

Certificate of Maintenance

Fire Detection & Alarm Systems Service Report



Trusted Fire Safety
Services | Supplies | Support

Company Name & Installation Address:
 West Moors Memorial Hall and Social Club
 Station Road
 West Moors
 Ferndown
 Dorset
 BH22 0HZ

Contact Name: [REDACTED]
 Contact Number: [REDACTED]
 Contact email: [REDACTED]
 Service Agreement Number:
 01-07/4

(01202) 84 96 95
safe@thefirepoint.co.uk
 Unit 3, Old Manor Farm Buildings
 187 Leigh Road
 Wimborne
 Dorset
 BH21 2BT

Extent of the Installation and limitations of the Inspection and Servicing

BS 5839-1 System Category: M P1 P2 L1 L2 L3 L4 L5

Variations from the recommendations of **Clause 45** of BS5839-1:2017 for periodic inspection:

No known documented variations.

Agreed Limitations, if any, on the inspection and servicing of the system:

Inspection of concealed cable management.

Non Conformities of BS5839-1:2017 found during the course of servicing:

Diagrammatic representation of zone plan absent. However, single zone system.

Remedial works considered necessary:

In the last 12 months, 0 false alarms have occurred, equating to 0 false alarms per 100 automatic fire detectors (not applicable for Cat M)

Fire Risk Assessment must be conducted for you to comply with fire safety law: The Regulatory Reform (Fire Safety Order) 2005.
All of your legal obligations regarding fire safety in non-domestic operations can be found listed online, searching: "RRO 2005"

Certification of Maintenance for the Fire Detection & Alarm System

I/we being the competent person(s) responsible (as indicated by my/our signature(s) below) for the servicing of the fire detection and fire alarm system, particulars of which are set out below, CERTIFY that the said work for which I/we have been responsible, complies to the best of my/our knowledge and belief with the recommendations of Clause 45 of BS5839-1:2017: Accept for the variations and/or non conformities, if any, stated in this certificate.

- Quarterly inspection of vented batteries
 Periodic inspection and test/inspection and test over a 6 month period

Technician (Print): [REDACTED] Technician (Sign): [REDACTED]

- 1). I/we requested the attendance of a Technician from The Firepoint and for the work to be carried out.
- 2). The work detailed above has been completed to my satisfaction, I am aware of any non-conformities and no further training is required.
- 3). The system has been left in good working order (unless detailed otherwise).
- 4). I am authorised to sign on behalf of the Customer.
- 5). I/we, The Customer will pay any charges for the work done, in accordance with payment terms detailed on the invoice.

Client (Print): [REDACTED] Position: **Committee** Client (Sign): [REDACTED]

Call Out
 Scheduled Service

Non-Conformities

Site has outstanding work required to comply with BS5839-1:2017.
 Details listed above.

Signed:
 Yes [REDACTED]
 No [REDACTED]

Date: 01/05/2024

USER GUIDANCE:

It is strongly recommended that in addition to this Six Month Service Interval: Daily checks are conducted to ensure there are no faults indicated on the CIE Panel. Weekly tests are conducted, activating a different manual call point at the same time, logging the event in the system Log Book. False alarms and system faults should also be recorded, including identification of device responsible for activation of false alarm, for future preventive measures.

REGULATORY

The Firepoint is a trading name of 3crossfire Ltd
 Registered office: 256 Ashley Road, Parkstone,
 BH14 9BZ Registered in England
 Company No: 05677727
 VAT Reg No: 8815062 21

QC38: Issue 5 - 27/01/2020

Checklist

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Arrival Time: 0830
Departure Time: 1100

Type of Inspection & Service

Frequency of inspection and service visits applicable to this system: Six monthly Quarterly Other:

Device Testing Summary

Percentage of the total amount of detection devices tested during this visit: 100 %
Device types and quantities inspected/tested:
ARC Link: Yes No
Manual Call Points: 7
Smoke Detectors: 1
Heat Detectors:
Sounders: 4
VADS:
Multi Detectors:
Linear Detector:
Aspirating Detector:
Flame Detector:
Optical Beam:
Video Detector:
Ancillary Functions:
Brief description of devices tested during this Inspection & Service visit that will assist the Maintenance Technician on subsequent visit(s) to identify which devices remain outstanding for testing over the 12 month period.

