Fire Alarm Inspection & Servicing Certificate

Printable certificate template for routine inspection and servicing of non-domestic fire alarm systems.

PRINTABLE TEMPLATE: Complete by hand in clear block capitals. Use additional schedule pages where required. Use alongside the applicable edition of BS 5839-1 and your own certification / third-party scheme requirements.

1. CERTIFICATE & VISIT DETAILS

Certificate reference	**Job / order reference**
Date of inspection / service	**Next service due**
Service type [ ] Routine [ ] Takeover [ ] Other	**Engineer**

2. CONTRACTOR, CLIENT & PREMISES

Contractor company	**Telephone / email**
Contractor address	**Certification / scheme ref.**
Client / organisation	**Responsible person**
Premises / building	**Site contact**
Premises address	**Postcode**

3. SYSTEM INFORMATION

System category [ ] L1 [ ] L2 [ ] L3 [ ] L4 [ ] L5 [ ] P1 [ ] P2 [ ] M	**System type** [ ] Addressable [ ] Conventional [ ] Wireless [ ] Hybrid
Control panel make / model	**Panel location**
No. of zones	**No. of loops / circuits**
ARC / monitoring [ ] Yes [ ] No [ ] N/A	**Original install date (if known)**

4. INSPECTION & SERVICING SUMMARY

CHECK / ACTIVITY	RESULT	NOTES / REF.
Control & indicating equipment inspected / tested	[ ] P [ ] F [ ] N/A	
Manual call points sampled / tested	[ ] P [ ] F [ ] N/A	
Automatic detectors sampled / tested	[ ] P [ ] F [ ] N/A	
Alarm devices / visual alarms checked	[ ] P [ ] F [ ] N/A	
Cause & effect / outputs checked where applicable	[ ] P [ ] F [ ] N/A	
Remote signalling / ARC tested where applicable	[ ] P [ ] F [ ] N/A	
Mains supply / PSU condition checked	[ ] P [ ] F [ ] N/A	
Standby batteries / charger checked	[ ] P [ ] F [ ] N/A	
Fault monitoring / indications checked	[ ] P [ ] F [ ] N/A	
System restored to normal operation	[ ] Yes [ ] No	

Extent of testing / sampling and work carried out

5. BATTERY / POWER SUPPLY RECORD where applicable

Mains supply healthy

[ ] Yes [ ] No

Charger / PSU condition

[ ] Satisfactory [ ] Attention

Battery quantity / configuration

Battery age / date code

Battery voltage / observations

Replacement recommended

[ ] Yes [ ] No

Power supply / battery notes

6. DEVICE TEST SCHEDULE photocopy / print additional schedule pages as required

Ref	Zone	Loop	Address	Location	Device type	P/F	Notes

Result key: P = Pass F = Fail N/T = Not tested

7. DEFECTS & OBSERVATIONS

#	Description / location	Severity	Recommended action	Target	Status
1					
2					
3					
4					
5					
6					
7					

8. LIMITATIONS, VARIATIONS & RECOMMENDATIONS

Limitations affecting inspection / testing

Variations / departures / relevant observations

Recommendations / further work

9. COMPLETION & DECLARATION

System left operational	Outstanding critical defect
[ ] Yes [ ] No	[ ] Yes [ ] No
Client informed of defects	**Documentation / logbook updated**
[ ] Yes [ ] No [ ] N/A	[ ] Yes [ ] No [ ] N/A

Engineer declaration
I certify that the information recorded on this document is a true record of the inspection, testing and servicing undertaken, subject to the limitations and observations stated on this certificate.

Engineer name	Qualifications / competency
Engineer signature	**Date**
Client / responsible person	**Position**
Client signature	**Date**

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