



VANCOUVER FIRE MARSHAL

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360-487-7260



Separate form required to be filled out for each separate system
(Even if more than one system is approved with the review and acceptance testing)

Kitchen Hood Suppression System Installation Certification

Permit #: FRI-__ __ __ __ __

City witnessed test date: _____ Fire Inspectors Name: _____

Installed at (Business Name and Address):

Describe location (if more than one system exists at the business):

Type of System: _____

Number of heads installed: ____ Flow points used: ____ of ____ available.

List cooking equipment protected from left to right:

Location of approved plans on premises:

System installation & maintenance manual and copy of this certification provide to:

(Name of responsible party): _____

Certification of System Installation: Complete this section after system is installed, but prior to conducting the witnessed operational acceptance tests.

This system installation was inspected and was found to be in accordance with the standards and requirements of (**check all that apply**):

- NFPA 12 Carbon dioxide systems
- NFPA 13 Automatic fire sprinkler systems
- NFPA 96 Ventilation Control & Fire Protection of Comm. Cooking
- NFPA 16 Foam-water systems.
- NFPA 17 Dry chemical systems.
- NFPA 17A Wet chemical systems.
- IFC 904 Fire-extinguishing systems.
- Manufacture's Instructions.
- UL300
- Other _____

Installer's company name: _____

Installer's printed name: _____ Telephone (____) _____

Installer's signature: _____ Date: _____

Installer's Vancouver Endorsement number: _____