

Our Ref. : DD112 Lot 84 S.A RP & VL
Your Ref. : TPB/A/YL-SK/442

The Secretary,
Town Planning Board,
15/F, North Point Government Offices,
333 Java Road,
North Point, Hong Kong

By E-mail

11 February 2026

Dear Sir,

1st Further Information

**Renewal of Planning Approval for Temporary Place of Recreation, Sports or Culture
(Hobby Farm) and Associated Filling of Land for a Period of 5 Years in "Agriculture" Zone,
Lots 84 S.A ss.1 S.A (Part), 84 S.A ss.1 RP (Part) and 84 S.A RP (Part) in D.D. 112,
Nam Hing West Road, Shek Kong, Yuen Long, New Territories**

(S.16 Planning Application No. A/YL-SK/442)

We write to submit further information in response to departmental comments on the captioned application.

Should you require more information regarding the application, please contact our Mr. Danny NG at [REDACTED] / [REDACTED] or the undersigned at your convenience. Thank you for your kind attention.

Yours faithfully,

For and on behalf of
R-riches Planning Limited



Christian CHIM
Town Planner

cc DPO/FSYLE, PlanD

(Attn.: Mr. Jason WONG

email: [REDACTED])



Response-to-Comment (RtC)

Renewal of Planning Approval for Temporary Place of Recreation, Sports or Culture (Hobby Farm) and Associated Filling of Land for a Period of 5 Years in “Agriculture” Zone, Lots 84 S.A ss.1 S.A (Part), 84 S.A ss.1 RP (Part) and 84 S.A RP (Part) in D.D. 112, Nam Hing West Road, Shek Kong, Yuen Long, New Territories

(S.16 Application No. A/YL-SK/442)

(i) A RtC table:

Departmental Comments		Applicant’s Responses
1. Comments of the Director of Fire Services (D of FS)		
(a)	<p>Noted that this is a renewal application, if applicable, the following supplementary information shall be submitted for further consideration:</p> <ul style="list-style-type: none"> - full set of valid F.S. 251(s) covering all the FSIs implemented on the application site; and - a statement/undertaking to confirm there is no change in the layout and proposed uses as compared with the previous application. 	<p>The valid F.S. 251 covering all fire service installations are enclosed for your information.</p> <p>The applicant confirms that there is no change in the layout and proposed uses as compared with the previous application. For details, please refer to Section 2.3 of the supplementary statement of the original submission.</p>
(b)	<p>The applicant is reminded that if the proposed structures are required to comply with the Buildings Ordinance (Cap. 123), detailed fire services requirements will be formulated upon receipt of formal submission of general building plans.</p>	<p>Noted.</p>

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

FSD Ref.:
消防處檔號

Serial Number
10392 000544

Name of Client 顧客姓名

Cheung Chi Wah

Address 地址

D.D 112 S.A 84 SS.1 Part & RP



Type of Building 樓宇類型: Industrial 工業 Commercial 商業 Domestic 住宅 Composite 綜合 Licensed premises 持牌處所 Institutional 社團

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

In accordance with Regulation 8(b) of the 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. 根據消防(裝置及設備)規例第八條(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。

Code 編碼 (1-35)	Type of FSI 裝置類型	Location(s)位置	Comment on Condition 狀況評述	Completion Date 完成日期 (DD/MM/YYYY)	Next Due Date 下次到期日 (DD/MM/YYYY)
11	Emergency Lighting	The Whole Unit	Conforms with FSD requirements	09/02/2026	08/02/2027
12	Exit Sign	The Whole Unit	Conforms with FSD requirements	09/02/2026	08/02/2027

Part 2 第二部 Installation / Modification / Repair / Inspection works 裝置/改裝/修理/檢查工作

Code 編碼 (1-35)	Type of FSI 裝置類型	Location(s)位置	Nature of Work Carried out 完成之工作內容	Comment on Condition 狀況評述	Completion Date 完成日期 (DD/MM/YYYY)

Part 3 第三部 Defects 損壞事項

Code 編碼 (1-35)	Type of FSI 裝置類型	Location(s)位置	Outstanding Defects 未修缺點	Comment on Defects 缺點評述

Remark 備註

I/We hereby certify that the above installations/equipment have been tested and found to be in efficient working order in accordance with the Codes of Practice for Minimum Fire Service Installations and Equipment and Inspection, Testing and Maintenance of Installations and Equipment published from time to time by the Director of Fire Services. Defects are listed in Part 3.

