

**Check List for FINAL INSPECTION of Inside Service/Fire Service
[Tank and Pump Room]**



WWO 542 ASN XXXXXXXXXXXX

Type of Building: (a) (a) Building of Storey >=4
(b) Separate Meter
[*Note: For Building of Storey < 4 and Village House, use Form FI-I]

Address: XX - XX, Hollywood Road, Central, HK

Prepared by
Signature _____
Name of LP _____
Plumber Licence No. _____
Date _____

Certified by
Signature _____
Name of RPE _____
Date _____

Selected Zone: (c) (a) Roof Tank
(b) Intermediate Tank
Extra Sample: _____ (c) Sump Tank and Pump Room
_____ (d) Break Pressure Tank
_____ (e) Break Tank
(f) Other, please specify.

Type: (a) (a) Fresh Water (FW)
(b) Flushing Water (FLW)
(c) Fire Service (FS)

Final Inspection
Date _____
Signature _____
Name _____
Post _____
WSD Officer

Signature _____
Name _____
Plumber Licence No. _____
Acknowledgement of Licensed Plumber

No	Item	Details/Attached Photo Ref. (e.g. Brand Name/Model No./Location etc. if	Inspection Results (Circle appropriate box)	Defects (Please specify the details, if any)	WWO 1008 Reference [INDICATIVE only]	Remarks
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Part A - Annex to Form WWO 46 (min. 1 photo to cover all typical pipe/material items)

Tank

1	Inlet Pipe Size	50 mm / Kembla LG/F	<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			See Photo 1
2	Outlet Pipe Size	80 mm / Kembla LG/F	<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			See Photo 2
3	Materials of Pipe/Fittings	Copper / Kembla LG/F	<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			See Photo 3
4	Control Valves at Inlet/Outlet	Inlet: 50 mm / Kitz / LG/F Bronze gate valve Outlet: 80 mm/Toyo / LG/F C.I. gate valve	<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			See Photo 4, 5
5	Rooftop Booster Pump for Topmost Floors - Gate Valve		<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			
6	Rooftop Booster Pump for Topmost Floors - Branch Tee		<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			
7	Rooftop Booster Pump for Topmost Floors - Non-return valve / strainer (Note: Applicable for the Annex to Form WWO 46 submitted on or after 1 April 2016)		<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			

No	Item	Details/Attached Photo Ref. <small>(e.g. Brand Name/Model No./Location etc. if</small>	Inspection Results <small>(Circle appropriate box)</small>	Defects <small>(Please specify the details, if any)</small>	WWO 1008 Reference <small>[INDICATIVE only]</small>	Remarks
Pump Room						
8	Gate Valve	LG/F 80 mm / AVK C.I. gate valve	<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			See Photo 6
9	Fitting - Branch Tee		<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			
10	Non-return valve / strainer <small>(Note: Applicable for the Annex of Form WWO 46 submitted on or after 1 April 2016)</small>	LG/F Strainer: 80 mm / XXXX Non-return valve: 80 mm / XXXX	<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			See Photo 7, 8
Part B - Approved plumbing drawings (no photo required unless defect found)						
Tank						
11	Siting of Water Tank	LG/F Siting complied with approved drawing.	<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			
12	Inlet Pipe Position	LG/F Position complied with approved drawing.	<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			
13	Outlet Pipe Position	LG/F Position complied with approved drawing.	<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			
14	Cover of Water Tank <small>(e.g. double upstand edges for potable water tank)</small>	LG/F Double upstand edges; complied with approved drawing	<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			
15	Storage Capacity Sign	760L LG/F	<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			
16	Materials of Water Tank	Fiberglass / Sekisui LG/F	<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			
17	Safe Access for Cleansing or Repairs of Water Tanks		<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			
18	Overflow Pipe Size	100 mm / Asahi LG/F	<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			
19	Overflow Pipe with a Grating and Self-closing Flap		<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			
20	Overflow/Warning Pipe discharge to conspicuous position or outside building		<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			

