



# Fire Sprinkler System Specification Sheet

(Per §40-10-250)



## Project Data

Project name:			
<b>Location in South Carolina:</b>	Address (street # & street name):	State project: <input type="checkbox"/> Yes <input type="checkbox"/> No	
	City:	County:	State project #:

## Water Supply Information

(flow test data must be less than 1 year old per §40-10-250(A)(1))

Date test conducted: / /	Static pressure (psi):	Residual pressure (psi):	Flow (gpm):
<b>Distances of test gauges relative to the base of the riser:</b>		Horizontal (ft):	Vertical (elevation difference in ft):
<b>Source of water supply:</b>	<input type="checkbox"/> Municipal dead-end <input type="checkbox"/> Municipal circulation <input type="checkbox"/> Other:		Pipe Size (in.):
<b>Test data by/from:</b>	Name:		Title:
	Organization:		Telephone #:
<b>Fire pump:</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	Pump Capacity (gpm):	Churn Pressure (psi):
	<input type="checkbox"/> New <input type="checkbox"/> Existing	Rated Pressure (psi):	Pressure @ 150% flow (psi):
<b>On-site storage tank:</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> New <input type="checkbox"/> Existing	Tank capacity (gallons):

## NFPA Hazard Classification

(attach continuation page when necessary)

Area #	Class or Code Reference	Description of Hazard Protected (commodity description, storage height, and arrangement as applicable.)

## Design Parameters

(attach continuation page when necessary)

Area #	System Type	Density (gpm/ft <sup>2</sup> ) / Area (ft <sup>2</sup> ) or Other (reference code section)	Inside Hose (gpm)	Outside Hose (gpm)

**Seismic Design Data:** S<sub>s</sub>=

## Codes and Standards

(attach continuation page when necessary)

**Applicable Codes, Standards & Editions (i.e. "2006 IBC", "2007 NFPA 13", etc.) for the Scope of Work on the Sprinkler System**

Scope of work (such as sprinkler system A.G. from 1'-0" A.F.F., U.G. from tap to 5'-0" outside, etc.) and notes (attach continuation page when necessary):

## Specifier's Information

Name: Engineering services provided through a firm: <input type="checkbox"/> Yes <input type="checkbox"/> No Firm name: Address: City: State:                      Zip: Phone #:                      Fax #: E-mail:	Certificate of Authorization	Professional Engineer's Seal
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