

DEVELOPMENT SERVICES 2nd Floor, 10111 104 Avenue NW EDMONTON, ALBERTA, T5J 0J4 PHONE: 311 or if outside Edmonton: 780-442-5311

EMAIL: streetvending@edmonton.ca

Certification of Inspection

Fire Requirements

This document must be completed by a qualified Inspector certified within the Province of Alberta who is either ULC or InterTech certified. Certification may only be issued upon an in-person inspection and evaluation of the Vendor Unit identified on this Form in accordance with NFPA 96 and NFPA 10 Standards.

To be completed by Vendor			
Vendor Unit Information			
Applicant Full Name:			
Company Name:	Applicant Signature :		
Vehicle Make:	VIN #:		
Vehicle Model:			
Licence Plate:	Phone:		
To be completed by Servicing Agency Commercial Cooking Exhaust System Maintenance Agency Information			
Inspector Full Name:	Date of Inspection:		
Certification #:	Qualified Service Company:		
Street Address:	Province: Postal Code:		
Phone:	Email:		
	Declaration of Compliance		
equipment exhaust system re	, am responsible for the inspection of the commercial cooking equirements as set out by the National Fire Protection Association on the ring the inspection on the above noted date, I held appropriate certification		
	oking equipment exhaust system is in conformance with NFPA 96, "Ventilation of Commercial Cooking Operations."		
"Ventilation Contro	oking equipment exhaust system is NOT in conformance with NFPA 96, of and Fire Protection of Commercial Cooking Operations."		
☐ N/A I certify that the above inform compliance with NFPA 96 Stan	nation is accurate and that I have reviewed the above noted vendor unit for dards.		
Signature:	nture: Date:		

ATTACH COPIES OF ALL APPLICABLE FIRE SUPPRESSION CERTIFICATES AND FIRE EXTINGUISHER TAGS TO THIS FORM

The City of Edmonton is collecting personal information required on this form in accordance with section 33(b) and (c) of the Alberta Freedom of Information and Protection of Privacy (FOIP) Act. It will be used for the administration and operation of the food truck licensing and permit program and for enforcement purposes. If you have any questions about the collection, use or disclosure of the information on this form, please contact Street Vending at 780-442-5054 or by email at streetvending@edmonton.ca.

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CURRENT PLANNING 5TH FLOOR, 10250 – 101 STREET NW EDMONTON, ALBERTA, T5J 3P4 PHONE: 311 or if outside Edmonton: 780-442-5311

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Fire Protection System

	Agency Information		
Inspector Full Name:		Date of Inspection:	
Certification #:	Qualified Service Company:		
Street Address:	Province: _	Postal Code:	
Phone:	Email:		
Declaration of Compliance			
I,, am responsible for the inspection of the fire protection system requirements as set out by the National Fire Protection Association on the above noted vendor unit. During the inspection on the above noted date, I held appropriate certification and I certify that:			
☐ The fire protection system is in conformance with NFPA 96, "Ventilation Control and Fire Protection of Commercial Cooking Operations."			
☐ The fire protection system is NOT in conformance with NFPA 96, "Ventilation Control and Fire Protection of Commercial Cooking Operations."			
□ N/A			
I certify that the above information is accurate and that I have reviewed the above noted vendor unit for compliance with NFPA 96 Standards.			
Signature:	Date:		
Fire Extinguishers			
Agency Information			
Inspector Full Name:		Date of Inspection:	
Certification #:	Qualified Service Company:		
Street Address:	Province: _	Postal Code:	
Phone:	Email:		
Declaration of Compliance			
I,, am responsible for the inspection of the portable fire extinguisher requirements as set out by the National Fire Protection Association on the above noted vendor unit. During the inspection on the above noted date, I held appropriate certification and I certify that:			
\Box The Fire Extinguishers comply with the NFPA 10, "Portable Fire Extinguishers."			
☐ The Fire Extinguishers DO NOT comply with the NFPA 10, "Portable Fire Extinguishers."			
□ N/A			
I certify that the above information is accurate and that I have reviewed the above noted vendor unit for compliance with NFPA 10 Standards.			
Signature:	Date:		

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