

# Fire Safety Plan

**FOR**

Business/Property Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone Number: \_\_\_\_\_

Occupancy Classification \_\_\_\_\_

\_\_\_\_\_

Approved by Fire Inspector: \_\_\_\_\_

Date: \_\_\_\_\_

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**Part 1**

**Building Resources Audit**

- 1. **Business Name:** \_\_\_\_\_
- 2. **Building Address:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- 3. **Telephone #:** \_\_\_\_\_
- 4. **Occupancy Type:** \_\_\_\_\_
- 5. **Building Construction:** \_\_\_\_\_  
\_\_\_\_\_
- 6. **Number of Stories:** \_\_\_\_\_
- 7. **Fire Alarm System:** *Type of system? , Activation devices? , Etc.?* \_\_\_\_\_  
\_\_\_\_\_
- 8. **Fire Alarm Control Panel:** *Location?* \_\_\_\_\_
- 9. **Extra Hazard Areas:** \_\_\_\_\_  
\_\_\_\_\_
- 10. **Fire Department Access:** \_\_\_\_\_  
\_\_\_\_\_

**Part 2**

**Human Resources Audit**

- 1. **Owners Name:** \_\_\_\_\_
- 2. **Owners Address:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- 3. **Phone #:** \_\_\_\_\_  
\_\_\_\_\_

**After Hours Contacts:**

- 1. **RP: Name/Title:** \_\_\_\_\_  
**Phone #:** \_\_\_\_\_
- 2. **RP: Name/Title:** \_\_\_\_\_  
**Phone #:** \_\_\_\_\_
- 3. **RP: Name/Title:** \_\_\_\_\_  
**Phone #:** \_\_\_\_\_

**Key Access/Location:** \_\_\_\_\_  
\_\_\_\_\_

**Emergency Fuel Shutoff:** \_\_\_\_\_

## **Part 3**

# **Emergency Procedures for Occupants**

## **IN CASE OF FIRE**

### **Upon Discovery of a Fire:**

- Leave the fire area closing all doors behind you. Take all others around with you.
- Sound the Fire Alarm using the safest, nearest pull station.
- Leave the building using the safest, nearest exit.
- Ensure the Milton Fire Department has been called. Telephone **9-1-1**.

*Insert Building Address*

### **Upon Hearing the Fire Alarm**

- Leave the building closing all doors behind you. Take all others around with you.
- Inform others to evacuate.
- Ensure the Milton Fire Department has been called. Telephone **9-1-1**.

*Insert Building Address*

## **CAUTION**

**IF YOU ENCOUNTER SMOKE – USE AN ALTERNATE EXIT**

## **REMAIN CALM**

**If you cannot leave your area or have returned to it because of fire or heavy smoke, remain in the area, and;**

1. Close the door.
2. Unlock the door for possible entry of fire fighters.
3. Protect yourself from smoke.
4. Crouch low to the floor if smoke comes into the room.
5. Wait to be rescued. Remain Calm.

## Part 4

# Emergency Procedures for Management and Staff

### **Upon Discovery of a Fire:**

- Leave the fire area closing all doors behind you.
- Sound the fire alarm using the safest, nearest pull station.
- Assist occupants to evacuate the building using the safest, nearest exit.
- Ensure the Milton Fire Department has been called. Telephone **9-1-1**.

*Insert Building Address*

- Only if safe to do so, fight the fire if small and contained and if properly trained.
- Meet the Fire Department Officer upon their arrival.
- Inform the Fire Department Officer of the last known whereabouts of any missing persons.
- Provide any other vital information to the Fire Department Officer.

### **Upon Hearing the Fire Alarm**

- Ensure the other occupants have been notified of the emergency situation.
- Ensure the Milton Fire Department has been called. Telephone **9-1-1**.

*Insert Building Address*

- If it is safe to do so, assist in the evacuation of all other occupants, especially those requiring assistance.
- Meet the Fire Department officer upon their arrival.
- Inform the Fire Department Officer of the last known whereabouts of any missing persons.
- Provide any other vital information to the Fire Department Officer.

**Evacuation of Endangered Occupants:** As management or staff you shall assist in the evacuation of any occupant requiring any special assistance. Only do this if it is safe to do so. Always remember your personal safety comes first. If you are unable to help in the evacuation of such occupants make the Fire Department Officer aware of the last known location.

## **Part 5**

# **Alternative Measures for Safety of the Occupants**

In the event of a shutdown of any Fire and Life Safety Equipment, the provisions and actions taken must be approved by the Milton Fire Department. Assistance and direction for specific situations can be received from the Milton Fire Department. Telephone 905-878-9251 ext.0.

