



**Incorporated Village of Westhampton Beach**

DEPARTMENT OF BUILDING AND ZONING

165 Mill Road, Westhampton Beach, New York 11978

(631) 288-3478 – Fax (631) 288-4332



**FIRE SPRINKLER SYSTEM**  
**INSPECTION & TESTING CERTIFICATION FORM**

**CAUTION: NOTIFY ALL OCCUPANTS AND ANY AGENCIES WHO MIGHT RESPOND BEFORE TESTING SYSTEM. FAILURE TO DO SO MAY RESULT IN LEGAL ACTION AGAINST THE INSPECTOR!**  
PLEASE PRINT OR TYPE ALL INFORMATION

NAME OF PREMISES: \_\_\_\_\_

ADDRESS OF PREMISES: \_\_\_\_\_, WESTHAMPTON BEACH

**FIRE DISTRICT:** \_\_\_\_\_

NAME OF OCCUPANT/AGENT PRESENT: \_\_\_\_\_

TYPE OF SYSTEM: \_\_\_\_\_ IF DRY PIPE, DATE OF TRIP TEST: \_\_\_\_\_  
(WET, DRYP PIPE, PRE-ACTION, ETC)

2" MAIN DRAIN TEST:

PRESSURE BEFORE: \_\_\_\_\_ PRESSURE DURING: \_\_\_\_\_ PRESSURE AFTER: \_\_\_\_\_

LIST DEFICIENCIES NOTED: \_\_\_\_\_

**WERE ALL DEFICIENCIES NOTED ABOVE CORRECTED?** \_\_\_\_\_ **IF NOT, WHY:** \_\_\_\_\_

NAME OF INSPECTING FIRM: \_\_\_\_\_

ADDRESS OF INSPECTING FIRM: \_\_\_\_\_

INSPECTING FIRM PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

**CERTIFICATION: I, an employee of the Inspecting Firm listed above, do hereby certify that the sprinkler system described above was inspected in accordance with the applicable portions of NFPA 25 (Current Version), particularly Table 2-1 and Table 9-1 of NFPA 25. This Certification does not imply that items requiring daily, weekly, monthly or quarterly inspection or testing were performed at the specified intervals, but does imply that all such items were inspected or tested and appeared to function as noted in this certification at the time of the inspection. I certify that this inspection has been properly conducted and all of the above statements are true and correct to the best of my knowledge.**

\_\_\_\_\_  
Print Name of Inspector

\_\_\_\_\_  
Signature of Inspector

\_\_\_\_\_  
Date of Inspection

**ANY FALSE STATEMENT MADE HEREIN IS PUNISHABLE AS A MISDEMEANOR PURSUANT TO SECTION 210.45 OF THE NEW YORK STATE PENAL LAW.**

(This form does **not** need to be notarized.)

<b>For Office Use</b>	<b>Date Received:</b> _____
<input type="checkbox"/> <b>APPROVED</b>	<input type="checkbox"/> <b>DENIED</b>
<b>FM</b> _____	<b>Date Reviewed:</b> _____