DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 12/26/2023
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	205132	A. BUILDING 01 - MAIN BUILDING 01 B. WING	12/22/2023

RECEIVED JAN 10 2024 BY:

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
DURGIN PINES	9 LEWIS RD KITTERY, ME 03904

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETION DATE
K 000	INITIAL COMMENTS	K 000		

INITIAL COMMENTS
Federal Recertification Survey
Survey Dates: 12/19/2023

Life Safety Code Statement

Durgin Pines, a long-term care facility, is not in substantial compliance with the National Fire Protection Association 101 Life Safety Code, 2012 Edition as referenced in 42 CFR 483.90 (a - d) - Physical Environment.

K 321 SS=D	Hazardous Areas - Enclosure CFR(s): NFPA 101	K 321		

Hazardous Areas - Enclosure
Hazardous areas are protected by a fire barrier having 1-hour fire resistance rating (with 3/4 hour fire rated doors) or an automatic fire extinguishing system in accordance with 8.7.1 or 19.3.5.9.
When the approved automatic fire extinguishing system option is used, the areas shall be separated from other spaces by smoke resisting partitions and doors in accordance with 8.4.
Doors shall be self-closing or automatic-closing and permitted to have nonrated or field-applied protective plates that do not exceed 48 inches from the bottom of the door.
Describe the floor and zone locations of hazardous areas that are deficient in REMARKS.
19.3.2.1, 19.3.5.9

Area — Automatic Sprinkler Separation N/A
a. Boiler and Fuel-Fired Heater Rooms
b. Laundries (larger than 100 square feet)
c. Repair, Maintenance, and Paint Shops
d. Soiled Linen Rooms (exceeding 64 gallons)

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE: Michelle R Belhumeur — TITLE: Administrator — (X6) DATE: 1/4/24

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

Michelle R Belhumeur Administrator 1/10/24

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K 321	Continued From page 1 e. Trash Collection Rooms (exceeding 64 gallons) f. Combustible Storage Rooms/Spaces (over 50 square feet) g. Laboratories (if classified as Severe Hazard - see K322) This REQUIREMENT is not met as evidenced by: Based on observation, the long-term care facility failed to maintain hazardous areas per NFPA 101, Life Safety Code, 2012 Edition, Section 19.3.2.1.3. Finding: On December 19, 2023, between 9:30 AM and 12:00 PM, a surveyor, with the Director of Environmental Services present. 1. Multipurpose Room on Gillis wing being used for a storage room. The door to the corridor is required to be self-closing and positive latching. The surveyor confirmed this finding with the Director of Environmental Services at the time of the observation.	K 321	K 321 • Self-closing door applied on 12/27/23. • Residents were not impacted by this deficient act. • Staff educated on the need for self-closing when it is a storage area. • Random door assessments will be done to assess the need for self-closing. Completion date: 12/27/23	
K 353 SS=F	Sprinkler System - Maintenance and Testing CFR(s): NFPA 101 Sprinkler System - Maintenance and Testing Automatic sprinkler and standpipe systems are inspected, tested, and maintained in accordance with NFPA 25, Standard for the Inspection, Testing, and Maintaining of Water-based Fire Protection Systems. Records of system design, maintenance, inspection and testing are maintained in a secure location and readily available.	K 353	Completion date 12/27/23 SMB	

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K 353	Continued From page 2 a) Date sprinkler system last checked b) Who provided system test c) Water system supply source Provide in REMARKS information on coverage for any non-required or partial automatic sprinkler system. 9.7.5, 9.7.7, 9.7.8, and NFPA 25 This REQUIREMENT is not met as evidenced by: Based on observation and record review, the long-term care facility failed to ensure that Automatic sprinkler and standpipe systems are inspected, tested, and maintained in accordance with NFPA 25, Standard for the Inspection, Testing, and Maintaining of Water-based Fire Protection Systems, 2011 Edition, Sections 7.3, and 14.2.1.1 Findings: On 12/19/2023, between 09:30 AM and 12:00 PM, this surveyor, observed the following findings with the Director of Environmental Services and the Administrator. 1. The facility failed to complete the assessment of the internal condition of piping during the required 5 year time interval. The system was due for an sprinkler internal examination on June, 28, 2023 2. The facility failed to completed the hydrostatic flow testing of the piping of the fire department connection during the required 5 year time interval.	K 353	K 353 • Residents were not affected by this deficiency. • A new contract initiated with Eastern Fire. • Eastern Fire completed assessments on 1/2/24 • Reminder system initiated for every 3rd and 5th year assessments for the next 10 ye Completion date: 1/4/24 Cont'd- K 353 • Attached are copies noting these requirements were completed: 1. 5 year internal pipe inspection 2. Hydrostatic testing on the Fire Department connection 3. 3 Trip Testing 4. Gauges were replaced. Completion date 1/4/24	

