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|-----------------------------|--|---|---|-------|-----|
| Property Information | |  | Contractor or Licensed Owner Information | | |
| Building Name | | | Name | | |
| Address | | | Address | | |
| City | | | City | St. | Zip |
| Contact Person | | | License # | Phone | |
| | | <input type="checkbox"/> SFM | Job # | | |
| | | <input type="checkbox"/> CSLB | Misc. | | |

| Riser Information | | | Main Drain Test (Annual) | | | | |
|---|----------|----------------|----------------------------------|-------------------------|-------------------|-----------------------|---------|
| Riser No. | Location | Riser Diameter | Main Drain Diameter | Initial Static Pressure | Residual Pressure | Final Static Pressure | P,F,N/A |
| | | | | | | | |
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| | | | | | | | |
| <input type="checkbox"/> This building has more than 5 risers. See additional AES 2.9 form attached | | | Number of AES 2.9 forms attached | | | | |

| Quarterly Inspections | | | | | | | |
|---|---|---|--|------|------|------|------|
| I = Inspection T = Test M = Maintenance | | | P = Pass F = Fail N/A = Not Applicable | | | | |
| Item | | Description | NFPA 25 CA ed. Reference | Date | Date | Date | Date |
| 1.1 | I | Control Valves – Identification Sign | 13.3.1 | | | | |
| 1.2 | I | Control Valves – Inspection | 13.3.2 | | | | |
| 1.3 | I | Waterflow Alarm Devices | 5.2.5 | | | | |
| 1.4 | I | Supervisory Devices | 5.2.5 | | | | |
| 1.5 | I | Gauges (Wet Pipe Systems) | 5.2.4.1 | | | | |
| 1.6 | I | Enter Water Supply Pressure Below Riser Check | 5.2.4.1 | psi | psi | psi | psi |
| 1.7 | I | Enter Water Supply Pressure Above Riser Check | 5.2.4.1 | psi | psi | psi | psi |
| 1.8 | I | Pressure Readings Acceptable | 5.2.4.1 | | | | |
| 1.9 | I | Hydraulic Design Information Sign <i>(for hydraulically designed systems)</i> | 5.2.6 | | | | |
| 1.10 | I | General Information Sign <i>(not required for system prior to 2007 edition of NFPA 13)</i> | 5.2.8 | | | | |
| 1.11 | I | Heat Tape | 5.2.7 | | | | |
| 1.12 | I | Spare Sprinklers | 5.2.1.4 | | | | |
| 1.13 | I | Fire Department Connections | 13.7 | | | | |
| 1.14 | I | Alarm Valves – Exterior Inspection | 13.4.1 | | | | |
| 1.15 | I | Pressure Reducing Valves | 13.5.1.1 | | | | |
| 1.16 | I | Backflow Preventers | 13.6.1 | | | | |
| 1.17 | I | Small Hose Connections - Hose Valve* | 5.1.6, 13.5.2 13.5.5.1 | | | | |
| 1.18 | I | PRV – Fire Sprinkler Systems | 13.5.1.1 | | | | |

* Small hose connections are hose valves and optional hose supplied by the fire sprinkler system. They do not include Class I, II, or III standpipe systems.

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| Property Information |  | Contractor or Licensed Owner Information |
| Building Name | | Name |
| Address | | Job # |
| City | | |

ANNUAL INSPECTION, TESTING, AND MAINTENANCE
Include ALL Quarterly Inspections

I = Inspection T = Test M = Maintenance P = Pass F = Fail N/A = Not Applicable

| Item | | Description | NFPA 25 CA ed. Reference | Date | Comments Only | P,F,N/A |
|------|---|---|--------------------------|------|---|---------|
| 1.19 | I | Sprinklers | 5.2.1 | | | |
| 1.20 | I | Buildings (Freeze Protection) | 4.1.1.1 | | Owner's Responsibility | |
| 1.21 | I | Pipe and Fittings | 5.2.2 | | | |
| 1.22 | I | Hangers | 5.2.3 | | | |
| 1.23 | I | Seismic Braces | 5.2.3 | | | |
| 2.1 | T | Field Service Test Required <i>(Send Report to Fire Code Official)</i> | 5.3.1 | | If REQUIRED, Enter 'F' until results are returned from Lab | |
| 2.2 | T | Recalled Sprinklers <i>If not present = Pass; If present = Fail</i> | Title 19 904.1(c) | | | |
| 2.3 | T | Water Flow Alarm Devices <i>90 sec. maximum - (Enter Time)</i> | 5.3.3 13.2.6 | | sec. | |
| 2.4 | T | Main Drain Test <i>(Enter data on Page 1 of this form)</i> | 13.2.5 13.3.3.4 | | | |
| 2.5 | T | Control Valve - Position | 13.3.3.2 | | | |
| 2.6 | T | Control Valve – Operation | 13.3.3.1 | | | |
| 2.7 | T | Supervisory Devices | 13.3.3.5 | | | |
| 2.8 | T | Backflow Preventer Assemblies | 13.6.2 | | | |
| 2.9 | T | Small Hose Connections* <i>w/PRV Hose Valves – Partial Flow Test</i> | 13.5.2.3 13.5.3.3 | | | |
| 2.10 | T | PRV – Fire Sprinkler Systems | 13.5.1.3 | | | |
| 3.1 | M | Control Valves | 13.3.4 | | | |
| 3.2 | M | Small Hose Connections* | 13.5.6.3 | | | |
| 3.3 | M | Obstruction Investigation required <i>(If "Yes", see Deficiencies and Comments Section for Results.)</i> | 14.3 | | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| 3.4 | M | System Returned to Service | 4.5.3 | | <input type="checkbox"/> Yes <input type="checkbox"/> No | |

* Small hose connections are hose valves and optional hose supplied by the fire sprinkler system. They do not include Class I, II, or III standpipe systems.

D = Deficiency C = Comment (Indicate type)

| Item | Date | Riser | D | C | Deficiencies and Comments <i>Indicate all equipment, devices and parts that were repaired or replaced</i> |
|------|------|-------|---|---|--|
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Property Information

Building Name _____

Address _____

City _____



Contractor or Licensed Owner Information

Name _____

Job # _____

D = Deficiency C = Comment (Indicate type)

| Item | Date | Riser | D | C | Deficiencies and Comments (cont.) <i>Indicate all equipment, devices and parts that were repaired or replaced</i> |
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Check here if additional Deficiencies and Comments are listed on Form AES9 Number attached: _____

See Correction Form AES 10 for corrected deficiencies. Number attached: _____

I hereby certify that the fire protection equipment listed above has been fully inspected, tested, and maintained on this date by the company indicated above, in accordance with CCR, Title 19, Sections 901 to 906 and that the equipment is fully operable except as noted in the "Deficiencies and Comments" section of this form.

Check box if Annual Inspection, Testing & Maintenance Items are Completed in the Indicated Quarter

| Quarter | 1st - <input type="checkbox"/> Annual | 2nd - <input type="checkbox"/> Annual | 3rd - <input type="checkbox"/> Annual | 4th - <input type="checkbox"/> Annual |
|------------|---------------------------------------|---------------------------------------|---------------------------------------|---------------------------------------|
| Date | | | | |
| Print Name | | | | |
| Signature | | | | |