



CITY OF PUYALLUP

Engineering Services

333 S Meridian, Puyallup, WA 98371

Tel: (253) 841-5491 Fax: (253) 840-6678

www.cityofpuyallup.org

UNDERGROUND FIRE LINE INSPECTION CHECKLIST

Permit Number: PRCNC 202410193PRCCP20241109 Applicant: Songyi Cho
Address: 3303 8TH AVE SE
Building E, Puyallup, WA 98372 Phone No.: (509) 432-4651
Installer - RW Scott

3/24/25 - Begin fire riser install under footing. - JL 3/25/25 - Building riser thrust blocks installed. - JL
Action: ☒ Approved ☐ Approved with corrections
Cover Inspection/Thrust Blocks ☒ Partial Approved ☐ Incomplete / Not Approved
9/17 - Fire line install w/ thrust blocks. JL ☐ Not Ready / Canceled
9/18 - Fire install w/ thrust blocks. JL 3/24/25 - Begin central fire jumper under footing install. - JL

3/26/25 - Hydro-tested 4" central fire jumper @ 200psi for 2hrs. (PASSED) - MR
Action: ☒ Approved ☐ Approved with corrections
Hydrostatic Test 200lbs/2hrs ☒ Partial Approved ☐ Incomplete / Not Approved
9/24/25 - Hydro-tested fire line from 2" b/o near tie in through building inlet flanged
jumper to the building FDC flange to the FDC stand pipe. (PASSED) - JL

10/2/25 - Fire line was flushed twice for 15min. each time. Second time bag was clean. (PASSED) JL
Action: ☒ Approved ☐ Approved with corrections
Flushing of Fire Line ☐ Partial Approved ☐ Incomplete / Not Approved
10/2/25 - 4" underground cross over between was flushed ☐ Not Ready / Canceled
twice with no debris in the bag the second time. (PASSED) JL Note: Valley Water District isolated two valves on their system off site.

Action: ☐ Approved ☐ Approved with corrections
Valve DDC/Tampers/Ladders ☐ Partial Approved ☐ Incomplete / Not Approved
☐ Not Ready / Canceled

9/17 - GV installed. JL Post indicator installed. - JL
Action: ☒ Approved ☐ Approved with corrections
PIV and Tamper ☒ Partial Approved ☐ Incomplete / Not Approved
☐ Not Ready / Canceled
Confirmed tamper switch operation with COP Ray C.

9/18 - FDC installed. JL 9/18 - Saddle for ball drip installed. JL 3/24/25 - Begin FDC riser install under footing. - JL
Action: ☒ Approved ☐ Approved with corrections
FDC/Locking Knox Cap/Signage ☒ Partial Approved ☐ Incomplete / Not Approved
3/25/25 - FDC riser thrust blocks installed. - JL ☐ Not Ready / Canceled
Ball drip was installed prior to flush.

Action: ☒ Approved ☐ Approved with corrections
Final Fire Underground ☐ Partial Approved ☐ Incomplete / Not Approved
☐ Not Ready / Canceled

WASHINGTON STATE
CERTIFICATE OF COMPETENCY
FIRE SPRINKLER SYSTEMS

Brandon Charles Young
7637-1225-D Level U
RW Scott Construction Company
RWSCOC*229MU

Certified Installer Stamp

Signature

Date

Approved - City Engineering Inspector

1/22/2026

Date

**FIRE PROTECTION BUREAU – PLAN REVIEW**

PO Box 42642

Olympia WA 98504-2642

(360) 596-3900 FAX: (360) 596-3934

**CONTRACTORS' MATERIALS AND TEST CERTIFICATE
FOR PRIVATE FIRE SERVICE MAINS****PROCEDURE**

Upon completion of work, inspection and test shall be made by the contractor's representative and witnessed by an owner's representative. All defects shall be corrected and system left in service before contractor's personnel finally leave the job.

A certificate shall be filled out and signed by both representatives. Copies shall be prepared for approving authorities, owners, and contractor. It is understood the owner's representative's signature in no way prejudices any claim against contractor for faulty material, poor workmanship, or failure to comply with approving authority's requirements or local ordinances.

