



# FIRE SAFETY PLAN WORKSHEETS

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# FIRE SAFETY PLAN WORKSHEETS

## BUILDING OWNER INFORMATION

Owner Name:			
Street Address:		Office Phone:	
Unit Number:		Office Fax:	
City:		Office Email:	
Province:		Contact Name:	
Postal Code:		Emergency Phone:	

## BUILDING MANAGERS / SUPERVISORS

Name:		Email:	
Position:		Pager Number:	
Home Phone:		Work Phone:	
Cell Phone:		Work Fax:	

Name:		Email:	
Position:		Pager Number:	
Home Phone:		Work Phone:	
Cell Phone:		Work Fax:	

Name:		Email:	
Position:		Pager Number:	
Home Phone:		Work Phone:	
Cell Phone:		Work Fax:	

## KEYHOLDER(S)

Name:		Email:	
Position:		Pager Number:	
Home Phone:		Work Phone:	
Cell Phone:		Work Fax:	

Name:		Email:	
Position:		Pager Number:	
Home Phone:		Work Phone:	
Cell Phone:		Work Fax:	

Name:		Email:	
Position:		Pager Number:	
Home Phone:		Work Phone:	
Cell Phone:		Work Fax:	





# FIRE SAFETY PLAN WORKSHEETS

## EVACUATION PROCEDURE


Procedure on a separate file?

### SAMPLE

UPON DISCOVERY OF A FIRE OR HEARING THE ALARM:

LEAVE THE FIRE AREA IMMEDIATELY  
 CLOSE ANY DOORS  
 LEAVE THE BUILDING VIA NEAREST EXIT  
 UPON REACHING A FIRE EXIT, SOUND THE FIRE ALARM SYSTEM BY ACTIVATING A FIRE PULL STATION TO ALERT OTHER OCCUPANTS  
 GO TO ASSIGNED ASSEMBLY AREA  
 CALL 911 TO NOTIFY THE FIRE DEPARTMENT  
 DO NOT USE ELEVATORS.  
 IF YOU ENCOUNTER SMOKE IN STAIRWAY USE ALTERNATE EXIT, REMAIN CALM.  
 IF YOU ARE REQUIRED TO STAY IN THE BUILDING DUE TO SMOKE OR HEAT, CALL THE FIRE DEPARTMENT (911) AND GIVE THE ADDRESS AND YOUR LOCATION IN THE BUILDING.  
 ON-SITE SUPERVISORY PERSONNEL WILL AWAIT THE FIRE DEPARTMENTS ARRIVAL, DO NOT SILENCE THE ALARM.

ONCE YOU ARE OUT OF THE BUILDING "STAY OUT".

## RE-ENTRY PROCEDURE


Procedure on a separate file?

### SAMPLE

RE-ENTER THE BUILDING ONLY IF THE FIRE DEPARTMENT HAS GIVEN THE ALL CLEAR.

DO NOT RESET ANY FIRE DETECTION EQUIPMENT. RESET IS ONLY TO BE DONE BY THE FIRE DEPARTMENT OR AN AUTHORIZED TECHNICIAN FROM \_\_\_\_\_ (CONTRACTOR)



# FIRE SAFETY PLAN WORKSHEETS

## FIRE DRILL PROCEDURE

Performed:	Once	Twice	Four Times	Six Times	Twelve Times

Procedure on a separate file?

### SAMPLE

THIS BUILDING WILL CONDUCT ONE FIRE ALARM DRILL EACH YEAR. THE DRILL WILL BE CONDUCTED AFTER CONSULTATION WITH THE LOCAL FIRE DEPARTMENT.

NOTICE WILL BE POSTED 1 WEEK PRIOR TO DRILL DATE.

ALL AUTHORITIES HAVING JURISDICTION WILL BE NOTIFIED PRIOR TO COMMENCEMENT OF THE DRILL AND UPON IT'S COMPLETION.

