FIRE SPRINKLER AFFIDAVIT FOR ALTERATIONS OR TENANT IMPROVEMENTS
(1 to 10 sprinkler heads without plans)

Project Name: _____________________________  Occupancy: _______________________
Job Address: ______________________________  Type of Construction: _______________
Suite: ______________________________________  Phone: _________________________
Contractor: ________________________________  Number of proposed or altered heads: ________

I, _____________________________ WA State Certified Competency Holder/Certificate # ______________
certify that the following is true and reasonably defines the scope of work for this project:

a) All work is limited to drops and armovers in a light-hazard occupancy with like sprinkler heads, i.e. standard response and quick response.

b) Positions of sprinkler heads relative to architectural features such as soffits, beams, partitions, walls, etc. complies with the current adopted edition of NFPA 13.

c) The proposed work does not require hydraulic calculations because sprinklers use standard spacing and are not extended coverage or other specialized type of sprinkler.

d) Only one sprinkler head will be installed from one drop.

e) The area covered per sprinkler head is limited to the spacing requirements of NFPA 13.

f) Tenant improvements in new building shall be equipped with sprinklers as defined in NFPA 13, Section 8.3.3.1.

g) The installation shall comply with the requirements of the current adopted edition of NFPA 13.

h) Piping shall not be concealed until hangers and bracing are inspected.

i) Final approval shall be subject to onsite tests and inspections.

In addition, I understand the following is required:

- A sketch attached to this document showing the area of work within the building’s structure, and a copy of this document shall be available for all inspections.

Signature: _________________________________  Date: ____________________