



IFC MEDICAL GASES INSTALLATION CERTIFICATE
BUILDING SAFETY DIVISION

Permit/case # _____

This document is provided to certify that the installer has met all the requirements of the 2003 edition of the International Fire Code, Article 3306-Med Gases, IPC sec 1202, IMC sec 602.9.1 and NFPA 99 ch. 14. This form must be completed and submitted to the Fire Code Inspector at the time of inspection.

Project address of installation: _____
(No.) (Dir.) (Street name) (type) (bldg #) (suite #)

Business name (at installation address): _____ Phone: () _____

Installer's company name: _____ Phone: () _____

Installer's company address: _____
(No.) (Dir.) (Street name) (type) (bldg #) (suite #)

Check the appropriate box for each statement:

- 1. Piping and fittings are approved type for medical use. yes [] no []
2. Piping was fed nitrogen while brazing was done. yes [] no []
3. If answer to #2 is no, was piping thoroughly cleaned after brazing? yes [] no []
How was cleaning done? _____
4. All brazed joints were made with silver brazing alloy or similar high-melting point (at least 1,000 degrees) brazing metal. yes [] no []
5. Piping has been appropriately labeled at not more than 20 foot intervals and at each room. yes [] no []
6. After piping was installed, the system was subjected to a 24-hour standing pressure of one and one-half times the maximum working pressure, but not less than 150 psig. yes [] no []

All of the requirements for installation of medical gas piping and equipment according to the 2003 edition of the IFC, IPC, IMC and NFPA have been met at this installation.

Installer's name: _____

Installer's signature: _____

Date installation was completed: _____