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K 353	Continued From page 3 3. The facility failed to complete the 3 year trip test on the dry sprinkler system in the attic. 4. The facility failed to replace all sprinkler system gauges on the sprinkler system. This surveyor confirmed these findings with Director of Environmental Services and the Administrator the time of the observation and review.	K 353		
K 712 SS=D	Fire Drills CFR(s): NFPA 101 Fire Drills Fire drills include the transmission of a fire alarm signal and simulation of emergency fire conditions. Fire drills are held at expected and unexpected times under varying conditions, at least quarterly on each shift. The staff is familiar with procedures and is aware that drills are part of established routine. Where drills are conducted between 9:00 PM and 6:00 AM, a coded announcement may be used instead of audible alarms. 19.7.1.4 through 19.7.1.7 This REQUIREMENT is not met as evidenced by: Based on observation and interview, the long-term care facility failed to ensure that fire drills are held at expected and unexpected times under varying conditions, at least quarterly on each shift per NFPA 101, Life Safety Code, 2012 Edition, Section 19.7.1.6. Findings: On December 19, 2023, between 9:30 AM and	K 712		

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K 712	Continued From page 4 12:00 PM, a surveyor, with the Director of Environmental Services present. 1. The following fire drills for the facility were not completed or missing: A. Second shift drill during the 4th quarter of 2023 B. Second and third shift drills during the 3rd quarter of 2023 C. 1st shift drill during the 2nd quarter of 2023 The surveyor confirmed these findings with the Director of Environmental Services at the time of the observation and record review.	K 712	K 712 • No Residents were impacted by this deficient act. • A system was put into place effective 12/23/23. • Each month will rotate fire drills for each shift. Ex: January- 1st Shift Ex: February- 2nd Shift Ex: March- 3rd Shift • Fire Drills will be reviewed at the Safety Committee to ensure compliant Completion date: 1/5/24	
K 754 SS=D	Soiled Linen and Trash Containers CFR(s): NFPA 101 Soiled Linen and Trash Containers Soiled linen or trash collection receptacles shall not exceed 32 gallons in capacity. The average density of container capacity in a room or space shall not exceed 0.5 gallons/square feet. A total container capacity of 32 gallons shall not be exceeded within any 64 square feet area. Mobile soiled linen or trash collection receptacles with capacities greater than 32 gallons shall be located in a room protected as a hazardous area when not attended. Containers used solely for recycling are permitted to be excluded from the above requirements where each container is less than or equal to 96 gallons unless attended, and containers for combustibles are labeled and listed as meeting FM Approval Standard 6921 or equivalent. 18.7.5.7, 19.7.5.7 This REQUIREMENT is not met as evidenced by: Based on observation and interview, the	K 754		

