**AUTHORITY:**

A. NMSA 1978, Sections 33-1-6, 33-2-4, 59A-52-1 to -25 and 59A-53-1 to -17, as amended.
B. Corrections Industries Act, NMSA 1978 Sections 33-8-1 et. seq.
C. *National Fire Protection Association Life Safety Code*, current edition.
*D.* Policy *CD-010100*

**REFERENCES:**

A. ACA Standards 2-CO-2A-01, 2-CO-2A-02 and 2-CO-3B-01, *Standards for the Administration of Correctional Agencies*, 2nd Edition.
B. ACA Standard 5-2A-4124, 5-3B-4211, 5-3B-4212, 5-3B-4213 and 5-3B-4214, *Performance Based Expected Practices for Adult Correctional Institutions*, 5th Edition.
C. ACA Standard 1-CTA-2A-02, 1-CTA-3C-02, and 1-CTA-3C-03, *Standards for Correctional Training Academies*, 1st Edition.
D. ACA Standard 4-APPFS-3F-03, *Performance Based Standards for Adult Probation and Parole Field Services*, 4th Edition.
E. ACA Standards 2-CI-1A-1, 2-CI-1A-4, 2-CI-1B-1, 2-CI-1B-1-1, 2-CI-1B-2 and 2-CI-1B-3, *Standards for Correctional Industries*, 2nd Edition.
F. NFPA 1 Fire Prevention Code, 1997 Edition as per New Mexico State Fire Marshal's Office
G. NFPA 101 Life Safety Code, 1997 Edition as per New Mexico State Fire Marshal's Office

**PURPOSE:**

A. To ensure that all Institutional facilities, Academy/Central Office complex, Probation and Parole offices and Corrections Industries programs comply with Federal, State and local health, safety and fire standards.

B. To ensure that Corrections Industries has a fire and safety program established in accordance with appropriate standards and rules and regulations to provide safety for all Corrections Industries staff and assigned inmates.

**APPLICABILITY:**

All Corrections Department employees, contract staff, and inmates.

**FORMS:**

- **A. Report of Internal Condition of Sprinkler Piping** form (*CD-160100.1*)
- **B. Report of Inspection, Testing & Maintenance of Fire Pumps** forms (*CD-160100.2*) (5 pages)
- **C. Report of Inspection & Testing of Dry Pipe Fire Protection Systems Monthly/Quarterly** form (*CD-160100.3*)
- **D. Report of Inspection & Testing of Dry Pipe Fire Protection Systems Quarterly/Annual** forms (*CD-160100.4*) (2 pages)
- **E. Report of Inspection & Testing of Wet Standpipe Systems** forms (*CD-160100.5*) (2 pages)
- **F. Report of Inspection & Testing of Water Based Fire Protection Systems – Quarterly** form (*CD-160100.6*)
- **G. Report of Inspection & Testing of Water Based Fire Protection Systems – Monthly** form (*CD-160100.7*)
- **H. Report of Inspection & Testing of Water Based Fire Protection Systems – Annual** form (*CD-160100.8*)

**ATTACHMENTS:**

None

**DEFINITIONS:**

A. *Class A Fires*: Fires consuming ordinary combustible material such as wood, paper or clothing. The type of fire extinguisher used is one with pressurized water base.

B. *Class B Fires*: Fires consuming flammable or combustible liquids, grease, and gases. The type of fire extinguisher used is a foam dry chemical, or CO2 extinguisher.

**C.** *Class C Fires*: Fires burning in energized electrical equipment. The fire extinguisher used is a dry chemical or CO2 extinguisher. **Never use a water-based extinguisher.**

D. *Authority Having Jurisdiction*: The state Fire Marshal or local official governing regulations applicable to federal, state, and/or local work, fire, sanitation, safety, and health codes qualified to perform such inspections. Qualification shall be verified through state licensed or certification.

E. *Contract Employee*: An employee of a business, corporation, organization, state or federal agency, or other entities that have contracted with New Mexico Corrections Department to perform work or provide services.

F. *Fire, Safety and Sanitation Officer (FSSO)*: An employee assigned to manage and direct safety, sanitation and fire prevention programs within an institutional facility that has been trained in these specific areas and is familiar with the safety and sanitation requirements of the institution.

G. *Fire Watch*: This is a tool used as a short-term, emergency measure to provide early detection of fire and to preserve life and property at an acceptable level of life safety in a building or occupancy, which has an impaired fire safety system (fire alarm, fire sprinkler system, facilities water supply or facility's exiting system). A Fire Watch is a compensatory measure only, intended to allow continued occupancy of a building or facility, which may not be safe to be occupied during the time period, required to implement appropriate changes or repairs. The purpose of the fire watch is to check all areas of the building on a regular basis to detect fire and life safety emergencies and then to alert the facility occupants to take appropriate action as early as possible. This check inspection shall be documented only during occupancy on an hourly base or more frequent checks may be mandated if required by the authority having jurisdiction.

*H. Flammable, Toxic and Caustic Materials:*

1. Flammable materials - liquids with a flash point below 100 degrees F;

2. Toxic materials - substances that through chemical reaction or mixture can produce possible injury or harm to the body by entering through the skin, digestive tract or respiratory tract (for example zinc chromate paint, ammonia, chlorine, antifreeze, herbicides, pesticides);

3. Caustic materials - substances that can destroy or eat away by chemical reaction (for example, lye, caustic soda, sulfuric acid).

I. *Institutional facilities*: Detention and Correctional occupancies that provide sleeping facilities for four or more residents and are occupied by persons who are generally prevented from taking self preservation action because of security measures not under the occupant's control.

J. *National Fire Protection Association (NFPA*: A United States trade association (albeit with some international members) that creates and maintains private, copyrighted, standards and codes for use and adoption by local governments. This includes publications from model building codes to equipment used by firefighters while engaging in hazmat response, rescue response, and some firefighting. The world's leading advocate of fire prevention and an authoritative source on public safety, NFPA develops, publishes, and disseminates more than 300 consensus codes and standards intended to minimize the possibility and effects of fire and other risks.

K. *Physical Plant Central Services Staff Manager (PPCS)*: A manager who is knowledgeable in building code compliance, life safety codes, National Fire Protection Association (NFPA) standards, and the overall physical layout of the facility, and who has the authority to direct the physical plant specialists to correct deficiencies that are found during inspections.

L. *Qualified departmental staff member or designee*: An individual who conducts weekly inspections of assigned areas and who has received basic training from the Fire, Safety and Sanitation Officer and are familiar with safety and sanitation requirements.

M. *Safety Inspectors*: Officials designated to perform inspections of safety conditions and fire and emergency equipment in each work locations or unit.

N. *Fire Safety Program Administrator*: An employee trained in fire prevention and life safety, assigned to act as the liaison between the Corrections Department (Central Office) and other state agencies and offices involved with fire prevention and life safety issues.

**POLICY:**

**A.** The Department shall adhere to applicable federal, state, and/or local work, fire, and sanitation, safety, and health codes. Compliance shall be documented by the authority having jurisdiction. **[2-CO-2A-01] [2-CO-3B-01] [1-CTA-2A-02] [1-CTA-3C-03] [2-CI-1A-4] [4-APPFS-3F-03]**

**B.** Institutional Facilities, Academy/Central Office complex, Probation and Parole offices and Corrections Industries Programs compliance shall be documented by the authority having jurisdiction. A fire alarm and automatic detection system are required, as approved by the authority having jurisdiction, or there is a plan for addressing these or other deficiencies within a reasonable time period. The authority approves any variances, exceptions, or equivalencies that do not constitute a serious life safety threat to the occupants or the facility. **[5-2A-4124]**

**C.** All Facilities, Academy/Central Office complex, Probation and Parole field offices and Corrections Industries Programs are inspected by representatives of appropriate governmental agencies at specified intervals, each report is reviewed, and remedial action taken if indicated. **[2-CO-2A-02]**

**D.** The Academy will provide a system of fire prevention and control through the use of efficient fire protection methods, services and equipment as regulated by the authority having jurisdiction to ensure the safety of the employees, students and visitors. **[1-CTA-3C-02]**

**E.** All Institutional Facilities, Academy/Central Office complex, Probation and Parole offices and Corrections Industries Programs shall promulgate procedures and practices for fire prevention that shall include but not be limited to: **[5-3B-4211]**

1. provisions for an adequate fire protection service;
2. a system of fire inspection and testing of equipment at least quarterly or at intervals approved by the authority having jurisdiction, following the procedures stated for variances, exceptions, or equivalencies;
3. an annual inspection by local or state fire officials or other qualified person(s);

4. availability of fire protection equipment at appropriate locations throughout the institution.

**F.** There shall be a comprehensive written report of a thorough monthly inspection of the institutions by a qualified fire and safety officer for compliance with safety and fire prevention standards. There is a weekly fire and safety inspection of the institutions by a qualified departmental staff member. **[5-3B-4212]**

**G.** Specifications for the selection and purchase of facility furnishings indicate the fire safety performance requirements of the materials selected. **[5-3B-4213]**

H. The Fire Safety and Sanitation Officers (FSSO) shall develop and implement a program to control all flammable, toxic and caustic materials; all materials should be stored in secure areas that are not accessible to inmates. The program shall be used to account for and distribute chemicals and cleaning supplies. The chemicals that are distributed shall only be used by inmates under close supervision of qualified staff.

**I.** Institutional facilities shall be equipped with noncombustible receptacles for smoking materials and separate containers for other combustible refuse at accessible locations throughout the living quarters in the institution. Special containers are provided for flammable liquids and for rags used with flammable liquids. All receptacles and containers are emptied and cleaned daily. **[5-3B-4214]**

J. The Corrections Department shall develop an internal inspection and reporting system to provide administrators with monthly reports on institutional facilities, Academy/Central Office complex, and Probation and Parole compliance with applicable Fire Prevention and Life Safety Codes. This information may be used as a basis for corrective action, for budgetary purposes and as a loss control tool.

K. All automatic fire alarm and smoke detection systems will be tested quarterly and system elements checked at random in conjunction with the system tests by the Fire, Safety and Sanitation Officer for adequate operation and shall be certified annually by an approved qualified vendor.

L. All automatic fire alarm and smoke detection systems will be inspected by the institution's Fire, Safety and Sanitation Officer on a monthly basis. System components will be inspected at random in conjunction with the systems inspections.

M. Non-coded manual fire alarm boxes shall be tested at least once every six months by the Fire Safety and Sanitation Officer.

N. Institutional facility inspections, test results and corrective action taken will be reported in writing by the Fire, Safety and Sanitation Officer to the Warden with a copy forwarded to the Fire Safety Programs Administrator and the Director of Adult Prisons.