AICO devices push tested also.

System Technology

Addressable Non-Addressable Wireless Linked

Control & Indicating Equipment Manufacturer: Tate
Device Manufacturer: CQR & Apollo
Number of Zones: 1
Number of Loops:

Captured Panel Readings

A/C Readings (1):	235.9 v	Induced (1):	0.011 v	D/C Zone (1):	17.36 v	D/C Charge (1):	27.18 v
A/C Readings (2):	v	Induced (2):	v	D/C Zone (2):	v	D/C Charge (2):	v
A/C Readings (3):	v	Induced (3):	v	D/C Zone (3):	v	D/C Charge (3):	v
Battery 1:	12.52 v 2.1 A/h	Battery 4:	v A/h	Loop 1:	m/A	Loop 3:	m/A
Battery 2:	12.34 v 2.1 A/h	Battery 5:	v A/h	Loop 2:	m/A	Loop 4:	m/A
Battery 3:	v A/h	Battery 6:	v A/h	Battery Installation date:	2x 2.1A/h - 05/21		

Fault & Fire Simulations

Open Circuits Fault applied (zones and sounders.) Short Circuits Fault applied (zones and sounders). *Not applicable to Loop Circuits, prevention of memory corruption.*
 Panel Buzzer and Lamps functioning. Mains and Battery Power Fail simulated. System is capable of full alarm state under mains power fail.

Brief details of works performed - Additional information not captured above

Brief details of potential retrospective design variations (subject to agreement from all interested parties)

Materials used

Section 1: Exchange of Information		Inspection/Test Type	Tick as appropriate
1.1	There is an agreement for emergency call out to deal with any fault or damage that occurs to the system. <i>Note: The agreement should be that on a 24-hour basis, a Technician of the maintenance organisation or associate can normally attend the premises within 8 hours of a call from the user. It is accepted that this might not be possible in very remote areas and certain offshore islands, in which case, this ought to be regarded as a variation from the recommendations of BS 5839, which is recorded in the system Log Book.</i>		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Section 2: Manual Call Points		Inspection/Test Type	Tick as appropriate
2.1	All manual call points have been checked to ensure they are unobstructed and conspicuous? 46.3a	Periodic	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
2.2	All exits that lead to a place of ultimate safety have been checked to ensure that they have the provision of a manual call point? 45.3b2	Periodic	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
2.3	The switch mechanism of every call point has been tested? 45.4a <i>Note: This test can be carried out over the course of 2 or more service visits during each 12-month period.</i>	Annual	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
2.4	The building has been checked to ensure that there have not been any alterations or extensions to the building, which introduce a requirement for additional call points to be installed? 45.3b7	Periodic	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Section 3: Automatic Detection		Inspection/Test Type	Tick as appropriate
3.1	The building has been checked to ensure that there are no new or relocated partitions, which are erected within 500mm horizontally of any automatic fire detector? 45.3b3	Periodic	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
3.2	The building has been checked to ensure that there is not any storage, which encroaches within 300mm of ceilings? 45.3b4 <i>Note: Where a storage rack contains high-risk materials or where the height of the rack exceeds 8 metres, the Inspection and Servicing Certificate shall be written to include a recommendation for consideration of use of in-rack detection.</i>	Periodic	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
3.3	Each automatic fire detector has been checked to ensure there is a clear space of 500mm being maintained below it and it has been checked to ensure it has the ability to receive the stimulus that it has been designed to detect? 45.3b5	Periodic	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
3.4	The building has been checked to ensure that there have not been any changes to the occupancy of an area, which results in the existing types of automatic detection being unsuitable for detection of fire or prone to false alarms? 45.3b6	Periodic	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
3.5	All automatic fire detectors and remote indicators have been examined to ensure that they are not damaged, painted or otherwise adversely affected? 45.4b	Annual	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
3.6	All automatic fire detectors have been functionally tested to prove that they are connected to the system, are operable and capable of responding to the phenomena that they are designed to detect. <i>Note: This test can be carried out over the course of 2 or more service visits during each 12-month period.</i>	Annual	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
3.7	All analogue values have been confirmed that they are within the range specified by the manufacturer? 45.4i	Annual	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
3.8	All multi-sensors have been functionally tested, by a method as recommended by the manufacturer, that confirms that products of combustion in the vicinity of the detector can reach the sensors and that a fire signal can be produced as appropriate? 45.4j <i>Note: Where the detector or system design allows each sensor on which a fire detection decision depends (eg. smoke, heat, CO) to be physically tested individually, then each sensor should be physically tested individually. Alternatively, individual sensors may be physically tested together if the detection system design allows simultaneous stimuli and individual sensor responses to be verified either individually or collectively. Where a system includes a time dependent configuration of detection, care needs to be taken to ensure that a sensor is not excluded from being tested as a result of the time dependent mode.</i>	Annual	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
3.9	All aspirating fire detection have been inspected and serviced in accordance with the Aspirating Smoke Detection Systems Maintenance Checklist, which has been enclosed with this report? 45.4f <i>Note: This test can be carried out over the course of 2 or more service visits during each 12-month period.</i>	Annual	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
3.10	All carbon monoxide fire detectors have been functionally tested using apparatus that generates carbon monoxide or a gas that has a similar effect on the electro-chemical cell as carbon monoxide? 45.4g WARNING: Carbon monoxide is a highly toxic gas and suitable precautions should be taken in its use. <i>Note: This test can be carried out over the course of 2 or more service visits during each 12-month period.</i>	Annual	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
3.11	All flame detectors have been functionally tested by a method as recommended by the manufacturer that confirms that the detector will respond to a suitable frequency of radiation and produce a fire alarm signal? 45.4h <i>Note: This test can be carried out over the course of 2 or more service visits during each 12-month period.</i>	Annual	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
3.12	All optical beam smoke detectors have been functionally tested by introducing signal attenuation between the transmitter and the receiver, either by use of an optical filter or any other similar method of simulating obstruction by smoke or simulated smoke? 45.4e <i>Note: This test can be carried out over the course of 2 or more service visits during each 12-month period.</i>	Annual	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
3.13	All video fire detectors have been tested in accordance with manufacturers guidelines? 45.4s <i>Note: This test can be carried out over the course of 2 or more service visits during each 12-month period.</i>	Annual	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
3.14	Any lighting provided specifically to aid the detection of flame or smoke shall be regarded as an integral part of the video fire detection system. As such, its correct operation has been confirmed by both in the presence of any mains supply to the lighting circuit and the absence of such a supply? 45.4s	Annual	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
3.15	The building has been checked to ensure that there have not been any alterations or extensions to the building, which introduce a requirement for additional automatic fire detection to be installed. 45.3b7	Periodic	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Section 4: Remote Indicators		Inspection/Test Type	Tick as appropriate
4.1	All remote indicators have been functionally tested to prove that they are connected to the system and are operational? 45.4b <i>Note: This test can be carried out over the course of 2 or more service visits during each 12-month period.</i>	Annual	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Section 5: Cause & Effect		Inspection/Test Type	Tick as appropriate
5.1	The cause and effect programme has been confirmed as being correct by activating at least one cause and observing the operational effects? 45.4o <i>Note: Where there are different types of devices, eg. manual call points and automatic fire detectors, one cause and its effects shall be tested for each type of device. Note: Testing of a single cause is deemed acceptable and satisfies the recommendations of 45.3o. On a site with multiple cause and effect operations, if the user deems further causal testing is required, it is necessary for the user to have specified this to the maintenance provider. Where no agreement has been specified, testing of one cause will satisfy this recommendation. (It is recommended that the Maintenance Technician seeks clarification on what has been agreed between the maintenance organisation they represent and the user)</i>	Annual	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Section 6: Audible Alarms		Inspection/Test Type	Tick as appropriate
6.1	The operation of audible alarm devices has been checked? 45.3h <i>Note: This shall be done by the operation of at least 1 manual call point or fire detector.</i>	Periodic	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
6.2	All audible alarms have been checked for correct operation? 45.4k <i>Note: This test is intended to ensure that every fire alarm device operates in response to a fire alarm signal. It is not intended that sound pressure level measurements are made. Note: This test can be carried out over the course of 2 or more service visits during each 12-month period.</i>	Annual	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
6.3	The building has been checked to ensure that there have not been any alterations or extensions to the building, which introduce a requirement for additional audible alarms to be installed? 45.3b7	Periodic	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A

