PROJECT DETAILS

INSPECTION & TEST PLAN								
EF. NO.								
EV. NO.	0							
ATE:								
AGE:	1 OF 1							

ACTIVITY:	INSTALLATION, TESTING & COMMISSIONING OF FIRE	FIGHTING EQUIPMEN	T (FIRE EXTINGUISHERS, FIRE HOSE REEL & FIRE HOSE CABINENTS)								
AREA/LOCATION:	PI Building Phase 1A										
ITP approved by CONTRACTOR's QA/QC:			ITP approved by Consultant:								
Signature:			Signature:								
Date:			Date:								
Dutc.				INSPECTION LEVEL							
SERIAL NO.	DESCRIPTION FREQU		SPECIFICATION/CRITERIA	ITL CONTRACTOR Consultant					VERIFICATION RECORD		
				ı	IL	CONTR	RACTOR	Cons	ultant		
1	DOCUMENTATION										
1.1	Material Approval	Once (Approval prior to start of activity)	Specs. Submittals. Sumbit product data for each fire stop system. Submittals shall include product characteristics, performance & limitation criteria, test data, installation details & procedures for each method of installation applicable to the project.			н		Н		Approved Submittal	
1.2	Shop Drawing Approval	Each Shop Drawing	Specs. Shop Drawing: Shop drawings shall indicate water supply location, size, piping layout & size. Sprinkler locations & type, hanger locations & type, equipment locations & type, valve locations & type, occupancy classes, hydraulic calculations reference points, node references of remote area & discharge densities. Fire suppression data, classification & fire and smoke partitions shall also be indicated.			Н		н		Approved DTF	
1.3	Method Statement Approval	Once (Approval prior to start of activity)	All forms (MS, ITP, Check list)			Н		Н		Approved DTF	
2	MATERIAL INSPECTION										
2.1	Check the Material as per approved submittal.	Each Delivery	As Per Specs. Approved Submittal.			Н		Н		MIR Approval	
3	INSTALLATION INSPECTION										
3.1	Check the installation as per approved drawing. Check the physical Installation of equipment.	Area Wise or As instructed by Consultant.	As per approved shop drawings. As Per Specs. Install fire protection system in accordance with NFPA rulings, listings, and manufactureres' recommendations. Locate where accessible for servicing and replacement.			Н		Н		WIR, Check List	
4	TESTING & COMMISSIONING	Area Wise or As instructed by Consultant.	As per approved shop drawings. As Per Specs. Testing & Commissioning shall be as detailed in standards listed in the section as well as per Section 23 05 93 (Testing, Adjusting & Balancing)			Н		Н		WIR, Check List	
		LEGEN	D: H: HOLD W: WITNESS S: SURVEILLANCE R: REVIEW		-						
			ITP Sign-Off post completion of Works								
	CONTRACTOR APPROVAL		Consultant APPROVAL								
	NAME : SIGN :										
			NAME :								
			SIGN:								
	DATE:		DATE								