

Smoke Control and/or Damper Deficiencies Report

When deficiencies are not corrected within ninety (90) days of the certification inspection or testing, the Contractor must submit this deficiency report to the Department of Licenses and Inspections.

Property Information							
Provide the address of the property where the deficiency is being reported.	1	Address					-
Building Owner/Owner's Agent Information			Name				_
Provide the contact information for the building owner/owner's agent.	2		Address				-
			<u>Email</u>			Phone	
Contractor and Inspector Information Provide the names of the			Contractor Name				
contractor and inspector.	3		Inspector Name				_
'Date of inspection' refers to the completion date noted on the Smoke Control or Damper Certification Forms.			Date of Inspection				
Deficiency Information		(a) [Damper Deficiency	v Details			
(a) Provide any Damper deficiency information.		[Damper Type (FD/FSD/SD)	Location		Deficiency Reported	
(b) Provide any Smoke Control deficiency information.							
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		(b) \$	Smoke Control De	eficiency Details			
			Smoke Control Component	Location		Deficiency Reported	
Declaration & Signature							
The Deficiency Report must be preser	nted by the	e Conti	ractor to the building owi	ner/agent upon complet	ion.		
Signature of Inspector					Date		
Signature of Building Owner/Owner's A	gent				Date		