BAFE SP203-1 CERTIFICATION SCHEME
SITE SELECTION

Please complete this form with 5 fire detection and fire alarm systems that your company has completed over the previous 12 month period or are currently in progress. This information will be reviewed by our assessor to decide which installations we would like to visit for your assessment. The form can be copied as many times as you need.

Note: It is the contractors responsibility to bring all relevant documents, tools and access equipment to the selected site.

Company Name:

Scope applying for:
- Design
- Installation
- Commissioning
- Maintenance

Site 1  Project Number/Name/Address

Start Date

Finish Date

Elements carried out by the firm applying:
- Design
- Installation
- Set to work
- Commissioning
- Maintenance
- Low Voltage (230V) Work i.e. Main supply or interfaces

Purpose of Building or Building Description

System Type/Grade/Category/Description

Has a Fire Risk Assessment been completed? YES NO

Is the Fire Risk Assessment available for the Assessor to view? YES NO

Number of Point Detectors

Number of Repeater Panels

Number of Control Panels

Number of Zones

Can we dismantle / carry out:
- Sounder checks YES NO
- Short-Circuit checks YES NO
- Open-Circuit checks YES NO

Are there any special PPE required for the installation visit other than a High Visibility Vest, Safety Helmet, Safety Shoes/Boots? If so please detail:

Site selected
### Site 2 Project Number/Name/Address

<table>
<thead>
<tr>
<th>Start Date</th>
<th>Finish Date</th>
</tr>
</thead>
</table>

**Elements carried out by the firm applying:**

<table>
<thead>
<tr>
<th>Design</th>
<th>Installation</th>
<th>Set to work</th>
<th>Commissioning</th>
<th>Maintenance</th>
<th>Low Voltage (230V) Work i.e. Main supply or interfaces</th>
</tr>
</thead>
</table>

**Purpose of Building or Building Description**

**System Type/Grade/Category/Description**

**Has a Fire Risk Assessment been completed?**

- YES  
- NO

**Is the Fire Risk Assessment available for the Assessor to view?**

- YES  
- NO

**Can we dismantle / carry out:**

<table>
<thead>
<tr>
<th>Sounder checks</th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Short-Circuit checks</td>
<td>YES</td>
<td>NO</td>
</tr>
<tr>
<td>Open-Circuit checks</td>
<td>YES</td>
<td>NO</td>
</tr>
</tbody>
</table>

**Number of Point Detectors**

**Number of Repeater Panels**

**Number of Control Panels**

**Number of Zones**

Are there any special PPE required for the installation visit other than a High Visibility Vest, Safety Helmet, Safety Shoes/Boots? If so please detail:

```
```

Site selected

### Site 3 Project Number/Name/Address

<table>
<thead>
<tr>
<th>Start Date</th>
<th>Finish Date</th>
</tr>
</thead>
</table>

**Elements carried out by the firm applying:**

<table>
<thead>
<tr>
<th>Design</th>
<th>Installation</th>
<th>Set to work</th>
<th>Commissioning</th>
<th>Maintenance</th>
<th>Low Voltage (230V) Work i.e. Main supply or interfaces</th>
</tr>
</thead>
</table>

**Purpose of Building or Building Description**

**System Type/Grade/Category/Description**

**Has a Fire Risk Assessment been completed?**

- YES  
- NO

**Is the Fire Risk Assessment available for the Assessor to view?**

- YES  
- NO

**Can we dismantle / carry out:**

<table>
<thead>
<tr>
<th>Sounder checks</th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Short-Circuit checks</td>
<td>YES</td>
<td>NO</td>
</tr>
<tr>
<td>Open-Circuit checks</td>
<td>YES</td>
<td>NO</td>
</tr>
</tbody>
</table>

**Number of Point Detectors**

**Number of Repeater Panels**

**Number of Control Panels**

**Number of Zones**

Are there any special PPE required for the installation visit other than a High Visibility Vest, Safety Helmet, Safety Shoes/Boots? If so please detail:

```
```

Site selected
### Site 4  Project Number/Name/Address

<table>
<thead>
<tr>
<th>Start Date</th>
<th>Finish Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Elements carried out by the firm applying:

- Design [ ]
- Installation [ ]
- Set to work [ ]
- Commissioning [ ]
- Maintenance [ ]
- Low Voltage (230V) Work i.e. Main supply or interfaces [ ]

**Purpose of Building or Building Description**

**System Type/Grade/Category/Description**

**Has a Fire Risk Assessment been completed?**

- YES [ ]
- NO [ ]

**Is the Fire Risk Assessment available for the Assessor to view?**

- YES [ ]
- NO [ ]

#### Site selected

**Are there any special PPE required for the installation visit other than a High Visibility Vest, Safety Helmet, Safety Shoes/Boots?**

If so please detail:

**Can we dismantle / carry out:**

- Sounder checks [YES] [NO]
- Short-Circuit checks [YES] [NO]
- Open-Circuit checks [YES] [NO]

**Number of Point Detectors**

**Number of Repeater Panels**

**Number of Control Panels**

**Number of Zones**

**Has a Fire Risk Assessment been completed?**

- YES [ ]
- NO [ ]

**Is the Fire Risk Assessment available for the Assessor to view?**

- YES [ ]
- NO [ ]

**Site selected**

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### Site 5  Project Number/Name/Address

<table>
<thead>
<tr>
<th>Start Date</th>
<th>Finish Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Elements carried out by the firm applying:

- Design [ ]
- Installation [ ]
- Set to work [ ]
- Commissioning [ ]
- Maintenance [ ]
- Low Voltage (230V) Work i.e. Main supply or interfaces [ ]

**Purpose of Building or Building Description**

**System Type/Grade/Category/Description**

**Has a Fire Risk Assessment been completed?**

- YES [ ]
- NO [ ]

**Is the Fire Risk Assessment available for the Assessor to view?**

- YES [ ]
- NO [ ]

#### Site selected

**Are there any special PPE required for the installation visit other than a High Visibility Vest, Safety Helmet, Safety Shoes/Boots?**

If so please detail:

**Can we dismantle / carry out:**

- Sounder checks [YES] [NO]
- Short-Circuit checks [YES] [NO]
- Open-Circuit checks [YES] [NO]

**Number of Point Detectors**

**Number of Repeater Panels**

**Number of Control Panels**

**Number of Zones**

**Has a Fire Risk Assessment been completed?**

- YES [ ]
- NO [ ]

**Is the Fire Risk Assessment available for the Assessor to view?**

- YES [ ]
- NO [ ]

**Site selected**

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**DECLARATION**

On behalf of the business, I confirm that all information provided on the site selection form is true and accurate.

**Signature:**

**Date:**

**Name (Printed):**

**Position in the business:**