No	Item	Details/Attached Photo Ref. (e.g. Brand Name/Model No./Location etc. if	Inspection Results (Circle appropriate box)	Defects (Please specify the details, if any)	WWO 1008 Reference [INDICATIVE only]	Remarks
21	Warning Pipe not less than 25mm in Diameter	25 mm / uPVC LG/F	<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			
22	Siting Gap between Potable and Non-potable Tanks		<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			
23	Provision of Washout		<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			
24	Internal Surfaces of Floors, Walls and Soffits of Potable Water Tank		<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> N/A			No concrete potable water tank in this project
25	Rooftop Booster Pump for Topmost Floors - No. of Pump		<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> N/A			
26	Rooftop Booster Pump for Topmost Floors - Flexible Joints		<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> N/A			
27	Rooftop Booster Pump for Topmost Floors - any plate to show pump data		<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> N/A			
28	Rooftop Booster Pump for Topmost Floors - Non-return valve / strainer (Note: To be under Part A of the checklist for the Annex of Form WWO 46 submitted on or after 1		<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> N/A			
Pump Room						
29	Flexible Joint of pumpsets	LG/F Complied with approved drawing	<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			
30	No. of Pump	LG/F Complied with approved drawing	<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			
31	Plate to show pump data	LG/F Complied with approved drawing	<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			
32	Non-return valve / strainer (Note: To be under Part A of the checklist for the Annex of Form WWO 46 submitted on or after 1 April 2016)	LG/F Complied with approved drawing	<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			
Others						
			<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			

Check List for FINAL INSPECTION of Inside Service / Fire Service
[Master Meter/Check Meter/Meter Position and Adjoining Pipes and Fittings/Master Meter Room]



WWO 542 ASN XXXXXXXXXX

Type of Building: Building of Storey >=4
 [*Note: For Building of Storey < 4 and Village House, use Form FI-I]

Address: XX - XX, Hollywood Road, Central, HK

Selected Zone: Meter Position

Extra

Type: (a) (a) Fresh Water
 (b) Flushing Water
 (c) Fire Service

Prepared by
 Signature _____
 Name of LP _____
 Plumber Licence No. _____
 Date _____

Certified by
 Signature _____
 Name of RPE _____
 Date _____

Final Inspection
 Date _____
 Signature _____
 Name _____
 Post _____
WSD Officer

Signature _____
 Name _____
 Plumber Licence No. _____
Acknowledgement of Licensed Plumber

No	Item	Details/Attached Photo Ref. <small>(e.g. Brand Name/Model No./Location etc. if</small>	Inspection Results <small>(Circle appropriate box)</small>	Defects <small>(Please specify the details, if any)</small>	WWO 1008 Reference <small>[INDICATIVE only]</small>	Remarks
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Part A - Annex to Form WWO 46 (min. 1 photo to cover all typical pipe/material items)

(a) Master Meter / Check Meter / Meter Position and Adjoining Pipes and Fittings (at a typical location)

1	Pipe Materials	50 mm / Copper / Kemt	<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / <input type="checkbox"/> N/A			See Photo 1
2	Pipe Fittings <small>(e.g. valves, elbows and slow bend, branch tee etc.)</small>	Gate valve: 50 mm / bronze / Kitz Elbow: 50 mm /	<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / <input type="checkbox"/> N/A			See Photo 2, 3

Part B - Approved plumbing drawings (no photo required unless defect found)

(b) Master Meter / Check Meter / Meter Position and Adjoining Pipes and Fittings (at a typical location)

3	Siting of Master Meter/ Check-Meter Position	Complied with approved drawing	<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / <input type="checkbox"/> N/A			
4	Pipe Alignment	Complied with approved drawing	<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / <input type="checkbox"/> N/A			
5	Display Board	Complied with approved drawing	<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / <input type="checkbox"/> N/A			
6	Uninterrupted Access		<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / <input type="checkbox"/> N/A			

No	Item	Details/Attached Photo Ref. <small>(e.g. Brand Name/Model No./Location etc. if</small>	Inspection Results <small>(Circle appropriate box)</small>	Defects <small>(Please specify the details, if any)</small>	WWO 1008 Reference <small>[INDICATIVE only]</small>	Remarks
7	Clear Working Space		<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / <input type="checkbox"/> N/A			
(c) Master Meter Room						
8	Universal Beam <small>(e.g. lifting capacity sign etc.)</small>		<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / <input type="checkbox"/> N/A			
9	Certificate of Test of Lifting Appliances		<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / <input type="checkbox"/> N/A			
10	Door (e.g. opening dimensions, door handles, prohibition of self-closing door)		<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / <input type="checkbox"/> N/A			See Photo 4
11	Building Services Facilities <small>(e.g. drainage and others etc.)</small>		<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / <input type="checkbox"/> N/A			See Photo 5
Others						
			<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / <input type="checkbox"/> N/A			

Check List for FINAL INSPECTION of Inside Service

[Meter Cabinet/Room]



WVO 542 ASN XXXXXXXXXXXX

Type of

Building: Building of Storey >=4
[*Note: For Building of Storey < 4 and Village House, use Form FI-I]

Address: XX - XX, Hollywood Road, Central, HK

Selected Zone: Middle Zone (7/F to 13/F)

Type: (a) (a) Typical
(b) Non-typical

Extra Sample: _____

Prepared by
Signature _____
Name of LP _____
Plumber Licence No. _____
Date _____

Certified by
Signature _____
Name of RPE _____
Date _____

Final Inspection
Date: _____
Signature _____
Name _____
Post _____
WSD Officer

Signature _____
Name _____
Plumber Licence No. _____
Acknowledgement of
Licensed Plumber

No	Item	Details/Attached Photo Ref. <small>(e.g. Brand Name/Model No./Location etc. if available)</small>	Inspection Results <small>(Circle appropriate box)</small>	Defects <small>(Please specify the details, if any)</small>	WVO 1008 Reference <small>[INDICATIVE only]</small>	Remarks
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Part A - Annex to Form WVO 46 (min. 1 photo to cover all typical pipe/material items)

1	Pipe Materials	13/F Copper / Kembla	<input checked="" type="checkbox"/> / <input type="checkbox"/> / N/A			See Photo 1 & 2
2	Pipe Fittings <small>(e.g. valves, elbows and slow bend, branch tee etc.)</small>	13/F meter cabinet TYT Stop Valve	<input checked="" type="checkbox"/> / <input type="checkbox"/> / N/A			See Photo 3

Part B - Approved plumbing drawings (no photo required unless defect found)

3	Siting of Meter/ Check Meter Position	Complied with approved drawing	<input checked="" type="checkbox"/> / <input type="checkbox"/> / N/A			
4	Pipe Alignment	Complied with approved drawing	<input checked="" type="checkbox"/> / <input type="checkbox"/> / N/A			
5	Building Services Facilities <small>(e.g. drainage and others etc.)</small>	Complied with approved drawing	<input checked="" type="checkbox"/> / <input type="checkbox"/> / N/A			
6	Display Board	Complied with approved drawing	<input checked="" type="checkbox"/> / <input type="checkbox"/> / N/A			
7	Uninterrupted Access		<input checked="" type="checkbox"/> / <input type="checkbox"/> / N/A			
8	Door (e.g. opening dimensions, door handles, prohibition of self-closing door)	Complied with approved drawing	<input checked="" type="checkbox"/> / <input type="checkbox"/> / N/A			
9	Clear Working Space	Complied with approved drawing	<input checked="" type="checkbox"/> / <input type="checkbox"/> / N/A			

Others

			<input checked="" type="checkbox"/> / <input type="checkbox"/> / N/A			
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Check List for FINAL INSPECTION of Inside Service/Fire Service



[Connection]

WWO 542 ASN XXXXXXXXXX

Type of Building: Building of Storey >=4
 [*Note: For Building of Storey < 4 and Village House, use Form FI-I]

Prepared by
 Signature _____
 Name of LP _____
 Plumber Licence No. _____
 Date _____

Address: XX - XX, Holly Road, Central, HK

Certified by
 Signature _____
 Name of RPE _____
 Date _____

Selected Zone: G/F
 (Location of the connection point)

Extra _____

Final Inspection
 Date: _____
 Signature _____
 Name _____
 Post _____
 WSD Officer
 Signature _____
 Name _____
 Plumber Licence No. _____
 Acknowledgement of Licensed Plumber

*Fresh Water (FW), Flushing Water (FLW), Fire Service (FS).

No	Item	Type (Delete FW/FLW for cases involving FS)	Details/Attached Photo Ref. (e.g. Brand Name/Model No./Location etc. if available)	Inspection Results (Circle appropriate box)	Defects (Please specify the details, if any)	WWO 1008 Reference [INDICATIVE only]	Remarks
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Part A - Annex to Form WWO 46 (min. 1 photo to cover all typical pipe/material items)

1	Size of Connection Pipe	FW	50 mm / Kembla	<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			See Photo 1
		FLW		<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			
2	Pipe Material	FW	Copper / Kembla	<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			See Photo 2
		FLW		<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			
3	Boundary Valve	FW	50 mm / Kitz / Bronze gate valve	<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			See Photo 3
		FLW		<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			
4	Fittings - Branch Tee	FW	50 mm / Copper / Lawton	<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			See Photo 4
		FLW		<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			

