



Checklist / Resistance to Fire

Test reports should be requested before installation and carefully checked with the latest version of DS 9500 on our homepage www.owa.com!

Object/construction project	
Contact	Point of contact
Street	Zip code/City/Country

1.	<p>Loadbearing construction: (mark with a cross)</p> <p><input type="checkbox"/> Steel beam floor</p> <p><input type="checkbox"/> Steel roof construction with corrugated steel sheets insulation + mineral wool</p> <p><input type="checkbox"/> Gang nail timber trusses + mineral wool</p> <p><input type="checkbox"/> Timber floor</p> <p><input type="checkbox"/> other building types, please include as annex</p> <p>Self-contained fire protection unit Barriere <input type="checkbox"/>A <input type="checkbox"/>B <input type="checkbox"/>C</p>	Sketch of other building types include as annex please.
2.	Insulation (thickness, type, fastening)	
3.	Required fire resistance (REI, EI)	
4.	OWA KIT-No. – Test report	
5.	OWAcoustic® Dessin (certain product surfaces are non-applicable to all types of construction: see DS 9500 eu/e, see page 12 and 13)	
6.	Tile dimensions length x width x thickness [mm]	
7.	<p>System: (mark with a cross)</p> <p><input type="checkbox"/> S 3</p> <p><input type="checkbox"/> S 3 cliq</p> <p><input type="checkbox"/> S 3a</p> <p><input type="checkbox"/> S 3a cliq</p> <p><input type="checkbox"/> S 15 cliq</p> <p><input type="checkbox"/> S 15a cliq</p> <p><input type="checkbox"/> S 15b</p> <p><input type="checkbox"/> S 18p / S 6a</p> <p><input type="checkbox"/> S 1</p> <p><input type="checkbox"/> S 7</p>	<p>Centres of main tees:</p> <p>Centres of hangers:</p> <p>Hangers:</p> <p><input type="checkbox"/> Nonius hangers</p> <p><input type="checkbox"/> Double-adjustable hangers</p> <p><input type="checkbox"/> other.....</p>
8.	Cavity height (a = distance from bottom level loadbearing construction or insulation to top level OWAcoustic® tiles)	
9.	installations / structures [length x width x hight/kg]	<p><input type="checkbox"/> recessed light fittings, l x w x h/kg</p> <p><input type="checkbox"/> suspended fixture, l x w x h/kg</p> <p><input type="checkbox"/> other installations, type + l x w x h/kg</p> <p><input type="checkbox"/> fire box</p>
10.	Contractor	

Date / signature / stamp