

Smoke Control Systems Acceptance and Periodic Tests

Year:	System:		
Location:			
Frequency of Periodic modifications	Tests: Dedicated System—semi-annu	ally; nondedicated system	m—annually; test at conclusion of system
Y = Satisfactory	N = Unsatisfactory (explain below) N/A = Not applicable		
Equipment		Equipment Operates Properly	Comments (number and record additional comments on reverse)
Fans (list each)			
Dampers (list each)			
Bumpers (not each)			
Doors and Closers			
Other Equipment			
Smoke Barrier Integrity			
Shaft or Enclosure Integ	ritv		
The state of the s	1		



Smoke Control Systems Periodic Tests

Date:	Inspector:	System:	
Location:			
Frequency of Period modifications	dic Tests: Dedicated System—semi-annually; nondedic	cated system—annually;	test at conclusion of system
Y = Satisfactory	N = Unsatisfactory (explain below)	N/A = Not applicab	le
		Record Information	Comments
Ensure the system is	in normal mode		
Measure and record			
Wind speed			
Wind direction			
Outside temperatur			
Test system normal			
Test system emerger			
	h input there is a designated output		
•	ete smoke control system sequence		
Normal mode			
	ontrol from first alarm		
	normal and automatic modes		
Return to normal	alongs in grade and decade a superior to the state of the		
	alarm inputs produce the correct outputs		
	t method for recording pressure differences		
	oduction of untempered air will not damage		
equipment	er conditions (freezing temperatures) will not damage		
equipment	er conditions (freezing temperatures) will not damage		
ечиричени			
Comments			
Ref No: SMS/SCSPT/17/SS			



Zoned Smoke Control Systems Periodic Tests

Date:	Inspector:	System:	
Location:			
Frequency of Per modifications	iodic Tests: Dedicated System—semi-	annually; nondedicated system—annually	; test at conclusion of system
		Record Information	Comments
Verify the location	n of the perimeter of each smoke contr		Comments
	oors in the smoke control zone are clos		
	ord the pressure difference across the s	smoke barrier at each door or pair of doors	
Door		Pressure Difference	Comments
Verify the proper	operation of each zoned smoke contro	ol system in response to each required mea	ns of activation. List each
Means of Activation	on	Record Information	Comments

Ref No: SMS/ZSCSPT/17/SSCL/01

Stairwell Pressurization Systems Periodic Tests

Date:	Inspector:	System:	
Location:			
Frequency of Perio	odic Tests: Dedicated System—semi-an	nually; nondedicated system—annually; test a	at conclusion of system

	Building in Normal Mode Building in Smoke Control Mode					
Stair Door	Force to Open Door	Pressure Difference	Force to Open Door	Pressure Difference with Doors Closed	Pressure Difference with 2 Doors Open	Pressure Difference with 3 Doors Open

Ref No: SMS/SPSPT/17/SSCL/01

modifications



Elevator Smoke Control System Periodic Tests

Date:	Inspector:	System:	
Location:			
Frequency of I modifications	Periodic Tests: Dedicated System—semi-annually; r	nondedicated systen	n—annually; test at conclusion of system
		Record	Comments
		Information	
	tion of the perimeter of each smoke control zone		
	Il doors in the smoke control zone are closed	- 1	
Measure and barrier	record the pressure difference across the smok	e barrier at each d	loor or pair of doors in the smoke
		Pressure	
	Door	Difference	Comments
Verify the pro	oper operation of each zoned smoke control sys	tem in response to	each required means of activation.
	Means of Activation	Record Information	Comments
		· · · · · · · · · · · · · · · · · · ·	

Ref No: SMS/ESCSPT/17/SSCL/01



Fire Fighters Smoke Control System Periodic Tests

Date:	Inspector:	System:	
Location:			_
Frequency of Perion modifications	odic Tests: Dedicated System—semi-a	annually; nondedicated system—ann	ually; test at conclusion of system
		Record	Comments
		Information	
Verify the location	of the perimeter of each smoke contro	l l	
Confirm that all do	ors in the smoke control zone are close	ed	
Measure and reco	ord the pressure difference across	the smoke barrier at each door or	pair of doors in the smoke
		Pressure	
	Door	Difference	Comments
Verify the proper List each	operation of each zoned smoke co	ontrol system in response to each	required means of activation.
LIST EACH	Means of Activation	Record	Comments
		Information	
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Ref No: SMS/FFSCS/17/SSCL/01