




Paso Robles Department of Emergency Services

To: Fire Protection System Contractors
From: Ken Johnson, Chief 
Subject: Title 19 Fire Sprinkler System Testing Requirements
Date: May 7, 2007

California Code of Regulations Title 19, Article 4, Section 904 Fire Suppression System testing was modified on April 5, 2007. These changes can be reviewed at <http://osfm.fire.ca.gov/pdf/fireengineering/fe/AESLawsRegs.pdf> or in person at our office.

New reporting forms are included in the change and can be downloaded our website at http://www.prcity.com/government/departments/emergencyservices/pdf/5YrSprinklerSystem_TestReport.pdf. Please note that separate forms are required for fire sprinkler systems, fire standpipe systems, and private fire main systems.

Please continue to notify the Department of Emergency Services (ES) at least forty-eight (48) hours prior to conducting any five year test; ES may elect to have a representative present for test. Notification of intent to test can be made by fax to 805-237-4138 or via email to jbremer@prcity.com and must be done with the attached notification form.

At the conclusion of the service test, the contractor will be responsible for completing the appropriate service test report. Please note that this report is the only format that will be accepted and shall be returned to ES within seven (7) days of completion of the initial service. Please return the service test report via US Mail or fax to:

Paso Robles Department of Emergency Services
Attention: Fire Marshal
900 Park Street
Paso Robles, CA 93446
Fax: 805-237-4138

Please do not hesitate to contact our Fire Marshal at 805-227-7560 with questions about this process.



Paso Robles Department of Emergency Services

Notice of Intent to Test

Please print and complete as accurately as possible.

BUILDING OWNER (S): _____

BUILDING ADDRESS: _____

SYSTEM TEST DATE: _____ TIME: _____

LICENSED CONTRACTOR NAME: _____

CONTRACTOR'S LICENSE NUMBER: _____ LICENSE CLASS: _____

CONTRACTOR'S LICENSE EXPIRATION DATE: _____

PHONE NUMBER: _____

CONTRACTOR'S CITY OF PASO ROBLES
BUSINESS LICENSE NUMBER: _____

FOR OFFICIAL USE ONLY:

RECEIVED BY: _____ DATE: _____

NOTIFICATIONS: _____

Fire Sprinkler Inspector

Fire Marshal

Please fax completed form to 805-237-4138 or email to jbremmer@prcity.com.