

This form may take you 3 minutes to fill in. You will need the fire alarm / sprinkler layout plans to fill in the form.

Requesting Contractor and Tenant shall comply with the regulations and requirements as stated below. Before commencement of work, the requesting Contractor /Tenant shall call personally at the CAAS Term maintenance Contractor office (with a copy of the approved form) to confirm that the isolation has been carried out. Both parties must sign on Part 7

**Requirements for Isolation and Draining of Sprinkler System**

A "Work Permit to Work" from CAAS Estate Management is to be attached with this application. The request works shall be carried out during normal office hours and supervised by the tenant's Professional Engineer. Any isolation, draining or recharging to the affected sprinkler system must be carried out by our CAAS Term Maintenance Contractor (TMC) and it is chargeable to the tenant. The system must be promptly charged up by **1630hrs** for Mondays to Fridays. Isolating of the system on Weekend and Public Holiday **IS NOT ALLOWED**

A **joint physical site checks** must be carried out with our TMC to ensure that the requested zone is correct and be recorded in "PART 4". Approval will not be given if the joint inspection is not carried out. The applicant should submit this form to AES at least **3 working days** prior to the commencement of isolation or draining of fire sprinkler system for processing. The supervisor-in-charge is required to be present during draining and charging of the requested zone.

The sprinkler works contractor is required to **label the ACV** number on all the new sprinkler pipes that they have installed. The applicant shall ensure that all relevant parties are duly informed of the application status. All fire sprinkler installation works have to be carried out by Qualified Persons.

	<u>Telephone No</u>	<u>Fax No</u>
Fire Station 1 :	6541 2526	6543 0367
Fire Station 2 :	6541 2545	6543 1638
Fire Safety & Standards Unit :	6541 2535 / 2697	6545 7072
Engineering & Real Estate Division :	6541 2193 / 2225	6545 6510
T1 - Link Force Pte Ltd :	6546 2215	6546 5596
T2 - Kim Yew Electrical & Sanitary Pte Ltd :	6546 4091	6546 3034
T3 - CPG-FM	6585 5093	6214 1625
CAC - Indeco Engrg Pte Ltd :	6546 1501	6542 5227

**PART 1: To be filled by Tenant or Contractor for Fire Protection works**

Name: _____	Designation: _____
Company / Organisation: _____	
Contact No: (Tel / HP) _____	Fax: _____ Email: _____
Purpose for isolation / draining & detailed scope of work: _____ _____	
Unit No (Location): _____	Gridline: _____ (Terminal 1, 2, 3, BT or CAC)
Date of isolation / draining: _____ Duration: From _____ hrs to _____ hrs (The isolated zone / fire sprinkler system shall be switched back / charged back to normal not later by 1630 hrs)	
Name of Contractor for the Fire Protection Works engaged by Tenant: _____	
Person in Charge on site: _____	Contact no: _____ Sign: _____

**PART 2: Application Checklist**

<input type="checkbox"/>	Addition and Alteration plans, Fire Sprinkler drawings and EMI work permit are attached.
<input type="checkbox"/>	Regulations and requirements stated is thoroughly read and understood and will be strictly complied with.

**PART 3: Project Officer (CAAS) Certification (CAAS Project Works Only)**

This is to certify that the above isolation or draining is required by us and the information provided is accurate.

Name: \_\_\_\_\_ Contact no: \_\_\_\_\_

Division / Department: \_\_\_\_\_ Designation: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**PART 4: Joint Site Inspection**

Conducted on: \_\_\_\_\_  
Date & Time

FA / SIB Panel: \_\_\_\_\_ Zone(s): \_\_\_\_\_ ACV No: \_\_\_\_\_

Attended by: \_\_\_\_\_  
Term Maintenance Contractor (Name) Contractor for Sprinkler Works (Name)

Signature: \_\_\_\_\_

Term Maintenance Contractor: \*T1 - Link Force Pte Ltd \*CAC - Indeco Engrg Pte Ltd  
\*T2 - Kim Yew Elect & Sanitary Pte Ltd \*Others - Ancillary Building  
(\* Delete where not applicable) \*T3 - CPG - FM Pte Ltd

**PART 5: Approval by AES**

Application Approved  Application Rejected Date: \_\_\_\_\_

Remark : \_\_\_\_\_  
\_\_\_\_\_

Name & Designation: \_\_\_\_\_ Signature: \_\_\_\_\_

**PART 6: CAAS Maintenance Team Acknowledgement**

The above is noted.

Remark : \_\_\_\_\_

Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**PART 7 Isolation /draining will not be allowed unless this section is signed and acknowledge**

Confirmed isolation /draining has been carried out before commencement of work

\_\_\_\_\_  
*Requesting Contractor*

\_\_\_\_\_  
\*T1 - Link Force Pte Ltd  
\*T2 - Kim Yew Elect & Sanitary Pte Ltd  
\*T3 - CPG - FM Pte Ltd  
\*CAC Indeco Engrg Pte Ltd

(\* Delete where not applicable)