



BERMUDA

FIRE SAFETY (PRESCRIBED FORMS) REGULATIONS 2017

BR 120 / 2017

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The Minister responsible for Fire Services, in exercise of the power conferred by section 50 of the Fire Safety Act 2014, makes the following Regulations:

Citation

1 These Regulations may be cited as the Fire Safety (Prescribed Forms) Regulations 2017.

Interpretation

2 In these Regulations—

“Act” means the Fire Safety Act 2014;

“Form” means the form prescribed in the Schedule.

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Form of application

- 3 (1) An application for—
- (a) a fire certificate pursuant to section 10;
 - (b) the renewal of a fire certificate pursuant to section 16; or
 - (c) the transfer of a fire certificate pursuant to section 17,

of the Act shall be in Form 1.

(2) Any application made under this regulation shall be accompanied by a request for a fire risk survey submitted in accordance with regulation 4.

(3) An applicant for a fire certificate under paragraph (1)(a) shall submit such relevant plans as the Chief Fire Officer may require within such time as the Chief Fire Officer may specify.

Form of request for fire risk survey

4 (1) A request to have premises surveyed for risk of fire, pursuant to section 22 of the Act, shall be in Form 2.

(2) A request for a fire risk survey made in respect of an application under regulation 3 shall be made not later than 30 days after making such application.

Form of fire certificate

5 Pursuant to section 14 of the Act, a fire certificate shall be in Form 3.

Commencement

6 These Regulations shall come into operation on the date that the Act comes into operation.

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Address: Post Code:
Phone: (H) (W) Cell: Email:
Agent's name:
Address: Post Code:
Phone: Email:

Building Owner (if different from Applicant):
Address: Post Code:
Phone: (H) (W) Cell: Email:

DOCUMENT SUBMISSION (for new construction only)

Enclosed are 4 sets of bound construction documents, each consisting of
pages of drawings numbered and dated:

(Please ensure that all drawings submitted for permit are marked "for permit" and are stamped and signed by the local registered engineers where applicable.)

Pursuant to the Fire Safety Act 2014, I hereby apply for a Fire Certificate for the project described. I request that my certificate, if granted, list any additional requirements which are not shown on my documents and I hereby consent to any such requirements, and agree to fully comply. I further agree that I will perform no work on the property not specifically described in the application, and will grant officials the right to enter onto the property to inspect the premises.

Applicant's Signature: Date:

*If applicant is not the owner of the building, this application must be accompanied by a letter from the owner stating that he agrees to the proposals being carried out.

OFFICIAL USE ONLY

Application received on: Application received by:
Receipt issued:
Application approved by:

Certificate of Completion and Occupancy issued by: Date:

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Conditions (All of the conditions overleaf plus the following):

Date of issue of Fire Certificate:

Signature of recipient:

FIRE CERTIFICATE APPLICATION - REVERSE

CONDITIONS

EXIT SIGNS

Exit signs with not less than 6" green block letters and principal strokes 3/4" wide shall be provided over all exits.

FIRE ALARM SYSTEM

The fire alarm system shall be installed in accordance with:

- (a) NFPA 70 - National Electrical Code; and
- (b) NFPA 72 - National Fire Alarm and Signalling Code.

SPRINKLER SYSTEM AND FIRE PUMP

The Sprinkler System and Fire pump installation shall be in accordance with:

- (a) NFPA 13 - Installation of Sprinkler Systems;
- (b) NFPA 13R - Standard for the Installation of Sprinkler Systems in Low-Rise Residential Occupancies;
- (c) NFPA 13D - Standard for the Installation of Sprinkler Systems in One- and Two-Family Dwellings;
- (d) NFPA 14 - Installation of Standpipes and Hose Systems;
- (e) NFPA 20 - Installation of Stationary Pumps; and
- (f) NFPA 25 - Inspection, Testing and Maintenance of Water Based Fire Protection Systems.

All engineered sprinkler systems shall be stamped by a local Registered Engineer.

ELECTRICAL WIRING INSTALLATION

All electrical wiring and equipment installed shall be in accordance with NFPA 70 - National Electrical Code.

HEATING, VENTILATION AND AIR CONDITIONING

The air conditioning, ventilation or heating ducts etc. shall be installed in accordance with:

- (a) NFPA 90A - Standard for the Installation of Air-Conditioning and Ventilating Systems; and

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- (b) NFPA 90B – Standard for the Installation of Warm Air Heating and Air-Conditioning Systems.

COMMERCIAL COOKING EQUIPMENT

The design, installation, operation, inspection, and maintenance of all public and private cooking operations shall be in accordance with NFPA 96 – Standard for Ventilation Control and Fire Protection of Commercial Cooking Operations.

LPG INSTALLATION

The LPG installations and cylinders shall be in accordance with NFPA 58 – Liquid Petroleum Gas Code.