本人藉此證明以上之消防裝置及設備經試驗, 證明性能良好, 符合消防處處長不時公佈的最低限度之消防裝置及設備守則與裝置及設備之檢查測試及保養守則的規格, 損壞事項列於第三部。

如證書涉及年檢事項, 應張貼於大廈或處所當眼處以供消防處人員查核

This certificate should be displayed at prominent location of the building or premises for FSD's inspection if any annual maintenance work is involved.

Authorized Signature:

Name: Mr. C. W. Cheung

FSD/RC No.: RC1 / 0392 RC2 / 0558
消防處註冊號碼

Company Name: Hung Hing Building Services Engineering Company Limited
公司名稱

Telephone:
聯絡電話

Date: 10/02/2026
日期



For FSD use only

Inspected

Key-in

Verified

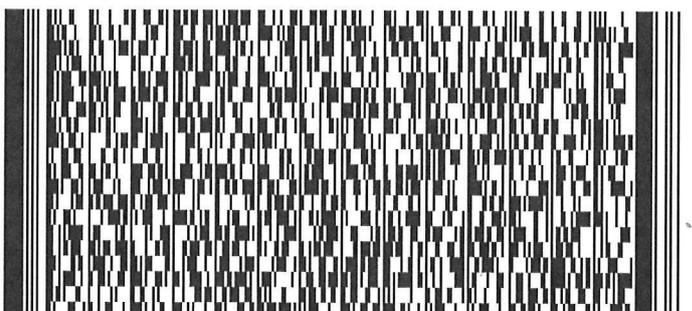
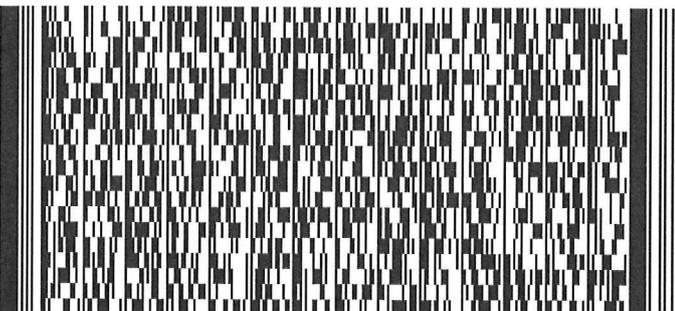
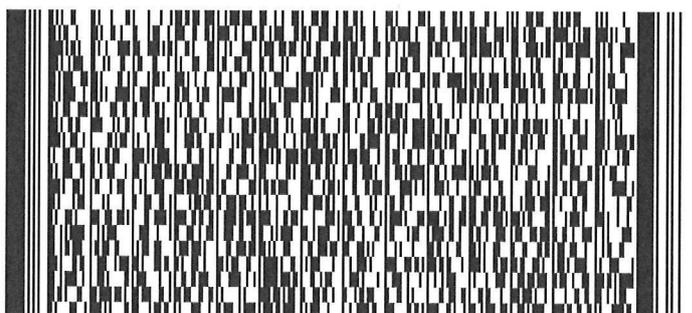
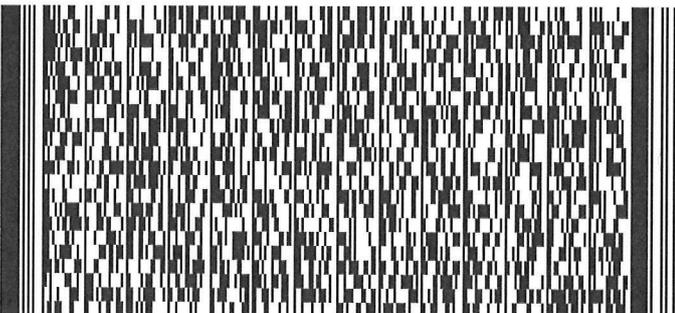
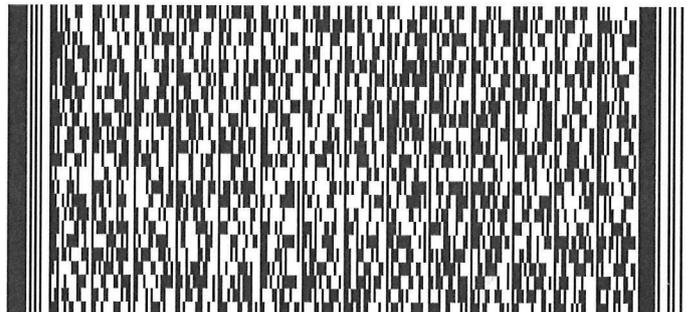
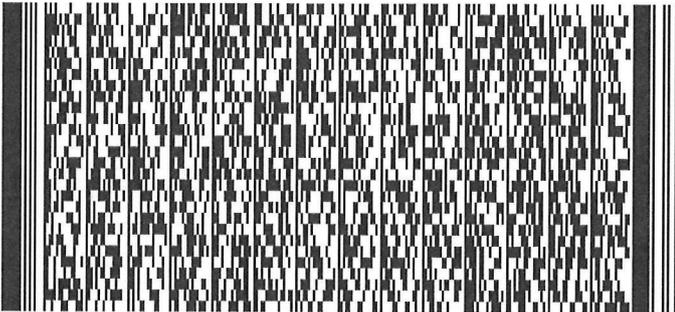
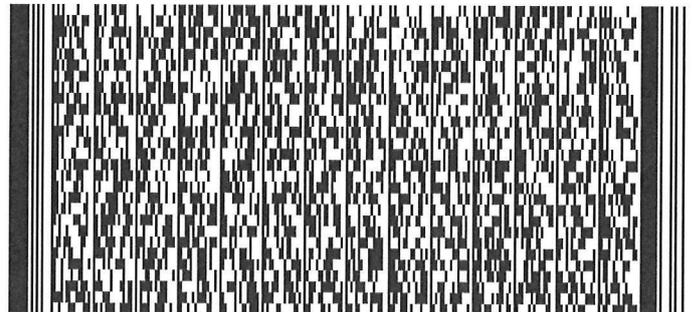
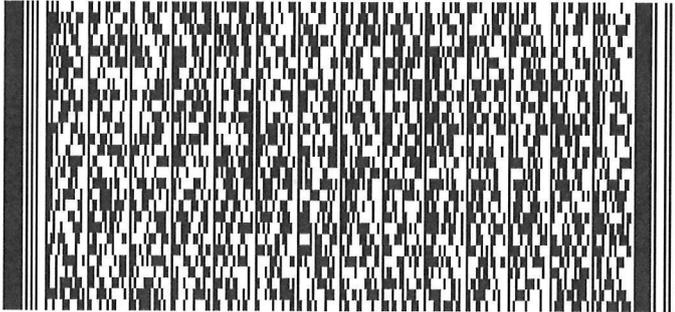