O. Primary responsibility for institutional fire safety management shall rest with the Wardens who shall plan, implement and monitor an effective program to reduce the potential for fire and to provide rapid and proper response to actual fire emergencies.

P. This policy shall be reviewed annually and revised as needed.

**Q.** All Divisions of the New Mexico Corrections Department shall comply with the fire prevention regulations and practices of the authority having jurisdiction. These practices include, but are not limited to: **[2-CI-1B-1]**

- provisions for adequate fire protection service;
- a system of fire inspection and testing of equipment at least quarterly or at intervals approved by the authority having jurisdiction, following the procedures stated for variance, exceptions or equivalencies;
- an annual inspection by local or state fire officials or other qualified person(s);
- availability of fire protection equipment at appropriate locations throughout the facility;
- a comprehensive and thorough monthly inspection by a qualified fire and safety officer for compliance with safety and fire prevention codes;
- a weekly fire inspection by a qualified staff member.

R. All flammable materials are controlled, safely handled, and securely stored. Where smoking is permitted, noncombustible receptacles for smoking materials and separate containers for other combustible refuse are provided at approved locations. Special containers for flammable liquids and rags used with flammable liquids are provided. All receptacles and containers are emptied and cleaned daily. [2-CI-1B-1-1]

**S.** Ongoing Corrections Industries programs that are under the control of the inmate programs and not located on facility grounds shall comply with all applicable fire and safety regulations. **[2-CI-1B-2]**

**T.** Each facility shall establish health and safety rules compliance with those regulations that are to be distributed to all staff, volunteers, contractors, and inmates assigned to Corrections Industries programs. **[2-CI-1A-1]**

**U.** The facility FSSO shall develop an evacuation plan to be used in the event of a fire or other major emergency. Evacuation drills shall be conducted at least quarterly on each shift and shall be conducted when the majority of inmates are present. All inmate workers shall participate in evacuation drills except when clear and convincing evidence demonstrates that facility security would be jeopardized. The plan shall be reviewed annually, updated if necessary, and reissued to the authority having jurisdiction. The plan shall include the following: **[2-CI-1B-3]**

- location of building, room floor plan;
- use of exit signs and directional arrows for traffic flow;
- location and identification of hazardous material storage; and

- location of publicly posted plan.

The Institutional facilities FSSO shall train all personnel in the implementation of written emergency plans.

**AUTHORITY:**

Policy *CD-160100*

**PROCEDURES:**

**A.** The Department shall adhere to applicable federal, state, and/or local work, fire, and sanitation, safety, and health codes. Compliance shall be documented by the authority having jurisdiction. **[2-CO-2A-01] [2-CO-3B-01] [1-CTA-2A-02] [1-CTA-3C-03] [2-CI-1A-4] [4-APPFS-3F-03]**

B. This system shall be established through the designation of Fire, Safety and Sanitation Officers or Loss Control Coordinators at each institutional facility, Academy/Central Office complex, Probation and Parole offices and Corrections Industries Programs and the designation of a department level Fire, Safety Programs Administrator at Central Office.

**C.** Inspections, Testing, and Services: **[2-CO-2A-02]**

1. The Warden or Deputy Warden in conjunction with the Fire Safety Sanitation Officer shall make provisions for the following:

- An adequate fire protection system;
- A series of fire inspection, testing and maintenance of water-based fire protection systems shall be conducted weekly, monthly, quarterly or at intervals approved by the authority having jurisdiction, following the procedures stated for variances, exceptions or equivalencies;
- Staff or contractors will document their findings on the appropriate NFPA-based forms listed in **forms** section above.
- An annual inspection of fire protection systems by a qualified contractor or person (s) on staff will document their findings on the appropriate NPFA- based forms listed in **forms** section or staff will ensure contractor complies with all areas of the forms;
- Availability of fire protection equipment at appropriate locations throughout the institution; and
- Arrangements to have the Institutional facilities, Corrections Industries Programs, Academy/Central Office complex, and Probation and Parole offices inspected by the authority having jurisdiction (State Fire Marshal or Local Fire Official) to ensure conformance with applicable fire prevention and life

safety codes. The authority having jurisdiction shall determine date of inspection and shall have access to all areas of the facility.

2. Inspection results will be forwarded to the Fire, Safety and Sanitation Officer, Loss Control Coordinator or Physical Plant Central Services Staff Manager at the institutional facilities, Academy for Central Office/Academy complex, Probation and Parole field offices and Industries Programs. This information may be used as a basis for corrective action, budgetary purposes and as a loss control tool.

3. Any corrective action implemented will be documented by the responsible party (Fire Safety Sanitation Officer, Loss Control Coordinator or Physical Plant Central Services Staff Manager) and forwarded to the Warden's, Deputy Warden, Probation and Parole Division Director or Academy Director and Adult Prisons Division for review and approval. If no corrective action is warranted, a "thank you" correspondent letter will be sent to the authority having jurisdiction.

4. The Warden, Deputy Warden, Probation and Parole Division Director or Academy Director shall forward the documentation of the Corrective Action implemented to the Authority Having Jurisdiction with copies to the Deputy Secretary of Operations, Deputy Secretary of Administration, Fire Safety Programs Administrator, Internal Audit and Compliance Bureau, and Business Manager.

**5.** The Fire Safety Sanitation Officer, Loss Control Coordinator or Physical Plant Central Services Staff Manager shall maintain copies for three years of the inspection results, Corrective actions or correspondent letters. **[5-3B-4211] [5-3B-4212] [5-2A-4124]**

6. The FSSO shall complete a comprehensive and thorough monthly inspection of all areas of the institution to ensure compliance with safety and fire prevention standards.

7. The FSSO shall inspect and monitor the storage and handling of flammable, combustible and hazardous materials throughout the institution, including Corrections Industries.

8. The Facility Warden, Deputy Warden, Probation and Parole Division Director or Academy Director shall assign a qualified departmental staff member to conduct a weekly fire and safety inspection of their respective areas. The employee assigned will submit a completed inspection form and the corrective action to the FSSO or Loss Control Coordinator at the end of each week.

D. Each institution shall develop a fire safety and evacuation plan that is specific to each facilities design and security level.

E. Fire Protection Equipment

1. Hydrants:

   a) All fire hydrants shall be accessible and properly maintained (**NFPA 1142).** The water supply system shall be checked quarterly by the FSSO. Each hydrant shall be inspected annually by the local fire authority or a qualified vendor.

2. Extinguishers:

   a) Fire extinguishers of an appropriate class and rating shall be placed in all areas. Locations of extinguishers will be well marked.

   b) Fire extinguishers shall be placed throughout the institutional facilities, Academy/Central Office complex, Probation and Parole offices and Corrections Industries Programs with one (1) extinguisher for every 3,500 square feet of floor space, and not over seventy-five (75) feet of travel to reach an extinguisher.

   c) Portable fire extinguishers shall be mounted in a location where they will be readily available and easily located. All fire extinguishers shall be clearly identified as to the type of fire they extinguish. They shall be maintained and fully charged in ready to use condition. Every extinguisher shall have a tag or label showing the last monthly inspection, annual maintenance or recharge date and the initials or signature of the person who performed the service.

   d) The FSSO or Loss Control Coordinator shall be notified immediately after the deployment of a fire extinguisher to ensure immediate replacement.

   e) Portable extinguishers are stored in designated areas when not in use.

   f) All fire extinguishers shall have 6 years of maintenance from the date the extinguisher was manufactured by a qualified vendor (Ref: NFPA 10 Standard for Portable Fire Extinguishers, 1998 Edition).

   g) All fire extinguishers shall have a 12 year hydrostatic test from the date the extinguisher was manufactured by a qualified vendor and annually each year thereafter (Ref: NFPA 10 Standard for Portable Fire Extinguishers, 1998 Edition).

F. Fire Prevention Requirements:

1. All employees shall be aware of potential fire hazards, and are responsible for reporting such conditions, either through their chain of command or by submission of a work order request. Fire hazards include altered electrical (outlets or cords), overloaded electrical units and improper or excessive trash storage.

**2.** The Corrections Department is a tobacco-free agency, which will have designated smoking areas outside each Institutional facility, Academy/Central Office complex, Probation and Parole offices and Corrections Industries Programs. Noncombustible receptacles will be used for smoking materials, at all designated smoking areas for staff. **[5-3B-4214]**

a. Special containers will be provided for flammable liquids or rags used with flammable liquids. All receptacles and containers will be emptied and cleaned daily.

**3.** When purchasing intuitional facility furnishings; mattresses, pillows and blankets the fire safety performance requirements shall be part of the specifications for selection. **[5-3B-4213]**

**AUTHORITY:**

Policy *CD-160100*

**PROCEDURE:**

**A. Compliance: [2-CI-1B-1]**

1. A weekly fire, safety and sanitation inspection will be conducted on all Corrections Industries work areas by the respective shop supervisor or work area supervisor. CI Management can designate a staff member to inspect more than one work area.

2. The designated staff member will use the institution's fire**, s**afety and sanitation inspection checklist when conducting the inspections. The check list will indicate deficiencies, and in cases requiring it, recommend specific corrective action. The shop supervisor shall, during the next weekly inspection verify that the deficiency has been corrected or provide a plan of action; with approximate date of completion noting the reason why the deficiency has not been corrected.

3. The designated staff member shall submit a weekly inspection of the building or work area to the institution's Fire, Safety and Sanitation Officer (FSSO) and provide a copy to CI Management. It shall be the designated staff member's responsibility to correct any deficiency noted on their weekly inspection.

   a. In the case of the deficiency requiring any type of work from the institution's Physical Plant Services (PPS), the designated staff member will fill out a PPS work order and submit it to the Warden of the institution.

   b. If shop machinery or equipment needs corrective action, the shop supervisor will submit a purchase requisition for the required service or part.

   c. Under no circumstances shall design of equipment be altered in any way. The equipment shall remain as designed and engineered by manufacturer.

4. Copies of the Fire, Safety, and Sanitation check list will be retained by the Facility Manager or other appropriate official for one year.

5. The Warden will ensure a monthly fire, safety, and sanitation inspection is conducted and documented by the FSSO. Comprehensive corrective action taken for any

deficiencies will be documented by Corrections Industries management, and sent to the FSSO and the Institutional facility Warden in a timelymanner.

6. Each facility shall establish health and safety rules that are to be distributed to all staff, volunteers, contractors, and inmates assigned to industries. These rules should include the appropriate use of mandatory safety equipmentand clothing. **[2-CI-1A-1]**

7. Ongoing Corrections Industries operations that are under the control of the inmate programs and not located on institutional grounds, shall comply with all applicable fire and safety regulations. **[2-CI-1B-2]**

**B. Responsibility:**

CI Management shall ensure that Fire, Safety and Sanitation programs are properly implemented.

1. All Corrections Industries staff shall be constantly aware of all potential fire hazards such as altered electrical outlets, overloaded electrical circuit boxes, discharged or damaged fire extinguishers, improper trash storage and improper storage of combustible liquids and solid materials.

2. Fire prevention procedures will be made a part of all employees' daily activities. All employees will make fire prevention a basic part of their daily activities by detecting, reporting, and correcting any fire or safety hazards.

3. All employees shall maintain good housekeeping standards and take appropriate action to correct or report unsafe conditions and fire hazards by notifying the Facility Manager, the FSSO or higher authority through their chain of command. Other actions to further assist in the prevention of fire and life safety include:

   - Proper storage of combustible materials;
   - Prevention of hazardous electrical situations;
   - Training of inmates in basic fire safety procedures;
   - Participation in quarterly fire drills conducted by FSSO;
   - Checking fire equipment;
   - Ensuring that all Corrections Industries areas are kept clean by promptly and properly disposing of all trash and waste material; and
   - Ensuring that hazardous and flammable materials are stored in accordance with proper procedures as outlined in CD policy **Control and use of Flammable, Toxic, Caustic Materials and Liquids** *(CD-160700)*.

**C. Fire Protection Equipment will meet the following standards:**

All Fire extinguishers of appropriate class and rating.

**D. Appropriate inspections, Inspection-Follow-ups:**

1. Fire inspections and follow-up by the designated staff member shall be specified in detail in the fire, safety and sanitation inspection checklist provided by the institution.

2. The FSSO will conduct a monthly fire, safety and sanitation inspection. Any discrepancies will be reported to the Corrections Industries Management, who will take appropriate action to correct the discrepancy and forward a report to the FSSO and the Institutional Facility Warden.

**E. Evacuation Plans:**

1. The facility FSSO shall develop an evacuation plan to be used in the event of a fire or other major emergency. Evacuation drills shall be conducted at least quarterly on each shift and shall be conducted when the majority of inmates are present. All inmate workers shall participate in evacuation drills except when clear and convincing evidence demonstrates that facility security would be jeopardized. The plan shall be reviewed annually, updated if necessary, and reissued to the authority having jurisdiction. The plan shall include the following: **[2-CI-1B-3]**

   - location of building, room floor plan;
   - use of exit signs and directional arrows for traffic flow;
   - location and identification of hazardous material storage; and
   - location of publicly posted plan.

   The facility FSSO shall train all Corrections Industries personnel in the implementation of written emergency plans.

2. The facility FSSO will be responsible for developing and posting evacuation plans for all Corrections Industries buildings. Evacuation plans shall be posted separately in a conspicuous location therein.

3. A review of evacuation plans shall be made part of each staff and inmate workers initial safety indoctrination, and made part of the safety training program on a monthly basis.

4. It shall be the responsibility of the shop supervisor to ensure that the evacuation plan in his or hers assigned shop are kept up-to-date and modified as required by new construction, relocation of equipment, etc.

5. The Facility Manager is responsible to ensure this plan is formally reviewed annually during the anniversary month of its effective date, updated if necessary, and reissued to the FSSO.

**NEW MEXICO CORRECTIONS DEPARTMENT**

**Report of Inspection & Testing of Fire Protection Systems**
**Report of Internal Condition of Sprinkler Piping (5 years and/or as required)**

ALL QUESTIONS ARE TO BE FULLY ANSWERED AND ALL BLANKS TO BE FILLED

Inspecting Firm: (contractor) Inspection Contract #
Name of Facility:
Inspector Name: Date:
Page of **Date of previous internal pipe inspection:**
Inspection Frequency: ☐ Monthly ☐ Quarterly ☐ Annually ☐ Other:

Identify system(s) involved: ☐ Wet ☐ Dry ☐ Preaction ☐ Deluge ☐
Other:

**An examination of representative sections of this sprinkler system has been made to determine internal conditions.**

## Initial Examination Data:

Number of branch lines examined: % of total branch lines
Number of cross mains examined: % of bulk lines
Other points examined (describe):

## Results of Initial Examination:

(Check box which applies)

☐ 1. The interior of the sprinkler piping appears in satisfactory condition.

☐ 2. The sprinkler systems are in need of internal cleaning. Some of the pipes were found to be partially full of Foreign materials. (Specifiy nature of internal stoppage, i.e., pipe scale, silt, mud, tuberculation):

## Examination Subsequent to Cleaning System:

Cleaning method used (describe):
Number of branch lines examined: % of total branch lines
Number of cross mains examined: % of bulk lines
Other points examined (describe):

## Results of Examination Subsequent to Cleaning:

(Check box which applies)

☐ 1. The interior of the sprinkler piping appears in satisfactory condition.

☐ 2. If interior of piping other than satisfactory, describe:

Signature and title of person conducting cleaning Date of cleaning

Witness (owner or lessee of the property)

(All "NO" answers to be fully explained.)
Inspector's initial Owner/designated rep. initial Date:

# NEW MEXICO CORRECTIONS DEPARTMENT

## Report of Inspection, Testing & Maintenance of Fire Pumps

The following inspection, testing and maintenance tasks are to be performed at the indicated frequencies. The required weekly tasks are also included on this list.

ALL QUESTIONS ARE TO BE FULLY ANSWERED AND ALL BLANKS TO BE FILLED

Inspecting Firm: (contractor) Inspection Contract #
Name of property:
Inspector Name: Date:
Page of

## Fire Pumps

| | Y | N/A | N |
|---|---|---|---|
| **A-1.0 Inspection of Pump Enclosure:** | ☐ | ☐ | ☐ |
| A-1.1 Pump enclosure secured: | ☐ | ☐ | ☐ |
| A-1.2 Pump enclosure heated (40° F if diesel Engine equipped with engine heater): | ☐ | ☐ | ☐ |
| A-1.3 Pump enclosure heated (70° F if diesel Engine is not equipped with engine heater): | ☐ ☐ | ☐ ☐ | ☐ ☐ |
| A-1.4 Vent louvers operate: | ☐ | ☐ | ☐ |
| A-1.5 Vent louvers intake duct clean: | ☐ | ☐ | ☐ |
| A-1.6 Pump Enclosure adequately lighted: | | | |
| **A-2.0 Electrical Pumps – Monthly Inspection and Maintenance:** | ☐ | ☐ | ☐ |
| A-2.1 Isolating switch and circuit breaker Exercised: | ☐ | ☐ | ☐ |
| A-2.2 Inspect, check, clean, and test circuit Breakers: (replace as needed) (replace date:_____) | ☐ | ☐ | ☐ |
| **A-3.0 Diesel Pumps – Monthly Inspection And Maintenance:** | ☐ | ☐ | ☐ |
| A-3.1 Inspect and remove corrosion, battery Case exterior clean and dry: | ☐ ☐ | ☐ ☐ | ☐ ☐ |
| A-3.2 Test specific or state of charge: | ☐ | ☐ | ☐ |
| A-3.3 Inspect charger and charger rate: | ☐ | ☐ | ☐ |
| A-3.4 Check equalize charge: | | | |
| **A-4.0 Diesel Pumps – Monthly Inspection And Maintenance:** | ☐ ☐ | ☐ ☐ | ☐ ☐ |
| A-4.1 Service fuel strainer, filter and/or dirt leg: | ☐ | ☐ | ☐ |
| A-4.2 Clean or replace crankcase breather: | ☐ | ☐ | ☐ |
| A-4.3 Check and clean water strainer: | ☐ | ☐ | ☐ |
| A-4.4 Inspect insulation and fire hazards: | ☐ | ☐ | ☐ |
| A-4.5 Inspect and check wire chafing where Subject to movement: | | | |

| | Y | N/A | N |
|---|---|---|---|
| **A.5-0 Diesel Pumps – Semiannual Inspection and Maintenance** | ☐ ☐ | ☐ ☐ | ☐ |
| A-5.1 Test antifreeze protection level: | ☐ | ☐ | ☐ |
| A-5.2 Inspect flexible exhaust section: | ☐ | ☐ | ☐ |
| A-5.3 Check and test operation of safeties And alarms: | ☐ | ☐ | ☐ |
| A-5.4 Clean boxes, panels and cabinets: | ☐ | ☐ | ☐ |
| **A-6.0 Maintenance to be Performed Annually Or as indicated:** | ☐ ☐ | ☐ ☐ | ☐ |
| A-6.1 Lubrication of bearings performed: | ☐ | ☐ | ☐ |
| A-6.2 Lubrication of coupling performed: | ☐ | ☐ | ☐ |
| A-6.3 Lubrication of right angle gear performed: | ☐ | ☐ | ☐ |
| A-6.4 Lubrication of motor bearings performed: | ☐ | ☐ | ☐ |
| A-7.1 Accuracy of pressure sensors checked: | ☐ | ☐ | ☐ |
| A-7.2 Calibrate pressure switch settings: | ☐ | ☐ | ☐ |
| A-8.1 Change oil (50 hours of operation): | ☐ | ☐ | ☐ |
| A-8.2 Change oil filter (50 hours of operation): | ☐ | ☐ | |
| **A-17.0 Fire pump controller in service:** | ☐ | ☐ | ☐ |
| **A-18.0 Jockey pump controller in service:** | ☐ | ☐ | ☐ |
| **A-19.0 Alarm panel clear:** | ☐ | ☐ | ☐ |
| **A-20.0 System in service:** | | | |
| **A-21.0 Comments:** | | | |

(All "NO" answers to be fully explained.)

