



## DEPARTMENT OF PERMITTING SERVICES

Marc Elrich  
*County Executive*

Rabbiah Sabbakhan  
*Director*

### GENERAL REQUIREMENTS FOR EXISTING FIRE DOORS AND OTHER OPENING PROTECTIVES

#### (A) BACKGROUND

Fire doors, shutters, and windows are of no value unless they are properly maintained and close, or are able to close, at the time of a fire. A periodic inspection and maintenance program is generally the responsibility of the building owner. Hinges, latches, and closers are especially subject to wear on fire doors that get used often. Fire doors and other opening protectives must be inspected regularly to ensure that they are working properly and effectively.

#### (B) FIRE CODE REQUIREMENTS

1. 2021 Edition of NFPA 1: Section 12.4.2 Care and Maintenance of Fire Doors and Other Opening Protectives. Section includes, but is not limited to, the following: fire doors, fire shutters, fire windows and all associated hardware, glazing, frames, and links.
  - a. Doors, shutters, and windows shall be operable at all times.
  - b. Doors, shutters, and windows shall be kept closed and latched or be arranged for automatic closing.
2. INSPECTION SCHEDULE:
  - a. Opening protectives in walls, floors, and ceilings shall be visually inspected and operationally tested at least annually.
  - b. The inspection shall be performed in accordance with 2019 edition of NFPA 80.
  - c. The assembly shall be reset after the successful test.
  - d. Test records shall be retained for a period of at least three (3) years.
3. FCC PERMIT - ENDORSEMENT:
  - a. An endorsement will be added to the Fire Code Compliance (FCC) permit for any building containing opening protectives.
  - b. The FCC permit is required to be renewed annually. This signed affidavit must be submitted by uploading it to ePlans in order to renew your FCC permit.
  - c. A single endorsement per address for "Opening Protectives" will encompass all fire doors and other opening protectives described under sections 12.4.2 in the 2021 NFPA 1, *Fire Code*.

#### (C) INSPECTION TECHNICIAN PERSONNEL REQUIREMENTS

1. Persons performing the inspection of opening protective shall have the appropriate technical knowledge and understanding of the operating components of the type of assembly being



2425 Reedie Drive, 7<sup>th</sup> Floor · Wheaton, Maryland 20902  
311 · 240-777-0311 · 711 for [MD Relay TTY](https://www.montgomerycountymd.gov/MDRelayTTY)  
[www.montgomerycountymd.gov/dps](https://www.montgomerycountymd.gov/dps)

subjected to testing. These inspections may be performed by a building maintenance service provider competent in inspecting fire doors and other opening protectives.

2. Persons performing the inspection of the opening protectives shall submit the signed affidavit along with an inspection report of any found deficiencies to FCC via ePlans.

**(D) SERVICE REQUIREMENTS**

1. When maintenance or visual inspection reveals a deficiency, the opening protective shall be repaired, replaced, or otherwise installed under permit from the Department of Permitting Services.
2. Where a fire door or window opening no longer functions as an opening, or the door or window is removed and not replaced, the opening shall be filled to maintain the required rating of the wall assembly. This work shall be done under permit from the Department of Permitting Services prior to the commencement of work.

**AFFIDAVIT FOR EXISTING FIRE DOORS AND OTHER OPENING PROTECTIVES**

☐ **I have technical knowledge and understanding of fire doors and other protective openings.**

☐ **I performed an inspection and testing of the protective openings for the building located at**

\_\_\_\_\_  
(street address)

☐ **There were no deficiencies found during the inspection and testing of the protective openings.**

☐ **There were deficiencies found during the inspection of the protective openings. See the attached form.**

☐ **I certify, under penalty of perjury, that all matters and facts set forth in this affidavit are true to the best of my knowledge and belief and that I have the authority to make this application on behalf of the company, business, or organization referenced within. I further certify that I have a clear understanding of, and will adhere to, all instructions and requirements set forth in this document.**

**Signature of Fire Door Inspector:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Printed Name:** \_\_\_\_\_ **Title:** \_\_\_\_\_

## FIRE DOORS AND OTHER PROTECTIVE OPENINGS – DEFICIENCY REPORTING FORM

**Address:**

**Fire Door Inspector Name:**

**Email/phone:**

[illegible]

Date: