

FIRE SAFETY AUDIT AND DATA GATHERING FORM

| | | | |
|---|--|---|--|
| Premises Information | | | |
| Organisation Name | | | |
| Building Name & No | | | |
| Street | | | |
| Locality | | Building/Unit No <i>Area within the building</i> | |
| Town/City | | Post Code | |
| | | | |
| Case Number | | Inspector Name | |
| Date and Time of Audit | | Number of occupiers <i>Complete separate form for each</i> | |
| | | | |
| Premises Classifications | | | |
| FSEC Code | | Risk Group | |
| Premises Classification | | | |
| | | | |
| PART A - FIRE SAFETY SITE ASSESSMENT | | | |
| | | | |
| Occupier Details | | | |
| Name | | | |
| Registered Address of Occupier | | | |
| Post Code | | Tel. No. ☎ | |
| | | | |
| Owner Details | | | |
| Name | | | |
| Registered Address of Owner | | | |
| Post Code | | Tel. No. ☎ | |
| | | | |
| Responsible Person Details | | | |
| Name | | Position | |
| Telephone No | | Mob. Tel. No. | |

| | | | |
|--|--|---------------|--|
| Fax No | | Email Address | |
| Person Providing Information <i>If different from above</i> | | | |
| Name | | Position | |
| Tel. No. ☎ | | Mob. Tel. No. | |
| Fax. No. | | Email Address | |

| | | | |
|---|--|--|-------------------------|
| Occupancy Details | Number of Occupants <i>Peak numbers (whole premises)</i> | | |
| Occupancy Profile. <i>Maximum number of persons affected by smoke, heat flame from a <u>single compartment fire</u> within 30 minutes, With no evacuation taking place.</i> | | | |
| Ranges: N = None A <20 B 20 – 49 C 50 – 99 D 100 – 999 E >1000 | Weekdays | | Weekends |
| | 0000 – 0400 | | 0000 – 0400 |
| | 0400 – 0800 | | 0400 – 0800 |
| | 0800 – 1200 | | 0800 – 1200 |
| | 1200 – 1600 | | 1200 – 1600 |
| | 1600 – 2000 | | 1600 – 2000 ✓ |
| | 2000 – 2400 | | 2000 – 2400 |
| Description of Occupants | | | ✓ (one box only) |
| | Atypically mobile for this type of occupancy – Above average mobility | | |
| | Average mobility for this type of occupancy – Average | | |
| | Un-typically vulnerable for this type of occupancy – Below Average mobility | | |

| | | | | |
|---|-------|------|-------------------------------------|------------------------|
| Potential Loss / Risk | ✓ Yes | ✓ No | If yes, give brief details | |
| UK Sole Supplier <i>Providing high value or unique service products</i> | | | | |
| Exceptional Value <i>Value of rebuild and restock</i> | | | | |
| Historic Building <i>Building of national importance or international significance</i> | | | | |
| Community Loss <i>Exceptional value or impact to the community</i> | | | | |
| Chemical Site | | | | |
| COMAH Site | | | ✓ Tier of site | |
| | | | Top | |
| | | | Lower | |
| Environmental Risk <i>Significant impact on the environment or community in the event of fire or other incident</i> | ✓ Yes | ✓ No | Type | ✓ All boxes that apply |
| | | | If yes, record brief details below: | Air |
| | | | | Explosive |

| | | |
|--|---------------------|--|
| | | |
| | Water Contamination | |
| | Biological | |
| | Nuclear | |
| | Chemical | |
| | Radiation | |

Property Loss

| | | | | | |
|--|---|-----------------------|---|---|-----------------------|
| Property Loss <i>Estimate the extent of fire & smoke damage arising from an uncontrolled fire and whether it is likely to be confined to an area</i> <i>Note: Without fire-fighting intervention of any description</i> | Note: Complete only 1 section A or B tick only one box | | | | |
| | SECTION A | | | SECTION B | |
| | Damage confined to | | | Damage beyond building of origin | |
| | | ✓ one box only | Damage estimate (nearest 50m ²) | Area of damage (m ²) | ✓ one box only |
| | Room or compartment of origin | | | <500m ² | |
| | Floor of origin | | | 500 – 999 m ² | |
| | | | | 1000 – 9999 m ² | |
| | Building of origin | | | 10000 – 100000 m ² | |
| | | | >100000 m ² | | |

Premises Features

| | | | | | |
|--|-------------|------------|------------------------------------|--------------------------------|-------------------------------|
| Fire - Fighter Hazard <i>Building or contents, which may pose a risk to fire fighters.</i> | ✓Yes | ✓No | | FF. Hazard | ✓ All boxes that apply |
| | | | If yes, give brief details: | Basement | |
| | | | | Hazchem | |
| | | | | Underground Structure | |
| | | | | Explosives | |
| | | | | Highly Flammables | |
| | | | | Unfenestrated Compartment | |
| | | | | Hazardous Processes | |
| | | | | Sandwich Panels | |
| | | | Unstable Structure | | |
| Are There Fire-Fighting Facilities? | ✓Yes | ✓No | | FF. Facility/Feature | ✓ All boxes that apply |
| | | | If yes, give brief details: | Dry Risers | |
| | | | | Wet Risers | |
| | | | | Fire Fighting (Ff) Shaft/s | |
| | | | | Dry Risers > 8 bar | |
| | | | | Ff Shaft/s with Ff Lift | |
| | | | | Wet Risers > 8 bar | |
| | | | | Staircase with Firemain B5 ADB | |
| | | | | Other | |

| | | | | | | | | | | |
|--|------|-----|--|-------------|--|--|---------------|-------------------------------|----------------------------|--|
| Smoke Control <i>Extract or positive pressure control system provided in common areas or means of escape</i> | ✓Yes | ✓No | | | | | ✓one box only | | | |
| | | | | | | | | | | |
| | | | | | Basement Clearance (ADB – Requirement) | | | | | |
| | | | | | Mechanical Extract | | | | | |
| | | | | | Natural Extract | | | | | |
| | | | | Pressurised | | | | | | |
| Sprinkler System <i>Is there an operational sprinklers system</i> | ✓Yes | ✓No | If yes, ✓ one box only to record % of sprinkler coverage | | | | | Type of system ✓ one box only | | |
| | | | 100% | | 90% | | 80% | | Life Safety System | |
| | | | 70% | | 60% | | 50% | | | |
| | | | 30% | | 20% | | 10% | | Property Protection System | |
| | 40% | | | | | | | | | |
| | | | | | | | | Life and Property | | |

| | | | | | | | | |
|--|----------------------|------------|------------------------|--------|-------------------------|------------|--------------------|--|
| Building Features Which May Assist Fire Spread <i>If yes, tick one or more boxes on the right</i> | ✓Yes | ✓No | ✓ All boxes that apply | | | | | |
| | | | Atrium | | Surface Spread of Flame | | | |
| | | | Unprotected Ducts | | Unprotected Voids | | | |
| | | | Other | | Details: | | | |
| Adequacy of fire warning system | ✓Yes | ✓No | ✓ only one box below | | | | | |
| Central Alarm Station - Monitored Fire Alarm System <i>auto-dialler</i> | | | More than Adequate | | Adequate | | Less than Adequate | |
| Building Size <i>See Floor space factors for floor areas for different occupancy types by FSEC group</i> <u>Do not use for common areas</u> | ✓ only one box below | | | | | | | |
| | Extremely Small | Very Small | Small | Medium | Large | Very Large | Extremely Large | |
| | | | | | | | | |

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|--|--|---|--|
| Height of building/premises | | | |
| Total Number of Storeys in the Building <i>Maximum height of the building including basements</i> | | Total Number of Basements in Building <i>Total number of levels of basements in building</i> | |
| No. Occupancy Storeys <i>No of storeys used by this occupier</i> <u>Do not use for common areas</u> | | No. of Occupancy Basements <i>No of basement levels used by this occupier where appropriate</i> <u>Do not use for common areas</u> | |

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|--|--|--|
| Levels Occupancy Occupies <i>Only complete if multi – occupied, specify the actual storeys occupied by this occupier including basements E.G. 1, 3, and 5. Do not use for common areas</i> | | |
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Part B - FIRE SAFETY AUDIT

| Article | | | | |
|-----------|--|------------|-----------|-----------------------|
| 9 | Risk Assessment | Yes | No | |
| | Has a FRA been carried out? | | | |
| | Is FRA Suitable, Sufficient and Reviewed? | | | |
| | Comments i.e. Have items on action plan been implemented? | | | |
| 10 | Principles of prevention to be applied. | Yes | No | Not Applicable |
| | Arson Prevention Measures Adequate? | | | |
| | Heating System Regularly Serviced? | | | |
| | Heating System Causing Fire Risk? | | | |
| | Electrical Equipment Suitable? | | | |
| | Electrical Installation Regularly Tested? | | | |
| | Electrical PAT Testing Carried Out? | | | |
| | Cooking Ductwork/Ventilation Clean? | | | |
| | Dangerous Plant Shutdown on Evacuation? | | | |
| | House Keeping Suitable? | | | |
| | Storage of Flammables Suitable? | | | |
| | Hot Work Processes on Site | | | |
| | Hot Work Processes Controlled? | | | |
| | Other? (Please specify in comments box) | | | |
| | Comments: i.e. has the RP implemented the principles to reduce the risk of fire? | | | |
| 11 | Fire Safety Arrangements | Yes | No | |

| | | |
|---|--|--|
| Appropriate Fire Safety Arrangements in Place? | | |
| Effective Communication Informing Employees? | | |
| Emergency Plan in Policy or Kept Under Review? | | |
| Written Policy Available? | | |
| Responsibilities Clearly Defined? | | |
| Other? (Please specify in comments box) | | |
| Comments: i.e. has the RP put arrangements in place to ensure fire safety matters are controlled, reviewed and managed adequately, given the size and use of the premises. | | |

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|-----------|--|-----------------|--------------------|-----------------------|-----------------------|
| 17 | Maintenance | Adequate | Minor Issue | Major Issue | Not applicable |
| | Emergency Lighting Adequately Maintained? | | | | |
| | Emergency Lighting Regularly Inspected? | | | | |
| | Fire Alarm Adequately Maintained? | | | | |
| | Fire Alarm Regularly Inspected? | | | | |
| | Fire Doors Maintained? | | | | |
| | Fire-Fighting Equipment Maintained? | | | | |
| | Fire-Fighting Equipment Regularly Inspected? | | | | |
| | Means of Escape Maintained? | | | | |
| | Other? (Please specify in comments box) | | | | |
| | Comments | | | | |
| 38 | Maintenance of measures provided for protection of firefighters | Yes | No | Not applicable | |
| | Article Applicable? | | | | |
| | Co-operation Between Responsible Persons? | | | | |
| | Dry Rising Mains Maintained? | | | | |
| | Engineered Solution Maintained? | | | | |
| | Protected Shafts Maintained? | | | | |
| | Ventilation Adequately Maintained? | | | | |
| | Wet Rising Mains Maintained? | | | | |
| | Other? (Please specify in comments box) | | | | |
| | Comments | | | | |
| 19 | Provision of Information to Employees | Yes | No | Not Applicable | |
| | Article Applicable? | | | | |

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|--|--|--|--|
| Risks & Fire Hazards? | | | |
| Preventative & Protective Measures? | | | |
| Emergency Procedures? | | | |
| Nominated FFE & Evacuation Employees? | | | |
| Adjacent Premises Risk & Hazards? | | | |
| Dangerous Substances? | | | |
| Risk Info to Other Responsible Persons? | | | |
| Risk Info to Parents of Employed Children? | | | |
| Other? (Please specify in comments box) | | | |
| Comments | | | |

| | | | | | |
|-----------|--|------------|--------------------|-----------------------|--------------------|
| 20 | Provision of information to employers and the self-employed from outside undertakings | Yes | No | Not Applicable | |
| | Article Applicable? | | | | |
| | Risks Info to Employers/Self Employed? | | | | |
| | Emergency Procedures Info to Employers? | | | | |
| | Other? (Please specify in comments box) | | | | |
| | Comments | | | | |
| 22 | Co-operation and Co-ordination | Yes | No | Not applicable | |
| | Article Applicable? | | | | |
| | Adequate Co-operation Between Responsible Persons? | | | | |
| | Adequate Info to Other Responsible Persons? | | | | |
| | Steps Taken Allowing Others to Comply? | | | | |
| | Other? (Please specify in comments box) | | | | |
| | Comments | | | | |
| 21 | Training | Yes | | | |
| | Article Applicable? | | No | | |
| | Adequate FS Training? | | Minor Issue | | Major Issue |
| | Adequate FS Refresher Training? | | No | | |
| | Training for New Equipment/Procedures? | | No | | |
| | Other? (Please specify in comments box) | | Minor Issue | | Major Issue |

