

CHECK LIST FOR SELF-APPRAISAL OF FIRE SAFETY IN HOSPITALS & NURSING HOMES (ABOVE 15 mtrs and below 30 mtrs)

Sl. No.	Item GENERAL INFORMATION	Particulars to be furnished by marking the same in the plans			Check Points
1.	Name and Address of Owner/Occupier and Telephone Nos.				
2.	Location and Address of the Building				
3.	Area of the Site (in Sq. Mtrs.)				
4.	Type of Occupancy				
5.	Height of the Building from abutting road level to terrace (in meters)				
6.	No. of floors with Height (in meters) of each floor				
7.	Approximate No. of inhabitants / Occupants				
8.	Total Built Up area of the Building				
9.	Details of No. of blocks with height and inter distance				
10.	Means of Escape				
	a) No. of Internal Staircases				
	b) No. of External Staircases				
	c) Width of Internal Staircases				
	d) Width of External Staircases				
		Yes	No	N.A.	Remarks
*11	Whether No. of Internal Staircases provided comply with requirement of NBC of India (1No. for every 22.5 meters travel distance and are sufficient for safe evacuation of all inmates within 2 ½ minutes NBC Cl. 8.4.1.	Yes	No.	--	
*12	Whether No. of External Staircases provided comply with requirement of NBC of India (Minimum)	Yes	No	--	

*13	Whether width of the Internal Staircases complies with requirement of NBC of India	Yes	No	--		
	Occupancy					Min. width required
	Institutional (Hospitals)					2 Meters
*14	Whether the Min. width of External staircase i.e. 2 mtrs As per NBC is provided	Yes	No	--		
15	Whether Refuge Rooms (Between 24 meters to 39 meters height) is provided of the building is not fully sprinklered NBC 8.12.3.	Yes	No	N.A.		
16	Whether Fire Tower (above 24 meters building height) is provided ?	Yes	No	N.A.		
*17	Whether Fire Lift (545 Kg capacity) is provided as per NBC Appendix-D 1.5 q ?	Yes	No	--		
*18	Whether ramps of minimum 2m width are provided for transportation of ambulatory patients during emergencies	Yes	No	--		
19	<u>DETAILS OF BASEMENT</u>			N.A.		
	a) Whether min. 01 entry is provided	Yes	No			
	b) Whether min. 01 Exit is provided	Yes	No	N.A.		
	c) Whether staircase width (2 mtrs) is provided from cellar to ground floor ?	Yes	No	N.A.		
*20	<u>DETAILS OF TERRACE</u>					
	a) Whether over head tank for fire fighting is provided	Yes	No	--		
	b) Whether Roof exits provided	Yes	No	--		
	c) Whether Booster Pump Provided	Yes	No	--		
*21	Open spaces provided all around the building (As per Regulation 10 of MSB Regulations 1981) in mtrs. Min. Open spaces required are: 15mtrs. And above.6 mtrs., 16 mtrs. – 6.4 mtrs., 19 mtrs. – 7.4 mtrs., 22 mtrs., -- 8.4 mtrs., 25 mtrs., - 9.4 mtrs., 25 mtrs., to 30 mtrs., - 10 mtrs.					
	NORTH					
	EAST					
	WEST					
	SOUTH					
*22	Whether Open space in the North complies to M.S.B.R. 1981	Yes	No	--		
*23	Whether open space in the East Complies to M.S.B.R. 1981	Yes	No	--		
*24	Whether open space in the South Complies to M.S.B.R. 1981	Yes	No	--		
*25	Whether open space in the West Complies to M.S.B.R. 1981	Yes	No	--		

*26	Whether width of street abutting the Hospital Building is available as below: a) Hospitals up to 1000 Sq. mtrs covered area, 12m & above 1000 Sq.mtrs – 18 mtrs. (NBC Part III Cl. 4.6)	Yes	No	--	
*27	Whether Means of access to premises (As per Part III 4.6 of NBC 4.5 meters)(4.5 meters width and head room clearance of 5m minimum is provided?	Yes	No	--	
*28	Whether Hose reel provided				
*29	Whether Wet riser provided ?				
*30	Whether down comer provided ?				
*31	Whether manually operated electrical alarm system provided ?				
*32	Whether Yard hydrant is provided ?				
*33	Whether Automatic sprinkler is provided ?				
*34	Whether underground water storage water tank of 2,00,000 liters capacity is provided ?				
*35	Whether terrace tank 20,000 liters capacity is provided ?				
*36	Whether on electrical pump and one diesel pump as mentioned below are provided near the underground static water tank				
	a) capacity 2850 LPM and one electrical pump of 180 LPM capacity				
	b) Booster pump of 900 LPM at terrace level				
	c) Whether separate electrical pump is provided for sprinklers exclusively.				
*37	Whether open space around the building is leveled, hard surfaced, free from obstructions				
*38	<u>Whether Exit from premises (4.5 meters one minimum) is provided ?</u>				
*39	<u>More than 15 meters to 30 meters.</u> Transformer (As per Part IV Appendix D-1 1.16 of NBC of India) fire protection.				
	a) Whether 45 liters Foam Trolley is provided ?	Yes	No	N.A.	
	b) Whether fencing around transformer is provided?	Yes	No	N.A.	
	c) Whether Soak pit is provided ?	Yes	No	N.A.	
*40	Whether lighting protection (As per Part IV Appendix D-3 of NBC of India (one) provided ?	Yes	No	--	
41	Whether Control Room (As per Part IV Appendix D-3 of NBC of India (one) is provided ?	Yes	No	N.A.	

*42	Whether the Hydraulic Platform can be operated all around the building ?	Yes	No	--	
*43	Whether minimum required fire safety measures as prescribed in Table 20 of NBC to this type of occupancy and height are provided ?	Yes	No	--	
44	If central A.C. is provided, whether fire dampers are installed in the ducts	Yes	No	N.A.	
*45	Whether miniature circuit breakers are provided and electrical safety is ensured as per IS 1646:1982	Yes	No	--	
*46	Whether minimum required fire safety measures as prescribed in Table 20 of NBC part IV to this type of occupancy and height are provided ?	Yes	No	--	
*47	Whether emergency lighting with a battery backup up to 2 hours is provided in the escape route i.e. corridors, staircases and auto glow exit signage's are provided	Yes	No	--	
*48	Whether first aid fire extinguishers are provided as per IS 2190:1992	Yes	No	--	
*49	Whether emergency evacuation plan is prepared and practical periodically	Yes	No	--	
*50	Whether all the staff, nurses, ward boys are trained in emergency evacuation procedures	Yes	No	--	
*51	Whether all the security staff are trained in the operation of fire safety measures provided	Yes	No	--	

NOTE:- ALL SAFETY MEASURES WITH * MARK ARE MANDATORY

DATE:-

PLACE :-

(S I G N A T U R E)
Owner / Management