**Format: FAS (Fire Alarm System) Test & Work Completion Certificate**

**LETTER HEAD OF THE FAS WORKS CONTRACTOR**

|  |  |
| --- | --- |
| **Contractor’s Address:** |  |
| **Date:** |  |

**Certificate: FAS (Fire Alarm System) Test & work completion**

**Licensee’s Company Name**:

**Brand**

**Mall**

**Unit No**.

**Area** (In Sft or M²)

**A: Particulars of works:**

|  |  |
| --- | --- |
| Type of smoke detectors used:  (Brand name, Type and make) |  |
| No. of smoke detectors:  (As per approved drawing) | Nos. |
| All enclosed areas have smoke detectors | Yes/ No |
| Break Glass Panel installed | Yes/ No/ Nos. |
| Kitchens have heat detectors  (Applicable for F&B Kitchens ) | Yes/ No/ NA |
| Zone module connectivity achieved:  (for non-anchor stores) | Yes/ No/ NA |
| Monitor module connectivity achieved:  (For anchors) | Yes/ No/ NA |
| Independent Fire Alarm Panel Installed  (For Anchors) | Yes/ No/ NA |
| Hooter Installed  (only applicable to those with Independent Fire Panel) | Yes/ No/ NA |
| AHU tripping achieved through relay module: | Yes/ No |
| Connectivity to Mall panel at BMS room established | Yes/ No |
| Warranty/ Guarantee period |  |

**B. Confirmations:**

We confirm that the FAS at above unit is installed and tested to Mall Engineering and LP team’s satisfaction. We have conducted tests and the system is ready for use.

**Stamp & Signature**

Contractor