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K 754	Continued From page 5 long-term care facility failed to maintain mobile soiled linen collection receptacles in room protected as a hazard area per NFPA 101, Life Safety Code, 2012 Edition, Sections 19.7.5.7.1. Findings: On December 19, 2023, between 9:30 AM and 12:00 PM, a surveyor, with the Director Environmental Services present, observed the following: 1. Hand Wing two 32 gallon soiled linen carts found stored in exit corridor. 2. Feeney Wing two 32 gallon soiled linen carts found stored in exit corridor 3. Hogan Wing two 32 gallon soiled linen carts found stored in exit corridor The surveyor confirmed these findings with the Director of Environmental Services at the time of the observation.	K 754	K 754 • Residents were not impacted by this deficiency. • Linen Carts were removed from the hallways on 12/22/23. • Employees were educated on the need to have linen carts away. • Linen Carts will be kept in soiled utility room. • Random audits will be done by the Safety Committee. Completion date: 1/8/24	
K 761 SS=F	Maintenance, Inspection & Testing - Doors CFR(s): NFPA 101 Maintenance, Inspection & Testing - Doors Fire doors assemblies are inspected and tested annually in accordance with NFPA 80, Standard for Fire Doors and Other Opening Protectives. Non-rated doors, including corridor doors to patient rooms and smoke barrier doors, are routinely inspected as part of the facility maintenance program. Individuals performing the door inspections and testing possess knowledge, training or experience that demonstrates ability. Written records of inspection and testing are maintained and are available for review.	K 761		

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K 761	Continued From page 6 19.7.6, 8.3.3.1 (LSC) 5.2, 5.2.3 (2010 NFPA 80) This REQUIREMENT is not met as evidenced by: Based on observation and record review, the long-term care facility failed to conduct fire door inspections program that ensure they are inspected, tested, and maintained in accordance with NFPA 80, Standard for Fire Door and Other Opening Protectives, 2010 Edition, Sections 5.2 and 5.2.3 and also, in accordance with NFPA 101, Life Safety Code, 2012 Edition, Sections, 19.7.6 and 8.3.3.1. K 761 Finding: On 12/19/2023, between 09:30 AM and 12:00 PM, this surveyor, observed the following findings with the Director of Environmental Services and the Administrator. 1. The facility failed to complete the assessment of all fire doors in the facility. The facility had no documentation that the doors had been inspected by a trained employee or a outside qualified vendor. This surveyor confirmed this finding with Director of Environmental Services and the Administrator the time of the observation and record review.	K 761	• Residents were not affected by this deficiency. • Exactitude examined the doors on 1/2/24 and 1/3/24. • Maintenance employee met with Representative from Exactitude for training. • Annual Assessment schedule was created, and color coded to divide throughout the and meet yearly requirements. Completion date: 1/4/24 Cont'd- K 761 • Attached is a copy from Exactitude noting the inspection was done on 1/2/24. • Training was completed by Carlos Aguilar with the Rep from Exactitude- Ryan Gaudi • Attached is the statement verifying this training was done.	
K 918 SS=E	Electrical Systems - Essential Electric Syste CFR(s): NFPA 101 Electrical Systems - Essential Electric System Maintenance and Testing The generator or other alternate power source and associated equipment is capable of supplying service within 10 seconds. If the 10-second	K 918		

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K 918	Continued From page 7 criterion is not met during the monthly test, a process shall be provided to annually confirm this capability for the life safety and critical branches. Maintenance and testing of the generator and transfer switches are performed in accordance with NFPA 110. Generator sets are inspected weekly, exercised under load 30 minutes 12 times a year in 20-40 day intervals, and exercised once every 36 months for 4 continuous hours. Scheduled test under load conditions include a complete simulated cold start and automatic or manual transfer of all EES loads, and are conducted by competent personnel. Maintenance and testing of stored energy power sources (Type 3 EES) are in accordance with NFPA 111. Main and feeder circuit breakers are inspected annually, and a program for periodically exercising the components is established according to manufacturer requirements. Written records of maintenance and testing are maintained and readily available. EES electrical panels and circuits are marked, readily identifiable, and separate from normal power circuits. Minimizing the possibility of damage of the emergency power source is a design consideration for new installations. 6.4.4, 6.5.4, 6.6.4 (NFPA 99), NFPA 110, NFPA 111, 700.10 (NFPA 70) This REQUIREMENT is not met as evidenced by: Based on observations and interview, the facility failed to ensure that the generator had proper maintenance records and was being exercised in accordance on the auxiliary generator power per NFPA 99, 2012 Edition, Section 6.4.4.1.1.3 and NFPA 110, 2010 Edition, Section 8.4.1. Finding:	K 918		