| | | | |
|-----------|---|------------|-----------|
| | Comments | | |
| 12 | Elimination/ Reduction of risk from dangerous substances | Yes | No |
| | Article Applicable? | | |
| | Ignition Sources Controlled? | | |
| | Detrimental Effects Mitigated? | | |
| | Substance Handled, Stored, Transported Safely? | | |
| | Dangerous Substance Risks Eliminated/Reduced? | | |
| | Suitable Signage & Safety Info? | | |
| | Other? (Please specify in comments box) | | |
| | Comments | | |

| | | | | |
|-----------|---|------------|-----------|--|
| 16 | Additional emergency measures in respect of dangerous substances | Yes | No | |
| | Article Applicable? | | | <i>Note: Applicable only where article 12 proves inadequate to manage dangerous substances</i> |
| | Emergency Plans in Place? | | | |
| | Emergency Arrangement Info Available? | | | |
| | Emergency Escape Facilities Provided? | | | |
| | Info Displayed at Premises? | | | |
| | Info Provided to Emergency Services? | | | |
| | PPE, Equipment & Plant Available? | | | |
| | Suitable Evacuation Warning System? | | | |
| | Other? (Please specify in comments box) | | | |
| | Comments | | | |
| 18 | Safety Assistance | Yes | No | |
| | Article Applicable? | | | |
| | Sufficient Competent Persons Trained/Appointed? | | | N/A |
| | Sufficient Info Given to Employees? | | | N/A |
| | Sufficient Info to Other Employers? | | | N/A |
| | Co-operation Between Appointed Persons? | | | N/A |
| | Other? (Please specify in comments box) | | | |
| | Comments | | | |

| | | | | |
|-----------|---|------------|-------------------------|-------------------------|
| 14 | Emergency Routes and Exits | Yes | No - Minor issue | No - Major issue |
| | Adequate Emergency Exit Signage? | | | |
| | Adequate Emergency Lighting? | | | |
| | Able to Evacuate Quickly & Safely? | | | |
| | Fire Exits Appropriately Fastened? | | | |
| | Door Opening Direction Appropriate? | | | |
| | Appropriate Use of Revolving/Sliding Doors? | | | |
| | Exits/Emergency Routes Kept Clear? | | | |
| | Emergency Routes Lead Directly to Safe Place? | | | |
| | Adequate No. Distribution of Routes/Exits? | | | |
| | Other? (Please specify in comments box) | | | |
| | Comments | | | |
| 8 | General Fire Precautions | Yes | No - Minor issue | No - Major issue |
| | Adequate Reduction of Fire Risk? | | | |
| | Adequate Mitigation of Fire Spread? | | | |
| | Other? (Please specify in comments box) | | | |
| | Comments | | | |
| 13 | Fire Warning | Yes | No - Minor issue | No - Major issue |
| | Adequate Fire Alarm System Installed? | | | |
| | Adequate Audible/Visual Warning? | | | |
| | Fire Detection/Call Points Adequate? | | | |
| | Good Management of Unwanted FA Signal? | | | |
| | Other? (Please specify in comments box) | | | |
| | Comments | | | |
| 13 | Fire Fighting Equipment | Yes | No | |
| | Fire Fighting Equipment Provided? | | | |
| | Fire Fighting Provision Adequate? | | | |

| | | | |
|-----------|--|------------|-----------|
| | Fire Fighting Equipment is Suitably Positioned? | | |
| | Training Provided for Fire Fighting Equipment? | | |
| | Other? (Please specify in comments box) | | |
| | Comments | | |
| 15 | Procedures for serious and imminent danger and for danger areas | Yes | No |
| | Fire Evacuation Procedures in Place? | | |
| | Evacuation Plan Accounts for Disabled Persons? | | N/A |
| | Competent Person to Manage Evacuations? | | |
| | Safety Drills Organised & Practiced? | | |
| | Persons Exposed to Risk (No Training)? | | |
| | Other? (Please specify in comments box) | | |
| | Comments | | |

| | | | |
|-----------|---|------------|-----------|
| 37 | Fire-Fighters' switches for luminous tube signs etc. | Yes | No |
| | Article Applicable? | | |
| | Has Luminous Tube Sign Cut-Off Switch? | | |
| | Switch Appropriately Positioned/Marked? | | |
| | Notified KFRS of Proposed Switch Installation? | | |
| | Complied With Notice Regarding Switch? | | |
| | Other? (Please specify in comments box) | | |
| | Comments | | |
| 23 | General duties of employees at work | Yes | No |
| | Article Applicable? | | |
| | Reasonable Care Taken by Employees? | | |
| | Employees Co-operating? | | |
| | Hazards Identified by Employee Reported? | | |

| | | |
|---|--|--|
| Other? (Please specify in comments box) | | |
| Comments | | |

