



Lee Fire & Rescue Department

Chief of Department Scott M. Nemet • Assistant Chief Joseph P. Lombardo

20 George Bennett Road, Lee, NH 03861

Phone: (603) 659-5411 Fax: (603) 659-9611

"Protecting Yours Like It's Ours"

FINAL ACCEPTANCE

Fire Suppression/ Automatic Sprinkler System

1. Date Installation Place in Service: _____

2. Name of Location: _____

Address of Installation: _____

3. Installing Company: _____

4. Required attachments to the certification statement are:

- ☐ Completed Contractor's Material and Test Certificate for the Underground Piping.
- ☐ Completed Contractor's Material and Test Certificate for the Aboveground Piping.
- ☐ As-built drawings of the fire alarm system installed.

5. The undersigned certifies that the automatic sprinkler system is installed in total conformance with the 2010 edition of NFPA 13. (If not, the areas of non-conformance are):

6. Meets or exceeds the Lee Fire & Rescue Departments requirements

☐ PASS ☐ FAIL

Reason(s):



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Installer Signature: _____

Date: _____

Firm: _____

Phone No.: _____