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K 918	Continued From page 8 On December 19, 2023, between 9:30 AM and 12:00 PM, a surveyor, with the Director of Environmental Services present: 1. No generator records were on file showing the generator was exercised weekly the weeks of 11.06.2023, 08.21.2023, 07.03.2023, 04.17.2023, 03.20.2023, 02.20.2023. The surveyor confirmed this finding with the Director of Environmental Services at the time of the observation and record review.	K 918	RECEIVED JAN 10 2024 BY: K 918 • Residents were not impacted by this deficient act • Weekly inspections and logging of information will be done every Monday. • Education provided to other maintenance employees to cover this assignment and i weekly compliance. • Random reviews of the log will be done by the Maintenance Director. • This new system was put into place on 1/2/24. Completion date: 1/8/	
K 923 SS=D	Gas Equipment - Cylinder and Containe Storag CFR(s): NFPA 101 Gas Equipment - Cylinder and Container Storage Greater than or equal to 3,000 cubic feet Storage locations are designed, constructed, and ventilated in accordance with 5.1.3.3.2 and 5.1.3.3.3. >300 but <3,000 cubic feet Storage locations are outdoors in an enclosure or within an enclosed interior space of non- or limited- combustible construction, with door (or gates outdoors) that can be secured. Oxidizing gases are not stored with flammables, and are separated from combustibles by 20 feet (5 feet if sprinklered) or enclosed in a cabinet of noncombustible construction having a minimum 1/2 hr. fire protection rating. Less than or equal to 300 cubic feet In a single smoke compartment, individual cylinders available for immediate use in patient care areas with an aggregate volume of less than or equal to 300 cubic feet are not required to be stored in an enclosure. Cylinders must be	K 923		

Education for Maintenance Staff:

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JAN 10 2024
BY:

January 2, 2024

Read and Sign:

The generator must have proper maintenance records. Every week, the generator needs to be exercised and recorded. The plan is to complete this task every Monday morning. If an employee is out that day, it is the responsibility of the maintenance team to ensure that this task is completed. All have been educated on how to complete this task and record appropriately.

Employee Name:	Date:
Ray Clark	1/8/24
[illegible]	1/8/24

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K 923	Continued From page 9 handled with precautions as specified in 11.6.2. A precautionary sign readable from 5 feet is on each door or gate of a cylinder storage room, where the sign includes the wording as a minimum "CAUTION: OXIDIZING GAS(ES) STORED WITHIN NO SMOKING." Storage is planned so cylinders are used in order of which they are received from the supplier. Empty cylinders are segregated from full cylinders. When facility employs cylinders with integral pressure gauge, a threshold pressure considered empty is established. Empty cylinders are marked to avoid confusion. Cylinders stored in the open are protected from weather. 11.3.1, 11.3.2, 11.3.3, 11.3.4, 11.6.5 (NFPA 99) This REQUIREMENT is not met as evidenced by: Based on observation, the long-term care facility failed to store oxygen cylinders in accordance with NFPA 99, Health Care Facilities Code, 2012 Edition, Sections 11.3.2.3 and 11.6.5.2 K 923 Findings: On December 19, 2023, between 9:30 AM and 12:00 PM, a surveyor, with the Director of Environmental Services present. 1. 47 D Oxygen cylinders, containing a total of 658 cubic ft, were found stored in the Service Hall Oxygen/Biohazard Closet. This room does not meet the requirements for a fire-rated room in Section 11.3.2.3. 2.. All oxygen storage closet throughout the facility have no signage designating tanks on whether they are full or empty in Section 11.6.5.2 The surveyor confirmed these findings with the Director of Environmental Services at the time of	K 923	• No Residents were affected by this deficiency. • Cardboard and biohazard materials were removed from Oxygen storage room on 12/22/2 • Laminated signs were placed in the rooms noting the full and empty tanks on 12/22/23. • Education provided to staff to not have more than 12 cylinders in the closet and to separa the full tanks from the empty tanks and to keep signs posted designating the different tai Completion date: 1/8/24 Cont'd- K 923 • Airgas Company was called to make them aware that no more than 12 cylinders can l kept in the "Biohazard Room." • Biohazard materials were removed from this room. • Airgas Company removed the extra cylinders from this closet. Completion date 1/10/24	

