



CHERRY HILL FIRE MARSHAL'S OFFICE

FIRE PUMP TEST REPORT

Only this document will be accepted by the Cherry Hill Fire Prevention Division for annual testing purposes as required by the New Jersey Uniform Fire Safety Code and applicable N.F.P.A. standards.

PROPERTY NAME: _____ DATE OF INSPECTION: ____/____/____
PROPERTY ADDRESS: _____ INSPECTOR: _____
TESTING AGENCY NAME: _____
NJ-DFS BUSINESS PERMIT # _____ PHONE # _____
TESTING AGENCY ADDRESS _____

1. DOCUMENTATION AVAILABLE OF ALL PERIODIC MAINTENANCE & INSPECTIONS AS REQUIRED BY NFPA 25? ☐ YES ☐ NO
2. MANUFACTURER: _____ PUMP TYPE: ☐ HORIZONTAL SHAFT ☐ VERTICAL SHAFT
3. RATED G.P.M.: _____ @ _____ R.P.M. RATED HEAD PRESSURE: _____ P.S.I.
4. PUMP TYPE: ☐ ELECTRIC VOLTS _____ AMPS _____ PHASE _____
☐ DIESEL ☐ GASOLINE ☐ OTHER _____
5. BATTERY CONDITION: _____ BATTERY CHARGER WORKS: ☐ YES ☐ NO CHARGE RATE? _____
6. MOVING PARTS FOR PUMP & MECHANICAL TRANSMISSION SYSTEM LUBRICATED AS REQUIRED ☐ YES ☐ NO
PUMP COUPLING ALIGNMENT CHECKED ☐ YES ☐ NO GAGES CHECKED FOR ACCURACY ☐ YES ☐ NO
7. TYPE OF TEST PERFORMED: ☐ PUMP DISCHARGE VIA HOSE STREAMS ☐ PUMP DISCHARGE VIA BYPASS FLOWMETER
TO DRAIN OR SUCTION RESIVIOR ☐ PUMP DISCHARGE VIA BYPASS FLOWMETER TO PUMP SUCTION
8. AT NO FLOW (CHURN): CIRCULATION AND PRESSURE RELIEF VALVE(S) CHECKED FOR PROPER OPERATION ☐ YES ☐ NO
9. TEST RESULTS:

	<u>NO FLOW</u>	<u>RATED</u>	<u>PEAK</u>
ELECTRIC MOTOR CURRENT	_____	_____	_____
PUMP SPEED	_____	_____	_____
SUCTION PRESSURE	_____	_____	_____
DISCHARGE PRESSURE	_____	_____	_____
FLOW	_____	_____	_____
10. ABOVE TEST RESULTS WITHIN ACCEPTABLE RANGES? ☐ YES ☐ NO
11. ALARM CONDITIONS SIMULATED? ☐ YES ☐ NO
12. AUTOMATIC TRANSFER SWITCH TESTED? ☐ YES ☐ NO ☐ NA OPERATED AS INTENDED? ☐ YES ☐ NO
13. DOES JOCKEY PUMP OPERATE PROPERLY: ☐ YES ☐ NO ☐ N/A
14. SUCTION SCREEN CLEANED AFTER FLOW: ☐ YES ☐ NO
15. SATISFACTORY ENVIRONMENTAL CONDITIONS WITHIN PUMP HOUSE/PUMP ROOM ☐ YES ☐ NO
16. SUCTION, DISCHARGE, BYPASS VALVES LEFT FULLY OPEN ☐ YES ☐ NO PIPING FREE OF LEAKS ☐ YES ☐ NO

NOTES/DEFICIENCIES: _____