



NFA
 NATIONAL FIRE AUTHORITY
 FIJI ISLANDS
 Always Ready

**APPLICATION
 FOR
 FIRE PROTECTION SYSTEM (FPS)
 INSPECTION, TESTING & COMMISSIONING.**

FPS COMMISSIONING:

FPS INSPECTION:

FPS TESTING:

1. Monitored Premises

Premises/Building Name: _____

Site Address/Location: _____

Town/Suburb: _____ Municipality or Local Rural Authority: _____

Building(s) Occupied As: _____

No: of Detectors: _____ No: of Manual Call Points: _____ No: of Buildings: _____

Area (m²) of Monitored Premises: _____

2. Applicant Details

Applicant/Company: _____

Contact Name: _____ Email Address: _____

Phone No: _____ Fax No: _____ Mobile No: _____

Postal Address: _____

3. Contact Details – Premises

Name1 _____ Position1: _____

Email Address1: _____ Contact No1: _____

Name2: _____ Position2: _____

Email Address2: _____ Contact No2: _____

4. Fire Protection Agent (FSA)

Company Name: _____ Address: _____

Phone No: _____ Fax No: _____ Mobile No: _____

Contact Person: _____ Phone No: _____ Mobile No: _____

Email Address: _____

Signature of Applicant:

Signature of FPA Contractor:

