#### Fire Safety Plan

**for:**

**Address**

**Company Name**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_(Owner/Manager/Operator) have read and understand the responsibilities identified in this Fire Safety Plan. In addition, I have ensured that all current staff at the above facility have been trained and read this document, and that all new employees shall be required to read and receive training and understand their responsibilities as outlined in this Fire Safety document.

Fire Department Lock Box location is:

The Fire Safety Plan Approved Location is:.

Fire Safety Plan Prepared By:

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Owner’s Authorizing Name |  |  |
|  | Approved By: |  |
|  |  | Chief Fire Official |
| Owner’s Authorizing Signature and Date |  |  |
|  | Signature and Date: |  |

The reproduction or use of this fire safety plan for non-commercial purposes is permitted and encouraged. Permission to reproduce the plan for commercial purposes must be obtained from the Cavan Monaghan Fire Department.

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# Part 1

# Introduction

A Fire Safety Plan (FSP) shall be prepared, **approved** and implemented in buildings regulated by Article 2.8.1.1. of the Ontario Fire Code (see submission procedures below).

Section 2.8 of the Ontario Fire Code, requires the implementation of a **Fire Safety Plan** for this building/occupancy. The FSP is required to be kept in the building in an **approved** location.

The implementation of the Fire Safety Plan helps to ensure effective utilization of life safety features in a building to protect people from fire. The required Fire Safety Plan shall be designed to suit the resources of each individual building or complex of buildings.

**It is the responsibility of the owner** to ensure that the information contained within the Fire Safety Plan is accurate and complete. As required by the Fire Code, the Fire Safety Plan **must be reviewed** as often as necessary, but **at intervals not greater than 12 months** to ensure that it takes account of changes in the use and other characteristics of the building (*Ontario Fire Code 2.8.2.1.(4) of Division B*). As defined in the Ontario Fire Code, “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.

The Fire Protection and Prevention Act, 1997, Part VII, Section 28, states that in the case of an offence for contravention of the fire code, a corporation is liable to a fine of not more than $500,000 for a first offence and not more than $1,500,000 for a subsequent offence and an individual person, a director or officer of a corporation is liable to a fine of not more than $50,000 for a first offence and not more than $100,000 for a subsequent offence, or to imprisonment for a term of not more than one year or to both.

This official document is to be kept readily available at all times for use by staff and fire officials in the event of an emergency.

The Fire safety Plan is also used to provide training to the building’s supervisory staff who must have received instructions in the fire safety procedures as described in the plan before they are given any responsibility for fire safety. Supervisory staff shall be available on notification of a fire emergency to fulfil their obligation as described in the fire safety plan, although it is not necessary that supervisory staff be in the building on a continual basis.

# SUBMISSION PROCEDURES

At least two (2) copies of the Fire Safety Plan (8 ½ X 11 format) must be submitted to the Chief Fire Official. Upon approval, one copy will be returned to the author and one copy will be retained by the Fire Department. A copy of the plan returned to the author must be placed on site in the approved location as noted on the cover page.

Note: Whenever you see the word “*approved”*, it means “*Approved by the Chief Fire Official”* and in this case, by the Fire Department official who approved and signed this plan.

The Chief Fire Official is to be notified regarding any subsequent changes in the approved Fire Safety Plan.

# Part 2

# Audit of Human Resources

**Business/Building Name:**

**Municipal Address:**

**Business Phone Number:**       **Business Fax Number:**

---------------------------------------------------------------------------------------------------------------------

**Building Owner:**

**Mailing Address:**

**Phone Number(s): W****ork:**       **Fax No:**

**Cell:**

**Home:**       **Email:**

---------------------------------------------------------------------------------------------------------------------

**Business Owner:** If Req'd or N/A

**Mailing Address:**

**Phone Number(s):** **Work:**       **Fax No:**

**Cell:**

**Home:**       **Email:**

---------------------------------------------------------------------------------------------------------------------