Inspector's initial _____ Owner/designated rep. initial _____ Date: _____

# NEW MEXICO CORRECTIONS DEPARTMENT

## Report of Inspection, Testing & Maintenance of Fire Pumps

| | Y | N/A | N |
|---|---|---|---|
| **B-1.0 Annual Inspection of Hydrolic System:** | ☐ | ☐ | ☐ |
| B-1.1 Suction Pressure gauge: _____psi | | | |
| B-1.2 Discharge pressure gauge: _____psi | | | |
| B-1.3 Pump starting pressure: _____psi | | | |
| B-1.4 Suction line control valves sealed open: | ☐ | ☐ | ☐ |
| B-1.5 Discharge line control valves sealed open: | ☐ | ☐ | ☐ |
| B-1.6 By-pass line valves sealed open: | ☐ | ☐ | ☐ |
| B-1.7 All control valves accessible: | ☐ | ☐ | ☐ |
| B-1.8 Suction reservoir full: | ☐ | ☐ | ☐ |
| B-1.9 Shaft seals dripping water properly: (1 drop per second) | ☐ | ☐ | ☐ |
| B-1.10 System free of vibration or unusual noise: | ☐ | ☐ | ☐ |
| B-1.11 Packing boxes, bearings, pump casing Free of overheating: | ☐ | ☐ | ☐ |
| **Comments:** | | | |

| | Y | N/A | N |
|---|---|---|---|
| **B-2.0 Annual Inspection of Electrical Pump System:** | ☐ | ☐ | ☐ |
| B-2.6 Isolating switch closed – standby Emergency source: | ☐ | ☐ | ☐ |
| B-2.7 Normal phase rotation pilot light "ON": | ☐ | ☐ | ☐ |
| B-2.8 Reverse phase alarm pilot light "OFF": | ☐ | ☐ | ☐ |
| B-2.9 Oil level in vertical motor sight glass Is in the normal range: | ☐ | ☐ | ☐ |
| **Comments:** | | | |

| | Y | N/A | N |
|---|---|---|---|
| **B-3.0 Annual Inspection of Diesel Engine System:** | ☐ | ☐ | ☐ |
| B-3.1 Diesel tank 2/3 full: | ☐ | ☐ | ☐ |
| B-3.2 Batteries fully charged: | ☐ | ☐ | ☐ |
| B-3.3 Battery charger operating properly: | ☐ | ☐ | ☐ |
| B-3.4 Battery terminals clean: | ☐ | ☐ | ☐ |
| B-3.5 Battery state of charge checked: | ☐ | ☐ | ☐ |
| B-3.6 Battery pilot lights "ON": | ☐ | ☐ | ☐ |
| B-3.7 Battery failure pilot lights "OFF": | ☐ | ☐ | ☐ |
| B-3.8 Electrolyte level in batteries normal: | ☐ | ☐ | ☐ |
| B-3.9 All alarm pilot lights "OFF": | ☐ | ☐ | ☐ |
| B-3.10 Engine running time meter recording Pump operation properly: | ☐ | ☐ | ☐ |
| B-3.11 Oil level in right angle gear drive normal: | ☐ | ☐ | ☐ |
| B-3.12 Diesel engine oil level full: | ☐ | ☐ | ☐ |
| B-3.13 Diesel engine water level full: | ☐ | ☐ | ☐ |
| B-3.14 Water jacket heater appears working Properly: | ☐ | ☐ | ☐ |
| B-3.15 Water jacket piping drip tight: | ☐ | ☐ | ☐ |
| B-3.16 Diesel engine water hose good condition: | ☐ | ☐ | ☐ |
| B-3.17 Coolant antifreeze protection adequate: | ☐ | ☐ | ☐ |
| B-3.18 Cooling line strainer clean: | ☐ | ☐ | ☐ |
| B-3.19 Solenoid valve operating correctly: | ☐ | ☐ | ☐ |
| B-3.20 Bearings and valves lubricated: | ☐ | ☐ | ☐ |
| **Comments:** | | | |

| | Y | N/A | N |
|---|---|---|---|
| **B-4.0 Annual Inspection of Steam Pump** Systems | ☐ | ☐ | ☐ |
| B-4.1 Steam pressure gauge reading normal: _____psi | | | |
| B-4.2 Record time required to reach running Speed:_____min_____sec | ☐ | ☐ | ☐ |
| B-4.3 Weekly test conducted and results Recorded: | ☐ | ☐ | ☐ |
| **Comments:**_____ | | | |

(All "NO" answers to be fully explained.)

Inspector's initial _____ Owner/designated rep. initial _____ Date: _____

## NEW MEXICO CORRECTIONS DEPARTMENT

### Report of Inspection, Testing & Maintenance of Fire Pumps

| | Y | N/A | N |
|---|---|---|---|
| **C-1.0 Annual Test of Electric Pump Systems:** | ☐ | ☐ | ☐ |
| C-1.1 Electric pump weekly 10-min test run | ☐ | ☐ | ☐ |
| Results recorded: (water flow not required) | ☐ | ☐ | ☐ |
| C-1.2 Time Controller on first step for reduced | ☐ | ☐ | ☐ |
| Voltage or reduced current starting: | | | |
| _____Min_____sec | | | |
| C-1.3 Record time pump runs after starting (for automatic stop controllers): | ☐ | ☐ | ☐ |
| _____Min_____sec | | | |
| C-1.4 Time required for motor to reach full speed _____Min_____sec | ☐ | ☐ | ☐ |
| **Comments:** | | | |

| | Y | N/A | N |
|---|---|---|---|
| **C-2.0 Annual Test of Diesel Pump System:** | ☐ | ☐ | ☐ |
| C-2.1 Weekly auto start/run 30 min and results | ☐ | ☐ | ☐ |
| Recorded: (water flow not required) | ☐ | ☐ | ☐ |
| C-2.2 Auto. Weekly test timer used for the | ☐ | ☐ | ☐ |
| Starting procedure: | | | |
| C-2.3 Time required for engine to crank: | ☐ | ☐ | ☐ |
| _____Min_____sec | | | |
| C-2.4 Time required to reach running speed: _____Min_____sec | ☐ | ☐ | ☐ |
| C-2.5 Observations while engine operating: | ☐ | ☐ | ☐ |
| Oil pressure: _____psi | | | |
| Speed indicator: _____rpm<br>Water Temperature: _____° F<br>Oil Temperature: _____° F | | | |
| C-2.6 Pump operational without abnormalities: | ☐ | ☐ | ☐ |
| C-2.7 Heat exchanger cooling water flow normal: | ☐ | ☐ | ☐ |
| C-2.8 Alarm company notified of test run: | ☐ | ☐ | ☐ |
| C-2.9 Pump test run performed satisfactorily: | ☐ | ☐ | ☐ |

### Fire Pump Test

**Pump:**
Make: _____
Type: _____
Rated capacity: _____
Rated pressure: _____
Rated rpm: _____

**Controller:**
Make: _____
Listed: _____

**Water Supply:**_____
Source: _____

**Power:**
Type: ___
Supervision: _____

**Electronic Characteristics:**
_____

**Test Data:**

| Type of test (hydrant, drain or pump) | Static or suction pressure (psi) | Residual or discharge pressure (psi) | Net pump pressure (psi) | Pump speed (rpm/ amperes) | Pilot pressure | Dia. of nozzle openings flowed | No. of nozzle openings flowed | Flow at C=.90 C=.97 (gpm) | Opening coefficient C= _____ | Actual flow (gpm) |
|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | | |
| | | | | | | | | | | |
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| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |

Notes:
Remarks on test: _____

Signature and title of person making test: Company name and address:

Witness (owner or designated rep.): Date of examination: ____

(All "NO" answers to be fully explained.)
Inspector's initial_____ Owner/designated rep. initial _____ Date: _____

## NEW MEXICO CORRECTIONS DEPARTMENT

### Annual Inspection and Test of Fire Pump Components: Conduct the Inspection and Test Tasks and Record Results as Applicable to the Type of Pump System:

| | Y | N/A | N |
|---|---|---|---|
| **D-1.0 Annual Inspection of System Components:** | ☐ | ☐ | ☐ |
| D-1.1 Pump in service on inspection: | ☐ | ☐ | ☐ |
| D-1.2 Pump identification no.: _____ | ☐ | ☐ | ☐ |
| D-1.3 Casing relief valve free of damage: | ☐ | ☐ | ☐ |
| D-1.4 Pressure relief valve free of damage: | ☐ | ☐ | ☐ |
| D-1.5 ALL valves, fittings, pipe leak tight: | ☐ | ☐ | ☐ |
| D-1.6 Condensate drain trap clean: | ☐ | ☐ | ☐ |
| D-2.1 Fire pump controller power "ON": | ☐ | ☐ | ☐ |
| D-2.2 Transfer switch normal pilot light "ON": | ☐ | ☐ | ☐ |
| D-3.1 Jockey pump operational: | ☐ | ☐ | ☐ |
| D-3.2 Jockey pump controller power "ON": | ☐ | ☐ | ☐ |
| D-3.3 Jockey pump controller set on "AUTO": | ☐ | ☐ | ☐ |
| D-4.1 Fire pump shaft coupling appears Properly aligned: | ☐ | ☐ | ☐ |
| D-4.2 Packing glands appear properly adjusted: | ☐ | ☐ | ☐ |
| D-5.1 Weekly test run records available: | ☐ | ☐ | ☐ |
| D-5.2 Date of last pump run test:_____ | ☐ | ☐ | ☐ |
| D-5.3 Pump peak load at 150% capacity: | ☐ | ☐ | ☐ |
| D-6.1 Test header control valve closed: | ☐ | ☐ | ☐ |
| D-6.2 Test header in good condition: | ☐ | ☐ | ☐ |
| D-6.3 Test header valves and caps in Good condition: | ☐ | ☐ | ☐ |
| D-6.4 Test header valve handles in Good condition: | ☐ | ☐ | ☐ |
| D-6.5 Test header valve swivels rotation is nonbonding: | ☐ | ☐ | ☐ |
| D-7.1 By-pass control valves open: | ☐ | ☐ | ☐ |
| D-7.2 Control valves sealed/not tampered: | ☐ | ☐ | ☐ |
| D-7.3 Control valves locked/tampered: | ☐ | ☐ | ☐ |
| D-7.4 Control valves properly tagged And identified: | ☐ | ☐ | ☐ |
| D-7.5 Flow meter control valves closed: | ☐ | ☐ | ☐ |
| D-8.1 Relief valve and cone operational: | ☐ | ☐ | ☐ |
| D-8.2 Relief valve pressure appears properly Adjusted: | ☐ | ☐ | ☐ |
| D-8.3 Suction gauge while flowing psi: | ☐ | ☐ | ☐ |
| D-8.4 Fire pump operating psi:_____ | ☐ | ☐ | ☐ |
| D-8.5 Discharge gauge flowing psi: _____ | ☐ | ☐ | ☐ |

| | Y | N/A | N |
|---|---|---|---|
| D-9.1 Automatic starts performed 10 times | ☐ | ☐ | ☐ |
| D-9.2 Automatic start function properly: | ☐ | ☐ | ☐ |
| D-9.3 Automatic stop function properly: | ☐ | ☐ | ☐ |
| D-9.4 Automatic start psi: | ☐ | ☐ | ☐ |
| D-9.5 Automatic stop psi: _____ | ☐ | ☐ | ☐ |
| D-10.1 Manual starts performed 10 times: | ☐ | ☐ | ☐ |
| D-10.2 Manual start function properly: | ☐ | ☐ | ☐ |
| D-10.3 Manual stop function properly: | ☐ | ☐ | ☐ |
| D-10.4 Manual start psi: _____ | ☐ | ☐ | ☐ |
| D-10.5 Manual stop psi _____ | ☐ | ☐ | ☐ |
| D-11.1 Remote start function properly: | ☐ | ☐ | ☐ |
| D-11.2 Remote stop function properly: | ☐ | ☐ | ☐ |
| D-11.3 Remote start psi: _____ | ☐ | ☐ | ☐ |
| D-11.4 Remote stop psi: _____ | ☐ | ☐ | ☐ |
| D-12.1 Timer indicates total run time:_____min | ☐ | ☐ | ☐ |
| D-12.2 Timer reset and graph paper changed: | ☐ | ☐ | ☐ |
| D-12.3 Test data and flow charts completed: (Attach all water flow charts, electrical Power charts, performance curves, etc.) | ☐ | ☐ | ☐ |
| D-12.4 Fire pump electrical power readings Recorded at each flow condition: | ☐ | ☐ | ☐ |
| D-12.5 Fire pump motor speed:_____rpm | ☐ | ☐ | ☐ |
| D-12.6 Fire pump discharge flow:_____gpm | ☐ | ☐ | ☐ |
| D-13.1 Jockey pump operational: | ☐ | ☐ | ☐ |
| D-13.2 Jockey pump appears properly aligned: | ☐ | ☐ | ☐ |
| D-13.3 Jockey pump valves open: | ☐ | ☐ | ☐ |
| D-13.4 Jockey pump "turn-on":_____psi | ☐ | ☐ | ☐ |
| D-13.5 Jockey pump "turn-off":_____psi | ☐ | ☐ | ☐ |

**D-20.0 Comments:_____**

**Note: Pump performance curve should be plotted on page 5 of 5.**

(All "NO" answers to be fully explained.)

