	California Code of Regulations - Title 19 Inspection, Testing, and Maintenance			
Property Information	OF CALIFORNIA	Contractor or Licensed Owner Information		
Building Name		Name		
Address		Address		
	AIRE MARIE	City St. Zip		
City	License #	Phone		
Contact Person	SFM	Job #		
Phone	CSLB	Misc.		

Riser Information		Main Drain Test					
Riser No.	Location	Riser Diameter	Main Drain Diameter	Initial Static Pressure	Residual Pressure	Final Static Pressure	P,F,N/A

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.				
Print Name				
Signature	Date			