

To : Planning Department
Tuen Mun and Yuen Long West District Planning Office
Attn: Mr. Yeung (TEL: 2158 6296)

Date: 26 Nov 2024

TPB Ref : TPB/A/YL-TYST/1292

Dear Sir/Madam,

**Proposed Temporary Open Storage of Construction Material with ancillary
office for a period of 3 years at Lot 1195 in D.D 119, Yuen Long, N.T**

To address FSD comments, the applicant has attached a full set of valid FS251 certificate covering all the FSIs implemented on the application site for your consideration.

Yours Faithfully,



Sun Cheong Management Consultant Limited

FIRE SERVICE (INSTALLATIONS AND EQUIPMENT) REGULATIONS

消防 (裝置及設備) 規例

(Regulation 9(1))

(第九條 (1) 款)

CERTIFICATE OF FIRE SERVICE INSTALLATION AND EQUIPMENT

消防裝置及設備證書

A 9460813

FSD Ref.: _____
消防處編號

Name of Client :
顧客姓名

Name of Building :
樓宇名稱

Street No./Town Lot : Street/Road/Estate Name :
門牌號數/市地段 街道/屋苑名稱

Block : District : Area : HK K NT
座 分區 地區 香港 九龍 新界

Type of Building 樓宇類型 : Industrial 工業 Commercial 商業 Domestic 住宅 Composite 綜合 Licensed premises 持牌處所 Institutional 社團

Part 1 Annual Inspection ONLY
第一部 只適用於年檢事項

In accordance with Regulation 8(b) of Fire Service (Installations and Equipment) Regulations, the owner of any fire service installation or equipment which is installed in any premises shall have such fire service installation or equipment inspected by a registered contractor at least once in every 12 months. 根據消防(裝置及設備)規例第八條(b)款，擁有裝置在任何處所內的任何消防裝置或設備的人，須每12個月由一名註冊承辦商檢查該等消防裝置或設備至少一次。

Code 編碼 (1-35)	Type of FSI 裝置類型	Location(s) 位置	Comment on Condition 狀況評述	Completion Date 完成日期(DD/MM/YY)	Next Due Date 下次到期日(DD/MM/YY)
			Nil		

Part 2 第二部 Installation / Modification / Repair / Inspection work 裝置/改裝/修理/檢查工作

Code 編碼 (1-35)	Type of FSI 裝置類型	Location(s) 位置	Nature of Work Carried out 完成之工作內容	Comment on Condition 狀況評述	Completion Date 完成日期(DD/MM/YY)
24	5x5 kg CO2 gas F.E.	Lot area	new supply	Conforms with FSD requirements	26/11/24

Part 3 第三部 Defects 損壞事項

Code 編碼 (1-35)	Type of FSI 裝置類型	Location(s) 位置	Outstanding Defects 未修缺點	Comment on Defects 缺點評述
			Nil	

I/We hereby certify that the above installations/equipment have been tested and found to be in efficient working order in accordance with the Codes of Practice for Minimum Fire Service Installations and Equipment and Inspection, Testing and Maintenance of Installations and Equipment published from time to time by the Director of Fire Services. Defects are listed in Part 3.

本人藉此證明以上之消防裝置及設備經試驗，證明性能良好，符合消防處處長不時公佈的最低限度之消防裝置及設備守則與裝置及設備之檢查測試及保養守則的規格，損壞事項列於第三部。

如證書涉及年檢事項，應張貼於大廈或處所當眼處以供消防處人員查核

This certificate should be displayed at prominent location of the building or premises for FSD's inspection if any annual maintenance work is involved.

Authorized Signature :
受權人簽署

Name :
姓名

FSD/RC No. :
消防處註冊號碼

Company Name :
公司名稱

Telephone :
聯絡電話

Date :
日期

For FSD use only:

Inspected

Key-in

Verified

FIRE SERVICE (INSTALLATIONS AND EQUIPMENT) REGULATIONS

消防(裝置及設備)規例
(Regulation 9(1))
(第九條(1)款)

Serial Number

10396 002826

FSD Ref.:
消防處編號

CERTIFICATE OF FIRE SERVICE INSTALLATION AND EQUIPMENT

消防裝置及設備證書

Name of Client 顧客姓名

KENNEX SCAFFOLDING SYSTEM CO. LTD.

Address 地址

LOT 1195, No. IN DD 119 TONG YAN SAN TSUEN, Yuen Long, NT

Type of Building 樓宇類型: Industrial 工業 Commercial 商業 Domestic 住宅 Composite 綜合 Licensed premises 持牌處所 Institutional 社團

Part 1 Annual Maintenance ONLY

第一部 只適用於年檢事項

In accordance with Regulation 8(b) of the Fire Service (Installations and Equipment) Regulations, the owner of any fire service installation or equipment which is installed in any premises shall have such fire service installation or equipment inspected by a registered contractor at least once in every 12 months. 根據消防(裝置及設備)規例第八條(b)款, 擁有裝置在任何處所內的任何消防裝置或設備的人, 須每12個月由一名註冊承辦商檢查該等消防裝置或設備至少一次。

Code 編碼 (1-35)	Type of FSI 裝置類型	Location(s)位置	Comment on Condition 狀況評述	Completion Date 完成日期 (DD/MM/YYYY)	Next Due Date 下次到期日 (DD/MM/YYYY)
11	EMERGENCY LIGHTING X 2NOS.	G/F, OFFICE	CONFORMS WITH FSD REQUIREMENTS	26/11/2024	25/11/2025
12	EXIT SIGN X 1NOS.	G/F, OFFICE	CONFORMS WITH FSD REQUIREMENTS	26/11/2024	25/11/2025

Part 2 第二部 Installation / Modification / Repair / Inspection works 裝置/改裝/修理/檢查工作

Code 編碼 (1-35)	Type of FSI 裝置類型	Location(s)位置	Nature of Work Carried out 完成之工作內容	Comment on Condition 狀況評述	Completion Date 完成日期 (DD/MM/YYYY)

Part 3 第三部 Defects 損壞事項

Code 編碼 (1-35)	Type of FSI 裝置類型	Location(s)位置	Outstanding Defects 未修缺點	Comment on Defects 缺點評述

Remark 備註

I/We hereby certify that the above installations/equipment have been tested and found to be in efficient working order in accordance with the Codes of Practice for Minimum Fire Service Installations and Equipment and Inspection, Testing and Maintenance of Installations and Equipment published from time to time by the Director of Fire Services. Defects are listed in Part 3.

本人藉此證明以上之消防裝置及設備經試驗, 證明性能良好, 符合消防處處長不時公佈的最低限度之消防裝置及設備守則與裝置及設備之檢查測試及保養守則的規格, 損壞事項列於第三部。

如證書涉及年檢事項, 應張貼於大廈或處所當眼處以供消防處人員查核

This certificate should be displayed at prominent location of the building or premises for FSD's inspection if any annual maintenance work is involved.



Authorized

Signature:

Name: CHUI KA TUNG

FSD/RC No.:

消防處註冊號碼

RC1 / 0396 RC2 / 0432

Company Name:

公司名稱

On Sing Engineering Company

Telephone:

聯絡電話

Date:

日期

26/11/2024

For FSD use only

Inspected

Key-in

Verified



Serial Number

10396002826

Name of Client 顧客姓名

KENNEX SCAFFOLDING SYSTEM CO. LTD.