### **FIRE ALARM SYSTEM**

#### **In the event of any type of Fire Alarm shutdown:**

- Call the fire alarm system service company for immediate repairs.
- Notify the Milton Fire Department at **905-878-9251 ext 0**.
- Make sure all other staff is aware of the situation.
- Post notices at all pull stations.
- Initiate a “Fire Watch” which includes an hourly check of all areas within the building for any signs of fire and/or fire and life safety hazards. Keep a record of checks; Date, time, area,etc.
- In the event of a “Fire” make a verbal announcement ensuring all occupants are aware of the situation.
- Once repairs to the Fire Alarm System have been completed, and the system is operational, notify the Milton Fire Department at **905-878-9251 ext.0**.
- Remove notices from all pull stations.

### **FIRE EXTINGUISHERS**

#### **In the event a fire extinguisher has been used:**

- Call a service company immediately.
- Replace the extinguisher with a spare with a minimum rating of the one taken out of service.

## **Part 6**

# **Ontario Fire Code Definitions**

### **Excerpts from The Ontario Fire Code**

**Article 1.1.1.1.** – Unless otherwise specified the Owner is responsible for carrying out the provisions of this code.

**Article 1.1.2.1.** – Written records shall be kept of all tests and corrective measures for two years after they are made, and the records shall be available upon request to the Chief Fire Official.

### **DEFINITIONS**

**CHECK** – Means visual observation to ensure the device or system is in place and not obviously damaged or obstructed.

**INSPECT** – Means physical examination to determine that the device or system will apparently perform in accordance with its intended function.

**TEST** – Means operation of the device or system to ensure that it will perform in accordance with its intended operation or function.

**OWNER** – Means any person, firm or corporation having control over any portion of the building or property under consideration and includes the persons in the building or property.

**BUILDING** – Means any structure used or intended for supporting or sheltering any use or occupancy.

**Part 7**

**Fire and Life Safety System Maintenance**

<b><u>DAILY CHECKS</u></b>	<b><u>RESPONSIBILITY</u></b>
Check to ensure streets, roadways and driveways are kept clear for fire department access.	
Check the fire alarm power indicator lamps are illuminated.	
Check all exit signs to ensure that they are clearly visible and illuminated	
Check emergency exits inside and out for any obstructions.	
<b><u>WEEKLY CHECKS</u></b>	<b><u>RESPONSIBILITY</u></b>
Check hoods, filters and ducts subject to accumulation of combustible deposits.	
<b><u>MONTHLY CHECKS</u></b>	<b><u>RESPONSIBILITY</u></b>
Inspect all doors in fire separations	
Inspect and test emergency lighting systems	
Inspect all portable fire extinguishers	
One fire alarm initiating device shall be operated on a rotational basis and initiate an alarm condition.	
<b><u>EVERY 6 MONTHS</u></b>	<b><u>RESPONSIBILITY</u></b>
Inspect kitchen exhaust hood and fire extinguishing per NFPA 96	Certified Outside Agency
<b><u>ANNUAL CHECKS</u></b>	<b><u>RESPONSIBILITY</u></b>
Inspect all chimney flues and flue pipes.	Certified Outside Agency
Inspect all portable fire extinguishers.	Certified Outside Agency
Inspect and test the fire alarm system.	Certified Outside Agency
Inspect and test emergency lighting systems	Certified Outside Agency
<b><u>6 YEAR CHECK</u></b>	<b><u>RESPONSIBILITY</u></b>
Six-year maintenance of all dry chemical portable fire extinguishers. (From date of manufacture)	Certified Outside Agency
<b><u>12 YEAR CHECK</u></b>	<b><u>RESPONSIBILITY</u></b>
Hydrostatic testing of all dry chemical portable fire extinguishers. (From date of manufacture)	Certified Outside Agency
<b><u>AS REQUIRED</u></b>	<b><u>RESPONSIBILITY</u></b>
Check to ensure doors in fire separations are closed	
Check to ensure corridors are maintained free of obstructions	
Recharge fire extinguishers after use	Certified Outside Agency



## **Part 8**

### **Owner/Supervisors Responsibilities**

- Establish emergency procedures to be followed in the event on an emergency.
- Appoint and organize designated supervisory staff to carry out fire and life safety duties.
- Instruction of supervisory staff and other occupants so they are aware of their responsibilities for fire safety.
- Ensure safe evacuation of all occupants to a designated safe area.
- The control of fire hazards in the building.
- Holding fire drills in accordance with the Ontario Fire Code, incorporating emergency procedures appropriate to the building. One per year and records kept on site.
- The maintenance of the building facilities provided for the safety of the occupants.
- Provide a copy of the fire emergency procedures and all other duties assigned to the supervisory staff as laid out in the fire safety plan to all supervisory staff.
- Post and maintain at least one copy of the approved Fire Safety Plan on each floor area.
- Provisions of alternate measures for the safety of the occupants during shutdown of any fire or life safety systems.
- Assuring the checks, tests and inspections as required by the Ontario Fire Code are completed on schedule and that records are kept for a period of two (2) years.
- Notify the Chief Fire Official regarding any changes to the Fire Safety Plan.
- Designate and train sufficient alternates to replace any supervisory staff in the event of an absence.

