze systems been tested?
- e. Date antifreeze systems were tested
- f. The antifreeze tests indicated protection to:  
System #1 \_\_\_\_\_ #2 \_\_\_\_\_ #3 \_\_\_\_\_ #4 \_\_\_\_\_ #5 \_\_\_\_\_
- g. Did alarm valves, waterflow alarm indicators and retards test satisfactorily?

YES	NA	NO
	X	
	X	
	X	
	X	
		X

**6. DRY SYSTEMS**

- a. No. of systems \_\_\_\_\_ Make & Model \_\_\_\_\_  
Date last trip tested \_\_\_\_\_
- b. Is the air pressure and priming water levels normal?
- c. Did the air compressor operate satisfactorily?
- d. Were all low points drained during this inspection?
- e. Did all quick opening devices operate satisfactorily?
- f. Did all the dry valves operate satisfactorily during this inspection?
- g. Do dry valves appear to be protected from freezing?
- h. Is the dry valve house heated?

YES	NA	NO
	X	
	X	
	X	
	X	
	X	

**7. SPECIAL SYSTEMS**

- a. No. of systems \_\_\_\_\_ Make & Model \_\_\_\_\_  
Type \_\_\_\_\_
- b. Were valves tested as required?
- c. Did all heat responsive systems operate satisfactorily?
- d. Did the supervisory features operate during testing?

YES	NA	NO
	X	
	X	
	X	

Heat Responsive Devices:

Type	Type of test
Valve No. 1... 2... 3... 4... 5... 6...	Valve No. 1... 2... 3... 4... 5... 6...
Valve No. 1... 2... 3... 4... 5... 6...	Valve No. 1... 2... 3... 4... 5... 6...
Valve No. 1... 2... 3... 4... 5... 6...	Valve No. 1... 2... 3... 4... 5... 6...
Valve No. 1... 2... 3... 4... 5... 6...	Valve No. 1... 2... 3... 4... 5... 6...

Auxiliary equipment: No. \_\_\_\_\_ Type \_\_\_\_\_  
Location \_\_\_\_\_  
Test results \_\_\_\_\_

**8. ALARMS**

- a. Did the water motors and gong operate during testing?
- b. Did the electric alarms operate during testing?
- c. Did the supervisory alarms operate during testing?

YES	NA	NO
	X	
	X	
	x	

**9. SPRINKLERS - PIPING**

- a. Do sprinklers generally appear to be in good external condition?
- b. Do sprinklers generally appear to be free of corrosion, paint, or loading and visible obstructions?
- c. Are extra sprinklers available on the premises?
- d. Does the exterior condition of piping, drain valves, check valves, hangers, pressure gauges, open sprinklers and strainers appear to be satisfactory?
- e. Does the hand hose on the sprinkler system appear to be in satisfactory condition?

YES	NA	NO
X		
X		
X		
X		
	X	

**10. EXPLANATION OF "NO" ANSWERS (For Sections 1B thru 9):**

No Coverage: Telecom Room 100. (9B) Obstructed sprinkler Janitors closet room 204 and Mechanical Room room 203( 165 degree brass uprights). Missing escution buildings ground office.

FIRE PUMP TEST PERFORMED 6/2015

**REPORT OF INSPECTION**

**11. THE INSPECTOR SUGGESTS THE FOLLOWING NECESSARY IMPROVEMENTS, HOWEVER, THESE SUGGESTIONS ARE NOT THE RESULT OF AN ENGINEERING SURVEY:**

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**12. ADJUSTMENTS OR CORRECTIONS MADE:**

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**13. LIST CHANGES IN THE OCCUPANCY HAZARD OR FIRE PROTECTION EQUIPMENT, AS ADVISED BY THE OWNER IN SECTION 1A:**

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**14. INSPECTION AND SUGGESTED IMPROVEMENTS WERE DISCUSSED WITH THE UNDERSIGNED OWNER OR OWNER'S REPRESENTATIVE?**

YES	NO
X	

Signature of owner or owner's representative \_\_\_\_\_

Date \_\_\_\_\_

9/10/2015

## Sprinkler Maintenance Checklist / Request For Quotation

Date: 9/10/2015  
Company: RIPTA Account Number: 490183  
Address: 265 MELROSE  
City: PROVIDENCE State: RI Zip: 02907  
Contact: Mike Vendetti Phone: 784-9500 Fax: 784-9595

