



SOUND LEVEL TEST QCDD FORM INSPECTION & TESTING

Date	Application No.
Project / Establishment Name	
Building Permit No. / Commercial Register No.	PIN *

Building No	رقم المبنى		
Area	منطقة	Street	شارع
Unit No	رقم الوحدة		

TESTING

Location	Ambient Sound Level	Alarm Mode Sound Level		Voice Audibility/ Clearness of Sound from Speakers
	(dB)	(dB)	Passed	Passed
Floor Level	Common Areas (e.g. lobby, corridor)			
	Farthest room/area			
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- Note: Public Mode** - Sound Level is at least 15 dB above the average ambient sound level.
Private Mode - Sound Level is at least 10 dB above the average ambient sound level.
Sleeping Area - Sound Level is at least 15 dB above the average ambient sound level or a sound level of at least 75 dB.
Reference - Approved QCDD Drawing and Latest NFPA 72.

Test Equipment

Instrument/s Used		Calibration Date	
Serial No		Calibration Certificate No.	

Declaration and Acknowledgement

1.We hereby declare that the information filled-up on this form is true and correct and that all system and equipment are installed/operational in accordance with approved QCDD drawings, NFPA, QCDD codes & standards, and Maintenance Manual and/or manufacturer recommendation.

2.The building is ready for QCDD inspection/assessment and successfully completed all necessary Inspection, Testing and Maintenance Work in accordance with NFPA, QCDD codes & standards.

QCDD Approved Engineer
(Printed Name with Signature, Stamp & Date)

ID No. & Mobile No.

Facility Manager / Owner's Representative / Consultant *
(Printed Name with Signature, Stamp & Date)

UPDA No.* / ID No. & Mobile No.

Note: *Required/mandatory for Building Completion