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| **Fire Risk Assessment** |
| **1** | **Premises particulars** |
| **Premises name:** |  |
| **Address:** |  |
| **Use of premises:** |  |
| **Employer/ Owner/****Person(s) in control of the workplace:**  |  |
| **Date of assessment:** |  | **Date(s) reviewed:** |  |
| **Date for next review:** |  |
| **Name and relevant details of the person undertaking the Fire Risk Assessment/ review:**  |
|  |
| **Signed:**  |  | **Date:**  |  |

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| **2** | **General statement of policy** |
| **Statement:** |
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| **3** | **General description of premises** |
| **Description** |
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| **Occupancy** |
| **Times the Premises are in use** | **From:** |  | **To:** |  |
| **The total number of persons employed within the premises at any one time:** |  |
| **The total number of persons who may be present (including visitors) at the premises at any one time:** |  |
| **Size** |
| **Building foot print (metres x metres)** |  |
| **Number of floors:** |  |
| **Number of Stairs:** |  |

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| **4** | **Plan drawing** |
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| **5** | **Identify fire hazards** |
| **Ignition sources:** |
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| **Fuel sources:** |
|  |
| **Work processes:** |
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| **Structural features that could promote the spread of fire:** |
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| **6** | **Identify people at risk** |
| **Identify people at risk in the event of a fire and their location within the premises. Outline why they are at risk, and what control measures are (or need to be) in place.** |
| **Commentary:** |
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| **7** | **Means of escape – horizontal evacuation** |
| **Commentary:** |
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| --- | --- |
| **8** | **Means of escape – vertical evacuation** |
| **Commentary:** |
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| --- | --- |
| **9** | **Fire safety signs and notices** |
| **Commentary:** |
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| **10** | **Fire detection and warning** |
| **Commentary:** |
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| **11** | **Emergency lighting** |
| **Commentary:** |
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| **12** | **Fire-fighting equipment** |
| **Commentary:** |
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| **13** | **Other fire safety systems (e.g. sprinklers, automatic smoke extraction)** |
| **Commentary:** |
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| **14** | **Maintenance**  |
| **Is there a maintenance program for the fire safety provisions in the premises? Y/N** |   |
| **Commentary:** |
|  |
| **Are regular checks of fire resisting doors, walls and partitions conducted? Y/ N** |  |
| **Commentary:** |
|  |
| **Are regular checks of escape routes and exit doors carried out? Y/ N**  |  |
| **Commentary:** |
|  |
| **Are regular checks of fire safety signs carried out? Y/ N** |  |
| **Commentary:** |
|  |
| **Is there a maintenance programme for the fire warning system? Y/ N** |  |
| **Weekly** |  |
| **Six-monthly** |  |
| **Annually** |  |
| **Commentary:** |
|  |
| **Is there a maintenance programme for the emergency lighting? Y/ N** |  |
| **Monthly** |  |
| **Annually** |  |

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| **Commentary:** |
|  |
| **Is there maintenance of the fire fighting equipment (by competent person?) Y/ N** |  |
| **Weekly** |  |
| **Annually** |   |
| **Commentary:** |
|  |
| **Is there a maintenance programme for other fire safety systems? Y/N** |  |
| **Commentary:**  |
|  |
| **Are records kept and their location identified? Y/N** |  |
| **Commentary:** |
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| **15** | **Method for calling the fire service** |
| **Commentary:** |
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| **16** | **Fire emergency plan (FEP)** |
| **Commentary:** |
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| **17** | **Training** |
| **Commentary:** |
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| **18** | **Significant findings** |
| **a)** | **Existing control measures** |
| **Significant finding** | **Control measure** |
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| **b)**  | **Fire safety deficiencies to be rectified**  |
| **Deficiency/ Action/ Allocated to**  | **Priority** | **Target date** | **Date rectified** |
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