



Office of Training
and Certification

New Jersey Division of Fire Safety

BASIC PRACTICAL SKILLS EXAMINATION REPORT

Skill sheet #

FF2-08

Certification title

Firefighter 2

PERFORM AN ANNUAL SERVICE TEST ON A FIRE HOSE

Applicant Information

Candidate name

DFS ID #

Course #

Evaluation

Standard:
NFPA 1001, 2019 Edition
5.5.5
Skill Drill 23-7

Task

Perform a service test on Fire Hose.

Conditions and Outcome

Utilizing the manufacturers testing recommendations for servicing and testing of fire hose, the student will demonstrate the proper method and complete necessary report.

| Number | Task Steps | First Test | | Retest #1 | | Retest #2 | |
|--------|---|------------|------|-----------|------|-----------|------|
| | | Pass | Fail | Pass | Fail | Pass | Fail |
| 1 | Don proper PPE | | | | | | |
| 2 | Connect up to 300 feet of hose to a hose test gate valve on the discharge value of a fire service apparatus or hose tester. | | | | | | |
| 3 | Attach a nozzle to the end of each hose. | | | | | | |
| 4 | Slowly fill each hose with water at 50 psi and remove any kinks in the hose. | | | | | | |
| 5 | Purge each hose line, and record the length of each section of hose. | | | | | | |
| 6 | Examine each hose line for water leaks, if leaks are found behind the coupling place the hose out of service. | | | | | | |
| 7 | Ensure all personnel are clear of the test area and increase the hose pressure required by NFPA. | | | | | | |
| 8 | Maintain that pressure for 5 minutes. | | | | | | |
| 9 | After 5 minutes, shut down the pressure in the hose and bleed off the pressure by opening the nozzles | | | | | | |
| 10 | Uncouple the hose and drain each hose. | | | | | | |
| 11 | Inspect the hose jacket near the coupling to determine if slippage occurred. | | | | | | |
| 12 | Tag / record each hose that failed | | | | | | |
| 13 | Record the hose that passed using the AHJ department log. | | | | | | |

Final Test Result for Entire Task

| Evaluator signature & comments, Test #1 | | Evaluator signature & comments, Retest #1 | | Evaluator signature & comments, Retest #2 | |
|--|------|--|------|--|------|
| | | | | | |
| Evaluator signature | Date | Evaluator signature | Date | Evaluator signature | Date |
| Candidate signature & acknowledgement, Test #1 | | Candidate signature & acknowledgement, Retest #1 | | Candidate signature & acknowledgement, Retest #2 | |
| By my signature below I acknowledge I have read and understood the evaluation results and evaluator comments | | By my signature below I acknowledge I have read and understood the evaluation results and evaluator comments | | By my signature below I acknowledge I have read and understood the evaluation results and evaluator comments | |

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|---------------------|------|---------------------|------|---------------------|------|
| Candidate signature | Date | Candidate signature | Date | Candidate signature | Date |
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Form DFS-SS-1 10/12
Approved by NJ SME Committee 11/23/2020