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K 923	Continued From page 10 the observation.	K 923	RECEIVED JAN 10 2024 BY: _____	

Fire Drills for 2024

- January- 1st Shift
- February- 2nd Shift
- March- 3rd Shift
- April- 1st Shift
- May- 2nd Shift
- June- 3rd Shift
- July- 1st Shift
- August- 2nd Shift
- September- 3rd Shift
- October- 1st Shift
- November- 2nd Shift
- December- 3rd Shift

Newly Signed Contract

RECEIVED
JAN 10 2024
BY:

Home Office
170 Kittyhawk Ave
P.O. Box 1390
Auburn, ME 04210-1390
207-784-1507

EASTERN FIRE

Satellite Office
408 Harlow St.
Bangor, ME 04401
207-942-8014

Fire Protection Contractors and Engineers
www.easternfiregroup.com

DAYWORK CONTRACT

DATE: DECEMBER 28, 2023

FROM: DAN ST. PIERRE
207-795-6314 x243

BILLING: (C015546) DURGIN PINES

LOC: (000157677) **DURGIN PINES**
9 LEWIS ROAD
KITTERY, MAINE

SUBJ: **3-YR & 5-YR SYSTEM TESTING**

ATTN: RAY CLAVERIE
PHONE: 603-205-2571
EMAIL: Raymond.claverie@durginpines.com

TOTAL: **$2,400.00**

SCOPE:

1. Price includes ***5-yr Pressure Gauge*** swap out. Your systems have (4) pressure gauges.
2. Price includes conducting the ***5-yr Internal Assessment*** on (1) dry & (1) wet sprinkler system. See "INTERNAL NOTES" below.
3. Price includes the Fire Department Connection ***(FDC) 5-yr Hydrostatic Test.*** This tests the FDC's ability to withstand the pressure of the fire department pumping water into the system during an actual fire event. A hydrostatic pressure of 150 psi will be maintained for 2 hours.
4. Price includes dry system having the ***3-year Full-Flow Trip Test***. Consists of flowing water from a dry system remote test port in order to measure the time for the water to travel from the main dry valve to the remote test port. The time recorded will be matched to the customer's records for previous tests, or secondarily to NFPA 13 requirements.
5. Price includes the dry system having the ***3-year Leakage Test***. The low air switch will be set at 40 psi and monitored for pressure loss for 2 hours. If the loss is greater than 3 psi, the test will be terminated and a plan to find and fix leaks will be organized. Finding and fixing leaks is not included in the above price. This will be done separately on a Time & Material basis.
6. Price is for (2) technicians for (1) long day includes travel.
7. If the scope of this proposal changes, the price of this quote will be adjusted on a time and material basis using the standard "RATES" below.
8. This proposed Fixed Price is good for 30 days. Pricing is based on material pricing as of the date on this proposal. Eastern Fire reserves the right to review pricing prior to contract acceptance.

SCHEDULE:

Our Field Superintendent, Tom Vining (Auburn) 795-6314 x276, will call to coordinate the work. Feel free to call him if you have questions about the schedule. ***Our current schedule is 4 to 6 months out.***

RATES:

Our standard rates are as follows.

	Weekdays	Evenings & Saturdays	Sundays & Holidays
Sprinkler Tech	$115.00/hr	$172.50/hr	$230.00/hr

For service 24/7 dial 784-1507 or toll free 800-274-1507. No appointment necessary

INTERNAL NOTES:

We will perform a fire sprinkler system "assessment of internal condition of piping" per NFPA 25 (2014) Paragraph 14.2.1.1 or 14.2.1.2.

For a wet sprinkler system this will involve opening one flushing connection at the end of one main and removing the end fitting or sprinkler head of one branch line.

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For a dry system this will involve opening one flushing connection at the end of one main and removing the end fitting or sprinkler head of one branch line both of which must be located adjacent to the system inspector's test valve which is normally located at the most remote point of the system. If the system has not been full flow trip tested in the last 3 years the cost of the trip test will also be included in this quotation. If a trip test is required this must be done during warm weather. A full flow trip test may cause the system to leak the same day or in the future which is beyond our control. Any leaks that may occur would be fixed on a time and material basis or under a separate quoted price.