FIXED FIRE SUPPRESSION SYSTEM

The installation, maintenance and testing of Fixed Fire Suppression systems provided shall be in accordance with:

- (a) NFPA 12 - Standard on Carbon Dioxide Extinguishing Systems;
- (b) NFPA 12A - Standard on Halon 1301 Fire Extinguishing Systems;
- (c) NFPA 17 – Standard for Dry Chemical Extinguishing Systems;
- (d) NFPA 17A – Standard for Wet Chemical Extinguishing Systems; and
- (e) NFPA 2001 - Standard on Clean Agent Fire Extinguishing Systems.

Any alterations or amendments to the submitted drawings will render any approval granted invalid.

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FORM 2

(regulation 4)

FIRE RISK SURVEY ASSESSMENT

Name of Premises:

Address of Premises:

Parish:

Post Code:

Mailing Address:

PRIMARY CONTACT

Name:

Phone:

Cell:

Email:

Role:

OWNER OR PERSON RESPONSIBLE FOR PREMISES

Name:

Phone:

Cell:

Email:

Fire Safety Plan for the Building:

Yes

No

Last Fire Drill (D/M/Y):

BUILDING INFORMATION

Floor Size (sq ft):

Total Height:

Building Status:

Occupied

Under renovation

Pending permit

Vacant (secured)

Vacant (unsecured)

Number of Storeys:

Above Grade (street level):

Below Grade:

Construction Type:

Concrete/Steel

Concrete/Wood

Concrete (Prefab)

Steel Frame

Bermuda Stone

Year Built:

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Occupancy Type: Mercantile Residential Care Residential
 Business Assembly Day Care
 Education Detention Storage

Occupant Load:

Number of Units/Tenants:

BUSINESSES OPERATING ON THE PREMISES

Name:

Floor Level:

Unit Number: Size (sq ft):

Floor Level:

Unit Number: Size (sq ft):

Floor Level:

Unit Number: Size (sq ft):

FIRE ALARM SYSTEM

Fire Alarm Type:

- Conventional
- Addressable
- N/A

Make:

Model:

Type of Detection:

- Smoke (Ion)
- Smoke (Photo)
- Heat (ROR)
- Heat (Fixed)
- Combo (Heat/Smoke)
- Smoke Alarm (Battery)
- Smoke Alarm (Hard Wired)
- Other

Type of Signals:

- N/A
- Multiple Types
- Bells
- Horn/Strobes
- Strobe Only
- Speaker Strobe

Monitored:(Y/N)

(if yes) Monitoring Company:

Location of Main Fire Alarm Panel:

Location of Remote Annunciator:

No. of Zones:

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- Type of Sprinkler: Standard Response Early Suppression/
Fast Response Extended Coverage
- Quick Response Control Mode/
Specific Application
- Commodity Classification: Ordinary Hazard (group 1) Extra Hazard (group 1) Light Hazard
- Ordinary Hazard (group 2) Extra Hazard (group 2)
- Type of Standpipe System: Automatic (Wet) Manual (Wet) Standpipe I
 Automatic (Dry) Manual (Dry) Class: II
 III

Spare Sprinkler Cabinet Location:

- Other Considerations: High Piled Storage Encapsulation
- Rack Storage Flammable/ Combustible
- Solid Shelving Hazardous Materials

Location of Fire Department Connections:

WATER SUPPLIES

- Type of Water Supply: Above Ground Tank Below Ground Tank Other
- City Water Bermuda Land Management Corporation

Other:

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Location of Water Tank(s):

Total Capacity of Water Tanks (US Gallons):

Are the Water Tanks Accessible? Yes No

Does Fire Suppression System have a dedicated Water Supply? Yes No

HAZARDOUS MATERIALS/ FLAMMABLE LIQUIDS/ FLAMMABLE GASES

Are there any LPG Cylinders on the property? Yes No

Size of Cylinders:

Number of Cylinders:

Location of Cylinders:

Service Provider:

Other:

Are there flammable liquids stored on site? Yes No

Type:

Other:

No. of Tanks:

Capacity of Tanks (US Gallons):

Location of Tanks:

What Hazardous Materials are stored on site?

Location of Storage:

Capacity of Storage (US Gallons):

SUBMITTED BY

Name:

Signature:

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Role: Owner or person responsible for premises Agent

Date:

[Form 2 amended by 2024 : 22 s. 11 effective 1 September 2024]

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FORM 3

(regulation 5)

FIRE CERTIFICATE

Name of Premises:

Certificate Number:

Name of Owner or Person Responsible for the Premises:

*Business operating on the Premises:

Use of Premises:

Building Address:

Mailing Address:

This is to Certify that the above named premises have been inspected and found to comply with the minimum safety provisions under the Fire Safety Act 2014

Special Conditions:

Expires:

Date:

Signed:

Chief Fire Officer

*Additional businesses operating on the premises can be found overleaf

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Made this 11th day of December 2017

Minister of National Security

[Amended by:
2024 : 22]