**Property Management Company:**  No  Yes

**Company Name:**

**Address:**

**Phone Number(s):** **Work:**       **Fax No:**

**Contact Person:**       **Cell:**

**Home:**       **Email:**

---------------------------------------------------------------------------------------------------------------------

# After Hour Emergency Contacts (24 hour telephone numbers)

**(Contacts normally called in order of nearness to the property for quickest response. Home address and phone number required to fulfil responsibilities.)**

Name:       Home #:       Cell #:

Position:       Pager #:       Other:

Address:

---------------------------------------------------------------------------------------------------------------------

Name:       Home #:       Cell #:

Position:       Pager #:       Other:

Address:

---------------------------------------------------------------------------------------------------------------------

Name:       Home #:       Cell #:

Position:       Pager #:       Other:

Address:

---------------------------------------------------------------------------------------------------------------------

Name:       Home #:       Cell #:

Position:       Pager #:       Other:

Address:

---------------------------------------------------------------------------------------------------------------------

# Other Key Contacts

Fire Alarm Monitoring Company: (Name) Phone:       Pager/Cell:

Fire Alarm Company:       Phone:       Pager/Cell:

Sprinkler Company:       Phone:       Pager/Cell:

Fire Extinguisher Company:       Phone:       Pager/Cell:

Security Company:       Phone:       Pager/Cell:

Electrical Contractor:       Phone:       Pager/Cell:

Plumbing Contractor:       Phone:       Pager/Cell:

Other:       Phone:       Pager/Cell:

---------------------------------------------------------------------------------------------------------------------

# Part 3

# Audit of Building Resources Checklist

**Occupancy Type:**       *(*Residential, Assembly, Mixed, etc*)* **Occupant Load:**       (if applicable)

**Building Height in Storeys:**     **Storey(s) Below Grade:**

**Year Built:**       **Additions/Renovations:**

**Building Construction:** (combustible, non-combustible, etc.)

# Fire Department Access

**Brief Description of Fire Dept. Access to Building:** Explain how firefighters gain access to property & building (from street) and location of alarm/annunciator panel (type over this wording).

**Fire Access Routes and access panels or windows provided to facilitate access for firefighting operations shall not be obstructed by vehicles, gates, fences, building materials, vegetation, signs or any other form of obstruction.**

**Designated Fire Route:**  No  Yes

**Nearest Municipal Hydrant Location:**

**Private Hydrants:**  No  Yes (Location(s)):

**Fire Department Connection:**  No  Yes (Location(s)):

***NOTE: Fire Dept. connections shall be equipped with plugs or caps that are secured wrench-tight.***

**Fire Pump:**  No  Yes (Location(s):

Fire Pump Description:

# Utilities and Shut-offs

**Heating System:**  Natural Gas  Electric  Fuel Oil  Other:

**Main Gas Shut-off:**  No  Yes Location(s):

**Main Electrical Shut-off Location:**

**Main Domestic Water Shut-off Location:**

**Other Shut-off:**       **Location:**

# Fire Protection Systems

**NOTE: In the event that the municipal fire department finds it necessary to reset, restore or perform emergency measures on any fire protection system, or to contact a contractor for repairs to any fire protection system, the municipality shall incur no liability or costs by such action.**

**Fire Alarm System:**  No  Yes

**The following information is required by Article B 6.3.2.2.(3) of Fire Code & Clause 3.6 of CAN/ULC- 536 Standard.**

Type:      - stage alarm (single or two) or  Interconnected Smoke Alarm System

**NOTE: Interconnected smoke alarms installed as a fire alarm system shall be tested and maintained in operating condition in conformance with CAN/ULC-S552, “Standard for the Maintenance and Testing of Smoke Alarms”, and as required by the Fire Code.**

**Where Fire Alarm Signal Monitoring is Not provided, signage must be posted over each pull station with wording that the Fire Department must be notified in the event of an emergency and the Emergency Telephone Number (9-1-1) .**

**Alarm Signal Monitoring:**  No  Yes, by

Remote Monitoring Station  Direct to Fire Department  Proprietary Signalling System

\*Where the Building Code or this Code require a fire alarm system to be monitored to transmit a signal to the fire department, the building owner shall ensure the continuation of the monitoring.\*

**Fire Alarm Manufacturer Name/Make:**

**Model:**

**Main Panel Location:**

**Annunciator Panel Location:**

**Description of Degraded Mode Capability:** (If applicable or else delete) A network operating feature where, under conditions of a communications link failure, each network segment remaining in communication shall maintain continual function as a group.