Additional comments – Overflow entries above

| | |
|-----------|--|
| Article.. | |
| Article.. | |
| Article.. | |
| Article.. | |

Non Scoring Articles

| Article | | ✓ Tick appropriate box | | | | | |
|---------|--|------------------------|--|----|--|-----|--|
| 27 | Powers of inspectors Has the responsible person prevented an inspector from exercising their power under this Article where a prosecution has not been taken | Yes | | No | | | |
| | Comments | | | | | | |
| 29 | Current alterations notices Has the Responsible Person failed to comply with any alterations notice served on the premises where a prosecution has <u>not</u> been taken | Yes | | No | | N/A | |
| | Comments | | | | | | |

| | | | | | | | | |
|----|---|-----|--|----|--|-----|--|--|
| 30 | Current enforcement notices Has the responsible person failed to comply with any enforcement notice served on the premises where a prosecution has not been taken | Yes | | No | | N/A | | |
| | Comments | | | | | | | |
| 31 | Current prohibition notices Has the responsible person failed to comply with any prohibition notice served on the premises where a prosecution has not been taken | Yes | | No | | N/A | | |
| | Comments | | | | | | | |
| 32 | Offences Has the responsible person failed to comply with any other Article, not mentioned elsewhere on this form, where a prosecution has not been taken | Yes | | No | | N/A | | |
| | Comments | | | | | | | |
| 24 | Powers to make regulations Article 24 Secretary of State's Power to make additional regulations about fire precautions | Yes | | No | | N/A | | |
| | Comments | | | | | | | |

Enforcement Management Model

Responsible Person Factor

| | | | | | |
|--|-----------------|--|----------------------|--|------------------------|
| Previous Enforcement Action Taken | Yes | | No | | |
| Ops Incident History | None | | Some | | Extensive and Relevant |
| FS Inspection History | Good | | Average / No History | | Poor |
| Deliberate Non Compliance | Inadvertent | | Omission | | Deliberate |
| Financial Advantage Sought | None | | Inadvertent | | Deliberate |
| Standard of General Conditions | Good | | Reasonable | | Poor |
| Responsible Person Co-operation / Attitude | Positive | | Reasonable | | Hostile / Indifferent |
| Level of Significant Risk | Low Significant | | Significant | | Very Significant |

| Strategic Factors | | | | |
|---|----------------------|--|----------------------|--|
| Action in Public Interest | No | | Yes | |
| Are Vulnerable Groups Protected? | No | | Yes | |
| Long Term Impact | No Long Term Impact | | Sustained Compliance | |
| Effect on Other Responsible Persons | Positive | | Negative | |
| Initial Effect | Benchmark Incomplete | | Benchmark Achieved | |
| Functional Effect | Unacceptable | | Acceptable | |
| Enforcement Principles & Expectations Met | No | | Yes | |

PART C - Management & Other Issues

| | | | | | |
|---|---------------------|--|----------|------|---------------------|
| Fire History (Last 3 years) | None | | Yes | | |
| Unwanted Fire Signals (Last 3 years) | None | | Yes | | |
| Fire Setting in Area (Last 3 years) | None | | Yes | | |
| Fire Loading | Lower than Average | | Average | | Higher than Average |
| Fire Fighting Access | Better than Average | | Average | | Poorer than Average |
| Water Supplies | Better than Average | | Average | | Poorer than Average |
| Peak Time Occupancy | Less than 20 | | 20 – 100 | | More than 100 |
| | | | | | |
| Signature of Inspector | | | | Date | |
| Signature of Fire Safety Manager (following management Review where necessary) | | | | Date | |

| | | |
|--|-----------------------------|--|
| Other Information Details of any other relevant information | Matters referred to CS ✓ | |
| | FS6/1 sent ✓ | |

Comments