Inspector's initial_____ Owner/designated rep. initial _____ Date: _____

# NEW MEXICO CORRECTIONS DEPARTMENT
## Fire Pump Test Summary Sheet

| | |
|---|---|
| Date:_____Time:_____Cont. no._____ | |
| Property name:_____ | |
| Address:_____ | |
| City/state/zip:_____ | |
| Static pressure: psi_____ | Flow @ 20 psi gpm_____ |

| Type of test (hydrant, drain or pump) | Static or suction pressure (psi) | Residual or discharge pressure (psi) | Net pump pressure (psi) | Pump speed (rpm/ amperes) | Pilot pressure | Dia. of nozzle openings flowed | No. of nozzle openings flowed | Flow at C=.90 C=.97 (gpm) | Opening coefficient C= | Actual flow (gpm) |
|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | | |
| | | | | | | | | | | |
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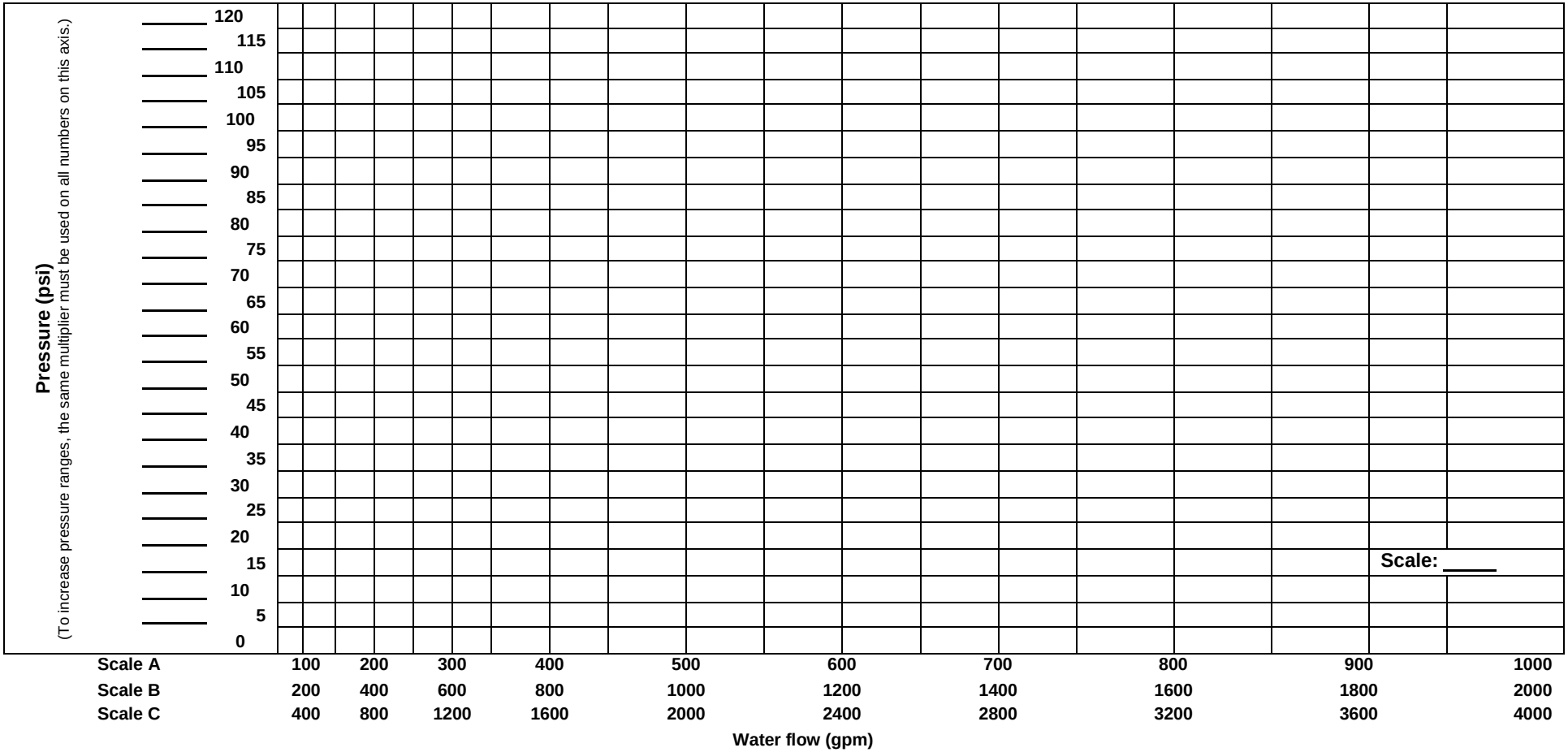

Form CD-160100.3

**NEW MEXICO CORRECTIONS DEPARTMENT**

**Report of Inspection & Testing of Dry Pipe Fire Protection Systems**
**Monthly and/or Quarterly Items to be Reviewed**

ALL QUESTIONS ARE TO BE FULLY ANSWERED AND ALL BLANKS TO BE FILLED

**(Weekly inspection tasks are included in this report)**

(There is not a scheduled monthly testing task requirement. See the quarterly schedule.)

Inspecting Firm: (contractor) Inspection Contract #
Name of Facility:
Inspector Name: Date:
Page of
Inspection Frequency: ☐ Monthly ☐ Quarterly ☐ Annually ☐ Other:

## Dry Pipe Sprinkler System Inspection

| | | | |
|---|---|---|---|
| A.1.1 Airpressure gauge: psi | ☐ | ☐ | ☐ |
| A-1.2 Accelerate or quick opening device gauge: psi | ☐ | ☐ | ☐ |
| A-1.3 Water pressure gauge: psi | ☐ | ☐ | ☐ |
| A-1.4 Water supply gauge: psi | ☐ | ☐ | ☐ |

| | Y | N/A | N |
|---|---|---|---|
| A-2.0 System in service on inspection: | ☐ | ☐ | ☐ |
| A-2.1 Dry pipe valve appears free of damage | ☐ | ☐ | ☐ |
| A-2.2 Trim valves in appropriate position: | ☐ | ☐ | ☐ |
| A-2.3 Alarm test valve closed: | ☐ | ☐ | ☐ |
| A-2.4 Intermediate chamber leak tight: | ☐ | ☐ | ☐ |
| A-3.1 Valve enclosure secured: | ☐ | ☐ | ☐ |
| A-3.2 Heater operational: | ☐ | ☐ | ☐ |
| A-3.3 Low temperature alarm operational: | ☐ | ☐ | ☐ |
| A-4.1 Compressor operational: | ☐ | ☐ | ☐ |
| A-4.2 Oil level full: | ☐ | ☐ | ☐ |
| A-4.3 High/low pressure switches operational: | ☐ | ☐ | ☐ |
| A-4.4 Auto. Air maint. Devices operational: | ☐ | ☐ | ☐ |
| A-5.1 Control va. Locked/tamper open: | ☐ | ☐ | ☐ |
| A-5.2 Backflow va. locked open/tamper | ☐ | ☐ | ☐ |
| A-5.3 Tamper switches appear operational: | ☐ | ☐ | ☐ |
| A-5.4 Valve area accessible: | ☐ | ☐ | ☐ |
| A-5.6 Control valves accessible: | ☐ | ☐ | ☐ |
| A-5.7 Main check valve holding pressure: | ☐ | ☐ | ☐ |
| A-6.1 FDC plainly visible: | ☐ | ☐ | ☐ |
| A-6.2 FDC easily accessible: | ☐ | ☐ | ☐ |
| A-6.3 FDC swivels non-binding rotation: | ☐ | ☐ | ☐ |
| A-6.4 FDC caps/plugs in place: | ☐ | ☐ | ☐ |
| A-6.5 FDC gaskets/signs in place | ☐ | ☐ | ☐ |
| A-6.6 FDC check valve drip free: | ☐ | ☐ | ☐ |
| A-6.7 FDC ball drip drain drip free: | ☐ | ☐ | ☐ |

| | Y | N/A | N |
|---|---|---|---|
| A-7.1 Exterior alarms properly identified: | ☐ | ☐ | ☐ |
| A-7.2 Exterior alarms appear operational: | ☐ | ☐ | ☐ |
| A-7.3 Interior alarms appear operational: | ☐ | ☐ | ☐ |
| A-8.1 Extra heads in spare head cabinet: | ☐ | ☐ | ☐ |
| A-8.2 Heads appear to be proper temperature: | ☐ | ☐ | ☐ |
| A-8.3 Head wrench for each type of head: | ☐ | ☐ | ☐ |
| A-8.6 Head in cooler appears free of ice, corrosion: | ☐ | ☐ | ☐ |
| A-8.7 Head appears free of leakage or damage: | ☐ | ☐ | ☐ |
| A-8.8 Head appears free of paint: | ☐ | ☐ | ☐ |
| A-8.9 Head appears free of non-approved coverings: | ☐ | ☐ | ☐ |
| A-9.0 Standard head less than 50 year: | ☐ | ☐ | ☐ |
| A-10.0 Residential head less than 20 year: | ☐ | ☐ | ☐ |
| A-11.1 Hose/hydrant house free of damage: | ☐ | ☐ | ☐ |
| A-11.2 Hose/hydrant house fully equipped: | ☐ | ☐ | ☐ |
| A-11.3 Hose/hydrant house is accessible: | ☐ | ☐ | ☐ |
| A-12.1 Wet pipe areas appear properly heated: (Wet SSP on dry pipe sys?) | ☐ | ☐ | ☐ |
| A-13.1 Low point drum drips drained: (As frequently as needed) | ☐ | ☐ | ☐ |
| A-13.2 All low points drained: | ☐ | ☐ | ☐ |
| A-14.1 All valves identified with signage: | ☐ | ☐ | ☐ |
| A-14.2 Hydraulic nameplate attached: | ☐ | ☐ | ☐ |
| **A-18.0 Alarm panel clear:** | ☐ | ☐ | ☐ |
| **A-19.0 System left in service:** | ☐ | ☐ | ☐ |

**A-20.0 Comments:**

(All "NO" answers to be fully explained.)

