

CAN/ULC-S1001-11 Integrated Fire & Life Safety Systems Coordinator Verification

This verification form must be accompanied with the Draft Integrated Testing Plan. The Integrated Testing Coordinator as required by CAN/ULC-S1001-11 shall be a person or Company Certified through ULC. Permit applications will be considered incomplete if the application is not accompanied by the following information:

Project Information				
Building Address (Number & Street name)		Permit Application No:		Date:
Owner Information				
Name of Owner:	Address:		Email:	
			Phone:	
Integrated Testing Coordinator				
Name of Company:	Address:		Email:	
			Phone:	
Coordinator Name:	UL Certification No.:		Coordinator Signature:	
Fire and Life Safety Systems to be Integrated				
Please check (☑) Systems to be integrated as per OBC Div. B 3.2.10.1. or 9.10.18.10.:				
Fire Alarm	<input type="checkbox"/>	Sprinkler	<input type="checkbox"/>	Fixed Fire Suppression
Mass Notification	<input type="checkbox"/>	Standpipe	<input type="checkbox"/>	Electromagnetic Locking Devices
Smoke Control Pressurization	<input type="checkbox"/>	Fire Pumps	<input type="checkbox"/>	Emergency Generator
Smoke Control Exhaust	<input type="checkbox"/>	Water Supplies	<input type="checkbox"/>	Emergency Elevators
Audio/Visual and/or Lighting Control	<input type="checkbox"/>	Notification	<input type="checkbox"/>	Water Supply Control Valve
Cooking Equipment Fire Suppression	<input type="checkbox"/>	Freeze Protection	<input type="checkbox"/>	Hazardous Protection
Smoke Alarms	<input type="checkbox"/>	Dust Collection	<input type="checkbox"/>	Spark Arrest
Fire Shutters	<input type="checkbox"/>	Fire Dampers	<input type="checkbox"/>	Emergency Power
Door hold open Devices	<input type="checkbox"/>	Other:	<input type="checkbox"/>	Other:
Integrated Testing Coordinator Declaration				
I _____ declare that:				
(Print name)				
<ol style="list-style-type: none"> 1. The submitted Integrate Testing Plan is in compliance with OBC Div. B 3.2.10.1, or 9.10.18.10 and CAN/ULC-S1001-11 2. The implementation of the Integrated Testing Plan, including all testing will be as per CAN/ULC-S1001-11 3. The engineer of record for all Fire and Life Safety Systems have been consulted as per the standard and approve the Integrated Testing Plan 4. I confirm that the Building Dept.will be contacted immediately in writing if I become disengaged from the project listed. 				
_____		_____		
Date		Signature of Integrated Testing Coordinator		