- Shall be completely familiar with all the fire and life safety equipment installed within the building. They must know the location and operation of any such equipment.

## **Part 9**

### **General Housekeeping Duties**

- Keep access to exits both inside and outside clear of any obstructions at all times.
- Do not permit combustible materials to accumulate in quantities or locations, which will constitute a fire hazard.
- Keep access to roadways, fire routes and fire department connections clear and accessible for fire department use at all times.
- Ensure portable fire extinguishers are easily seen and accessible at all times.
- Ensure all fire alarm pull stations are easily seen and accessible at all times.
- Where smoking is permitted, dispose contents of ashtrays separately from other materials in metal containers.
- Ensure doors in fire separations are kept closed. Do not wedge open doors.
- Do not use unsafe electrical appliances, extension cords or overload electrical outlets.

## **Part 10**

### **Fire Extinguishment, Control and Confinement**

This is primarily the responsibility of the Fire Department. The production of toxic fumes in buildings makes fire fighting potentially dangerous, particularly if a large amount of smoke is being generated.

Only after ensuring that the fire alarm has been sounded and the Fire Department notified, should a person trained in the use of a portable fire extinguisher attempt to extinguish a small fire. **This must be a voluntary act.** If it cannot be easily extinguished with the use of a portable fire extinguisher, leave the area and confine the fire by closing the door.

#### **REMEMBER PASS WHEN USING A PORTABLE FIRE EXTINGUISHER:**

**P** Pull the Pin  
**A** Aim the Nozzle  
**S** Squeeze the Handle  
**S** Sweep from Side to Side at the base of the Fire

**After the fire has been extinguished back out of the area and exit the building.**

**Part 11**

**Fire Drills**

**Record of Fire Drill**

**Date:** \_\_\_\_\_

**Time:** \_\_\_\_\_

**Owner/Supervisor on  
Duty:** \_\_\_\_\_

**Staff Present:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Alarm Activated Properly:** \_\_\_\_\_

**Alarm Verified at Fire  
Panel:** \_\_\_\_\_  
**Simulated Emergency:** \_\_\_\_\_  
**Deficiencies Noted:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**General Comments:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**FIRE ALARM DRILLS ARE TO BE HELD A MINIMUM OF ONCE EVERY 12 MONTH PERIOD**

**Part 12**

**Staff Sign Off**

We the undersigned employee's of:

*Insert Building Address*

**Have signed below to indicate that we have read and understand our duties and responsibilities in regards to this FIRE SAFETY PLAN.**

NAME	DATE

*Additional pages may be added if more are required.*

**Part 13 Fire Safety System Maintenance Logs**

*SAMPLE – USE ONE PER EXTINGUISHER*  
**Portable Fire Extinguisher Maintenance Log**

<b>EXTINGUISHER LOCATION</b>	
Extinguisher Serial Number	
Manufacture Date	

<b><u>YEAR</u></b>										
<b><u>Month</u></b>										
Jan.										
Feb.										
Mar.										
Apr.										
May										
June										
July										
Aug.										
Sept.										
Oct.										
Nov.										
Dec.										

**Six year Maintenance Date –**

**Hydrostatic Test Date –**

**Annual Inspection**

COMPLETION DATE	SERVICE COMPANY	SIGNATURE

*SAMPLE – USE ONE PER LIGHTING UNIT*  
**Exit Lighting and Emergency Lighting Maintenance Log**

<b>LIGHTING UNIT LOCATION</b>	
Unit Number	

<u><i>YEAR</i></u>										
<u><i>Month</i></u>										
Jan.										
Feb.										
Mar.										
Apr.										
May										
June										
July										
Aug.										
Sept.										
Oct.										
Nov.										
Dec.										

**Annual Inspection**

COMPLETION DATE	SERVICE COMPANY	SIGNATURE

**Record Of Repairs**

COMPLETION DATE	SERVICE COMPANY	SIGNATURE



**Part 14**

**Schematic Drawings**