Inspector's initial _____ Owner/designated rep. initial _____ Date: _____

# NEW MEXICO CORRECTIONS DEPARTMENT

## Report of Inspection & Testing of Dry Pipe Fire Protection Systems
## Quarterly and Annual Items to be Reviewed

ALL QUESTIONS ARE TO BE FULLY ANSWERED AND ALL BLANKS TO BE FILLED

Inspecting Firm: (contractor) Inspection Contract #
Name of Facility:
Inspector Name: Date:
Page of
Inspection Frequency: ☐ Monthly ☐ Quarterly ☐ Annually ☐ Other:

### Quarterly Testing Requirements For a Dry Pipe Sprinkler System

| | | Y | N/A | N |
|---|---|---|---|---|
| C-1.1 | Quick opening devices tested during Semi-annual inspections: | ☐ | ☐ | ☐ |
| C-1.2 | Quick opening device test date: | ☐ | ☐ | ☐ |
| C-1.3 | Priming water at proper level: | ☐ | ☐ | ☐ |
| C-2.1 | Low air pressure alarm tested: | ☐ | ☐ | ☐ |
| C-3.1 | Main drain flow test with_____in. Valve full open: | ☐ | ☐ | ☐ |
| C-3.2 | Spkr. Supply gauge:_____psi | | | |
| C-3.3 | Spkr. Supply gauge with main Drain flow:_____psi | | | |

| | | Y | N/A | N |
|---|---|---|---|---|
| C-3.4 | Gauges operating: | ☐ | ☐ | ☐ |
| C-4.1 | Water flow alarm devices activated: | ☐ | ☐ | ☐ |
| C-4.2 | Interior bldg. alarms operate: | ☐ | ☐ | ☐ |
| C-4.3 | Exterior alarms operate: | ☐ | ☐ | ☐ |
| C-4.6 | Did alarm supervisory company Receive signal: | ☐ | ☐ | ☐ |
| C-4.7 | Did alarm panel reset: | ☐ | ☐ | ☐ |
| **C-18.0 Alarm panel clear:** | | ☐ | ☐ | ☐ |
| **C-19.0 System left in service:** | | ☐ | ☐ | ☐ |

**C-20.0 Comments:**

### Annual Inspection of Dry Pipe Sprinkler System

| | Y | N/A | N |
|---|---|---|---|
| D-1.1 Interior of dry pipe valve in good Condition: | ☐ | ☐ | ☐ |
| D-1.2 Interior of quick opening device in Good condition: | ☐ | ☐ | ☐ |
| D-1.3 Inspect interior of strainers, filters, Restricted orifices every 5th year: Date: _____ | ☐ | ☐ | ☐ |
| D-1.4 Inspect interior of main check valve Every 5th year: Date: _____ | ☐ | ☐ | ☐ |
| D-2.1 Visual inspection: hanger/seismic Bracing appear attached and secure: | ☐ | ☐ | ☐ |
| D-3.1 Visual inspection: "exposed" piping Appears in good condition: | ☐ | ☐ | ☐ |
| D-3.2 Piping appears free of mechanical Damage; | ☐ | ☐ | ☐ |
| D-3.3 Piping appears free of leakage: | ☐ | ☐ | ☐ |
| D-3.4 Exterior of piping appears free of Corrosion: | ☐ | ☐ | ☐ |
| D-3.6 Piping appears properly aligned: | ☐ | ☐ | ☐ |
| D-3.7 Piping appears free of external loads: | ☐ | ☐ | ☐ |
| D-4.1 Sprinklers appear free of corrosion: | ☐ | ☐ | ☐ |
| D-4.2 Sprinklers appear properly positioned: | ☐ | ☐ | ☐ |
| D-4.3 Sprinklers appear properly spaced: | ☐ | ☐ | ☐ |
| D-4.6 Sprinklers appear free of foreign Material: | ☐ | ☐ | ☐ |
| D-4.7 Sprinkler spray patterns appear free Of obstructions: | ☐ | ☐ | ☐ |
| **D-18.0 Alarm panel clear:** | ☐ | ☐ | ☐ |
| **D-19.0 System left in service:** | ☐ | ☐ | ☐ |

**D-20.0 Comments:**

(All "NO" answers to be fully explained.)
Inspector's initial _____ Owner/designated rep. initial _____ Date: _____

**NEW MEXICO CORRECTIONS DEPARTMENT**

## Annual Testing and Maintenance Tasks That Are in Addition to Other Frequency Tasks – For Dry Pipe System

| | Y | N/A | N |
|---|---|---|---|
| E-1.1 Dry Pipe Valve: (annually) | ☐ | ☐ | ☐ |
| E-2.1 Quick opening devices: (semi-annually) | ☐ | ☐ | ☐ |
| E-3.1 Dry pipe valve trip tested with control valve Partially open: Date: _____ | | | |
| E-3.2 Trip test with control valve fully open when system is Altered or every 3rd year: Date: _____ | | | |
| *(Exception: When protecting a cooler or freezer, DO NOT Introduce moisture into system.)* | | | |

| | Y | N/A | N |
|---|---|---|---|
| E-4.1 Strainers and filters and restricted Orifices cleaned after trip test or Every 5 years: | ☐ | ☐ | ☐ |
| E-4.2 Information on last trip test recorded: | ☐ | ☐ | ☐ |
| E-5.1 Automatic air maintenance device Tested and operating properly | ☐ | ☐ | ☐ |
| E-6.1 Control valve lubricated: | ☐ | ☐ | ☐ |
| E-6.2 Control valve operated to closed Position and returned to open position: | ☐ | ☐ | ☐ |
| E-6.3 Backflow assembly control valves Lubricated: | ☐ | ☐ | ☐ |
| E-6.6 Backflow assembly control valves Operated and returned to open position: | ☐ | ☐ | ☐ |
| E-6.7 Post indicator valve operated with _____Number of turns recorded: | ☐ | ☐ | ☐ |
| E-6.8 Post indicator valve returned to open Position: | ☐ | ☐ | ☐ |
| (*All above listed control valves to be left ¼ turn from wide open)* | | | |
| E-7.1 All low points drained: | ☐ | ☐ | ☐ |
| E-7.2 Internal pipe inspection recommended: | ☐ | ☐ | ☐ |

| | Y | N/A | N |
|---|---|---|---|
| **Test Frequency Items of 5 Years Unless Noted** | | | |
| F-1.1 Gauge maintenance test: (5 year) _____ | | | |
| F-1.2 Replaced date: | ☐ | ☐ | ☐ |
| F-1.3 Calibrated date: | ☐ | ☐ | ☐ |
| F-2.1 Sprinkler maintenance test frequencies: | | | |
| F-2.2 (5 year) high temp. date: _____ | ☐ | ☐ | ☐ |
| F-2.3 (20 year, then 10 year thereafter) Fast response date: _____ | ☐ | ☐ | ☐ |
| F-2.4 (50 year, then 10 year thereafter) Standard sprinkler date: _____ | ☐ | ☐ | ☐ |
| F-3.1 Other: | ☐ | ☐ | ☐ |
| **F-4.1 Supplemental Information on Dry Pipe Valve And System Condition Report (Annual)** | | | |
| F-4.2 Dry system controls sprinklers in: | | | |
| F-4.3 D.P.V. trip test satisfactory | ☐ | ☐ | ☐ |
| F-4.4 Reason for failure/or partly satisfactory: | | | |
| F-4.5 Condition: interior of body in good Condition: | ☐ | ☐ | ☐ |
| F-4.6 Condition: water from test pipe in good Condition: | ☐ | ☐ | ☐ |
| F-4.7 Condition: moving parts in good Condition: | ☐ | ☐ | ☐ |
| F-4.8 Condition: seats in good condition: | ☐ | ☐ | ☐ |
| F-4.9 Condition: rubber facing in good Condition: | ☐ | ☐ | ☐ |
| F-4.10 Q.O.D operation indicate satisfactory: | ☐ | ☐ | ☐ |
| F-4.11 Q.O.D operation indicate failed: | ☐ | ☐ | ☐ |
| F-4.12 Q.O.D operation indicate shut off: | ☐ | ☐ | ☐ |

**F-10.0 Comments:**

## Trip Test Table

| | **Dry Valve** | Size | Year | | **Q.O.D.** | Year | | | |
|---|---|---|---|---|---|---|---|---|---|
| | Make | | Model | Serial No. | Make | Model | | Serial No. | |
| | | | | | | | | | |
| | | Time to trip Thru test pipe | Water Pressure | Air Pressure | Trip point Air pressure | Time water Reached test outlet | | Alarm Operated | |
| | | Min / Sec | Psi | Psi | Psi | Min | Sec | Yes | No |
| Dry Pipe Operating Test | Without Q.O.D. | | | | | | | | |
| | With Q.O.D. | | | | | | | | |

If No, explain:

(All "NO" answers to be fully explained.)