Section 7: Visual Alarms		Inspection/Test Type	Tick as appropriate
7.1	The building has been checked to ensure that there have not been any alterations or extensions to the building, which introduce a requirement for additional visual alarms to be installed? 45.3b7	Periodic	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
7.2	All visual alarms have been checked that they are not obstructed from view? 45.4k	Annual	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
7.3	All visual alarms have been checked to ensure that their lenses are clean? 45.4k	Annual	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
7.4	The operation of the visual alarm has been checked? 45.3h <i>Note: This shall be done by the operation of at least one manual call point or fire detector.</i>	Periodic	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
7.5	All visual alarm devices have been checked for correct operation? 45.4k <i>Note: This test can be carried out over the course of 2 or more service visits during each 12-month period.</i>	Annual	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Section 8: Radio Linked Systems		Inspection/Test Type	Tick as appropriate
8.1	All radio system equipment has been inspected and serviced in accordance with the recommendations of the manufacturer(s)? 45.3n	Periodic	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
8.2	Radio signal strengths have been checked for adequacy and the results have been recorded? 45.4m	Annual	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Section 9: Standby Power Supplies		Inspection/Test Type	Tick as appropriate
9.1	All vented batteries and their connections have been examined with electrolyte levels checked and topped up as necessary? 45.2 <i>Note: In many large premises and sites, in-house maintenance personnel may be competent to carry out this task.</i>	Quarterly	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
9.2	Vented batteries have been examined to ensure that the specific gravity of each cell is correct? 45.3f	Periodic	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
9.3	Battery steady state charge voltage measured and recorded on page 2? 45.3d <i>Note: This measurement should be carried out whilst the mains power supply is switched on.</i>	Periodic	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
9.4	The steady state charge voltage has been checked to ensure it is within the manufacturer's recommendations? 45.3d	Periodic	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
9.5	The standby battery has been disconnected, the alarms activated and the power output voltage checked to ensure that it is close to the nominal voltage? 45.3e <i>Note: If applying the full alarm is not practical, then a full load may be simulated. Note: It would be reasonable to expect the power supply voltage to achieve at least 95% of the nominal voltage.</i>	Periodic	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
9.6	Batteries and their connections have been examined and momentarily load tested with the mains supply switched off to ensure they are in good serviceable condition and are not likely to fail before the next inspection visit? 45.3f <i>Note: This does not apply for wireless systems, namely batteries within radio linked devices, eg. manual call points, detectors and fire alarm sounders of a radio linked system.</i>	Periodic	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
9.7	All standby batteries have been verified as being suitably sized, using the Standby Power Supply Capacity Verification Record? 45.4p	Annual	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Section 10: Control & Indicating Equipment (CIE)		Inspection/Test Type	Tick as appropriate
10.1	There is a label that details the name and telephone number of the maintenance organisation that is prominently displayed at the main CIE? 46.3b		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
10.2	At least one detector or manual call point on each circuit has been operated to ensure that the CIE generates a fire alarm? 45.3g <i>Note: An entry shall be made in the logbook indicating which initiating device was used for each circuit test.</i>	Periodic	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
10.3	All controls and visual indicators of the CIE have been checked to ensure correct operation? 45.3i	Periodic	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
10.4	All ancillary functions of the CIE have been tested? 45.3k	Periodic	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
10.5	All printers have been tested for correct operation and that the characters are legible? 45.3m	Periodic	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
10.6	Printer consumables have been checked that they are of suitable condition and of sufficient quantity to ensure that the printer will operate until the next inspection & service visit? 45.3m	Periodic	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
