

SANTA ROSA FIRE DEPARTMENT

FIRE PREVENTION BUREAU

INSPECTION CHECKLIST

July 1, 2010



FIXED EXTINGUISHING SYSTEMS (HOOD SYSTEM)

Address:

Permit #:

Inspector:

Date Inspected:

Status:

Inspector:

Date Inspected:

Status:

A-Approved, R-Re-inspection Required

This Checklist outlines general requirements. Information contained herein applies to typical instances and may not address all circumstances.

CODE REFERENCES

2007 California Fire Code (CFC), Chapter 9 Section 905
National Fire Protection Association (NFPA) 17 and 96
International Mechanical Code (IMC)

REQUIRED INSPECTIONS

1. System function test.
2. Fire Alarm test if applicable.

FILE REVIEW

General

- | | Y | N | |
|----|--------------------------|--------------------------|--|
| 1. | <input type="checkbox"/> | <input type="checkbox"/> | Approved plans and permit on site. |
| 2. | <input type="checkbox"/> | <input type="checkbox"/> | Plans match appliance layout, system manufacturer model and size. |
| 3. | <input type="checkbox"/> | <input type="checkbox"/> | System complies with UL 300 Standard. CFC 904.11 |
| 4. | <input type="checkbox"/> | <input type="checkbox"/> | Gas and electric supplies are hooked up and activated. |
| 5. | <input type="checkbox"/> | <input type="checkbox"/> | If required for evacuation of a building/premises, fire alarm is linked to the suppression system. CFC 904.3.5 |

FIELD INSPECTION

General

1. Verify suppression system installation is consistent with approved plans.
2. Verify nozzle locations match what is depicted on approved plans.
3. Verify all appliances are protected with approved nozzles. CFC 904.11

2373 Circadian Way, Santa Rosa 95407 Phone: 707-543-4351 Fax: 707-543-3218 www.santarosafd.com

Inspection Checklist
Fixed Extinguishing System

- | | Y | N | |
|-----|--------------------------|--------------------------|--|
| 4. | <input type="checkbox"/> | <input type="checkbox"/> | Verify the kitchen hood must extend at least 6" from all appliances. |
| 5. | <input type="checkbox"/> | <input type="checkbox"/> | Verify a 9" splash guard or a 16" separation must be present on a fryer if it sits next to an open-flamed, gas-fired appliance,. |
| 6. | <input type="checkbox"/> | <input type="checkbox"/> | Verify balloons are in place on all nozzles (plenum, duct shaft, and over all appliances). |
| 7. | <input type="checkbox"/> | <input type="checkbox"/> | Industry Standard - Verify Inert (nitrogen or CO2) gas supply hooked up to system for test. |
| 8. | <input type="checkbox"/> | <input type="checkbox"/> | Verify system functionality by both manual pull station, and a test link located in the plenum chamber. |
| 9. | <input type="checkbox"/> | <input type="checkbox"/> | Verify system actuate immediately upon the pull station activation or cutting the test link. |
| 10. | <input type="checkbox"/> | <input type="checkbox"/> | Verify gas appliances shut off - CFC 904.3.3. |
| 11. | <input type="checkbox"/> | <input type="checkbox"/> | Verify electrical equipment shut off. The exhaust fan shall continue to operate - CFC 904.3.3. |
| 12. | <input type="checkbox"/> | <input type="checkbox"/> | Verify the building fire alarm system activate (if required) - CFC 904.3.5. |
| 13. | <input type="checkbox"/> | <input type="checkbox"/> | Manufacture Standard Method - Verify balloons inflated properly (depending upon flow points) to show correct nozzle flow. |
| 14. | <input type="checkbox"/> | <input type="checkbox"/> | Verify system by second means of activation. Pull station or Test Link (Circle one) - CFC 904.11.1 |
| 15. | <input type="checkbox"/> | <input type="checkbox"/> | Verify all penetrations of the hood are protected by UL approved grease-seals - CFC 904.11. |
| 16. | <input type="checkbox"/> | <input type="checkbox"/> | Industry Standard - Verify all pipe threads are Teflon-taped per manufacture listing or industry standard. |
| 17. | <input type="checkbox"/> | <input type="checkbox"/> | Verify nozzles are correct for appliances and aimed correctly - CFC 904.4.1. |
| 18. | <input type="checkbox"/> | <input type="checkbox"/> | Verify Class K fire extinguisher is mounted, tagged and sealed. |
| 19. | <input type="checkbox"/> | <input type="checkbox"/> | Post required signage for Class K extinguisher - CFC 904.11.5.2. |
| 20. | <input type="checkbox"/> | <input type="checkbox"/> | Verify nozzle caps have been installed after acceptance test. |
| 21. | <input type="checkbox"/> | <input type="checkbox"/> | Verify system has been tagged with proper State Fire Marshal's certification tag – Title 19 CCR. |
| 22. | <input type="checkbox"/> | <input type="checkbox"/> | Verify Owner's Manual left with owner - NFPA 17. |