Part B - Approved plumbing drawings (no photo required unless defect found)

5	Position of Connection Pipe	FW	Complied with approved drawing	<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			
		FLW		<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			
6	Pipe Alignment	FW	Complied with approved drawing	<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			
		FLW		<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			

Others

		FW		<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			
		FLW		<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			

Check List for FINAL INSPECTION of Inside Service/Fire Service

[Communal Part]



WWO 542 ASN XXXXXXXXXX

Building: Building of Storey >=4
[*Note: For Building of Storey < 4 and Village House, use Form FI-I]

Address: XX - XX, Hollywood Road, Central, HK

Prepared by
Signature _____
Name of LP _____
Plumber Licence No. _____
Date _____

Certified by
Signature _____
Name of RPE _____
Date _____

Selected zones (Riser pipe & valve): (15/F to R/F)
Selected zones (Down-feed pipe & valve): (15/F to R/F)

Extra Samples: _____

Final Inspection
Date: _____
Signature _____
Name _____
Post _____
WSD Officer
Signature _____
Name _____
Plumber Licence No. _____
Acknowledgement of Licensed Plumber

*Fresh Water (FW), Flushing Water (FLW), Fire Service (FS).

No	Item	Type (Delete FW/FLW for cases involving FS)	Details/Attached Photo Ref. (e.g. Brand Name/Model No./Location etc. if available)	Inspection Results (Circle appropriate box)	Defects (Please specify the details, if any)	WWO 1008 Reference [INDICATIVE only]	Remarks
Part A - Annex to Form WWO 46 (min. 1 photo to cover all typical pipe/material items)							
1	Pipe Size	FW	Riser: 80 mm / Kembla / 18/F Down pipe: 67 mm / Kembla / 18/F	<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			See Photo 1, 2
		FLW		<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			
2	Pipe Material	FW	Riser: copper / 80 mm / 18/F Down pipe: copper / 67 mm / 21/F	<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			See Photo 1, 2
		FLW		<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			
3	Fittings - Valve	FW	Riser: 18/F / 80 mm / Kitz Down pipe: 18/F / 67 mm / Kitz	<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			See Photo 3, 4
		FLW		<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			
4	Fittings - Elbow	FW	Riser: 18/F / Lawton / 80 mm / copper Down pipe: 18/F / 67 mm / copper / Lawton	<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			See Photo 5, 6
		FLW		<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			
5	Fittings - Slow Bend	FW	Riser: 18/F / Lawton / 76 mm / copper Down pipe: N/A	<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			See Photo 7
		FLW		<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			

No	Item	Type <small>(Delete FW/FLW for cases involving FS)</small>	Details/Attached Photo Ref. <small>(e.g. Brand Name/Model No./Location etc. if available)</small>	Inspection Results <small>(Circle appropriate box)</small>	Defects <small>(Please specify the details, if any)</small>	WWO 1008 Reference <small>[INDICATIVE only]</small>	Remarks
6	Fittings - Branch Tee	FW	Riser: N/A Down pipe: 18/F / Lawton / 67 mm / copper	<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			See Photo 2
		FLW		<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			
7	Pressure Reducing Valve <small>(Note: Applicable for the Annex to Form WWO 46 submitted on or after 1 April 2016)</small>	FW	3/F 50 mm (hot water) / XXXX 22 mm (Cold water) / XXXX	<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			See Photo 8, 9
		FLW		<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			
Part B - Approved plumbing drawings (no photo required unless defect found)							
8	Pipe Alignment	FW	Complied with approved drawing	<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			
		FLW		<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			
9	Break Pressure Tank	FW		<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / <input checked="" type="checkbox"/>			
		FLW		<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			
10	Pressure Reducing Valve <small>(Note: To be under Part A of the checklist for the Annex to Form WWO 46 submitted on or after 1 April 2016)</small>	FW	Complied with approved drawing	<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			
		FLW		<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			
Others							
		FW		<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			
		FLW		<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			

**Check List for FINAL INSPECTION of Inside Service/Fire Service
[Communal Part (Miscellaneous)]**



WWO 542 ASN XXXXXXXXXX

Building: Building of Storey >=4
[*Note: For Building of Storey < 4 and Village House, use Form FI-I]

Address: XX - XX, Hollywood Road, Central, HK

Prepared by
Signature _____
Name of LP _____
Plumber Licence No. _____
Date _____

Certified by
Signature _____
Name of RPE _____
Date _____

Selected Zone: Hot Water System

(a) Swimming Pool (with balancing tank)
(b) Swimming Pool (with feed tank)
(c) Irrigation
(d) Cleansing
(e) Others (e.g. Hydrant, Hose Reel, Sprinkler, Fountain, etc.)

