

Fire Sprinkler Hydraulic Design Cover Sheet

Date: _____ **Project Name:** _____

Address: _____

Contractor: _____ **Designer:** _____

Contact: _____ **Phone:** _____

Fax: _____

Project Type:

New Addition Tenant Improvement Other _____

System # _____ **Remote Area #:** _____

Construction:

Combustible Non-Combustible
 Unobstructed Obstructed (If Obstructed, give reference/type in additional information on pg. 2)

System Type:

Antifreeze Circulating Closed-Loop Looped Preaction Dry Pipe Preaction
 Dry Gridded Deluge
 Wet

Hazard:

Light Ordinary Grp 1 Ordinary Grp 2 Extra Grp 1 Extra Grp 2
 Rack Palletized Special Design Methods Solid Piled Bin Boxes
 Other (Specify): _____

Figure: _____ **Curve:** _____

Area of Sprinkler Operation: _____ **Density:** _____

Area Per Sprinkler: _____ **Hose Allowance: Inside:** _____ **Outside:** _____

Rack Sprinkler Allowance: _____ **Sprinkler Make:** _____

Sprinkler Model: _____ **Size:** _____ **Type:** _____ **K-Factor:** _____ **Temp:** _____

Applying NFPA 13: 11.23.2.3 (QR modifier rule apply?)

No Yes

Ceiling Height: _____ ft. _____ in. (Provide all design formulas on the plan submitted)

Roof Slope, in inches: _____ in _____.

Other Design Applications/Modifier's that apply NFPA: _____

NFPA 13 Calculation Summary:

Density: _____ Area: _____ ft/2
Flowing: _____ gpm At: _____ psi at Base of Riser
Reference/Node: _____ with: _____ Heads Operating "C" Factor Used – Underground: _____
Overhead: _____ Elevation of Heads Operating from BOR: _____
Water Supply Info Attached: Density Curve Attached:

Head Info:

Extended Coverage-Dimension _____ X _____ Flow _____ Starting PSI _____

Commodity Storage:

Commodity: _____ Class: _____

Location: _____

Storage Height: _____ Area: _____ Aisle Width: _____

Storage Method:

Solid Piled _____ % Palletized _____ % Rack _____ %

Rack:

Single Row Double Row Multiple Row Conventional Pallet Plastic Tote Open
 Slave Pallet Automatic Storage Solid Shelving Encapsulated Non-Encapsulated

Flu Spacing in inches:

Longitudinal: _____ Transverse: _____ Horizontal Barriers Provided: Yes No
Clearance from Top of Storage to Ceiling: _____ ft _____ in.

Residential Systems:

NFPA 13D 13R 13D Modified

Number of Heads Operating: _____ Elevation from BOR: _____ ft. _____ in.

Sprinkler Make: _____ Starting PSI: _____

Model:

Upright Pendant Recessed Pendant Concealed Pendant Sidewall
 Other _____

Area per sprinkler: _____ ft/2 - _____ ft. x _____ ft. Any Vaulted Ceilings: Yes No

Installing Backflow: Yes No _____ Operating through a Meter: Yes No

System Water Supply Flows Provided at/through the Meter: Yes No:

Where? _____

Size, Pipe Type & C-Factor from Tap to Meter: _____

Size, Pipe Type & C-Factor Meter to Sprinkler "take off": _____

Contractor Installing Underground: Yes No

Additional Information and Clarifications: _____

Note: Attach additional information and clarification as needed.