Per NFPA 24 - 2014 (3.6.4) all piping that can be isolated by a separate control valve, flow switch and drain is considered to be another sprinkler system. This condition is common to wet systems in high rise buildings, some industrial buildings and buildings that have remote dry or antifreeze systems supplied by the wet sprinkler system. For wet systems only half of these individual systems in the same structure must be assessed once every 5 years. If this applies to your building the cost is reflected in the quotation.

Dry system assessments will always cost more than wet system assessments due to the difficulty in accessing the very specific inspection points which frequently requires 2 men and the time involved with draining and restoring air pressure.

There are 3 possible results of this assessment.

1. The piping could be found in satisfactory condition.
2. This assessment could determine that there is foreign organic material present in quantities substantial enough to warrant laboratory analysis. Paragraph 14.2.1.3 requires that "Tubercules or slime, if found, shall be tested for indications of microbiologically influenced corrosion (MIC)". If the presence of MIC is indicated an NFPA 25 bacterial deposit analysis, performed by an independent laboratory, would cost an additional $800.00, assuming samples can be collected at the time of the assessment. If laboratory analysis is positive for MIC bacterial deposits pricing can be provided for MIC treatment specific to the type of MIC found by the analysis.
3. This assessment could determine that there is foreign inorganic or organic material (non-MIC) present in quantities substantial enough to warrant a full obstruction investigation per paragraph 14.2.1.4.

An "assessment of internal condition of piping" that finds MIC tubercules and/or other solid or semi-solid, organic or inorganic material will require that an obstruction investigation be performed in accordance with NFPA 25 (2014) Section 14.3. A complete obstruction investigation in accordance with Section 14.3 is outside the scope of this proposal. Pricing can be provided under separate cover once the results of the "assessment of internal condition of piping" are known.

Should you find this quotation acceptable please return one signed and dated copy of this proposal along with your purchase order or contract (if necessary), at your earliest convenience.

SIGNATURES:

Eastern:

Daniel R. St. Pierre, 795-6314 x243,
dan.stpierre@easternfiregroup.us

Customer:

Michelle Bilbruner

Date Signed: 1/24/23

EASTERN FIRE

Eastern Fire
170 Kittyhawk Ave.
Auburn, Maine 04210
Phone: (207)784-1507

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BY:

Invoice #: 1052-F238254
Invoice Date: 1/9/2024

Customer PO	Astea Contract No.	Astea Service No.	AX Project No.	Customer No.	Terms
	N/A	SV2312290002@@1	1052-0241953	1052-C015546	Due Upon Receipt

Bill To: Durgin Pines
9 Lewis Rd
Kittery, ME 03904-5410

Project Site: Durgin Pines
9 Lewis Rd
Kittery, ME 03904-5410

Project Description: Durgin Pines 3yr & 5yr Testing
Salesperson: St. Pierre, Daniel Robert
Primary Field Tech: McClelland, Lawrence G
Project Manager: Vining, Thomas Edward

Signed by:

Description	Amount
Flat Rate Charge	2,400.00

Nature of the Call: Durgin Pines 3yr & 5yr Testing

Problem Resolution: 1/2/2024 Arrived, put system on test. Shut and drained system. Did internal check, passed, hydrostatic test passed. Did air leak test and trip test. Changed gauges, filled system, and put back online.

Gross Amount this Invoice **$2,400.00**

Please Remit Payment to:
Address for U.S. Postal Service (USPS)
Eastern Fire
PO Box 412007
Boston, MA 02241-2007

Total Amount Due this Invoice **$2,400.00**

Pay This Amount → **$2,400.00**

Service Simplified:
Pay your bill Online at www.davisulmer.com

Thank You for Your Business!!

EASTERN FIRE

INTERNAL PIPING CONDITION and OBSTRUCTION INVESTIGATION REPORT

PROPERTY NAME and ADDRESS Durgin Pines

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BY:

SECTION 1 – ASSESSMENT OF INTERNAL CONDITION OF PIPING

Per NFPA 25 (2014 Edition) Table 5.1.1.2 and Chapter 14, an assessment of internal condition of piping of all types of sprinkler systems shall be performed every 5 years by internally examining the end of one main and by removing the end fitting or piece of branch line or a sprinkler. If more than a ½ cup of scale can be collected or if scale fragments large enough to plug a sprinkler orifice are present then an obstruction investigation shall be performed per Chapter 14 or the system shall be flushed per Chapter 14. Note: Nonmetallic pipe systems do not require this assessment.