Final Inspection
Date: _____
Signature _____
Name _____
Post _____
WSD Officer

Signature _____
Name _____
Plumber Licence No. _____
Acknowledgement of Licensed Plumber

Extra Sample: _____

*Fresh Water (FW), Flushing Water (FLW), Fire Service (FS).

No	Item	Type (Delete FW/FLW for cases involving FS)	Details/Attached Photo Ref. (e.g. Brand Name/Model No./Location etc. if available)	Inspectio n Results (Circle appropriate box)	Defects (Please specify the details, if any)	WWO 1008 Reference [INDICATIVE only]	Remarks
Part A - Annex to Form WWO 46 (min. 1 photo to cover all typical pipe/material items)							
1	Pipe Size/Material	FW	67 mm / copper / Kembla R/F	<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			See Photo 1
		FLW		<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			
2	Fittings - Valve	FW	67 mm / copper / Kitz R/F	<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			See Photo 2
		FLW		<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			
3	Fittings - Elbow/Slow	FW	67 mm / copper / Lawton R/F	<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			See Photo 3
		FLW		<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			
4	Pressure Reducing Valve (Note: Applicable for the Annex to Form WWO 46 submitted on or after 1 April 2016)	FW	54 mm / C.I. / XXXX 3/F	<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			See Photo 4
		FLW		<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			
Part B - Approved plumbing drawings (no photo required unless defect found)							
5	Pipe Alignment	FW	Complied with approved drawing	<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			
		FLW		<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			
6	Pressure Reducing Valve (Note: To be under Part A for the Annex to Form WWO 46 submitted on or	FW	Complied with approved drawing	<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			
		FLW		<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			
Others							
		FW		<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			
		FLW		<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			

**Check List for FINAL INSPECTION of Inside Service/Fire Service
[Individual Household Flat/Unit]**



Type of Building: (a) (a) Building of Storey >=4
(b) Separate Meter
[*Note: For Building of Storey < 4 and Village House, use Form FI-I]

WWO 542 ASN XXXXXXXXXXXX

Address: XX - XX, Hollywood Road, Central, HK

Prepared by
Signature _____
Name of LP _____
Plumber Licence No. _____
Date _____

Certified by
Signature _____
Name of RPE _____
Date _____

Total No. of Household Units = 20 No. (for (a) Building of Storey >=4)

Final Inspection
Date: _____
Signature _____
Name _____
Post _____
WSD Officer

Selected Household Type / Zone: Flat A (Upper zone 15/F to 21/F)

Extra Sample:

Signature _____
Name _____
Plumber Licence No. _____
Acknowledgement of Licensed Plumber

Minimum photo requirement: (for (a) Building of Storey >=4)

1. 1 picture of sampling board to cover all typical fittings including valves, soldering material, flux, taps, mixer, etc. and pipe materials & all documents,
2. 1 set of photos for 1 set of inspected elements :- (i) exposed pipe; (ii) water heater; (iii) exposed pipe fitting; (iv) kitchen tap/mixer/valve; and (v) toilet tap/mixer/valve shall be taken.

*Fresh Water (FW), Flushing Water (FLW), Fire Service (FS).

No	Item	Type (Delete FW/FLW for cases involving FS)	Details/Attached Photo Ref. (e.g. Brand Name/Model No./Location etc. if available)	Inspection Results (Circle appropriate box)	Defects (Please specify the details, if any)	WWO 1008 Reference [INDICATIVE only]	Remarks
Part A - Annex to Form WWO 46							
(i) Exposed Pipe							
1	Pipe Size	FW	28 mm / Kembla 21/F Flat A Room 1 ceiling	<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			See Photo 1
		FLW		<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			
2	Pipe Material	FW	copper / 28 mm 21/F Flat A Room 1 ceiling	<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			See Photo 1
		FLW		<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			
(ii) Water Heater							
3	Water Heater	FW		<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> N/A			No instantaneous type water heater installed in this project
(iii) Exposed Pipe Fitting							
4	Fittings - Valve	FW	21/F Flat A Room 1 ceiling 28 mm / Kitz / copper	<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			See Photo 2
		FLW		<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			
5	Fittings - Elbow	FW	21/F Flat A Room 1 ceiling 28 mm / Lawton / copper	<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			See Photo 3
		FLW		<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			

