**Annex A**

(PNAP APP-13)

## Schedule of Building Materials and Products

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **BD Ref. :** |  |  | **Re :** |  |
|  |  |  |  | (\*Address of development site/Location of alteration and addition works) |

**(A1) Fire Resisting Products with Test or Assessment Report**

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Building **Product** | | ProductName | **Name of Manufacturer and Place of Manufacture (City and Country)** | **Fire Resistance Rating@(minutes)** | | **Compliance with Relevant Building Regulations and Codes of Practice** | Details of Test or Assessment Report | | | | | Remarks/ **Comments** |
| Integrity | Insulation | **Name of Laboratory Accreditation Body** | **Name of Laboratory / Assessing Organisation** | **Report No.** | **Date of Test / Assessment Report** | **Validity Date** |
| a) Fire rated doorset | ^ |  |  |  |  |  |  |  |  |  |  |  |
| b) Lift landing door | ^ |  |  |  |  |  |  |  |  |  |  |  |
| c) Fire rated glazing | ^ |  |  |  |  |  |  |  |  |  |  |  |
| d) Fire-stop or sealing system in wall/floor/curtain wall, etc. | |  |  |  |  |  |  |  |  |  |  |  |
| e) Fire dampers**ф** | |  |  |  |  |  |  |  |  |  |  |  |
| f) Others (e.g. proprietary products, fire shutter, etc.) | |  |  |  |  |  |  |  |  |  |  |  |

@ The performance on stability has to be demonstrated where applicable.

^ Corresponding legend in approved plan should be specified where applicable.

ф Part C of the Certificate of Accepted Building Materials and Products in Appendix A of PNAP APP-13 should be completed by RSC(V).

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date Signature# of authorized person

# In accordance with the registration record

\* Delete whichever is inapplicable

**Annex A**

(PNAP APP-13)

## Schedule of Building Materials and Products

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **BD Ref. :** |  |  | **Re :** |  |
|  |  |  |  | (\*Address of development site/Location of alteration and addition works) |

**(A2) Fire Resisting Products with Certificate of Conformity (CoC)**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Building **Product** | | ProductName | **Name of Manufacturer and Place of Manufacture (City and Country)** | **Fire Resistance Rating @(minutes)** | | **Compliance with Relevant Building Regulations and Codes of Practice** | Details of CoC | | | | | CoC **Scheme** | **Remarks/**  **Comments** |
| Integrity | Insulation | **Name of**  **Accreditation Body** | **Name of**  **Certification Body** | **CoC No.** | **Date of CoC** | **Validity**  **Date** |
| a) Fire rated doorset | ^ |  |  |  |  |  |  |  |  |  |  |  |  |
| b) Non-loadbearing fire partition | ^ |  |  |  |  |  |  |  |  |  |  |  |  |

@ The performance on stability has to be demonstrated where applicable.

^ Corresponding legend in approved plan should be specified where applicable.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date Signature# of authorized person

# In accordance with the registration record

\* Delete whichever is inapplicable

**Annex A**

(PNAP APP-13)

**Schedule of Building Materials and Products**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **BD Ref. :** |  |  | **Re :** |  |
|  |  |  |  | (\*Address of development site/Location of alteration and addition works) |

**(B) Other Building Materials and Products**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Building **Product** | ProductName | **Name of Manufacturer and Place of Manufacture (City and Country)** | **Compliance with Relevant Building Regulations and Codes of Practice** | Details of Test or Assessment Report | | | | | Remarks/ **Comments** |
| **Name of Laboratory Accreditation Body** | **Name of Laboratory / Assessing Organisation** | **Report No.** | **Date of Test / Assessment Report** | **Validity Date** |
| a) Glazing barrier |  |  |  |  |  |  |  |  |  |
| 1. Cast iron pipes and fittings |  |  |  |  |  |  |  |  |  |
| c) Others |  |  |  |  |  |  |  |  |  |

I confirm that the above mentioned building products have been tested or assessed as stated and hereby certify that the application and performance of these products comply with the relevant Building Regulations.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date Signature# of authorized person

# In accordance with the registration record

\* Delete whichever is inapplicable

(Rev. 9/2021)