



WE SERVE TO SAVE

**DEPARTMENT OF FIRE AND RESCUE SERVICES  
GOVERNMENT OF KERALA**

No.....

Date:.....

**CERTIFICATE OF APPROVAL**

(Rule.....of KMBR/KPBR)

1. Name & Address of the Applicant :
2. Name of the Company :
3. Occupancy type of Building :
4. Height of the Building :
5. Number of Floors of the Building :
6. Total Plinth Area (in sqm) :
7. Survey No :
8. Village :
9. Grama Panchayat /  
Municipality / Corporation :
10. District :

The above Site and Building were inspected by the authorized and competent Officials of this Department. The final Fire Plan drawings, the final filled up Checklist Cum Application and other Documents were scrutinized.

The building has been constructed as per the Rules and Norms pertaining to the Fire Safety arrangements (Duly filled and signed Checklist is attached, which will form the part of this Certificate of Approval).

In the circumstances this Certificate of Approval is issued under my Seal and Authority. No further construction will be allowed in the vacant spaces provided in the approved plan. This Certificate is issued on the condition that the Fire Fighting Systems installed will be kept always functional and owner of the Building need to take special care to maintain the systems installed in proper working condition.



No: .....

**This Certificate is valid for one year from the date of issue. After one year the Certificate must be renewed. Non Renewal of the Certificate within the time limit may result in loss of eligibility for insurance coverage and appropriate legal action by Local Self Government / Revenue Department or any other Department/Body.**

All Officers of and above the rank of Station Officers of the Fire & Rescue Services Department will have the right to Inspect the building on any day / time after serving seven days notice to ensure that the Installed Systems are in good working condition.

This Certificate of Approval pertains only to the Fire Fighting arrangements made and installed in the Building. The civil construction shall be got Inspected and Approved by the appropriate Local Authority.

A copy of this Certificate along with the enclosures must be made available by the applicant either in hard or in soft form with the owner / occupant of each individual apartment.

Signature with date

**For Director General**

[Name Seal]

To ,

The Secretary, .....(In Original)

(Vide Letter No.....Dated:.....)

Enclosures : 1) Approved Checklist Cum Application form duly signed by the Competent Official.

2) Fire Plan duly affixed with Seal

Copy to:

1) The Applicant with Enclosures

2) The Divisional Officer, .....

3) The Assistant Divisional Officer, .....

4) The Station Officer.....