

Contractor Test Completion Certification for Plumbing Systems (OBC 108.8)

This certification document was prepared by the Ohio Board of Building Standards (BBS) staff as a tool for building departments and health departments that are charged with the responsibility for approval of building plumbing systems. The plumbing inspector cannot always be present to witness all required tests. As a result, to help ensure that the plumbing systems installed within their jurisdiction have been tested in accordance with the rules of the Board, this certification document must be completed prior to final system inspection and acceptance and issuance of the certificate of occupancy.

Instructions:

In accordance with OBC 108.8, advanced notice of the test schedule shall be given to the building official. If their schedule permits, the building official may require that the tests be conducted in the presence of the building official or the plumbing inspector.

Upon completion of the system installation, required tests shall be conducted by the contractor's representative and witnessed by the property owner or the owner's representative and, if required, the building official or the plumbing inspector. All leaks and/or defects shall be corrected and the system shall be re-tested prior to final system acceptance and issuance of the certificate of occupancy.

This certificate shall be filled out by the contractor's representative and signed by both the contractor's representative and the owner's representative. Insert N/A in all unused lines. Attach additional sheets, as necessary, to provide a complete record of the testing (i.e. for multiple story buildings). Copies of this test certificate shall be made available to the building department, health department, owner, and contractor. It is understood that the signature of the owner's representative on this certificate in no way prejudices any claim against contractor for faulty material, poor workmanship, or failure to comply with the Ohio Plumbing Code and/or the conditions of the contract.

Property Name & Description: _____

Owner's Name: _____ **Owner's Representative:** _____

Property Address: _____

Contractor: _____ **Contractor's Representative:** _____

Certificate of Plan Approval Number: _____ **[OBC 105.5]**

Are approved plumbing plans and manufacturer's installation instructions on site? [OBC 107.7]

Yes _____ No _____ If no, explain _____

Was the plumbing system installed in accordance with the approved plans and the manufacturer's installation instructions? Yes _____ No _____ If no, explain _____

TYPE OF PIPING SYSTEM	TEST or PROCEDURE REQUIRED	TEST PRESSURE or METHOD	TEST DURATION	LEAKAGE PERMITTED or RESULT	CODE SECTION REFERENCE	DATE(S) TEST(S) CONDUCTED
Drainage and Vent	Water pressure test	10-foot head of water	15 minutes	None	OPC 312.2	
	or					
	Air pressure test (not for plastic pipe)	5 psi or sufficient to balance a 10-inch column of mercury	15 minutes	None	OPC 312.3	
	Final air test (after fixtures are connected) maybe with smoke or peppermint	1 inch water column	15 minutes prior to inspection	None	OPC 312.4	
	Shower Liner	Plug shower drain. Fill floor/receptor to 2 inch depth	15 minutes	None	OPC 312.9	
Plumbing Fixture Water Supply	Water pressure test	10% > working pressure	15 minutes	None	OPC 312.5	
	or					
	Air pressure test (not for plastic pipe)	50 psi	15 minutes	None	OPC 312.5	
	Disinfection	Flush with potable water until clear, fill with water/chlorine solution, stand for designated time, flush with potable water	Standing time is 3 hours or 24 hours (depending upon water/chlorine solution concentration)	N/A	OPC 610.1	
Storm Drainage	Water pressure test	10-foot head of water	15 minutes	None	OPC 312.2	
	or					
	Air pressure test (not for plastic pipe)	5 psi	15 minutes	None	OPC 312.3	

Signatures

Contractor Certification

I certify that the contractor has conducted all required tests in accordance with the Ohio Plumbing Code on the designated dates and that the system performed without leakage or defect.

For Contractor: _____ Title: _____ Date: _____

Witness Certification

Owner or owner's representative: _____ Title: _____ Date: _____