No	Item	Type (Delete FW/FLW for cases involving FS)	Details/Attached Photo Ref. (e.g. Brand Name/Model No./Location etc. if available)	Inspection Results (Circle appropriate box)	Defects (Please specify the details, if any)	WWO 1008 Reference [INDICATIVE only]	Remarks
6	Fittings - Slow Bend	FW	21/F Flat A Room 1 ceiling 28 mm / Lawton / copper	<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			See Photo 4
		FLW		<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			
7	Fittings - Branch Tee	FW	21/F Flat A Room 1 ceiling 28 mm / Lawton / copper	<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			See Photo 5
		FLW		<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			
(iv) Kitchen tap/mixer/valve							
8	Kitchen Tap - Tap/Mixer	FW	21/F Flat A Room 1 Open Kitchen Sink mixer 15 mm / Blanco	<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			See Photo 6
9	Kitchen Tap - Angle Valve / Stop Valve	FW	21/F Flat A Room 1 Open Kitchen Angle valve / 15 mm / Welson	<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			See Photo 7
(v) Toilet tap/mixer/valve							
10	Toilet - Wash Basin Mixer	FW	21/F Flat A Room 1 Toilet Cisal / 15 mm	<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			See Photo 8
11	Toilet - Angle Valve / Stop Valve	FW	21/F Flat A Room 1 Toilet Angle valve / 15 mm / Welson	<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			See Photo 9
		FLW		<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			
12	Toilet - Shower Mixer	FW	21/F Flat A Room 1 Toilet Brizo / 15 mm	<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			See Photo 10
13	Toilet -Bath Mixer	FLW		<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			
14	Toilet - Cistern Valve	FLW		<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			
Part B - Approved plumbing drawings							
(vi) Exposed Pipe							
15	Pipe Alignment	FW	21/F Flat A Rm 1 Complied with approved drawing	<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			
		FLW		<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			
Others							
		FW		<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			
		FLW		<input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> / N/A			

Checklist for Final Inspection (Form FI-A) - Site Inspection Photos

Address:	XX - XX, Hollywood Road, Central, HK
CCID:	XXXXXXXXXXXX
Inspection Date:	XX/XX/2016



Photo 1. - DN50 inlet pipe



Photo 2. - DN80 outlet pipe



Photo 3. - Copper/kembla



Photo 4. - Inlet valve / Kitz



Photo 5 - Outlet gate valve / Toyo



Photo 6 - Gate valve / AVK

Checklist for Final Inspection (Form FI-B) - Site Inspection Photos

Address:	XX - XX, Hollywood Road, Central, HK
CCID:	XXXXXXXXXXXX
Inspection Date:	XX/XX/2016



Photo 1. - DN50/Copper/Kembla



Photo 2. - DN50/bronze gate valve /Kitz



Photo 3. - DN50/Elbow/Copper



Photo 4. – Meter Door

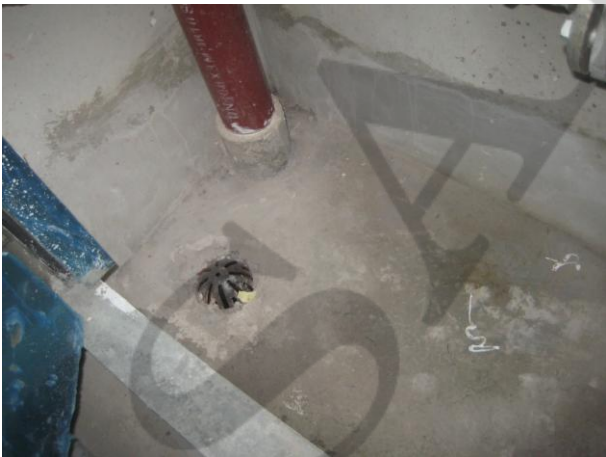


Photo 5 – Floor Drainage

Checklist for Final Inspection (Form FI-C) - Site Inspection Photos

Address:	XX - XX, Hollywood Road, Central, HK
CCID:	XXXXXXXXXXXX
Inspection Date:	XX/XX/2016



