

BASELINE DATA – COMMISSIONING	Document No: <input type="text"/>
FIRE DETECTION AND ALARM SYSTEM	Please enter the fire alarm agent document number.
AS1670.4 APPENDIX E - DESIGNERS STATEMENT Rev.20260218	

ⓘ Fill in all applicable fields. Complete on screen, or print and fill in by hand in BLACK PEN using BLOCK LETTERS. If filling by hand, fill circles with a large dot and mark boxes with a tick to indicate your answer.

I/We confirm _____ have provided the design for an Emergency Warning and Intercom System (EWIS) located at:		<input style="width: 100%; height: 100%;" type="text"/> OR; enter the fire alarm company name: <input style="width: 100%; height: 20px;" type="text"/>
Site/building name:	<input style="width: 100%;" type="text"/>	
Address:	<input style="width: 100%;" type="text"/>	
	Postcode:	<input style="width: 100%;" type="text"/>

The system installed is:	Type of system:	The system includes:
An alteration to an existing system		EIS (Warden Intercom Points)
A new system		Visual Alarm Devices

The design criteria is:		
AS 1670.4; standards edition year:	<input style="width: 100%;" type="text"/>	(YYYY)
Deemed to satisfy provisions of NCC		
A performance solution provided by:		
Engineer's Name / Company:	<input style="width: 100%;" type="text"/>	
Fire Safety Engineering Report (FSER) Reference:	<input style="width: 100%;" type="text"/>	

A. We certify the equipment used within the system design:	YES	NO	N/A
1) Is in accordance with the referenced equipment Standards.	YES	NO	N/A
2) Is located in an environment for which it is appropriate.	YES	NO	N/A
3) Is compatible with the relevant parts of CIE.	YES	NO	N/A

B. We have provided the following design documentation:	YES	NO	N/A
1) Design drawings showing the system layout (building plans), equipment type, location and designation.	YES	NO	N/A
2) Systems interface diagram.	YES	NO	N/A
3) Cause and effect statement for each system interface function.	YES	NO	N/A

B. We have provided the following design documentation:	YES	NO	N/A			
4) Table of all system components, their location, type, unique system designation and descriptor.	YES	NO	N/A			
5) Table of each system component having a fixed service life, nominating the service life expiry date.	YES	NO	N/A			
6) Table of any connectable equipment.	YES	NO	N/A			
7) Manuals for all CIE and system components (as applicable).	YES	NO	N/A			
8) Amplifier rated output; maximum load impedance (Ω) and power (W) (if applicable).						
9) Calculated impedance (Ω) and power load (W) of each loudspeaker transmission path (if applicable).						
10) Table of each supplementary warning device.	YES	NO	N/A			
11) Details of fire alarm monitoring requirements.						
12) Power supply requirements including:						
<div style="background-color: #d9e1f2; padding: 5px; border: 1px solid #ccc;"> i This section (12a to g) may be recorded in this form or in the Battery log. </div>						
<div style="background-color: #d9e1f2; padding: 5px; border: 1px solid #ccc;"> Please indicate where this data is recorded: <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%;"></td> <td style="width: 35%; text-align: center;">This form</td> <td style="width: 35%; text-align: center;">Battery Log</td> </tr> </table> </div>					This form	Battery Log
	This form	Battery Log				
a. Power supply source (mains), nominal voltage.	REFER TO BATTERY LOG					
b. Standby power source type, nominal voltage and capacity required.	REFER TO BATTERY LOG					
c. System quiescent current (mA), including ASE loads if applicable.	REFER TO BATTERY LOG					
d. System alarm current (mA), including ASE and occupant warning system loads.	REFER TO BATTERY LOG					
e. Load current of each ancillary circuit.	REFER TO BATTERY LOG					

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12) Power supply requirements including: (continued)	
f. Standby time (h).	REFER TO BATTERY LOG
g. Alarm time (min).	REFER TO BATTERY LOG

Commissioning Contractor (Business)	
I/We confirm the design includes any changes required during the installation of the system and that the system meets the design Standard required.	
Name:	<input style="width: 85%;" type="text"/>
Position:	<input style="width: 85%;" type="text"/>
Signature:	<div style="border-bottom: 1px solid black; width: 80%; display: inline-block;"></div> OR; type to sign:
Date:	<input style="width: 20%;" type="text"/> (dd/mm/yyyy)

Disclaimer

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