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| **UNCOMPLETED PERMANENT BUILDING** |
| **CERTIFICATION FOR WORKERS QUARTERS IN BUILDINGS UNDER CONSTRUCTION**  **CERTIFICATION OF SUPERVISION FOR WORKERS QUARTERS FIRE SAFETY PROVISION** |

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| --- | --- |
| WORKPLACE NO |  |
| MK / TS |  |
| LOT / PLOT |  |
| ADDRESS ROAD |  |

|  |  |  |
| --- | --- | --- |
| NAME OF QP1 |  | |
| PE REGISTRATION NO2 |  | |
| NRIC / FIN  (last 4 characters only) |  | |
| DATE |  | |
| I am the above name QP and I certify that the floors immediately above and on which the workers’ quarters at the above-mentioned construction site are to be located, and their supporting columns, have been constructed in accordance with the approved structural plans of the building and is safe for use as workers’ quarters according to the Building Control Act, Chapter 29, Building Control (Use of Buildings Under Construction as Workers’ Quarters Regulations 2008).  I also certify that all fire safety works have been inspected and complied with all fire safety requirements stipulatedunder the Fire Safety Requirements for Temporary Workers’ Quarters in Uncompleted Permanent Buildings on Construction Sites, FSR 2:2008. | | |
| **Signature of Qualified Person (QP)** | | **Name & Address of Professional Firm** |

A Qualified Person (QP) may refer to a Registered Architect, or Professional Engineer (Civil/Structural).

2 Applicable for Professional Engineer (PE) Only.