

# DECLARATION AND UNDERTAKING ON TESTING & COMMISSIONING (T&C) CHECKLISTS FOR FIRE SERVICE INSTALLATIONS AND EQUIPMENT (FSIs)

*(To be submitted after on-site Acceptance Inspection)*

## A. Project Information

FSD Reference. No.:

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Premises Address:

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Authorized Person (AP):

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Registered fire service installation  
contractor (RFSIC):

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## B. Schedule of Submitted Checklists

*Please indicate (by ticking the appropriate box) the specific T&C checklist(s) that were submitted to the Fire Services Department (FSD) prior to the FSI acceptance inspection:*

### Type of T&C Checklist

Appendix 1 – Actuating Devices and Operation of Fire Shutter

Appendix 2 – CO<sub>2</sub> / Clean Agent Extinguishing System

Appendix 3 – Emergency Generator Installation

Appendix 4 – Fire Detection and Fire Alarm System

Appendix 5 – Fire Hydrant and Hose Reel Installation

Appendix 6 – Staircase Pressurization System

Appendix 7 – Street Fire Hydrant System

Others

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## C. Declaration by RFSIC

I/We, the undersigned Registered Fire Service Installation Contractor (RFSIC), hereby undertake and confirm that:

1. The T&C checklist(s) specifically indicated in Section B above were duly submitted to the FSD prior to the commencement of the FSI acceptance inspection.
2. Any amendments, rectifications, or updates on the checklist(s) due to missing/incorrect information and/or defects/irregularities identified during the inspection, or changes in site condition, shall be properly documented and made available at any reasonable time at the request of the Director of Fire Services.
3. The T&C checklist(s) should be maintained and rigorously updated to accurately reflect the "as-installed" condition of all FSIs.
4. The updated checklists shall fully correspond to the on-site installation and align with the design details presented on the FSI plans under submission of FSI/501(a) dated \_\_\_\_\_.

**D. Undertaking**

We, the undersigned Authorized person and RFSICs, hereby undertake that to the best of our knowledge and belief, the declaration above is true, correct and complete. We understand that if we willfully give any false information, make any misrepresentation or withhold any material information in this undertaking, the case may be referred to appropriate professional registration bodies/disciplinary board for necessary action.

**Authorized Person**

Authorized Person Signature: \_\_\_\_\_

Name of Authorized Person: \_\_\_\_\_

Tel: \_\_\_\_\_

Date: \_\_\_\_\_

**Registered Fire Service Installation Contractor(s)**

Authorized Signature &

Company Chop

Name of Authorized Signatory: \_\_\_\_\_

RFSIC Name: \_\_\_\_\_

Registration No.: \_\_\_\_\_

Date: \_\_\_\_\_