Application for Inspection and Testing of Fire Service Installations and Equipment in Premises / Buildings under * Fire Safety (Commercial Premises) Ordinance, Cap. 502 / Fire Safety (Buildings) Ordinance, Cap. 572 / Fire Safety (Industrial Buildings) Ordinance, Cap. 636

To: Building Improvement Division 2
Fire Safety Command
Fire Services Department

Date: _____

FSD Ref. No.: FP * 45/56/63_____

FSDn/FSIDn No.: _____

Part A:

The below Fire Service Installations and Equipment (FSI) have been installed at _____

_____ (address of premises/buildings), and the installation work was completed on _____. I hereby certify that such FSI installed in accordance with the approved FSI plans submitted under the cover of FSI/314 (*B/C/D) dated _____ have been inspected and tested, and are in efficient working order. Copies of the completed checklists, equipment test reports and catalogues/data sheets are attached herewith for your information.

Type of FSI		Approved FSI Plan		Testing and Commissioning Checklist	FSI Equipment List	
					Certificate	Catalogue
Sprinkler System	☐	☐	FS 161 Serial No.:_____		☐	☐
Fire Hydrant/Hose Reel System	☐	☐	FS 161 Serial No.:_____	☐	☐	☐
Fire Alarm System	☐	☐	FS 161 Serial No.:_____	☐	☐	☐
Fire Detection System (IoT)	☐	☐	FS 161 Serial No.:_____	☐	☐	☐
Dry Riser	☐	☐	FS 161 Serial No.:_____		☐	☐
Ventilation/Air Conditioning Control System	☐	☐	FS 161 Serial No.:_____		☐	☐
Emergency Lighting	☐				☐	☐
Exit sign (including Directional Sign)	☐				☐	☐
Portable Hand-Operated Approved Appliance	☐	☐	FS 161 Serial No.:_____			☐
Others (please specify):_____	☐	☐	FS 161 Serial No.:_____	☐	☐	☐

(Please tick ☑ if provided.)

Authorized Signature:_____

RFSIC Name:_____ Name of Authorized Signatory: _____

Company Chop:_____ Registration No.:_____

Office Tel.:_____ Class:_____ Date: _____

Copy of Fire Service Completion Advice (FSCA) / Copy of Application for Constructing, Installing, Altering or Removing an Inside Service or Fire Service (Part V) (WWO46) from the Water Authority ☐

Copy of Electricity (Wiring) Regulations Work Completion Certificate (Form WR1) of the electrical installation for FSI ☐

Copy of acceptance document from the Buildings Department for the completion of building works for FSI ☐

Copy of confirmation letter from the Fire Services Communications Centre for the connection of a direct telephone line ☐

Part B:

* I/We,_____(*incorporated owners/ owners / owners' representative / occupiers / occupiers' representative of the above premises/ buildings), have been notified that the relevant FSI are ready for inspection.

Signature/Chop:

_____ Tel.:_____ Date:_____

*Please delete as appropriate