

RETURN COMPLETED CONTRACTOR FORMS TO:

BERMUDA FIRE & RESCUE SERVICE FIRE PREVENTION DIVISION #49 King Street, Hamilton Bermuda, HM19 TELE: (441) 93 5555

TELE: (441) 292-5555 EMAIL: fireprotection@govbm

The following life safety systems have been inspected and or tested by contractors licensed to maintain each of the systems for proper operation as required by the Fire Safety Act 2014 and National Fire Protection Association (NFPA) standards. Contractor certification forms for each of the applicable system must be attached to this sheet.

NAME OF BUILDING:	
ADDRESS OF BUILDING:	
TYPE OF OCCUPANCY (SPECIFIC USE):	
NAME OF OWNER OR AGENT:	
ADDRESS OF OWNER OR AGENT:	
OWNER OR AGENT TELEPHONE:	
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LIFE SAFETY SYSTEM	NFPA CODE REFERENCE	FREQUENCY OF TEST	CURRENT SYSTEM STATUS (circle one)			REQUIRED TAGS PROVIDED (circle one)		CONTRACTOR CERTIFICATION FORMS ATTACHED	
FIRE ALARM	72	ANNUALLY	N/A	OPERATIONAL	NOT OPERATIONAL	YES	NO	YES	NO
FIRE SPRINKLER	13,25	ANNUALLY	N/A	OPERATIONAL	NOT OPERATIONAL	YES	NO	YES	NO
	13,23	ANNOALLT	IN/A	OPERATIONAL	NOT OPERATIONAL	TES	NO	TES	NO
STANDPIPES	14,25	ANNUALLY	N/A	OPERATIONAL	NOT OPERATIONAL	YES	NO	YES	NO
FIRE PUMP				1	1				
FIRE POWP	20,25	ANNUALLY	N/A	OPERATIONAL	NOT OPERATIONAL	YES	NO	YES	NO
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SMOKE CONTROL / EVAC.	90A, 92B	ANNUALLY / SEMIANNUAL	N/A	OPERATIONAL	NOT OPERATIONAL	YES	NO	YES	NO
FIRE SUPPRESSION	12,12A,17, 2001	ANNUALLY	N/A	OPERATIONAL	NOT OPERATIONAL	YES	NO	YES	NO
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HOOD SUPPRESSION	96	SEMIANNUALLY	N/A	OPERATIONAL	NOT OPERATIONAL	YES	NO	YES	NO
FIRE EXTINGUISHERS	10	ANNUALLY	N/A	OPERATIONAL	NOT OPERATIONAL	YES	NO	YES	NO
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EMERGENCY GENERATORS	110	ANNUALLY	N/A	OPERATIONAL	NOT OPERATIONAL	YES	NO	YES	NO

NOTE: A record/log shall be maintained for each of the listed systems, and a tag or sticker be placed on the system control panel (if applicable) showing the date, telephone number and name of the company performing the inspection and/or test.

Date	Cignotura
Datc	Signature