



COMPCO
Fire Systems

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PRESSURE TEST CERTIFICATE

CONTRACT NO: _____		DATE: _____	
TO: _____ _____ _____		SITE: _____ _____ _____	
AREA/SYSTEM NO: _____ 1ST FIX / 2ND FIX / COMPLETION*			
THE ABOVE: _____ FIRE SYSTEM			
HAS BEEN WATER PRESSURE TESTED.			
@ _____ BAR FOR _____ HOURS AND			
HAS BEEN FOUND TO HOLD WATER FOR THE DURATION OF THE TEST AS REQUIRED BY THE			
CLIENT AND/OR THE RELEVANT STANDARD.			
PRESSURE GAUGE NO. _____ WAS USED FOR THIS TEST.			
TEST START TIME			
TEST FINISH TIME			
TESTED BY:- SIGNED (Compco)			
PRINT NAME (Compco)			
WITNESSED BY:- SIGNED (Client)			
PRINT NAME: (Client)			
THIS SYSTEM HAS BEEN LEFT _____ LIVE / SHUT OFF*			
* DELETE AS APPLICABLE. PLEASE ENSURE FINAL TEST IS OF COMPLETE WORKS.			
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