10.7	All unmonitored permanently illuminated filament lamp indicators have been replaced 45.4l	Annual	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
10.8	Further checks and tests as recommended by the manufacturer of the CIE have been carried out? 45.3o	Periodic	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Section 11: System Integrity & Fault Monitoring		Inspection/Test Type	Tick as appropriate
11.1	A test has been performed to ensure a fault indicator appears on introduction of a short circuit and open circuit to circuits serving fire alarm devices? 12.2.1a1 + 12.2.1a3	Periodic	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
11.2	A test has been performed to ensure a fault indicator appears on removal of a manual call point, fire detector or an alarm device that is designed to be detachable? 12.2.1a2 + 12.2.1a10	Periodic	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
11.3	A test has been performed to ensure a fault indicator appears on introduction of a short circuit and open circuit of any wiring between any power supply that is in a separate enclosure and the equipment to which it supplies power? 12.2.1a4	Periodic	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
11.4	A test has been performed to ensure a fault indicator appears on introduction of an earth fault? 12.2.1a6	Periodic	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
11.5	A test has been performed to ensure a fault indicator appears on removal of any fuse or operation of any other protective device? 12.2.1a6	Periodic	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
11.6	A test has been performed to ensure a fault indicator appears on introduction of a short circuit and open circuit on wiring between separate control and/or indicating equipment? 12.2.1a7	Periodic	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
11.7	A test has been performed to ensure a fault indicator appears on introduction of a short circuit and open circuit on wiring between main and any repeat control and/or indicating equipment, such as a mimic diagram? 12.2.1a8	Periodic	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
11.8	A test has been performed to ensure a fault indicator appears on introduction of a short circuit and open circuit on wiring between main and any separate enclosure of equipment used for the transmission of alarm signal to an ARC? 12.2.1a9	Periodic	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
11.9	A test has been performed to ensure a fault indicator appears on introduction of a mains power failure? 12.2.1b1 <i>Note: The fault indication shall appear within 30 minutes of the occurrence.</i>	Periodic	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
11.10	A test has been performed to ensure a fault indicator appears on introduction of a standby power failure? 12.2.1b2 <i>Note: The fault indication shall appear within 15 minutes of the occurrence.</i>	Periodic	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
11.11	A test has been performed to ensure a fault indicator appears on introduction of a battery charger failure? 12.2.1b3 <i>Note: The fault indication shall appear within 30 minutes of the occurrence.</i>	Periodic	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
11.12	A test has been performed to ensure a fault indicator appears on disconnection of 1 battery in instances where batteries are connected in parallel? 12.2.1d <i>Note: The fault indication shall appear within 15 minutes of the occurrence.</i>	Periodic	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
11.13	A test has been performed to ensure a fault indicator appears on introduction of a short circuit, open circuit and disconnection of any communication link(s) such as a voice alarm or fire warning system for deaf people? 12.2.1e <i>Note: The fault indication shall appear within 100 seconds of the occurrence.</i>	Periodic	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
11.14	All connections to other fire protection systems or safety facilities have been simulated for fault to ensure compliance with BS 7273or other applicable codes of practice? 12.2.1f	Periodic	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
11.15	All tactile alarm devices provided for people with impaired hearing have been simulated for fault to ensure compliance with BS 5839-1 18.2.1b? 12.2.1g	Periodic	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Section 12: Remote Signalling		Inspection/Test Type	Tick as appropriate
12.1	The operation of any facility for automatic transmission of all alarm and fault signals to the ARC has been checked, with their signals confirmed? 45.3j	Periodic	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A

Section 13: Cable, Wiring & Connections		Inspection/Test Type	Tick as appropriate
13.1	A visual inspection of the readily accessible cable fixings has been made to confirm they are all secure and undamaged? 45.4n	Annual	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Section 14: Zone Plan		Inspection/Test Type	Tick as appropriate
14.1	It has been confirmed that there is a suitable zone plan, which is correctly orientated in the format of a diagrammatic representation of the building, located and securely fixed adjacent to all CIE and repeat indicating equipment? 45.4q <i>Note: Where repeat indicating equipment relates to only part of the premises, the adjacent zone plan need only relate to that part of the building.</i>	Annual	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Section 15: False Alarm Limitation & Analysis		Inspection/Test Type	Tick as appropriate
15.1	Building occupants and any ARC to which fire alarm signals are transmitted have been notified prior to routine testing or maintenance work on the fire alarm system that might result in the occurrence of a fire alarm signal? 35.2.7d	Periodic	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
15.2	False alarms are being properly recorded by the user in the system logbook?	Periodic	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
15.3	When false alarms have been recorded by the user, the category of false alarm (if known) has been recorded? 31.2 <i>Note: When any doubt exists, the cause should be recorded as "UNKNOWN" (eg. it should not be assumed that in the absence of other information, a false alarm needs to have arisen from an equipment fault).</i>	Periodic	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
15.4	Quantity of detectors tested on the system recorded on page 2? 30.21	Periodic	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
15.5	Quantity of false alarms in the past 12 months recorded on page 2? 30.21 <i>Note: Value to be obtained from the system logbook and recorded as false alarms per 100 detectors.</i>	Periodic	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
15.6	The logbook has been referenced and the rate of false alarms has been checked to ensure it does not exceed the permissible value of one false alarm per 25 detectors, per annum? 30.2j1	Periodic	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
15.7	The logbook has been referenced and the rate of false alarms has been checked to ensure it does not exceed the permissible value of eleven or more false alarms since the previous inspection and service visit? 30.2j2	Periodic	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
15.8	The logbook has been referenced and the rate of false alarms has been checked to ensure it does not exceed the permissible value of two or more false alarms emanating from a single manual call point or fire detector since the previous service and inspection visit? 30.2j3	Periodic	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
15.9	The logbook has been checked to ensure that there is not an identified persistent cause of false alarms? 30.2j4	Periodic	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
15.10	The ARC has been contacted and the rate of false alarm signals has been checked to ensure it does not exceed the permissible value of two or more false alarm signals within the previous twelve months? 30.2j5	Periodic	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
15.11	In systems that incorporate less than 40 automatic fire detectors, the user has instigated an in-depth investigation by suitable specialists, if in any rolling twelve month period, 3 or more false alarms occur? 32.2b	Periodic	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
15.12	In systems that incorporate more than 40 automatic fire detectors, the user has instigated an in-depth investigation by suitable specialists, if in any rolling twelve month period, the average rate of false alarms exceeds 1 false alarm per 20 detectors per annum? 32.2a1	Periodic	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
15.13	In systems that incorporate more than 40 automatic fire detectors, the user has instigated an in-depth investigation by suitable specialists, if in any rolling twelve month period, the average rate of false alarms are initiated by any single manual call point or automatic fire detector (or detector location)? 32.2a2	Periodic	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
15.14	If the rate of false alarms is deemed as not acceptable, then a preliminary investigation has been carried out and the premises management have been provided with appropriate advice on how to reduce the false alarms or alternatively, the premises management have been advised of any need for further in-depth investigation? 30.2j	Periodic	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
15.15	In existing systems in which there is a frequent unwanted operation of manual call points, protective covers have been recommended and/or fitted? 35.2.2a	Periodic	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
15.16	Suitable action has been taken by the user when false alarms occur? 47.2e	Periodic	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Section 16: Variations		Inspection/Test Type	Tick as appropriate
16.1	All variations have been recorded in a Schedule of Variations and listed in the relevant system certificate? 7.2d	Periodic	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
16.2	The logbook has the facility to make a record of agreed variations? 7.2e	Periodic	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
16.3	Major non-compliances that are agreed variations have been clearly recorded in the logbook, so they are readily available for future reference by maintenance companies and other interested parties? 7.2e	Periodic	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Section 17: Documentation & Certification		Inspection/Test Type	Tick as appropriate
17.1	Standby Power Verification Records?	Periodic	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
17.2	Aspirating Detection System Maintenance Checklist?	Periodic	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
17.3	Duct Detector Maintenance Checklist?	Periodic	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
17.4	All outstanding defects have been recorded on the Inspection & Servicing Certificate and reported to the Premises Management? 45.3p	Periodic	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
17.5	Certificate of Inspection & Servicing in accordance with the recommendations of BS 5839-1:2017 Annex G.6? <i>Note: On or as soon as practicable after completion of the inspection and servicing process, a certificate has been issued certifying compliance with the recommendations of BS 5839-1 in respect of the process, or if variations exist, clearly identifying these variations. Note: The certificate issued can vary in format than shown in Annex G, but as a minimum, the information and statements of compliance within the model ought to be provided.</i>	Periodic	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Section 17: Documentation & Certification (Logbook)		Inspection/Test Type	Tick as appropriate
17.7	The logbook has been checked to ensure that the details of the radio signal strength levels as recorded during the initial system commissioning are present and available for reference? 27.2k	Periodic	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
17.8	The logbook has been checked to ensure that there is evidence of weekly testing by means of a different manual call point being tested in rotation, with the identity of the manual call point used, being recorded in the system logbook? 44.2d <i>Note: Should it be identified that weekly tests are not being carried out and/or a different manual call point is not being tested in rotation with the identity of the manual call point being recorded within the system logbook, this shall be brought to the attention of the user and recorded on the Inspection & Servicing Certificate.</i>	Periodic	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
17.9	The logbook has been checked to ensure all faults which have been recorded have received appropriate attention? 45.3a	Periodic	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
17.1	The user is recording all faults or damage in a system logbook and making arrangements for repair to be carried out as soon as possible? 46.3c	Periodic	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
17.11	The logbook makes record of brief details of maintenance arrangements? 48.2b	Periodic	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
17.12	The logbook makes records of dates and times of all fire alarm signals (regardless of whether the signal is a false or initiated as the result of a test, fire drill or genuine fire). If the fire alarm signal has resulted from the operation of a manual call point or fire detector, the device and its location has been recorded? 48.2c	Periodic	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
17.13	The logbook makes record of the name(s) of the member(s) of the premises management to whom responsibility for the Fire Detection & Alarm System is delegated? 48.2a	Periodic	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
17.14	The logbook makes record of causes, circumstances surrounding and category of all false alarms? 48.2d	Periodic	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
17.15	The logbook makes record of dates, times and types of all tests? 48.2e	Periodic	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
17.16	The logbook makes record of dates, times and types of all faults and defects? 48.3f	Periodic	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
17.17	The logbook makes record of dates and types of all maintenance (eg. service visit or non-routine attention)? 48.3g	Periodic	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
17.18	An entry has been made within the system logbook to make record of the inspection & service visit.	Periodic	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
17.19	An entry has been made within the system logbook to ensure that the details of the manual call point(s) and fire detectors used to carry out the circuit tests have been recorded? 45.3g	Periodic	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A