



Plumbing Division
Sprinkler Inspection Report



Date 07/28/2009
Premises 111 Fulton Street Borough Manhattan When Installed May 2009
Approved Plan # 110484440 Stories 10 Feet 164 Area 001
Construction Steel Occupancy Res & Comm No. of water supplies 1 Wet or Dry Wet

Supply: City Water Connection Size 6" Fed 2 ways no
Curb or P.I. Valve yes Name & size of meter 6" watts
Valves sealed open yes Lbs. Pressure 130

Gravity Tank Capacity na Heated na Height over top sprinkler line na
Size fill line na Size Overflow na Emergency Drain Valve na
Type and Size na Tank piping brass na Exposed piping weatherproofed na
Ladder secured na Location tank check and control valve na
Valves sealed open na No. Fill Pumps na Size na Type na
Capacity in gallons na How operated na

Pressure Tank Capacity na Tank House Heated na Size Fill Line na
Emergency Drain Valve na Type and Size na Air Pressure na
Water Level na Location tank check and control valves na
Control valves sealed open na

Risers No. 6 Size dead risers 6", 4" & 2 1/2" Size live risers 6", 4" & 2 1/2"
Size drain risers 1 1/2" Floor control valves YES Sealed open YES
Main Drain YES Size 2" Location inspectors Test valve TOP FLOOR
Exposed Piping or Heads NO Location NO How protected NA
No. Cold Weather Valves NA Location NA App'd signs NA

No. Dry Valves NA Name NA Type NA Water Pressure NA
Air Pressure NA Dry Valve room heated NA
No. of heads controlled by each dry pipe valve NA

No. Alarm Valves NA Size and type NA Local YES Supervisory YES
High-Low Gravity NA High-Low Pressure YES Flow Alarm YES

Fire Pumps: Name PATTERSON Type 5 X3 Capacity in Gallons 275
Or
Booster Pumps: Checked YES Draws from CITY Size of suction line 6"
Size of discharge line 6" How operated AUTOMATIC Supervisory YES
Adequate pressure in system 150

No. Siamese connections 3 Size 4X3X3 App'd Type YES
Location S/O F/O R/O Signs YES Type of drips 3/4" BALL DRIP
Caps painted green YELLOW
Is every square foot of the building sprinklered YES
If not, portion sprinklered _____
Extra heads & wrench provided YES Painted or corroded heads NO

Is installation as per app'd plan YES As per Fire Dept. order NO
Entire system tested at 200 p.s.i. YES Result SATISFACTORY
Certificate of Fitness required YES

Recommendations: _____

OWNER'S NAME AND ADDRESS	CONTRACTOR'S NAME AND ADDRESS
RICK COHEN LEVIEV FULTON CLUB, INC. 111 FULTON STREET NEW YORK, NY 10028	VIP FIRE SPRINKLERS, INC. 700 COLUMBIA STREET BROOKLYN, NY 11231

Inspector (sign) [Signature] Inspector (print) THOMAS PETRONIS

Test Listed _____
By _____

Report to: Div. Of Fire Prevention,
Fire Department