## EMPLOYEES

Shift Name:		Number per Shift:	
Shift Name:		Number per Shift:	
Shift Name:		Number per Shift:	
Shift Name:		Number per Shift:	
Day or Evening:			

## RESIDENTS / TENANTS

Totals Number:			
Daytime Number:		Evening Number:	

## SPECIAL ASSISTANCE OCCUPANCY

Name:		Floor #:	
Disability:		Suite #:	
Personnel Assistant:			
Information:			



# FIRE SAFETY PLAN WORKSHEETS

<b>Name:</b>		<b>Floor #:</b>	
<b>Disability:</b>		<b>Suite #:</b>	
<b>Personnel Assistant:</b>			
<b>Information:</b>			

Insert second sheet if required

## BUILDING DESCRIPTION: CLASSIFICATION

<b>Building Type (What is the Building Used for):</b>	
<b>Group and Division Classification:</b>	<b>GROUP A, DIVISION 1</b> – Assembly occupancies intended for the production and viewing of performing arts EXAMPLE: Motion Picture Theatre, Opera House, TV Studios with viewing Audience, or Theatres
	<b>GROUP A, DIVISION 2</b> – Assembly occupancies not elsewhere classified in Group A EXAMPLE: Art Galleries, Auditoria, Bowling Alleys, Churches, Clubs (nonresidential), Community Halls, Courtrooms, Dance Halls, Exhibition Halls, Gymnasium, Lecture Halls, Libraries, Licensed Beverage Establishments, Museums, Passenger Stations or Depots, Recreational Piers, Restaurants, Schools/College (nonresidential)
	<b>GROUP A, DIVISION 3</b> – Assembly occupancies of the arena type EXAMPLE: Arenas, Indoor Swimming Pool, Rinks
	<b>GROUP A, DIVISION 4</b> – Assembly occupancies in which occupants are gathered in the open air EXAMPLE: Amusement Park, Bleachers, Grandstands, Reviewing Stands, Stadium
	<b>GROUP B, DIVISION 1</b> – Care or detention occupancies in which person are under restraint or are incapable of self-preservation because of security measures not under their control EXAMPLE: Jails, Penitentiaries, Police Stations with Detention quarters, Prisons, Psychiatric Hospitals with Detentions quarters, Reformatories with Detention quarters
	<b>GROUP B, DIVISION 2</b> – Care or detention occupancies in which persons having cognitive or physical limitations require special care or treatment EXAMPLE: Children’s custodial homes, Convalescent homes, Hospitals, Infirmaries, Nursing homes, Orphanages, Psychiatric Hospitals without Detention quarters, Reformatories without Detention quarters, Sanitoria without Detention quarters
	<b>GROUP C</b> – Residential occupancies EXAMPLE: Apartments, Boarding House, Clubs (residential), College (residential), Convents, Dormitories, Hotels, Houses, Lodging House, Monasteries, Motels
	<b>GROUP D</b> – Business and personal services occupancies EXAMPLE: Banks, Hairdresser, Beauty Parlors, Dental Office, Dry Cleaners (self-service), Laundries (self-service), Medical Offices, Offices, Police Stations without Detention quarters, Radio Stations, Small tool and appliance rental and service
	<b>GROUP E</b> – Mercantile occupancies EXAMPLE: Department stores, Exhibition Halls, Markets, Shops, Stores, Supermarkets



# FIRE SAFETY PLAN WORKSHEETS

	<p><b>GROUP F, DIVISION 1</b> – High hazard industrial occupancies          EXAMPLE: Bulk Plants for flammable liquids, Bulk Storage for hazardous substances, Cereal Mills, Chemical manufacturing or processing plants, Distilleries, Dry Cleaning plants, Feed Mills, Flour Mills, Grain Elevators, Lacquer factories, Mattress factories, Paint/Varnish/Pyroxylin factories, Rubber processing plant, Spray painting operation, Waste paper processing plant</p>
	<p><b>GROUP F, DIVISION 2</b> – Medium hazard industrial occupancies          EXAMPLE: Aircraft hangers, box factories, candy plants, cold storage plants, dry cleaning not self-service, Electrical substations, factories, Freight depots, Helicopter Landing areas, Laboratories, Laundries not self-service, Mattress factories, Planing Mills, Printing plants, Repair Garages, Salesrooms, Service Stations, Storage Rooms, TV Studios with no audience, Warehouse, Woodworking factories, Workshops</p>
	<p><b>GROUP F, DIVISION 3</b> – Low hazard industrial occupancies          EXAMPLE: Creameries, Factories, Laboratories, Power Plants, Salesrooms, Sample Display rooms, Storage Garages, Open air parking garages, Storage rooms, Warehouses, workshops</p>
<b>Primary Construction Type:</b>	<b>TYPE 1 – Non-Combustible</b> Structural members are of non-combustible materials that are protected from fire by various methods that meet or exceed requirements.
	<b>TYPE 2 – Heavy Timber</b> Constructed with wooden timbers of large dimensional lumber and typically masonry exterior walls.
	<b>TYPE 3 – Partially Combustible</b> Exterior walls are masonry and interior floors and roofs are constructed of wood or other combustible materials.
	<b>TYPE 4 – Combustible</b> Constructed of all wooden members or similar materials.
<b>Construction Notes:</b>	<div style="border: 1px solid black; height: 100px; width: 100%;"></div>