PROPERTY NAME <u>Step By Step Family Support Center</u>		DATE <u>1-7-26</u>	
PROPERTY ADDRESS <u>3303 8TH Ave. SE, Building E, Puyallup, Wa, 98372</u>			
PLANS	ACCEPTED BY APPROVING AUTHORITIES (NAMES) <u>Jason L. City of Puyallup</u>		
	ADDRESS <u>333 S. Meridian Fl. 2 DPS</u>		
	INSTALLATION CONFORMS TO ACCEPTED PLANS <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		
	EQUIPMENT USED IS APPROVED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		
IF NO, STATE DEVIATIONS:			
INSTRUCTIONS	HAS PERSON IN CHARGE OF FIRE EQUIPMENT BEEN INSTRUCTED AS TO LOCATION OF CONTROL VALVES AND CARE AND MAINTENANCE OF THIS NEW EQUIPMENT? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		
	IF NO, EXPLAIN:		
LOCATION	SUPPLIES BUILDINGS <u>E</u>		
	PIPE TYPES AND CLASS <u>C.I. 52 D.I.</u>	TYPE JOINT <u>Restrained Gasket</u>	
PIPES AND JOINTS	PIPE CONFORMS TO <u>NFPA 24</u> STANDARD <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		
	FITTINGS CONFORM TO <u>NFPA 24</u> STANDARD <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		
	IF NO, EXPLAIN:		
	BURIED JOINTS NEEDING ANCHORAGE CLAMPED, STRAPPED, OR BLOCKED IN ACCORDANCE WITH <u>NFPA 24</u> STANDARD <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		
IF NO, EXPLAIN			
TEST DESCRIPTION	FLUSHING: Flow the required rate until water is clear as indicated by no collection of foreign material in burlap bags at outlets such as hydrants and blow-offs. Flush at flows not less than 390 gpm (1476 L/min) for 4-inch pipe, 610 gpm (2309 L/min) for 5-inch pipe, 880 gpm (3331 L/min) for 6-inch pipe, 1560 gpm (5905 L/min) for 8-inch pipe, 2440 gpm (9235 L/min) for 10-inch pipe, and 3520 gpm (13323 L/min) for 12-inch pipe. When supply cannot produce stipulated flow rate, obtain maximum available.		
	HYDROSTATIC: Hydrostatic tests shall be made at not less than 200 psi (13.8 bars) for two hours or 50 psi (3.4 bars) above static pressure in excess of 150 psi (10.3 bars) for two hours.		
FLUSHING TESTS	LEAKAGE: New pipe laid with rubber gasketed joints shall, if the workmanship is satisfactory, have little or no leakage at the joints. The amount of leakage at the joints shall not exceed 2 qts. per hr. (1.89 L/h) per 100 joints, irrespective of pipe diameter. The amount of allowable leakage specified above may be increased by 1 fl oz. per in. valve diameter per hr. (30 mL/25 mm/h) for each metal-seated valve isolating the test section. If dry barrel hydrants are tested with the main valve open, so the hydrants are under pressure, an additional 5 oz. per minute (150 mL/min) leakage is permitted for each hydrant.		
	NEW PIPING FLUSHED ACCORDING TO <u>NFPA 24</u> STANDARD BY <u>R.W. Scott</u> (company) <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		
	IF NO, EXPLAIN:		
	HOW FLUSHING FLOW WAS OBTAINED: <input checked="" type="checkbox"/> PUBLIC WATER <input type="checkbox"/> TANK OR RESERVOIR <input type="checkbox"/> FIRE PUMP		
THROUGH WHAT TYPE OPENING: <input type="checkbox"/> HYDRANT BUTT <input checked="" type="checkbox"/> OPEN PIPE			
LEAD-INS FLUSHED ACCORDING TO <u>NFPA 24</u> STANDARD <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			
HOW FLUSHING FLOW WAS OBTAINED: <input checked="" type="checkbox"/> PUBLIC WATER <input type="checkbox"/> TANK OR RESERVOIR <input type="checkbox"/> FIRE PUMP			
THROUGH WHAT TYPE OPENING: <input type="checkbox"/> Y CONNECTION TO FLANGE & SPIGOT <input checked="" type="checkbox"/> OPEN PIPE			

HYDROSTATIC TEST	ALL NEW PIPING HYDROSTATICALLY TESTED AT <u>200</u> PSI FOR <u>2</u> HOURS			BURIED JOINT COVERED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
LEAKAGE TEST	TOTAL AMOUNT OF LEAKAGE MEASURE <u>0</u> GALS. <u>2</u> HOURS			
	NO LEAKAGE ALLOWED FOR VISIBLE JOINTS			
	ALLOWABLE LEAKAGE (BURIED) <u>0</u> GALS. <u>2</u> HOURS			
	NO LEAKAGE ALLOWED FOR VISIBLE JOINTS			
HYDRANTS	NUMBER INSTALLED	TYPE AND MAKE		ALL OPERATED SATISFACTORILY
	Existing hydrant	M&H 5-1/4 129		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
CONTROL VALVES	WATER CONTROL VALVES LEFT WIDE OPEN <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			
	IF NO, STATE REASON:			
	HOSE THREADS OF FIRE DEPARTMENT CONNECTION AND HYDRANTS INTERCHANGEABLE WITH THOSE OF FIRE DEPARTMENT ANSWERING ALARM <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			
REMARKS	DATE LEFT IN SERVICE <u>1-7-26</u>			
	ADDITIONAL COMMENTS			
SIGNATURES	NAME OF INSTALLING CONTRACTOR <u>R.W. Scott Construction Co.</u>			
	TESTS WITNESSED BY			
	FOR PROPERTY OWNER (SIGNED)		TITLE	DATE
	<u>Krista Linden</u>		<u>Executive Director</u>	<u>1-20-26</u>
FOR INSTALLING CONTRACTOR (SIGNED)		TITLE	DATE	
<u>[Signature]</u>		<u>Superintendent/Estimator</u>	<u>1-7-26</u>	
ADDITIONAL EXPLANATION AND NOTES				