



Application for an Exemption (self-closure devices)

Complete in BLOCK CAPITALS and in black ink

Send completed form to: Isle of Man Fire and Rescue Service
Fire Service Headquarters
Tromode Road
Douglas
IM2 5PA
Telephone: +44 1624 647303
Email: iomfire@gov.im

To: **The Isle of Man Fire and Rescue Service**

Dear Sir,

I hereby apply for an exemption under Regulation 5 of the Fire Precautions (Houses in Multiple Occupation and Flats) Regulations 2016, to allow for the self-closure devices to be removed from the internal fire doors, in respect of the premises of which details are given below.

Yours faithfully,

Signature

Name (please print)

Date

1. Name and address of the occupier of the flat

Name

Flat No.

Address

Telephone number

Mobile number

Email address

For more details on how we process your data please refer to the Department of Home Affairs privacy notice available here: <https://www.gov.im/about-the-government/departments/home-affairs/home-affairs-privacy-notice/>



2. Reason for exemption request

3. Name and address of the owner of the premises (if different to the occupier)

Name	<input type="text"/>
Address	<input type="text"/>
	<input type="text"/>
	<input type="text" value="Postcode"/>
Telephone number	<input type="text"/>

In order for your application to be processed, please provide the following:

- **Correspondence from the owner of the flat giving consent for the self-closure devices to be removed. (N.B. The owner will need to inform their insurer of this change)**
- **Correspondence from a health professional stating the reasons for supporting your application.**

Exemption requests will be reviewed on an individual basis and may be subject to conditions so specified.