# FIRE SAFETY PLAN WORKSHEETS

## BUILDING SIZE

Enter information for this building in		FEET	METERS
<b>ABOVE GRADE</b>			
# of Stories:		Height of Typical Storey:	
Height of 1 <sup>st</sup> Storey:		Height of 2 <sup>nd</sup> Storey:	
<b>BELOW GRADE</b>			
# of Stories:		Height of Typical Storey:	
<b>PARTIAL STORIES</b>			
Is there a Penthouse?		Other Info:	
<b>BUILDING AREA INFORMATION</b>			
Building Area (per floor, between exterior walls and fire walls):			
Gross Area (sum of all areas in building):			

## LOCK BOX

Type:	Chubb	Knox	Other
Location:		Height from Grade (m.):	
Is there a Fire Department Window Decal?			

## ON-SITE SECURITY & ACCESS

Type:	24 Hrs	Days	Nights	Weekends
Company Name:		Phone:		
Information:				
Does the building have security dogs? How Many?				

## ON-SITE INFORMATION

<b>Fire Safety Plan</b>			
Location:		Revised Date:	
<b>WHIMS Records</b>			
Does the building contain WHIMS Records?			
Location:		Revised Date:	

## FIRE ALARM SYSTEM

Make:		Model:	
Number of Zones?		Number of Stages?	Single Stage / 2 Stage
Service Company Name:			
CONTINUED PAGE 10			







# FIRE SAFETY PLAN WORKSHEETS

## WATER SUPPLY/HYDRANTS

Source: Municipal or Private Size: Class C (Less than 500 GPM), Class B (500-999 GPM), Class A (1000-1499 GPM), Class AA (1500 GPM and above), unknown				
Name:	Source:	Distance (m.):	Location:	Size:

## SECONDARY WATER SUPPLY/HYDRANTS

Source: Tanker Response, Reservoirs, Elevated Tank			
Name:	Source:	Location:	Details:

## SPRINKLER SYSTEM

Full or Partial Coverage?				
Supervised by: Fire Alarm System, Monitor System, Stand Alone Type: Antifreeze Loop, Deluge, Dry, Foam, Mist, Preaction, Wet				
Name:	Type:	Supervised:	Coverage	Details

## SPRINKLER SYSTEM: SERVICE COMPANY

Service Company Name:			
Contact Name:			
Phone:		Email:	

## SPRINKLER SYSTEM: RISER

Riser Name:	Location:	Sprinkler System:



# FIRE SAFETY PLAN WORKSHEETS

Riser Name:	Location:	Sprinkler System:

## SPRINKLER SYSTEM: FIRE DEPT. CONNECTION

FDC Name:	Location:	Sprinkler System:

## SPRINKLER SYSTEM: FIRE PUMP

Pump Name:	Location:	Sprinkler System:

## SPRINKLER SYSTEM: MAIN CONTROL VALVE

Valve Name:	Location:	Sprinkler System:

## SPRINKLER SYSTEM: ISOLATION VALVE

Valve Name:	Location:	Sprinkler System:

## SPRINKLER SYSTEM: POST INDICATOR VALVE

Valve Name:	Location:	Sprinkler System:



# FIRE SAFETY PLAN WORKSHEETS

## SPRINKLER SYSTEM: WATER MOTOR GONG

Gong Name:	Location:	Sprinkler System:

## STANDPIPE SYSTEM

Full or Partial Coverage?			
Supervised:	Fire Alarm System	Monitor System	Stand Alone
Name:			
Type:	Dry		Wet
Hose Cabinet:	2 ½" Connector	1 ½" Connector	1 ½" & 2 ½" Connector
Details:			