Serial Number

10392 000544

Name of Client 顧客姓名

Cheung Chi Wah



FIRE SERVICE (INSTALLATIONS AND EQUIPMENT) REGULATIONS

消防 (裝置及設備) 規例

(Regulation 9(1))

(第九條(1)款)

A 9850848

FSD Ref.:
消防處檔號

CERTIFICATE OF FIRE SERVICE INSTALLATION AND EQUIPMENT

消防裝置及設備證書

Name of Client : **Cheung Chi Wah**
顧客姓名

Name of Building : **Lot 84S.A SS. 1(Part) & 84 S.A RP (Part) in D.D. 112**
樓宇名稱

Street No./Town Lot : _____ Street/Road/Estate Name : _____
門牌號數/市地段 街道/屋苑名稱

Block : _____ District : **Yuen Long** Area : HK K NT
座 分區 地區 香港 九龍 新界

Type of Building 樓宇類型 : Industrial 工業 Commercial 商業 Domestic 住宅 Composite 綜合 Licensed premises 持牌處所 Institutional 社團

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

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Part 2 第二部 Installation / Modification / Repair / Inspection work 裝置/改裝/修理/檢查工作

Code 編碼 (1-35)	Type of FSI 裝置類型	Location(s) 位置	Nature of Work Carried out 完成之工作內容	Comment on Condition 狀況評述	Completion Date 完成日期(DD/MM/YY)
24	5Kg Co2 F.E.		4nos. - New Supply	Good	10/2/2026

Part 3 第三部 Defects 損壞事項

Code 編碼 (1-35)	Type of FSI 裝置類型	Location(s) 位置	Outstanding Defects 未修缺點	Comment on Defects 缺點評述
			Nil	Good

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Authorized Signature :
授權人簽署

Name :
姓名

FSD/RC No. :
消防處註冊號碼

Company Name :
公司名稱

Telephone :
聯絡電話

Date :
日期

Chow Kwok Wah

RC3/540

N/A

10/2/2026

For FSD use only:

Inspected

Key-in

Verified

如證書涉及年檢事項, 應張貼於大廈或處所當眼處以供消防處人員查核

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