

FIRE SPRINKLER DESIGN BASIS

Owner's Information Certificate

1. Name/Address of property to be protected with sprinkler protection :

2. Name of building owner : _____
3. Existing or planned construction is : (check as applicable)
_____ Fire resistive or non-combustible
_____ Wood framed or ordinary (masonry walls with wood beams)
4. Is the facility/property, including all above ceiling spaces, maintained at a minimum 40 degrees (F) in order to prevent freezing of the system ? _____ (Y/N).
If not, please list such areas : _____ .
5. Is the facility/property capable of supporting the dead load of the fire sprinkler system (the weight of the water filled pipe plus an additional 250 lbs. at each point of hanging) ? _____ (Y/N).
6. Is the facility/property used for , or intended to be used for, rack or palletized storage ? _____ (Y/N).
7. List the insurance company providing coverage for the facility/property :

Do they have any additional requirements above and beyond those listed in NFPA 13 ? _____ (Y/N).
8. Does the building have combustible concealed spaces (such as spaces above suspended ceilings with exposed wood or combustible wiring) ? _____ (Y/N). If so, please list them below :

9. Is the system installation intended for one of the following special occupancies :

- Aircraft hanger _____ (Y/N)
- Fixed guideway transit system _____ (Y/N)
- Race track stable _____ (Y/N)
- Marine terminal, pier, or wharf _____ (Y/N)
- Airport terminal _____ (Y/N)
- Aircraft engine test facility _____ (Y/N)
- Power plant _____ (Y/N)
- Water cooling tower _____ (Y/N)

10. Indicate whether any of the following special materials are intended to be present :

- Flammable or combustible liquids _____ (Y/N)
- Aerosol products _____ (Y/N)
- Nitrate film _____ (Y/N)
- Pyroxylin plastic _____ (Y/N)
- Compressed or liquefied gas cylinders _____ (Y/N)
- Liquid or solid oxidizers _____ (Y/N)
- Organic peroxide formulations _____ (Y/N)
- Idle pallets _____ (Y/N)

If the answer to any of the above is “yes”, describe type, location, arrangement, and intended maximum quantities : _____

11. Indicate whether the protection is intended for one of the following specialized occupancies or areas :

- Spray area or mixing room _____ (Y/N)
- Solvent extraction _____ (Y/N)
- Laboratory using chemicals _____ (Y/N)
- Oxygen-fuel gas system for welding or cutting _____ (Y/N)
- Acetylene cylinder charging _____ (Y/N)
- Production or use of compressed or liquefied gases _____ (Y/N)
- Commercial cooking operation _____ (Y/N)
- Class A hyperbaric chamber _____ (Y/N)
- Cleanroom _____ (Y/N)
- Incinerator or waste handling system _____ (Y/N)
- Linen handling system _____ (Y/N)
- Industrial furnace _____ (Y/N)
- Water-cooling tower _____ (Y/N)

If the answer to any of the above is “yes”, describe type, location, arrangement, and intended maximum quantities : _____

12. Will there be any storage of products over 10 ft. (3.6 m) in height? _____ (Y/N).

If the answer is "yes", describe product, intended storage arrangement, and height : _____

13. Will there be any storage of plastic, rubber, or similar products over 5 ft (1.5 m) high? _____ (Y/N).

If the answer is "yes", describe product, intended storage arrangement, and height : _____

I certify that I have knowledge of the intended use of this property and that the above information is correct.

Signature of owner's representative or agent : _____

Date : _____

Name of owner's representative or agent completing certificate (print) : _____

Relationship and firm of agent (print) : _____