Inspector's initial_____ Owner/designated rep. initial _____ Date: _____

# NEW MEXICO CORRECTIONS DEPARTMENT

## Report of Inspection & Testing of Wet Standpipe Systems

ALL QUESTIONS ARE TO BE FULLY ANSWERED AND ALL BLANKS TO BE FILLED

Inspecting Firm: (contractor) Inspection Contract #
Name of Facility:
Inspector Name: Date:
Page of **Date or previous internal pipe inspection:**
Inspection Frequency: ☐ Monthly ☐ Quarterly ☐ Annually ☐ Other:

| | |
|---|---|
| A.1.1 | Supply water gauge: psi |
| A-1.2 | System water gauge: psi |
| A-1.3 | Top floor gauge: psi |
| A-1.6 | Class of service: I ☐ II ☐ III ☐ |
| A-2.1 | Hose valve size:_____in. |
| A-2.2 | Hose valve with adapter size:_____x_____in. |
| A-2.3 | Hose valve with_____in. hose: |
| A-2.6 | Type and size of nozzle: |
| | Adjustable _____in. |
| | Straight stream _____in. |
| | Fog _____in. |
| | Non-adjustable _____in. |
| A-3.1 | Indicate the type and record the information for the TOP FLOOR hose valve: |
| | Pressure reducing valves inlet pressure set_____psi |
| | Pressure reducing valves outlet pressure set_____psi |
| | Pressure restricting valve inlet pressure set_____psi |
| | Pressure restricting valve outlet pressure set_____psi |
| | Pressure regulating valve inlet pressure set_____psi |
| | Pressure regulating valve outlet pressure set_____psi |
| | (Attach supplemental sheet recording the gpm and Pressure setting for EACH FLOOR hose valve.) |

| | | Y | N/A | N |
|---|---|---|---|---|
| A-4.1 | System in service on inspection: | ☐ | ☐ | |
| A-4.2 | System equipped with flow switch: | ☐ | ☐ | |
| A-4.3 | System equipped with alarm check valve: | ☐ | ☐ | ☐ |
| A-4.4 | Trip piping leak tight: | ☐ | ☐ | |
| A-5.1 | Control valves sealed open: | ☐ | ☐ | |
| A-5.2 | Control valves locked/tamper open: | ☐ | ☐ | |
| A-5.6 | Backflow asmb. Valves sealed open: | ☐ | ☐ | ☐ |
| A-5.7 | Backflow asmb. Valves locked/tamper open: | ☐ | ☐ | ☐ |
| A-5.8 | Backflow assembly operating OK: | ☐ | ☐ | ☐ |
| A-6.1 | Wall hydrant sealed open: | ☐ | ☐ | ☐ |
| A-6.2 | Wall hydrant locked/tamper open: | ☐ | ☐ | ☐ |
| A-6.6 | Valve area clear of obstructions: | ☐ | ☐ | ☐ |
| A-6.7 | Valve area accessible: | ☐ | ☐ | ☐ |
| A-6.9 | Wall hydrant plainly visible: | ☐ | ☐ | |
| A-6.10 | Wall hydrant easily accessible: | ☐ | ☐ | |
| A-6.11 | Wall hydrant identification plate in Place: | ☐ | ☐ | ☐ |

| | | Y | N/A | N |
|---|---|---|---|---|
| A-6.12 | Roof manifold control valve closed: | ☐ | ☐ | ☐ |
| A-7.1 | Tamper switches appear operational: | ☐ | ☐ | ☐ |
| A-7.2 | Alarm devices appear operational: | ☐ | ☐ | |
| A-7.5 | Exterior of devices in good condition: | ☐ | ☐ | |
| A-7.6 | Exterior bells, gongs unobstructed: | ☐ | ☐ | |
| A-7.7 | Exterior fittings free of water leakage: | ☐ | ☐ | |
| | Main drain: | ☐ | ☐ | ☐ |
| | Alarm bell line: | ☐ | ☐ | |
| A-8.1 | Hose valve free of physical damage: | ☐ | ☐ | |
| A-8.2 | Hose valve outlets with cap: | ☐ | ☐ | |
| A-8.3 | Hose valve outlet thread in good condition: | ☐ | ☐ | ☐ |
| A-8.6 | System free of visible water leaks: | ☐ | ☐ | ☐ |
| A-8.8 | Hose valve outlets equipped with Reducing hose adapter: | ☐ | ☐ | ☐ |
| A-9.1 | Inspection of cabinet per NFPA 1962: | ☐ | ☐ | ☐ |
| A-9.2 | Inspection of hose per NFPA 1962: | ☐ | ☐ | |
| A-9.3 | Inspection of hose nozzle per NFPA 1962: | ☐ | ☐ | |
| A-9.6 | Wall penetrations caulked/sealed: | ☐ | ☐ | |
| A-10.1 | Roof manifold equipped with hose valves: | ☐ | ☐ | |
| A-10.2 | Roof manifold hose valve caps in place: | ☐ | ☐ | ☐ |
| A-10.3 | Roof manifold swivel rotation is nonbonding | ☐ | ☐ | |
| A-10.4 | Roof manifold valves good condition: | | | |
| A-10.5 | Roof manifold ball drip operational: | | | |
| A-11.1 | Caps or plugs on FDC: | | | |
| A-11.2 | FDC swivel rotation nonbonding: | ☐ | ☐ | ☐ |
| A-11.3 | FDC location plainly visible: | | | |
| A-11.4 | FDC easily accessible: | | | |
| A-11.5 | FDC identification plate in place: | | | |
| A-12.1 | Piping free of physical damage: | | | |
| A-12.2 | Piping (exterior) is free of corrosion: | ☐ | ☐ | ☐ |
| A-12.3 | Piping appears to be leak tight: | ☐ | ☐ | ☐ |
| A-12.6 | Ball drip drain drip tight: | ☐ | ☐ | ☐ |
| A-12.7 | Main drain at supply_____(in.):_____psi | | | |
| A-12.9 | Signage/identification plates in place: | ☐ | ☐ | ☐ |
| **A-15.1** | **Alarm panel clear:** | ☐ | ☐ | ☐ |
| **A-15.2** | **All systems in service:** | ☐ | ☐ | ☐ |
| **A-16.1** | **Comments:** | | | |

(All "NO" answers to be fully explained.)
Inspector's initial_____ Owner/designated rep. initial _____ Date: _____

**NEW MEXICO CORRECTIONS DEPARTMENT**

**Report of Inspection & Testing of Wet Standpipe Systems**
**Continued**

ALL QUESTIONS ARE TO BE FULLY ANSWERED AND ALL BLANKS TO BE FILLED

## Quarterly Testing of Wet Standpipe System

| | Y | N/A | N |
|---|---|---|---|
| B-1.1 Main drain_____(in.) flow at riser: _____psi | ☐ | ☐ | ☐ |
| B-2.1 Alarm devices operated: | ☐ | ☐ | ☐ |
| | | | |
| | | | |

*Refer to NFPA 1962 for testing of standpipe system in addition to the task indicated herein.*

## Annual Testing

| | Y | N/A | N |
|---|---|---|---|
| C-1.1 Test of hose per NFPA 1962: | ☐ | ☐ | ☐ |
| C-1.2 Test of hose nozzle per NFPA 1962: | ☐ | ☐ | ☐ |
| | | | |

## Five Year Inspection

| | Y | N/A | N |
|---|---|---|---|
| D-1.1 Internal inspection of check valves: Date:_____ | ☐ | ☐ | ☐ |
| D-1.1 Internal inspection of alarm check: Date:_____ | ☐ | ☐ | ☐ |
| | | | |

## Five Year Testing

| | Y | N/A | N |
|---|---|---|---|
| E-1.1 Pressure gauge calibrated: Date:_____ | ☐ | ☐ | ☐ |
| E-1.2 Pressure gauges replaced: Date:_____ | ☐ | ☐ | ☐ |
| E-2.1 Hydrostatic test performed: Date:_____ | ☐ | ☐ | ☐ |
| E-2.2 Water supply test performed: Date:_____ | ☐ | ☐ | ☐ |
| E-3.1 Pressure regulating type hose valves Flow tested: Date:_____ | ☐ | ☐ | ☐ |

(Attach additional pages to record the results of the flow test Information indicated below which shall be provided for each Type of hose valve connection including the roof manifold, For each floor, and for each standpipe riser. The authority Having jurisdiction shall be consulted prior to conducting The flow test.)

| | | | |
|---|---|---|---|
| E-4.1 Volume of flow:_____gpm | ☐ | ☐ | |
| E-4.2 Supply side:_____psi | ☐ | ☐ | |
| E-4.3 Hose connection side:_____psi | ☐ | ☐ | ☐ |
| | | | |

(All “NO” answers to be fully explained.)

Inspector’s initial_____ Owner/designated rep. initial _____ Date: _____

Form CD-160100.6

# NEW MEXICO CORRECTIONS DEPARTMENT

## Report of Inspection & Testing of Water Based Fire Protection Systems
## Quarterly Items to be Reviewed

ALL QUESTIONS ARE TO BE FULLY ANSWERED AND ALL BLANKS TO BE FILLED

Inspecting Firm: (contractor) Inspection Contract #
Name of Facility:
Inspector Name: Date:
Page of
Inspection Frequency: ☐ Monthly ☐ Quarterly ☐ Annually ☐ Other:

## Quarterly Report of Inspection of Wet Sprinkler System

(For a quarterly inspection, complete all items listed on Monthly Items to be Reviewed **AND** the items listed below.)

| | Y | N/A | N |
|---|---|---|---|
| B-1.1 Hydraulic nameplate attached: | ☐ | ☐ | ☐ |
| B-1.2 Strainers and filters cleaned: | ☐ | ☐ | ☐ |
| B-1.3 Exterior alarms properly identified: | ☐ | ☐ | ☐ |
| **B-2.0 Alarm panel clear:** | ☐ | ☐ | ☐ |
| **B-3.0 System left in service:** | ☐ | ☐ | ☐ |
| **B-20.0 Comments:** | | | |

## Quarterly Testing Requirements For Wet Sprinkler System

| | Y | N/A | N |
|---|---|---|---|
| C-1.1 Main drain flow test with_____in. valve full open: | ☐ | ☐ | ☐ |
| C-2.1 Spkr. Supply gauge:_____psi | | | |
| C-2.2 Spkr. Supply gauge:_____main drain flow:_____psi | | | |
| C-3.1 Spkr. System gauge:_____psi | | | |
| C-3.2 Spkr. System gauge with main drain flow:_____psi | | | |

| | Y | N/A | N |
|---|---|---|---|
| C-4.1 Water flow alarm devices activated: | ☐ | ☐ | ☐ |
| C-4.2 Interior bldg. alarms operating: | ☐ | ☐ | ☐ |
| C-4.3 Exterior alarms operating: | ☐ | ☐ | ☐ |
| C-5.1 Inspectors test flow: psi | | | |
| C-6.1 Time to ring alarm from alarm Check valve: | min | sec | |
| C-7.1 Time to ring alarm from flow switch: | min | sec | |
| C-8.1 Time to ring alarm from pressure switch: | min | sec | |

| | Y | N/A | N |
|---|---|---|---|
| C-9.1 Gauges appear operating properly: | ☐ | ☐ | ☐ |
| C-10.1 Did alarm supervisory company receive signal Properly: | ☐ | ☐ | ☐ |
| C-10.2 Did alarm panel reset properly; | ☐ | ☐ | ☐ |
| **C-11.0 Alarm panel clear** | ☐ | ☐ | ☐ |
| **C-12.0 System left in service:** | ☐ | ☐ | ☐ |
| **C-20.0 Comments:** | | | |

(All "NO" answers to be fully explained.)
Inspector's initial_____ Owner/designated rep. initial _____ Date: _____

Form CD-160100.7

**NEW MEXICO CORRECTIONS DEPARTMENT**

**Report of Inspection & Testing of Water Based Fire Protection Systems**
**Monthly Items to be Reviewed**

ALL QUESTIONS ARE TO BE FULLY ANSWERED AND ALL BLANKS TO BE FILLED

**(WEEKLY INSPECTION TASKS ARE INCLUDED IN THIS REPORT)**

(THERE IS NOT A SCHEDULED MONTHLY TESTING TASK REQUIREMENT. SEE THE QUARTERLY SCHEDULE.)