Photo 1. - Pipe material / Copper / Kembla



Photo 2. - Pipe Material / Copper / Kembla



Photo 3. - Pipe Fitting / Valve / TYT

Checklist for Final Inspection (Form FI-E)-Site Inspection Photos

Address:	XX - XX, Hollywood Road, Central, HK
CCID:	XXXXXXXXXXXX
Inspection Date:	XX/XX/2016



Photo 1. - DN50/Kembla/G/F Connection



Photo 2. - Copper/Kembla



Photo 3. - Bronze gate valve/Kitz



Photo 4. -50mm/Copper branch tee

Checklist for Final Inspection (Form FI-G) Site Inspection Photos

Address:	XX - XX, Hollywood Road, Central, HK
CCID:	XXXXXXXXXXXX
Inspection Date:	XX/XX/2016



Photo 1. - 67mm/copper/Kembla



Photo 2. - Copper/Kitz



Photo 3. - 67mm/copper branch tee /Lawton



Photo 4. - DN54/ PRV / XXXX

SFA

Checklist for Final Inspection (Form FI-F) Site Inspection Photos

Address:	XX - XX, Hollywood Road, Central, HK
CCID:	XXXXXXXXXX
Inspection Date:	XX/XX/2016



Photo 1. - 80mm/copper riser/Kembla



Photo 2. - 67mm/copper down feed /Kembla / Lawton



Photo 3 - 80mm/Kitz

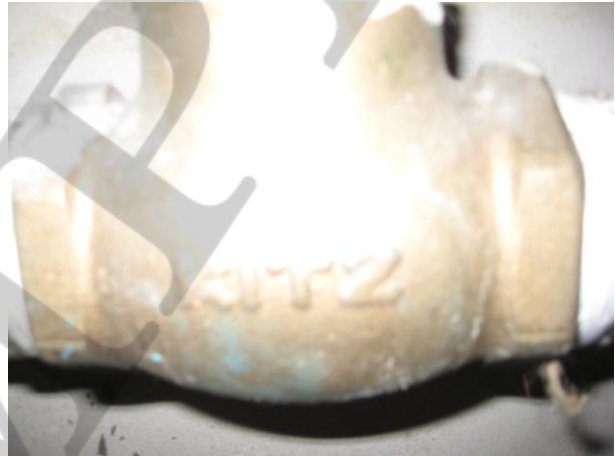


Photo 4 - 67mm/Kitz valve



Photo 5 - 80mm/Copper/Elbow



Photo 6 -67mm/ copper down pipe/Lawton



Photo 7 –Copper/Riser/Slow Bend



Photo 8 -50mm /PRV/ hot water



Photo 9 – 22 mm /PRV

SAMPLE

Checklist for Final Inspection (Form FI-H) - Site Inspection Photos

Address:	XX - XX, Hollywood Road, Central, HK
CCID:	XXXXXXXXXXXX
Inspection Date:	XX/XX/2016