## STANDPIPE SYSTEM: FIRE DEPT. CONNECTION

FDC Name:	Location:	Standpipe System:

## STANDPIPE SYSTEM: MAIN CONTROL VALVE

Valve Name:	Location:	Standpipe System:

## STANDPIPE SYSTEM: ISOLATION CONTROL VALVE

Valve Name:	Location:	Standpipe System:





# FIRE SAFETY PLAN WORKSHEETS

## FIXED EXTINGUISHING SYSTEM

<b>Supervised:</b>	Fire Alarm System	Monitor System	Stand Alone
<b>Name:</b>			
<b>Location:</b>			
<b>Type:</b>	Chemical	CO2	Kitchen
<b>Appliance Power:</b>	Gas	Electrical	
<b>Appliance Shut Off Procedure:</b>			
<b>Service Company:</b>			
<b>Contact Name:</b>		<b>Phone:</b>	
<b>Details:</b>			

## DOMESTIC WATER SUPPLY

<b>Information about the buildings Main Water Shut Off</b>	
<b>Used for heating the building?</b>	
<b>Location:</b>	

## DOMESTIC WATER SUPPLY SECONDARY SHUTOFF

<b>Name:</b>	<b>Location:</b>

## ELECTRICITY: SUB STATIONS

<b>Name:</b>	<b>Location:</b>



# FIRE SAFETY PLAN WORKSHEETS

## ELECTRICITY: TRANSFORMER VAULTS

Name:	Location:

## ELECTRICITY: MAIN PANELS AND DISCONNECTS

Name:	Location:

## ELECTRICITY: EMERGENCY GENERATORS

Name:	Coverage: Full/Partial	Location:	Transfer Switch Location:

## ELECTRICITY: EMERGENCY & EXIT LIGHTING

Name:	Model/Type:	Location:



# FIRE SAFETY PLAN WORKSHEETS

## FUEL

Type:	Shut-off Location	Used for heat?	Used for appliances?

## GARBAGE DISPOSAL

Sprinkler Coverage?		
Garbage Chute, Garbage Compactor, Garbage Exterior Storage, Garbage Room		
Name:	Type:	Location:

## ELEVATING SYSTEMS

Does the building have elevators?	
Elevator Service Company Name:	
Contact Name:	
Phone:	
Email:	

## ELEVATING SYSTEMS

Types: Red (Firefighter), Yellow (Retrofit), Service Elevators, Dumb Waiters, Escalators, Conveyor Chutes, Handicap Lifts, Machine Room		
Name:	Type:	Location:





# FIRE SAFETY PLAN WORKSHEETS

## ACCESS & STAGING RESTRICTIONS

Type: Fire Route, Fenced Area, Gateway, Retaining Wall, Roof Canopy/Overhang, Parking		
Name:	Type:	Location:

## PARKING GARAGES

Type: Above Ground, Below Ground, Open Storey Code: Controlled, Open Access			
Name:	Type:	Code:	Location:

## HAZARDOUS MATERIALS

SEE FORM

## EMERGENCY COORDINATOR

Name:		Email:	
Position:		Pager Number:	
Home Phone:		Work Phone:	
Cell Phone:		Work Fax:	

## HAZARDOUS MATERIALS RESPONDER

Name:		Email:	
Position:		Pager Number:	
Home Phone:		Work Phone:	
Cell Phone:		Work Fax:	



# FIRE SAFETY PLAN WORKSHEETS

## CHEMICAL EXPERTS

Name:		Email:	
Position:		Pager Number:	
Home Phone:		Work Phone:	
Cell Phone:		Work Fax:	

Name:		Email:	
Position:		Pager Number:	
Home Phone:		Work Phone:	
Cell Phone:		Work Fax:	

## HAZARDOUS MATERIALS CONTRACTOR

Name:		Email:	
Position:		Pager Number:	
Home Phone:		Work Phone:	
Cell Phone:		Work Fax:	

## HAZARDOUS MATERIALS OTHER CONTACT

Name:		Email:	
Position:		Pager Number:	
Home Phone:		Work Phone:	
Cell Phone:		Work Fax:	

Name:		Email:	
Position:		Pager Number:	
Home Phone:		Work Phone:	
Cell Phone:		Work Fax:	

Name:		Email:	
Position:		Pager Number:	
Home Phone:		Work Phone:	
Cell Phone:		Work Fax:	

