

APPENDIX 10

Updated Certificates of Fire Service Installations and Equipment (FS251)

消防處檔號: **N7N6-86119**
FSD Ref.

消防(裝置及設備)規例(第九條(1)款)消防裝置及設備證書
FIRE SERVICE (INSTALLATIONS AND EQUIPMENT) REGULATIONS
(REGULATION 9(1))
CERTIFICATE OF FIRE SERVICE INSTALLATION AND EQUIPMENT

序號 Serial Number
A 9950021

顧客姓名
Name of Client

YEUNG KAI FONG

樓宇地址
Address of Building

座
Block

樓宇名稱
Name of Building

屋邨/鄉村名稱
Name of Estate/Village

MAI PO

門牌號數及街道/地段
Number and Name of Street/Lot

6A PALM SPRINGS BOULEVARI

地區
District

YUEN LONG

☐ 香港
HK

☐ 九龍
K

☒ 新界
NT

持牌/註冊處所類型
(如適用)
Type of Licensed/
Registered Premises
(If applicable)

☐ 簡樸房 Basic Housing Unit

☐ 危險品倉 Dangerous Goods Store

☐ 食物業處所 Food Premises

☐ 校舍 School Premises

請在合適空格內填
上“號”
Please tick the
appropriate “box”

☒ 幼兒中心 Child Care Centre

☐ 酒店 Hotel

☐ 會社 Club

☐ 木料倉 Timber Store

☐ 電器廢物處置 E-waste Disposal

☐ 改建校舍 Non-designed School

☐ 私營骨灰安置所 Private Columbaria

☐ 賓館 Guesthouse

☐ 床位寓所 Bedspace Apartment

☐ 危險品車輛 Dangerous Good Vehicle

☐ 公眾娛樂場所 Place of Public Entertainment

☐ 安老院舍 Residential Care Home for the Elderly

☐ 殘疾院舍 Residential Care Home for Persons with Disabilities

☐ 卡拉 OK 場所 Karaoke Establishment

第一部 只適用於年檢事項
Part 1 Annual Inspection ONLY

根據《消防(裝置及設備)規例》第八條(1)(b)款，擁有裝置在任何處所內的任何消防裝置或設備的人，須每12個月由一名註冊承辦商檢查該等消防裝置或設備至少一次。
In accordance with Regulation 8(1)(b) of Fire Service (Installations and Equipment) Regulations, the owner of any fire service installation or equipment which is installed in any premises shall have such fire service installation or equipment inspected by a registered contractor at least once in every 12 months.

編碼 Code (1-35)	裝置類型 Type of FSI	位置 Location(s)	狀況評述 Comment on Condition	完成日期 Completion Date (DD/MM/YYYY)	到期日 Due Date (DD/MM/YYYY)
25	2 x SAND BUCKET	G/F	Conforms with FSD requirements	5-6-2026	4-6-2027
"	2 x FIRE BLANKET	"	Conforms with FSD requirements	5-6-2026	4-6-2027

第二部 Part 2 裝置/保養/修理/檢查工作 Installation/Maintenance/Repair/Inspection work

編碼 Code (1-35)	裝置類型 Type of FSI	位置 Location(s)	完成之工作內容 Nature of Work Carried out	狀況評述 Comment on Condition	完成日期 Completion Date (DD/MM/YYYY)	消防裝置關閉/嚴重損壞/恢復通知書 消防處檔案編號 FSD serial number of Notification of FSI Shutdown/Major Defect/Resumption
24	2 x 9L WATER TYPE F.E.	G/F	To supply and install	Conforms with FSD requirements	5-6-2026	
"	5 x 5 KG CO2 GAS TYPE F.E.	"	To supply and install	"	"	

第三部 Part 3 欠妥事項 Defects

編碼 Code (1-35)	裝置類型 Type of FSI	位置 Location(s)	欠妥事項 Defects (請以 * 註明主要系統嚴重損壞 Please indicate major defects in major system with a "*" sign)	欠妥事項評述 Comment on Defects	消防裝置關閉/嚴重損壞/恢復通知書 消防處檔案編號 FSD serial number of Notification of FSI Shutdown/Major Defect/Resumption

本人/我們藉此聲明，上述之消防裝置/設備經測試及/或檢查，其運作狀況符合消防處處長訂明適用於該建築物處所的《最低限度之消防裝置及設備守則》中的規格/要求，以及最新的《裝置及設備之檢查、測試及保養守則》中的要求，以證明其性能良好，除在第三部分中詳列的裝置/設備欠妥事項（如有），I/We hereby declare that the above installations/equipment have been tested and inspected, with its/their working conditions, certified in conformance with the specifications/requirements in the Code of Practice for Minimum Fire Service Installations and Equipment applicable to the building/premises and the requirements in the latest Code of Practice for Inspection, Testing and Maintenance of Installations and Equipment prescribed by the Director of Fire Services to be in efficient working order except defects(s) of the installations/equipment, if any, detailed in Part 3.

請將此證書張貼於大廈或處所當眼處以供消防處人員查核
Please display this certificate at a conspicuous place in the building
or premises for FSD's inspection.

獲授權簽署人簽署
Signature of Authorized Signatory

獲授權簽署人姓名
Name of Authorized Signatory

Cheung Wai Keung

註冊編號
Registration No.

RC 3/456

註冊消防裝置承辦商名稱
Name of Registered Fire
Service Installation Contractor

**Intercept Fire & Security
Tech Ltd**

聯絡電話
Telephone

電郵地址
Email address

日期
Date

11-6-2026

備註
Remark

第一部 只適用於年檢事項 Part I Annual Inspection ONLY			根據《消防（裝置及設備）規例》第八條(1)(b)款，擁有裝置在任何處所內的任何消防裝置或設備的人，須每 12 個月由一名註冊承辦商檢查該等消防裝置或設備至少一次。 In accordance with Regulation 8(1)(b) of Fire Service (Installations and Equipment) Regulations, the owner of any fire service installation or equipment which is installed in any premises shall have such fire service installation or equipment inspected by a registered contractor at least once in every 12 months		
編碼 Code (1-35)	裝置類型 Type of FSI	位置 Location(s)	狀況評述 Comment on Condition	完成日期 Completion Date (DD/MM/YYYY)	到期日 Due Date (DD/MM/YYYY)
12	出口指示牌x5 ("a & b")	G/F	符合消防處規定	05/06/2026	04/06/2027
11	應急照明燈x10 ("Zebra" Model : Z12) x6 ("Marsc" Model : MT-1011)x1 ("a & b" Model : TS-EL. 2053) x3	G/F	符合消防處規定	05/06/2026	04/06/2027

消防處檔號: NTNB-86159
FSD Ref.

消防(裝置及設備)規例(第九條(1)款)消防裝置及設備證書
FIRE SERVICE (INSTALLATIONS AND EQUIPMENT) REGULATIONS
(REGULATION 9(1))
CERTIFICATE OF FIRE SERVICE INSTALLATION AND EQUIPMENT

序號 Serial Number

006001630000 000014

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Name of Client

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Address of Building

座

樓宇名稱
Name of Building

屋邨/鄉村名稱
Name of Estate/Village

MEI PO

門牌號數及街道/地段
Number and Name of Street/Lot

6A PALM SPRINGS BOULEVARD

地區
District

YUEN LONG

☐ 香港 HK

☐ 九龍 K

☒ 新界 NT

持牌/註冊處所類型
(如適用)
Type of Licensed/
Registered Premises
(If applicable)

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☐ 食物業處所 Food Premises

☐ 校舍 School Premises

☐ 幼兒中心 Child Care Centre

☐ 酒店 Hotel

☐ 會社 Club

☐ 木料倉 Timber Store

☐ 電器廢物處置 E-waste Disposal

☐ 改建校舍 Non-designed School

☐ 私營骨灰安置所 Private Columbaria

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☐ 卡拉 OK 場所 Karaoke Establishment

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Please tick the
appropriate "box"

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23	消防喉轆	G/F	符合消防處規定	05/06/2026	04/06/2027
13	火警警報系統	G/F	符合消防處規定	05/06/2026	04/06/2027
			See Appendix		

第二部 Part 2 裝置/保養/修理/檢查工作 Installation/Maintenance/Repair/Inspection work

編碼 Code (1-35)	裝置類型 Type of FSI	位置 Location(s)	完成之工作內容 Nature of Work Carried out	狀況評述 Comment on Condition	完成日期 Completion Date (DD/MM/YYYY)	消防裝置關閉/嚴重損壞/恢復通知書 消防處檔案編號 FSD serial number of Notification of FSI Shutdown/Major Defect/Resumption

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I/We hereby declare that the above installations/equipment has/have been tested and/or inspected, with its/their working conditions certified in conformance with the specifications/requirements in the Code of Practice for Minimum Fire Service Installations and Equipment applicable to the building/premises and the requirements in the latest Code of Practice for Inspection, Testing and Maintenance of Installations and Equipment prescribed by the Director of Fire Services to be in efficient working order except defect(s) of the installations/equipment, if any, detailed in Part 3

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獲授權簽署人簽署
Signature of Authorized Signatory

獲授權簽署人姓名
Name of Authorized Signatory

LI SAU PING

註冊編號
Registration No.

RC1/0060;RC2/0163

註冊消防裝置承辦商名稱
Name of Registered Fire
Service Installation Contractor

Intercept Fire & Security Technicians Ltd.

聯絡電話
Telephone

電郵地址
Email address

日期
Date

11/06/2026

備註
Remark