

FIRE DETECTION AND ALARM SYSTEM INSTALLATION CERTIFICATE

DETAILS OF THE CLIENT

Client: THIS CERTIFICATE WAS CREATED USING FORMFILL LEVEL 2
Address: Address 1
Address 2
Town Postcode: POST CODE

DETAILS OF THE FIRE DETECTION AND ALARM SYSTEM

Address: 45 Ashton Lane
Dewksbury, Essex Postcode: EA1 6WR
Extent of the installation covered by this certificate: The complete system
The system is:
New:
An Addition: N/A
An Alteration: N/A

INSPECTION AND TESTING OF WIRING SYSTEM(S)

Tick box or insert N/A (Not Applicable), as appropriate

Wiring has been tested in accordance with the recommendations of Clause 38 of BS5839-1: 2002.

Insulation resistance tests:	Supply circuit(s) tests:	Test(s) required by manufacturer (if any):
<input checked="" type="checkbox"/> Between conductors	<input checked="" type="checkbox"/> Earth continuity	<input checked="" type="checkbox"/> Maximum circuit resistance
<input checked="" type="checkbox"/> Between conductors and Earth	<input checked="" type="checkbox"/> Earth fault loop impedance	<input type="checkbox"/> Other tests
<input checked="" type="checkbox"/> Between conductors and screen, if any	* Test results recorded on additional numbered page(s) and provided to: N/A	

* The results of all tests must be recorded on additional numbered page(s) and made available to the organisation responsible for the commissioning of the system

CERTIFICATION OF INSTALLATION

I/We, being the competent person(s) responsible (as indicated by my/our signatures below) for the installation of the fire alarm system, particulars of which are set out above, CERTIFY that the said installation for which I/we have been responsible complies to the best of my/our knowledge and belief with the specification described below and with the recommendations of Section 4 of BS 5839-1:2002, except for the variations, if any stated in this certificate.

Variations from the specification and/or Section 4 of BS 5839-1 (see BS 5839-1 Clause 7).

No variations

The extent and liability of the signatory/signatories is limited to the work described above.

For the INSTALLATION of the system:

The results of the inspection and testing reviewed by the Qualified Supervisor:

Name: JUSTIN Position: Sitting down
Signature: [Signature] Date: 08/09/03

Name: GAVIN Position: Position
Signature: [Signature] Date: 08/09/2003

PARTICULARS OF THE APPROVED CONTRACTOR

Organisation: Your Company Name
Address: Address 1
Address 2
Town County Postcode: POSTCODE

DESIGN SPECIFICATION AND RELATED DOCUMENTS

Design Specification Ref No: dfg-1	Date issued: 08/09/20	Electrical Installation Certificate No: dfg-4	Date issued: 08/09/20
Design Drawings Ref Nos: fdg-2	Date issued: 08/09/20	Design Certificate No: dfg-5	Date issued: 08/09/20
'As Fitted' Drawing Nos: dfg-3	Date issued: 08/09/20	Other: dfg-6	Date issued: 08/09/20

Unless supplied by others, the 'As Fitted' drawings have been supplied to the person responsible for commissioning the system (see Clause 36.2m) of BS5839-1: 2002.