Photo 1. - 28mm/Kembla/Copper pipe



Photo 2. - 28mm/Kitz/copper valve



Photo 3. - 28mm/Lawton/Copper fittings



Photo 4 -28mm/copper slow bend



Photo 5- 28mm/Lawton/copper branch tee



Photo 6 - sink mixer /Blanco



Photo 7 - Angle valve/Welson



Photo 8 - Basin tap /Cisal



Photo 9- Angle valve/Welson



Photo 10 - Shower mixer/ Brizo

SAMPLE

Glossary 辭彙對照表

英文詞條	中文詞條
Boundary Valve	邊界閥
Break Pressure Tank	減壓缸
Building Services Facilities (e.g. drainage and others etc.)	屋宇設備裝置 (例如 排水設備及其他等)
Certificate of Test of Lifting Appliances	承重裝置測試證明書
Clear Working Space	淨作業空間
Control Valve at Inlet	進水控制閥
Control Valve at Outlet	出水控制閥
Cover of Water Tank (e.g. double upstand edges for potable water tank)	水箱蓋 (例如 食水箱設有雙行豎邊)
Display Board	展示板
Door to Room / Cabinet (e.g. Opening dimensions, door handles) (Prohibition of self-closing door)	水錶房 / 箱入口 (例如 開口面積、門柄等) (不得加設任何自動關閉裝置)
Fittings - Branch Tee	配件 - 支管三叉
Fittings - Elbow	配件 - 曲尺喉
Fittings - Slow Bend	配件 - 慢灣
Fittings - Valve	配件 - 閥
Fittings - Valves	配件 - 閥
Flexible Joint of Pumpsets	水泵撓性接頭
FLW	沖廁水
FW	食水
Gate Valve	閘閥
Inlet Pipe Position	進水管位置
Inlet Pipe Size	進水管尺碼
Internal Surfaces of Floors, Walls and Soffits of Potable Water Tank	飲用水儲水缸缸底、缸壁和拱腹的內表層
Kitchen Tap No.1 - Tap / Mixer	1號廚房水龍頭 - 水龍頭 / 混合閥
Kitchen Tap No.1 - Angle Valve / Stop Valve	1號廚房水龍頭 - 曲尺閥 / 斷流閥
Kitchen Tap No.2 - Tap / Mixer	2號廚房水龍頭 - 水龍頭 / 混合閥
Kitchen Tap No.2 - Angle Valve / Stop Valve	2號廚房水龍頭 - 曲尺閥 / 斷流閥
Materials of Fittings	配件物料
Materials of Pipe	水管物料
Materials of Water Tank	水箱物料
No. of Pump	水泵數量
Non-return Valve	止回閥
Others	其他
Outlet Pipe Position	出水管位置
Outlet Pipe Size	出水管尺碼
Over Pipe Size	溢流管尺碼
Overflow Pipe with a Grating and Self-closing Flap	溢流管裝設格柵及自動關閉舌瓣
Overflow Pipe / Warning Pipe Discharge to a Conspicuous Position or Outside Building Periphery on Roof	溢流管 / 警戒管引至易於看見地方或在天台大廈外圍
Partially Completed Works - Fittings - Valves	部分完成工程 - 配件 - 閥
Partially Completed Works - Material of Pipe and Pipe	部分完成工程 - 水管物料及水管接合

Glossary 辭彙對照表

英文詞條	中文詞條
Partially Completed Works - Pipe Alignment	部分完成工程 - 水管路線
Partially Completed Works - Pipe jointing Method	部分完成工程 - 水管接合方法
Partially Completed Works - Pipe Size	部分完成工程 - 水管尺碼
Pipe Alignment	水管路線
Pipe Fittings (e.g. valves, elbows and slow bend, branch tee etc.)	水管配件 (例如 閘、曲尺喉及慢灣、支管三叉等)
Pipe Material	水管物料
Pipe Size	水管尺碼
Position of Connection Pipe	駁喉位置
Pressure Reducing Valve	減壓閘
Provision of Washout	排水管設備
Pump Data (as shown on plate)	水泵資料 (印在金屬板)
Rooftop Booster Pump for Topmost Floors - Branch Tee	給頂層用天台增壓水泵 - 支管三叉
Rooftop Booster Pump for Topmost Floors - Flexible Joints	給頂層用天台增壓水泵 - 撓性接頭
Rooftop Booster Pump for Topmost Floors - Gate Valve	給頂層用天台增壓水泵 - 閘閘
Rooftop Booster Pump for Topmost Floors - No. of Pump	給頂層用天台增壓水泵 - 水泵數量
Rooftop Booster Pump for Topmost Floors - Non-return	給頂層用天台增壓水泵 - 止回閘
Rooftop Booster Pump for Topmost Floors - Pump Data (as shown on plate)	給頂層用天台增壓水泵 - 水泵資料 (印在金屬板)
Safe Access for Cleansing or Repairs of Water Tanks	安全通道進行清洗及修理水箱
Siting Gap between Potable and Non-potable Tanks	飲用水儲水箱與非飲用水儲水箱之間留有空間
Siting of Master Meter / Check Meter Position	總水錶 / 檢測錶位位置
Siting of Meter / Check Meter Position	水錶 / 檢測錶位位置
Siting of Water Tank	水箱位置
Size of Connection Pipe	駁喉尺碼
Storage Capacity	存水量
Toilet No.1 - Angle Valve / Stop Valve	1號洗手間 - 曲尺閘 / 斷流閘
Toilet No.1 - Cistern Valve	1號洗手間 - 沖廁水箱閘
Toilet No.1 - Shower Mixer	1號洗手間 - 淋浴混合閘
Toilet No.1 - Wash Basin Mixer	1號洗手間 - 洗手盆混合閘
Toilet No.1 - Bath Mixer	1號洗手間 - 浴缸混合閘
Uninterrupted Access	暢通無阻進出
Universal Beam (e.g. lifting capacity etc.)	通用橫樑 (例如 承重能力等)
Warning Pipe not less than 25mm in Diameter	警戒管管徑不少於25毫米
Water Heater	熱水器