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| --- | --- |
| **BUILDING** | |
| **Compliance Schedule Number** |  |
| **Name / Address & Location**  (building name, level/unit number, street address and location within site/block): |  |
| **Compliance Schedule Anniversary Date** |  |
| **Location where compliance schedule is kept** |  |
| **OWNER** | |
| **Name** |  |
| **Contact Number** |  |
| **Mailing Address** |  |
| **SPECIFIED SYSTEMS** | |
| ***<egSS1 Automatic systems for fire suppression>*** | |
| **IQP DECLARATION** | |
| This report has been issued in lieu of a Form 12A.  **Missed procedures**  A Form 12A for the above specified system was unable to be issued due to restrictions in force under the Covid-19 Alert Levels preventing the following scheduled inspection, maintenance and reporting procedures of the compliance schedule from being carried out:   |  |  | | --- | --- | | **Procedure** | **Reason** | | *e.g. March – Weekly Diesel Test* | *e.g. It was not an essential service or it was not safe for the tenants or our staff to undertake the work* | | *e.g. April - Annual Sprinkler Diesel Survey* | *e.g. Ditto* | | *e.g. April - 4 Yearly Valve Overhaul* | *e.g. Ditto* |   **Performance of the system**  As at **INSERT DATE OF LAST INSPECTION** The system(s) were performing to the standards stated on the compliance schedule.  As at **INSERT TODAYS DATE** it is unknown if the above specified system(s) performance standards stated in the compliance schedule have been met **BECAUSE***e.g. we could not gain access to undertake inspections*  To clarify the systems performance we will;  **LIST ACTIONS**  *e.g undertake testing of the fire alarm system before the building is* ***occupied*** *and provide a IMR to QLDC.*  Name of Independent Qualified Person: *[insert name]*  IQP Number: *[insert number]*  Date: *[insert date]* | |