



MIC Corrosion Inside Pipe

This test is designed to conform to the requirements of NFPA 25, 2002, 13.2.1.2 requiring testing for MIC if slime or tubercles are discovered in an internal inspection. The test involves removing some of the slime, deposit, scale, tubercles, mounds, etc. from the pipe section at Potter for microbiologically influenced corrosion (MIC) analysis.

The pipe section will be evaluated for wall loss and MIC damage.

Upon receiving the sample, the lab will establish a chain of custody and prepare the sample for bacterium extraction. Five groups of bacteria will be cultured: Heterotrophic Bacterium which determines if the majority of bacterium are anaerobic (without air) or aerobic (with air) in nature; Slime Forming Bacterium (aids in tubercle formation); Iron Related Bacterium (iron-pipe oxidizing and reducing bacterium); Sulfate Reducing Bacterium (causes pit corrosion) and Acid producing Bacterium (causes pit corrosion). The testing will take approximately 9 days to allow for bacteria culture growth. A full written report will be provided approximately 15 business days after testing is started.

Pipe Section Return Procedure

Note: The sample must be received by Potter within 72 hrs after it is removed from the sprinkler system.

1. Package the failed pipe section (8" – 24" in length) to preserve deposits and corrosion sites during shipping. Taping plastic bags or duct tape over the ends will help retain deposits during shipping. Mark the sample with system orientation, i.e. top, bottom, if known. Package the pipe section in a shipping box using packing materials to ensure the sample is well-cushioned to prevent being crushed or broken during shipping.
2. Complete sample identification of this document and include with pipe section return.
3. Contact Potter at 800-325-3936 for prepaid shipping information.

Certification

Bacterium testing procedures have been tested against the appropriate A.T.C.C. (American Type Culture Collection) strains for each specific group of bacterium.

Includes:

- Sample identification form
- Prepaid shipping - (U.S. Only)
- Laboratory analysis of returned pipe sample

Stock number: 1119184

Sample Identification

NOTE: This section *MUST* be filled out completely and returned with the sample.

Person/Firm Requesting Test

Name: _____
 Company: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Phone #: _____
 Email: _____
 (If you would like report sent via email)

Facility Pipe Sample Taken

Name: _____
 Bldg #: _____ Riser #: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Phone #: _____

System Information

System (*circle one*): Wet/Dry FPS Age: _____ Total # of Risers: _____
 Facility Sq. Ft. (*approx.*): _____ # of Floors: _____
 Facility Type: _____
 Type of Pipe (*circle*): TW/Sch 40/Black/Galv/Threaded/Grooved/CPVC
 Previous System Treatment: _____

Water Sample Information

Date sample collected: _____ Time: _____
 Location in system where obtained: _____
 Sample collected by: _____
 Company: _____
 Address: _____
 Sample description/remarks: _____
