

Report of Completion

Name of Hotel / Guesthouse / Club / Karaoke Establishment #	
Address	

I _____ (name of applicant) confirm the completion of **ALL** building safety and fire safety requirements as stated in the Letter of Requirements issued by the Office of the Licensing Authority on _____ and submit herewith the following documents for consideration. I understand that if the required documents are not submitted, this Report will not be accepted as a valid report of completion of works.

Part I - Documents* related to building safety requirements:

	Plan	Doc.	Photo Record
(a) 4 sets of building plans (showing column, windows, furniture & counter layout, A/C units, width of corridor, height and material of raised floor, material and thickness of the partitions, capacity of guesthouse)	<input type="checkbox"/>		
(b) Structural Safety Structural justification prepared by an Authorized Person or Registered Structural Engineer for the effects on the structure of the existing building, due to the proposed change in use and the associated building works, in particular: (i) The balcony or cantilevered structure involved; and/or (ii) Raised floors, partition walls, external walls, storage type water heaters or heavy equipment. Copies of relevant record structural plans and structural calculation should be submitted.	<input type="checkbox"/>	<input type="checkbox"/>	
(c) Fire Resisting Construction (i) Supplier's certificate, test report, invoice/delivery note for all fire resisting walls, doorsets and other fire resisting materials & products such as fire sealant, fire stop, etc. (ii) Photos clearly showing the critical steps, components or construction details before covering up of all fire resisting construction works, such as the walls and duct-works passing through fire resisting walls, etc.		<input type="checkbox"/>	<input type="checkbox"/>

	Plan	Doc.	Photo Record
<p>(d) Means of Escape</p> <p>Catalogue, certificate, invoice/delivery note of electrically operated locking device on the entrance/exit doors</p>		<input type="checkbox"/>	
<p>(e) Sanitary Fitments and Drainage</p> <p>(i) 3 sets of drainage plans (showing sanitary fitments, routing, size and material of waste pipe, soil pipe, vent pipe and A/C condensation pipes, and section of concealed drainage pipes)</p> <p>(ii) Photos taken before covering up of concealed drainage pipes</p> <p>(iii) Invoice/delivery note, catalogue and record photos of the waterproofing materials applied to the structural slab and wall of every toilet or bathroom</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<p>(f) Lighting and Ventilation</p> <p>(i) 3 sets of ventilation plans (showing location of exhaust fans, routing, size and material of ventilation ducts and associated fire dampers).</p> <p>(ii) Catalogue, invoice/delivery note of exhaust fans and calculation of air change rate</p> <p>(iii) Photos taken before covering up of concealed ventilation works</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<p>(g) Documentary proof for Buildings Works</p> <p>(i) Minor Works items: Copy of specified form and supporting documents submitted to the Buildings Department</p> <p>(ii) Building Works approved by Buildings Department (BD): Copy of the approved plans, Form BA14 for the completed works and BD's acknowledgment letter of the completion</p> <p>(iii) An undertaking letter prepared by the relevant Authorized Person for the concerned building works approved by BD are remained intact.</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<p>(h) Unauthorised Building Works</p> <p>Photo showing completion of removal or reinstatement works</p>			<input type="checkbox"/>

Part II - Documents* related to fire safety requirements:

(a)	2 sets of Fire Service Installation (FSI) layout plan	<input type="checkbox"/>
(b)	Valid Certificate of FSI and Equipment (Form FS251)	<input type="checkbox"/>
(c)	FSI /314A and NP /317 from FSD for alteration/addition of FSI and Equipment	<input type="checkbox"/>
(d)	Valid Letter of Compliance from the Ventilation Division of FSD for Ventilation System, annual maintenance certificate and 3 sets of the ventilation plan	<input type="checkbox"/>
(e)	Valid Certificate of Compliance/Completion for Gas Installation/Appliance	<input type="checkbox"/>
(f)	Valid Electrical Installation Work Completion/ Periodic Test Certificate (Form WR1/WR2)	<input type="checkbox"/>
(g)	Invoice/delivery note and test certificate of carpet on means of escape	<input type="checkbox"/>
(h)	Invoice/delivery note and test certificate of PU foam mattresses and upholstered furniture	<input type="checkbox"/>
(i)	Supporting document for the approved fire retardant product applied onto combustible material	<input type="checkbox"/>
(j)	Certificate of Accomplishment issued by FSD (<i>Karaoke Establishment only</i>)	<input type="checkbox"/>

Signature: _____

Company Chop (if applicable): _____

Contact Phone No.: _____

Date: _____

delete as appropriate

* Please tick in the box wherever the item is appropriate.

R01 8/2018 (HAD/LA/1/14)