Name of person(s) performing assessment Larry McClelland

Date of assessment 1-2-24	FAIL ____	PASS ✓
Was at least ½ cup of scale collected?	yes ____	no ✓
Were large scale fragments present?	yes ____	no ✓

SECTION 2 – OBSTRUCTION INVESTIGATION

Per NFPA 25 (2014 Edition) Chapter 14 an obstruction investigation shall be performed for all types of sprinkler systems and yard main piping whenever any of the following conditions exist:

1. The Assessment of Internal Condition of Piping fails
2. When any of the 15 conditions listed in Paragraph 14.3.1, and the back of this report, exist.

Name of person(s) performing obstruction investigation_____

Date of obstruction investigation _____	FAIL ____	PASS ____
Was at least ½ cup of scale collected?	yes ____	no ____
Were large scale fragments present?	yes ____	no ____
Was a full unobstructed flow obtained from each branch line checked?	yes ____	no ____

SECTION 3 – FLUSHING

Per NFPA 25 (2014 Edition) if an assessment of internal condition of piping or an obstruction investigation carried out in accordance with Chapter 14 indicates the presence of sufficient material to obstruct sprinklers, a complete flushing program shall be conducted in accordance with Chapter 14.

Name of person(s) performing flushing _____

Date of flushing_____

At completion of the flushing procedure, while removing the flushing valves, did the interior of the sprinkler system piping appear to be in satisfactory condition? yes ____ no ____

Briefly describe any repairs (i.e. replacement of rusted through piping, unplugging of piping, etc) performed to the system during the flushing procedure and explain any unsatisfactory conditions unresolved by or caused by the flushing procedure (i.e. flushing could not remove all scale, thinning of pipe walls after scale removal with leaks expected, etc.)

_____

_____

_____

_____

Provide the following information regarding the flushing procedure:

Number of branch line flushing valves used _____

Number of main flushing valves used _____

Number of sprinkler heads replaced _____

Dry

Home Office
170 Kittyhawk Ave.
P.O. Box 1390
Auburn, ME 04210-1390
207-784-1507

EASTERN FIRE

Fire Protection Contractors and Engineers
www.easternfiregroup.com

Satellite Office
408 Harlow St.
Bangor, ME 04401
207-942-8014

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5 YEAR FIRE DEPARTMENT CONNECTION and/or DRY STANDPIPE HYDROSTATIC TEST RECORD

Customer	Durgin Dues
City, State	Kittery Maine
Contact	Ray

Following are test results for the 5 year fire department connection and dry standpipe hydrostatic test(s) performed for the referenced customer. All tests were performed in accordance with the 2014 Edition of NFPA 25, Chapters 6 and 13, Sections 6.3.2 and 13.7.

BUILDING	TEST DATE	TEST DURATION	PASS/FAIL	NOTES
Durgin Dues	1-2-24	2 HRS	pass	Held 150psi for 2 HRS

Eastern Fire Responsible Person Supervising the Testing: Larry M, Jacob H

EASTERN SPRINKLER SERVICES, INC.

170 Kittyhawk Avenue, P.O. Box 1582
Auburn, Maine 04211-1582
Auburn (207) 795-6314

499 Hammond Street
Bangor, Maine 04401
Bangor (207) [illegible]

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DRY PIPE VALVE TRIP TEST REPORT

FOR Durgin Pines TESTING NO. ____

STREET Lewis St CITY Kittery STATE me CONTRACT NO. ____

DATE OF TRIP TEST 1-2-24 TESTER Larry W # ____ DAY WORK NO. ____

NOTE: BEFORE ANY DRY PIPE VALVE IS TRIP TESTED, THE WATER SUPPLY LINE TO IT SHOULD BE THOROUGHLY FLUSHED. THE TWO INCH DRAIN BELOW THE VALVE SHOULD BE OPENED WIDE, AND WATER AT FULL PRESSURE SHOULD BE DISCHARGED LONG ENOUGH TO CLEAR THE PIPE OF ANY ACCUMULATION OF SCALE OR FOREIGN MATERIAL. IF THERE IS A HYDRANT ON THE SUPPLY LINE, THIS HYDRANT SHOULD BE FLUSHED BEFORE THE TWO INCH DRAIN IS OPENED. THE DRIP VALVE ON THE DRY PIPE VALVE SHOULD BE CHECKED BEFORE TRIPPING THE DRY PIPE VALVE, TO SEE THAT IT IS IN OPERATING CONDITION.

DRY PIPE VALVES		SYSTEM NO. ( )	SYSTEM NO. ( )	SYSTEM NO. ( )	SYSTEM NO. ( )
VALVE SERIAL NUMBER		F4070637			
MANUFACTURER (NAME)		Firelock			
VALVE MODEL		[illegible] Uxt5/768			
VALVE SIZE		4 INCH	INCH	INCH	INCH
CONTROLLING SPRINKLERS	(LOCATION)				
	(NUMBER)	(APPROX)	(APPROX)	(APPROX)	(APPROX)
DATE LAST TRIP TESTED?					
DATE LAST OPERATED?					
PRESSURE BEFORE TEST	AIR	18 LBS	LBS	LBS	LBS
	WATER	135 LBS	LBS	LBS	LBS
SIZE AND LOCATION OF TEST VALVE					
WAS GATE VALVE BELOW DRY VALVE OPEN WIDE AT TEST? (IF NOT, HOW MANY TURNS?)					
VALVE TRIPPED AT	AIR PRESSURE	12 LBS	LBS	LBS	LBS
	WATER PRESSURE	135 LBS	LBS	LBS	LBS
	TIME	MIN 10 SEC	MIN SEC	MIN SEC	MIN SEC
IF SYSTEM FLOODED, LIST TIME WATER REACHED TEST OPENING		MIN SEC	MIN SEC	MIN SEC	MIN SEC
PERFORMANCE					
VALVE CONDITION	INTERIOR OF BODY				
	MOVING PARTS				
	RUBBER FACING				
	SEATS				
	RESET?				
DID ALARMS OPERATE AT TRIP TEST?					
ALL LOW POINT DRAINS BLOWN OUT?					
WATER CONTROL VALVE LEFT OPEN AND SEALED?					
ALARM CONTROL VALVE LEFT OPEN AND SEALED?					

QUICK OPENING DEVICES	SYSTEM NO. ( )	SYSTEM NO. ( )	SYSTEM NO. ( )	SYSTEM NO. ( )
DEVICE SERIAL NUMBER				
MANUFACTURER (NAME)				
TYPE AND MODEL				
AIR PRESSURE IN UPPER CHAMBER	LBS	LBS	LBS	LBS
QUICK OPENING DEVICE TRIPPED AT	SEC LBS	SEC LBS	SEC LBS	SEC LBS
PERFORMANCE				
QUICK OPENING DEVICE LEFT IN SERVICE AND CONTROL OPEN AND SEALED?				
DRAIN TEST: STATIC PRESSURE				
RESIDUAL PRESSURE				
TEST PIPE SIZE				

REMARKS:

LIST ANY UNSATISFACTORY CONDITIONS:

HOME OFFICE
Auburn, Maine
207-784-1507

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BRANCH OFFICE
Bangor, Maine
207-942-8014

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Service Order:

3-Year Air Leak Test

Date: 1-2-24

Facility Name: Durgin Pines

- Location Address: Lewis St Kittery Maine
- Contact Name: Ray
- Contact Phone Number

Systems Description: 4" Dry system
low air Valve

Report Questions:

System Tested at 40 PSI for 2 Hours	
System Tested at System Pressure for 4 Hours	
Reasons for System Fail	Pass
Type of Air Compressor & Size	Jenny Floor mount 3/4 HP Model IS
Description or Type of Dry Pipe System	4" Dry pipe sy stem

Inspected By: Larry M

Signature of Inspector: