**Appendix E**

**Designer’s/Installer**

**Statement**

(Include all information as applicable)

I/We confirm *name and/or company* have provided the design, *reference*, for an automatic fire detection and alarm system located at *site name, building name if applicable* address.

The system is an alteration to *an existing system, a new system* and includes equipment of the following type(s): *collective (conventional), addressable, analogue-addressable or any combinations*.

The design criteria is *AS 1670*.*1:2018*, *Deemed to satisfy provisions of NCC, a performance solution* provided by *engineer’s name/company; fire safety engineering report (FSER) report reference*.

1. We certify the equipment used within the system design:

|  |  |
| --- | --- |
| * 1. Conforms with the referenced equipment Standards. | Y/N/NA |
| * 1. Is located in an environment for which it is appropriate. | Y/N/NA |
| * 1. Is compatible with the relevant parts of CIE. | Y/N/NA |

1. We have provided the following design documentation:

|  |  |
| --- | --- |
| * 1. Design drawings showing the system layout (building plans), equipment type, location and designation. | Y/N/NA |
| * 1. Systems interface diagram. | Y/N/NA |
| * 1. Cause and effect statement for each system interface function. | Y/N/NA |
| * 1. Table of all system components, their location, type, unique system designation and descriptor. | Y/N/NA |
| * 1. Table of each system component having a fixed service life, nominating the service life expiry date. | Y/N/NA |
| * 1. Table of any connectable equipment. | Y/N/NA |
| * 1. Manuals for all CIE and system components (as applicable). | Y/N/NA |
| * 1. Aspirating smoke detection design calculations (if applicable). | Y/N/NA |
| * 1. Type of occupant warning equipment. |  |
| * 1. Amplifier rated output; maximum load impedance (Ω) and power (W) (if applicable). |  |
| * 1. Calculated impedance (Ω) and power load (W) of each loudspeaker transmission path (if applicable). |  |
| * 1. Table of each supplementary warning device. | Y/N/NA |
| * 1. Details of fire alarm monitoring requirements. | Y/N/NA |
| * 1. Power supply requirements including — |  |
| 1. Power supply source (mains), nominal voltage. |  |
| 1. Standby power source type, nominal voltage and capacity required. |  |
| 1. System quiescent current (mA), including ASE loads if applicable. |  |
| 1. System alarm current (mA), including ASE and occupant warning system loads. |  |
| 1. Load current of each ancillary circuit. |  |
| 1. Standby time (h). |  |
| 1. Alarm time (min). |  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Zone of protection | Number and type of actuating devices | | | | | | | | | | | |
| Alarm zone† | Number of  actuating devices per  zone‡ | Heat | | | | | Fire | | Flame | | Manual call  point | Other |
| A | B | C | D | E | Smoke | CO | IR | UV |
| 1 |  |  |  |  |  |  |  |  |  |  |  |  |
| 2 |
| 3 |
| 4 |
| 5 |
| 6 |
| 7 |
| 8 |
| 9 |
| 10 |
| 11 |
| 12 |
| 13 |
| 14 |
| 15 |
| 16 |
| 17 |
| 18 |
| 19 |
| 20 |
| Total  Number |  |  |  |  |  |  |  |  |  |  |  |  |

† Add addressable loop number in brackets where applicable.

‡ Indicate with a number in brackets the number of actuating devices in concealed spaces.

Additional Information .......................................................................................................

I/We confirm the design includes any changes required during the installation of the system and that the system meets the design Standard required.

On and on behalf of company:

Name:

Position:

Signature:

Date: