

Fire Sprinkler Affidavit For Alterations Up To 10 Sprinkler Heads



**Portland Fire & Rescue
Fire Marshal's Office**
1300 SE Gideon St.
Portland, OR 97202-2419
Phone: 503-823-3712
Fax: 503-823-3925



Date: _____	Permit #: _____
Job address: _____	Suite: _____
Project name: _____	Occupied as: _____
Contractor: _____	Phone & Fax #: _____
Cont. Address: _____	
Valuation of work: \$ _____	CO permit #: _____
Number of altered heads (max 10): _____	
Description of work: _____	

I certify that the following is true and reasonably defines the scope of work for this project:

- A) Piping involves branch lines or piping directly connected to sprinkler heads or connected through arm-overs.
- B) There is no change in hazard classification or commodity configuration.
- C) Positions of sprinkler heads relative to architectural features such as soffits, beams, partitions, walls, etc. complies with the current adopted edition of NFPA 13.
- D) The proposed work does not require hydraulic calculations/does not create a newly hydraulically remote area.
- E) The area covered per sprinkler head is limited to the spacing requirements of NFPA 13.
- F) Tenant improvements in new light hazard occupancies shall be equipped with QR heads or meet conditions of 8.3.3.1 in the current edition of NFPA 13.
- G) The installation shall comply with the requirements of the current adopted edition of NFPA 13.
- H) Work shall not be covered until piping, 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 provided with this application showing:
 - Locations of work within the building.
 - Placement of existing heads/devices in the area of work.
 - New locations if any existing heads/devices will be moved.
 - Locations and cutsheets for all new/added heads or devices.
- Installer certificate of fitness information

Name: _____ Company: _____
Certificate #: _____ Phone: _____

A copy of this document shall be available for all inspections. The Fire Marshal's Office reserves the right to require plans and calculations as determined during the field inspection.

Signature: _____ Date: _____

Print Name: _____