



# Warrington Township

3400 Pickertown Road ♦ Chalfont, Pa 18914

Phone: 215-997-7501 ♦ Fax: 215-997-7539

## APPLICATION *for* RESIDENTIAL SPRINKLER FIRE SPRINKLER SYSTEM INSTALLATION/ ALTERATION PERMIT

### Property Information:

Owners Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Owners Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Other: \_\_\_\_\_

### Applicant/ Sprinkler Contractor Information (NOT BUILDER):

Applicant's Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Title: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Other: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Warrington Township Sprinkler Contractor's Registration#: \_\_\_\_\_

### System Information: (All work performed will be per current NFPA and local Ordinances)

Square Footage of affected area: \_\_\_\_\_

Number of Sprinkler Heads installed/ relocated/ dropped: \_\_\_\_\_

Make and model of sprinkler head used for renovations/ installation: \_\_\_\_\_

Sprinkler piping make and type to be used: \_\_\_\_\_

(All manufacturers installation procedures are to be followed)

_____	_____	_____
Applicant Signature	Printed Name	Date

_____	_____	_____
Property Owner/ Agent Signature	Printed Name	Date

**NOTE: Do not begin work until permit is issued. Both owner and contractor applying must sign this application. Two (2) copies of plans (signed & sealed drawings) must accompany this application. Hydraulic Calculations are required for new sprinkler and standpipe systems. Incomplete or incorrect applications will be returned. Antifreeze systems will require a design professional signed and sealed statement indicating that there is no alternative to antifreeze.**

**SEE ATTACHED FOR REQUIREMENTS OF THE PERMIT FOR APPROVAL**

### FOR OFFICE USE ONLY:

APPROVED BY: \_\_\_\_\_ DATE APPROVED: \_\_\_\_\_

# Instructions for Residential Fire Sprinkler Permit Application

## The following information shall be provided at the time of application:

1. Provide a detailed plan indicating scale, walls, stairwells and stairwell sprinkler coverage, closets, light fixture locations, soffits, ceiling type, existing sprinkler head and proposed sprinkler head locations, and riser location.
2. Provide cut sheets for the materials to be used for the alteration or addition to the system.
3. Provide current system pressure \_\_\_\_\_ PSI.
4. In the space provided below write a brief detail as to the scope of the work to be performed, and it's location in the building:

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## Permit Process

1. The permit shall be completed and submitted to the Fire Marshal's Office with all the required information or it shall be rejected until that time when all information is provided.
2. When the permit is received and approved, the applicant will be contacted to receive the permit after all applicable fees are paid.
3. The contractor may then perform the work as per the application submission, using the approved materials.
4. Upon completion of the work, the contractor or property owner will call for inspection to verify the Life Safety components are properly placed and installed.
5. Should any of the work not pass the inspection, corrections will be required to be made and a re-inspection performed.
6. Contractor is to provide a current system certification, to meet local requirements.
7. All pressure gauges are to be 300 PSI.
8. Approved plan is to remain on site for inspectors use.



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# Residential Fire Sprinkler System Maintenance Schedule

## Annual Homeowner Checklist:

1. Perform a visual inspection of the sprinkler heads to insure that:
  - a. The heads do not have any paint, oil or other coating. If any coating is found, the head must be replaced.
  - b. There is no obstruction within three (3)-feet of the head. Obstructed heads must be cleared by moving the obstruction, or by moving the head.
2. Perform a visual inspection of the sprinkler riser to determine that
  - a. All flow valves are open.
  - b. Water pressure is between 30 PSI and 150 PSI.
3. Spare sprinkler heads are available.

**Certified sprinkler technician checklist. Inspection is to be performed upon resale/ lease of home and after a fire event. Inspection every five years is highly recommended. See Township Inspection/Test forms.**

4. Check the heads to insure that none have been recalled.
5. Check water flow and verify that the flow switch operates the local and the remote alarm.
6. Verify if local alarm is audible throughout the home.
7. Verify the correct installation and operation of the backflow preventer. Some have been found to be installed backward.
8. Check water level in optional tank.
9. In anti-freeze systems, check specific gravity of antifreeze solution (recommended annually).
10. In anti-freeze systems, drain, re-mix solution, and re-charge antifreeze system (recommended annually).
11. In on-site well systems, check tanks, water level, pump operation, and supply line.