



**Bear Industries, Inc.**  
FIRE PROTECTION SYSTEMS



DELAWARE STATE FIRE MARSHAL  
FIRE SUPPRESSION SYSTEM  
**CERTIFICATE OF INSPECTION**

Annual Certificate of Inspection     Non-Annual WITH a MAJOR deficiency

Property/Address Changed

**PROTECTED PROPERTY**

Name: Sussex Academy of the Arts    Contact: Facilities  
Address/City: 21150 Airport Rd., Georgetown    Phone Number: (302) 856-3636

**PROPERTY OWNER**

Owner: Same    Address:

**SUPPRESSION SYSTEM COMPANY INFORMATION**

Company Name: Bear Industries, Inc.    FSL #: 0007  
Technician's Name: Todd Simonson    WBC Cert. # 2051    Date: 8/22/11

**FIRE SUPPRESSION SYSTEM MONITORING**

Is this system monitored off-site?     Yes     No  
If yes, provide name, location and phone # of monitoring station: Alarm Eng., 800 St. 2210

**SYSTEM INFORMATION**

System ID Number: Sys 3    Control Location: Sprinkler room  
System Type:     Wet Sprinkler     Dry Sprinkler     Other  
                           Pre-Action     Deluge     Water Spray

Sprinkler Heads Make: #1 <u>Victaulic</u>	#2 <u>Victaulic</u>	#3
Model: #1 <u>6-25</u>	#2 <u>6-34</u>	#3
Are heads subject to recall?: #1 Y <input type="checkbox"/> / N <input checked="" type="checkbox"/>	#2 Y <input type="checkbox"/> / N <input type="checkbox"/>	#3 Y <input type="checkbox"/> / N <input type="checkbox"/>

**MAJOR DEFICIENCIES IDENTIFIED DURING INSPECTION**

- 7701 - System Out-of-Service / Impaired
- 7702 - Unprotected Areas (≥ 10 heads contiguous)
- 7703 - Closed Control Valves
- 7704 - Dry Pipe System Tripped
- 7705 - Major FDC Obstructions

NONE

CHECKED BELOW

- 7706 - Fire Pump / Jockey Pump Inoperative
- 7707 - Improper Design (Storage Occupancies Only)
- 7708 - Quick Opening Device Inoperative
- 7709 - Other (Comment Below)

**MINOR DEFICIENCIES IDENTIFIED DURING INSPECTION**

- 7720     7724     7728
- 7721     7725     7729
- 7722     7726     7730
- 7723     7727     7731

NONE

CHECKED BELOW

- 7732     7736
- 7733     7737
- 7734     7738
- 7735

**COMMENTS/DEFICIENCY DESCRIPTION**

Annual Inspection, Tagged system.

**FOR INTERNAL USE ONLY:**

Data Entry Date: \_\_\_\_\_ Date Received By T.S. Manager: \_\_\_\_\_ FM Assigned: \_\_\_\_\_ Date FM Assigned: \_\_\_\_\_ Date Inspected: \_\_\_\_\_  
 NO MAJOR DEFICIENCIES FOUND     MAJOR DEFICIENCIES FOUND: \_\_\_\_\_     MAJOR DEFICIENCIES VERIFIED: \_\_\_\_\_  
 DATE NOV ISSUED \_\_\_\_\_ COMPLIANCE DATE: \_\_\_\_\_ 1<sup>ST</sup> EXTENSION DATE \_\_\_\_\_ 2<sup>ND</sup> EXTENSION & APPROVAL DATE: \_\_\_\_\_  
 DATE OF COMPLIANCE: \_\_\_\_\_ DATE FORWARDED TO T.S. MANAGER: \_\_\_\_\_ DATE FORWARDED TO OPERATIONS: \_\_\_\_\_ BY \_\_\_\_\_

# INSPECTION DEFICIENCIES /COMMENTS

DATE OF INSPECTION: 8/22/17

PROTECTED PROPERTY

NAME: Sussex Academy of the Arts

ADDRESS: 21150 Airport Rd

Georgetown Va

PHONE: 502 256-3636

OWNER/SEND QUOTE TO:

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE: 502 256-3636

FAX: \_\_\_\_\_

ITEMS NOTED DURING INSPECTION

( C = Comment    D = Deficiency )

ITEM#

- 1.  C     D Annual inspection tower System  
Alarms reported satisfactory
- 2.  C     D Antifreeze tested to -30
- 3.  C     D \_\_\_\_\_
- 4.  C     D \_\_\_\_\_
- 5.  C     D \_\_\_\_\_
- 6.  C     D \_\_\_\_\_
- 7.  C     D \_\_\_\_\_
- 8.  C     D \_\_\_\_\_
- 9.  C     D \_\_\_\_\_
- 10.  C     D \_\_\_\_\_

MATERIAL:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



# Bear Industries, inc.

## FIRE PROTECTION SYSTEMS

P.O. Box 9174 • Newark, DE 19714-9174  
(302) 368-1311 • Fax (302) 368-9217

27549



JOB # \_\_\_\_\_

JOB NAME Super Anchor of All DATE OF ORDER 8/27/10

JOB LOCATION 21159 Airport Rd

JOB CONTACT: Mark DeBora PHONE # 302 368 2000

BILL TO: \_\_\_\_\_ MECHANIC: Tom

\_\_\_\_\_ APPRENTICE: \_\_\_\_\_

- CONTRACT
- CHANGE ORDER
- SERVICE QUOTED
- TIME & MATERIAL
- EMERGENCY SERVICE
- INSPECTIONS
- DEFICIENCY REPAIR

### DESCRIPTION OF WORK

Conducted Annual Sprinkler Inspection

SYSTEM TYPE:  WET  DRY  PRE ACTION  DELUGE  FIRE PUMP  STANDPIPE

SYSTEM LEFT:  INSERVICE  IMPAIRED  OUT OF SERVICE      SERVICE COMPLETE:  YES  NO

QUANTITY	MATERIAL	UNIT COST	TOTAL	QUANTITY	MATERIAL	UNIT COST	TOTAL

LABOR	HOURS	AT	TOTAL
MECHANIC			
APPRENTICE			
TECHNICIAN			
MECH. OT			
APPR. OT			

VISA \_\_\_\_\_ EXP DATE \_\_\_\_\_  
MASTERCARD \_\_\_\_\_ EXP DATE \_\_\_\_\_

OVERTIME

SATURDAY  SUNDAY  
 EVENING  HOLIDAY

TOTAL MATERIAL	
TOTAL LABOR	
TAX	
TOTAL AMOUNT	

ARRIVED \_\_\_\_\_ DEPARTED \_\_\_\_\_

GC  OWNER  AUTHORIZED PERSON AM / PM AM / PM

PRINT NAME Mark DeBora TITLE \_\_\_\_\_ PO# \_\_\_\_\_

SIGNATURE Mark DeBora DATE 8-27-2010 CONTRACT# \_\_\_\_\_

WHITE - OFFICE      YELLOW - OFFICE      PINK - PURCHASING      GOLD - CUSTOMER