1. Has the sprinkler system been extended to all visible areas of the building? N (Y or N)
2. Has the piping in all dry systems been checked for proper pitch within the past five years? N/A (Y or N or N/A)  
*Recommended at least every 5 years to ensure proper installation of the sprinkler piping.*
3. Has the piping in all systems been checked for obstructive materials? Yes (Y or N or N/A)  
*As required every 5 years by NFPA 25 - 2002 Edition - Chapter 13.2.1*
4. Are there any installed standard sprinklers 50 years old or older, quick response sprinklers 20 years old or older, dry sprinklers 10 years old or older or extra high temperature sprinklers 5 years old or older? Yes (Y or N)  
*As required by NFPA 25 - 2002 Edition - Chapter 5.3.1.1.1*
5. Are there any installed sprinklers that are in need of replacement due to leakage, corrosion, loading of foreign materials, paint or physical damage? Yes (Y or N)  
*As required by NFPA 25 - 2002 Edition - Chapter 5.2.1.1.1*
6. Have the pressure gauges been tested or replaced in the last 5 years? Yes (Y or N)  
*As required every 5 years by NFPA 25 - 2002 Edition - Chapter 5.3.2*
7. Have all alarm valves and all associated trim been internally inspected in the past 5 years? Yes (Y or N)  
*As required every 5 years by NFPA 25 - 2002 Edition - Chapter 12.4.1.1*
8. Are extra \*sprinklers and a \*\*sprinkler wrench available on the premises? Yes (Y or N)  
*\*If no please note the number and type needed, and or the wrench type needed  
As required by NFPA 25 - 2002 Edition - Chapter 5.2.1.3*
9. Has the freezing point of solutions in antifreeze been tested in the last year? NA (Y or N or N/A)  
*As required by annually by NFPA 25 - 2002 Edition - Chapter 5.3.4*
10. Has the system ever been analyzed for MIC (microbiologically influenced corrosion), corrosion and bacterial problems? N (Y or N)  
*Recommended to insure the integrity of the sprinkler piping, valves and associated equipment.*

Notes: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\*Please note if an alarm technician would be needed to assist with the above recommended recommendations.

The aforementioned recommendation is respectfully submitted to improve your company's fire and safety protection and to keep up with OSHA, NFPA, and local fire codes. Please call our Deficiency Specialist team at (401) 288-4600 to rectify these deficiencies or fax your approval to (401) 721-0744.

Authorized Signature/Purchase Order Number: \_\_\_\_\_

\_\_\_\_\_  
Customer's Signature

GUERTIN  
\_\_\_\_\_  
Inspector's Signature

## Sprinkler Maintenance Checklist / Request For Quotation

Date: 9/10/2015  
Company: RIPTA Account Number: 664378  
Address: 335 MELROSE  
City: PROVIDENCE State: RI Zip: 02907  
Contact: Mike Vendetti Phone: 784-9570 Fax: 784-9595

1. Has the sprinkler system been extended to all visible areas of the building? N (Y or N)
2. Has the piping in all dry systems been checked for proper pitch within the past five years? NA (Y or N or N/A)  
*Recommended at least every 5 years to ensure proper installation of the sprinkler piping.*
3. Has the piping in all systems been checked for obstructive materials? Yes (Y or N or N/A)  
*As required every 5 years by NFPA 25 - 2002 Edition - Chapter 13.2.1*
4. Are there any installed standard sprinklers 50 years old or older, quick response sprinklers 20 years old or older, dry sprinklers 10 years old or older or extra high temperature sprinklers 5 years old or older? N (Y or N)  
*As required by NFPA 25 - 2002 Edition - Chapter 5.3.1.1.1*
5. Are there any installed sprinklers that are in need of replacement due to leakage, corrosion, loading of foreign materials, paint or physical damage? N (Y or N)  
*As required by NFPA 25 - 2002 Edition - Chapter 5.2.1.1.1*
6. Have the pressure gauges been tested or replaced in the last 5 years? Yes (Y or N)  
*As required every 5 years by NFPA 25 - 2002 Edition - Chapter 5.3.2*
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*\*If no please note the number and type needed, and or the wrench type needed*  
*As required by NFPA 25 - 2002 Edition - Chapter 5.2.1.3*
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10. Has the system ever been analyzed for MIC (microbiologically influenced corrosion), corrosion and bacterial problems? N (Y or N)  
*Recommended to insure the integrity of the sprinkler piping, valves and associated equipment.*

Notes: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\*Please note if an alarm technician would be needed to assist with the above recommended recommendations.

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Authorized Signature/Purchase Order Number: \_\_\_\_\_

\_\_\_\_\_  
Customer's Signature

Roy Souza  
\_\_\_\_\_  
Inspector's Signature

## Sprinkler Maintenance Checklist / Request For Quotation

Date: 9/10/2015  
Company: RIPTA Account Number: 664378  
Address: 750 ELMWOOD  
City: PROV. RI State: MA Zip: 02907  
Contact: Mike Vendetti Phone: 784-9570 Fax: 784-9595

1. Has the sprinkler system been extended to all visible areas of the building? No (Y or N)
2. Has the piping in all dry systems been checked for proper pitch within the past five years? NA (Y or N or N/A)  
*Recommended at least every 5 years to ensure proper installation of the sprinkler piping.*
3. Has the piping in all systems been checked for obstructive materials? Yes (Y or N or N/A)  
*As required every 5 years by NFPA 25 - 2002 Edition - Chapter 13.2.1*
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8. Are extra \*sprinklers and a \*\*sprinkler wrench available on the premises? Y&N (Y or N)  
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Notes: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\*Please note if an alarm technician would be needed to assist with the above recommended recommendations.

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Authorized Signature/Purchase Order Number: \_\_\_\_\_

\_\_\_\_\_  
Customer's Signature

Roy Souza  
\_\_\_\_\_  
Inspector's Signature