Inspecting Firm: (contractor) Inspection Contract #
Name of Facility:
Inspector Name: Date:
Page of
Inspection Frequency: ☐ Monthly ☐ Quarterly ☐ Annually ☐ Other:

## Wet Sprinkler System Inspection

| | | | |
|---|---|---|---|
| A.1.2 Spkr. system gauge: psi | ☐ | ☐ | ☐ |

| | Y | N/A | N |
|---|---|---|---|
| A-2.0 System in service on inspection | ☐ | ☐ | ☐ |
| A-2.1 Spkr. Control va. Locked/tamper open: | ☐ | ☐ | ☐ |
| A-2.2 Stpipe control va. Locked/tamper open: | ☐ | ☐ | ☐ |
| A-2.3 Backflow va. Locked open/tamper: | ☐ | ☐ | ☐ |
| A-2.4 Anti-freeze system va. Locked/tamper open: | ☐ | ☐ | ☐ |
| A-2.8 Tamper switches appear operational: | ☐ | ☐ | ☐ |
| A-3.1 Valve area accessible: | ☐ | ☐ | ☐ |
| A-3.2 Control valves accessible: | ☐ | ☐ | ☐ |
| A-4.1 Pressure regulating valve is open: | ☐ | ☐ | ☐ |
| A-4.2 Pressure regulating valve in good condition: | ☐ | ☐ | ☐ |
| A-4.3 Pressure reg. valve leak tight: | ☐ | ☐ | ☐ |
| A-4.4 Pressure reg. va. Maintaining down-stream pressure per design criteria: | ☐ ☐ | ☐ ☐ | ☐ ☐ |
| A-5.1 Pressure relief va. In closed position except when operational: | ☐ | ☐ | ☐ |
| A-5.2 Pressure relief va. In good condition: | ☐ | ☐ | ☐ |
| A-5.3 Pressure relief va. Leak tight: | ☐ | ☐ | ☐ |
| A-5.4 Pressure relief va. Maintaining up-stream pressure per design criteria: | ☐ | ☐ | ☐ |
| A-6.1 Main check valve holding pressure: | ☐ | ☐ | ☐ |
| A-6.2 Alarm checks va. Exterior free of damage: | ☐ | ☐ | ☐ |
| A-6.3 Water flow switch operational: | ☐ | ☐ | ☐ |
| A-7.1 Trim piping leak tight: | ☐ | ☐ | ☐ |
| A-7.2 Retard chamber drip tight: | ☐ | ☐ | ☐ |
| A-7.3 Alarm drain drip tight when not operational: | ☐ | ☐ | ☐ |
| A-8.1 Trim valves in appropriate position: | ☐ | ☐ | ☐ |
| A-8.2 Alarm test line valve closed: | ☐ | ☐ | ☐ |

| | Y | N/A | N |
|---|---|---|---|
| A-9.1 FDC plainly visible: | ☐ | ☐ | ☐ |
| A-9.2 FDC easily accessible: | ☐ | ☐ | ☐ |
| A-9.5 FDC swivels non-binding rotation: | ☐ | ☐ | ☐ |
| A-9.6 FDC caps/plugs in place: | ☐ | ☐ | ☐ |
| A-9.7 FDC gaskets/signs in place: | ☐ | ☐ | ☐ |
| A-9.10 FDC check valve drip free: | ☐ | ☐ | ☐ |
| A-9-11 FDC ball drip drain drip free: | ☐ | ☐ | ☐ |
| A-10.1 Exterior alarms properly identified: | ☐ | ☐ | ☐ |
| A-10.2 Exterior alarms appear operational: | ☐ | ☐ | ☐ |
| A-10.5 Interior alarms appear operational: | ☐ | ☐ | ☐ |
| A-11.1 Extra heads in spare head cabinet: | ☐ | ☐ | ☐ |
| A-11.2 Heads appear of proper temperature: | ☐ | ☐ | ☐ |
| A-11.3 Head wrench for each type of head: | ☐ | ☐ | ☐ |
| A-11.6 Head in cooler appears free of ice, corrosion: | ☐ | ☐ | ☐ |
| A-11.7 Head appears free of leakage or damage: | ☐ | ☐ | ☐ |
| A-11.8 Head appears free of paint: | ☐ | ☐ | ☐ |
| A-11.9 Heads appear free of non-approved coverings: | ☐ | ☐ | ☐ |
| A-12.0 Standard head less than 50 year: | ☐ | ☐ | ☐ |
| A-13.0 Residential head less than 20 year: | ☐ | ☐ | ☐ |
| A-14.0 Watt hydrant plainly visible: | ☐ | ☐ | ☐ |
| A-14.1 Watt hydrant easily accessible: | ☐ | ☐ | ☐ |
| A-14.2 Watt hydrant identification plate in place: | ☐ | ☐ | ☐ |
| A-15.1 Hose/hydrant house free of damage: | ☐ | ☐ | ☐ |
| A-15.2 Hose/hydrant house fully equipped: | ☐ | ☐ | ☐ |
| A-15.3 Hose/hydrant house is accessible: | ☐ | ☐ | ☐ |
| A-16.1 Wet pipe areas appear properly heated: | ☐ | ☐ | ☐ |
| **A-17.0 Alarm panel clear:** | ☐ | ☐ | ☐ |
| **A-18.0 System left in service:** | ☐ | ☐ | ☐ |

**A-20.0 Comments:**

(All "NO" answers to be fully explained.)

Inspector's initial_____ Owner/designated rep. initial _____ Date: _____

Form CD-160100.8

# NEW MEXICO CORRECTIONS DEPARTMENT

## Report of Inspection & Testing of Water Based Fire Protection Systems
## Annual Items to be Reviewed

ALL QUESTIONS ARE TO BE FULLY ANSWERED AND ALL BLANKS TO BE FILLED

Inspecting Firm: (contractor) Inspection Contract #
Name of Facility:
Inspector Name: Date:
Page of
Inspection Frequency: ☐ Monthly ☐ Quarterly ☐ Annually ☐ Other:

## Annual Report of Inspection of Wet Sprinkler System

**(Description of this form:** Theses tasks are in addition to the Monthly and quarterly tasks. Complete the monthly and Quarterly reports AND this report as required for a total annual Report of inspection. Visual inspection is defined as what can Be observed from the floor level by an inspector. The use of Binoculars is recommended for visual inspections in high Buildings.)

| | Y | N/A | N |
|---|---|---|---|
| D-1.1 Prior to freezing season, owner is Responsible for bldg. to be in secure Condition and properly heated: | ☐ | ☐ | ☐ |
| D-2.1 Visual inspection: hanger/seismic Bracing appear attached and secure: | ☐ | ☐ | ☐ |
| D-3.1 Visual inspection: "exposed" piping Appear in good condition: | ☐ | ☐ | ☐ |
| D-3.2 Piping appears free of mechanical damage: | ☐ | ☐ | ☐ |
| D-3.3 Piping appears free of leakage: | ☐ | ☐ | ☐ |
| D-3.4 Piping appears free of corrosion: | ☐ | ☐ | ☐ |
| D-3.5 Piping appears properly aligned: | ☐ | ☐ | ☐ |
| D-3.6 Piping appears free of external loads: | ☐ | ☐ | ☐ |
| D-4.1 Sprinklers appear free of corrosion: | ☐ | ☐ | ☐ |
| D-4.2 Sprinklers appear properly positioned: | ☐ | ☐ | ☐ |
| D-4.3 Sprinklers appear properly spaced: | ☐ | ☐ | ☐ |
| D-4.4 Sprinklers appear free of foreign material: | ☐ | ☐ | ☐ |
| D-4.5 Sprinkler spray patterns appear free Of obstructions: | ☐ | ☐ | ☐ |
| **D-10.0 Alarm panel clear:** | ☐ | ☐ | ☐ |
| **D-11.0 System in service:** | ☐ | ☐ | ☐ |
| **D-20.0 Comments:** | | | |

*** Provide additional pages if necessary to record the:
Volume of flow gpm,
Supply side pressure psi,
System side pressure psi.

## Annual Testing & Maintenance Tasks That are in Addition to Other Frequency Tasks - For Wet Sprinkler System

| | Y | N/A | N |
|---|---|---|---|
| E-1.1 Control valve lubricated: | ☐ | ☐ | ☐ |
| E-2.1 Control valve operated to closed position and returned to open position: | ☐ | ☐ | ☐ |
| F-1.1 Backflow assembly control valves lubricated: | ☐ | ☐ | ☐ |
| F-1.2 Backflow assemble valve operated and Returned to open position: | ☐ | ☐ | ☐ |
| G-1.1 Post indicator valve operated with number of Turns recorded:_____ | ☐ | ☐ | ☐ |
| G-1.2 Post indicator valve returned to open position: (Valves left ¼ turn from wide open) | ☐ | ☐ | ☐ |
| H-1.1 Antifreeze solution checked to provide Adequate freeze protection: (protection temp:_____° F) | ☐ | ☐ | ☐ |
| **Test Frequency Items of 5 Years or Greater** | | | |
| H-2.0 Internal inspection last date (5 years): _____ | | | |
| H-2.1 Alarm check valve: | ☐ | ☐ | ☐ |
| H-2.15 Flow tested pressure regulation control Valves: *** | ☐ | ☐ | ☐ |
| H-2.2 Make:_____ | | | |
| H-2.3 Model:_____ | | | |
| H-2.4 Size: _____ Date:_____ | | | |
| H-2.5 Check valve:_____ | | | |
| H-2.6 Strainers:_____ | | | |
| H-2.7 Filters:_____ | | | |
| H-2.8 Trim orifices:_____ | | | |
| H-2.9 Other:_____ | | | |
| H-3.0 Gauge maintenance: date last tested (5 year): | | | |
| H-3.1 Replaced date:_____ | | | |
| H-3.2 Calibrated Date:_____ | | | |
| J-1.0 Sprinkler maintenance test: _____ (5 year) | | | |
| J-1.1 High temp. date:_____ (20 year, then 10 year thereafter) | | | |
| J-1.2 Fast Response Date:_____ | | | |
| J-1.3 Residential head 20 year: (50 year, then 10 year thereafter) | | | |
| J-1.4 Standard sprinkler date: _____ | | | |
| **J-20.0 Comments:** | | | |

(All "NO" answers to be fully explained.)
Inspector's initial_____ Owner/designated rep. initial _____ Date: _____