**Emergency Power Supply for Fire Alarm:** (i.e. Batterie(s) located in Fire Alarm Control Panel or in one central location or supplied by emergency generator or combination of both. Describe battery type, charging procedure and maintenance (Type over this wording).

**NOTE:** The duration of supervisory power for the fire alarm is a minimum of 24 hours followed by a full alarm operation for     minutes (5, 30, 60, or 120 minutes).

**Fire Alarm Description:** Is system zoned, non-coded, single or 2-stage. If a 2-stage system - explain alert signal & alarm signal sequence here (i.e. second stage on fire floor and floor above and below, and 1st stage alert signal on all other floors or areas). If a single stage system, give brief description of system (Type over this wording)

**Fire Alarm Devices and Locations:**

Manual Pull Stations: at each exit door on each floor (Type over examples if necessary)

Smoke Detectors: in all stairways and corridors

Heat Detectors: at top of elevator shafts, in service and storage rooms, laundry room & parking garage

Duct-type Smoke Detectors: in air handling systems

Ancillary Systems: kitchen extinguishing system, (also list others)

Sounding Devices: Bells/Horns/Speakers (choose type) throughout building & in each dwelling unit

Visual Signal Devices: in all public areas

Emergency Telephones: at exits

Sprinkler Flow and Valve Supervisory Switches: on a floor-by-floor basis

**Alarm Activation:** How does alarm activate? (Type over)

**Acknowledging Trouble Alarm:** How is this done? (Type over)

**Acknowledging Alarm Signal:** How is this done? (Type over)

**Alarm Silencing:** Provide complete procedure to silence alarm (Type over)

**Alarm Re-setting:** Provide complete procedure to reset fire alarm system (Type over)

**Note:** Fire alarm system shall not be reset until permission given by on-scene fire department personnel following an emergency response.

**Voice Communication Equipment:** Explain system and its operation (Type over)

**Emergency Telephone Equipment:** Explain system and its operation (Type over)

**Ancillary Devices:** Sprinkler flow switches No  Yes

Air supply fan shutdown No  Yes

Magnetic door hold-open devices No  Yes

**(Hold-opens must release on activation of fire alarm or power disruption)**

**Electromagnetic Locking Devices**  No  Yes

(*Mag-locks* *must release on activation of fire alarm or power disruption)*

Manual release switch location for mag-locks:  N/A

**Note: Doors equipped with magnetic locking devices must be provided with proper signage.**

Location(s) throughout building: List all locations of mag-locks here (Type over)

**Smoke Control Measures:**  No  Yes

Automatically Shuts-Off With Activation of Fire Alarm  No  Yes

**Sprinkler System:**  No  Yes Type:  Wet  Dry  Other:

**Coverage Area:**

**Connected to the Fire Alarm System:**  No  Yes

**Location of Sprinkler Room/Shut Off Valves:**

**Fire Department Connection:**  No  Yes Location(s):

**Note:** (i) The Chief Fire Official shall be notified when any alterations, additions or repairs are to be made involving the interruption to a sprinkler system.

(ii)Sprinkler control valves and sprinkler water supplies shall not be shut down, disconnected or otherwise impaired for more than 24 hours without notifying the Chief Fire Official

**Standpipe System:**  No  Yes Locations:

**Location of Shutoff/Isolation Valves:**

**Note**: (i) Each Hose Connection in a standpipe system shall have a legible sign reading;

“FIRE HOSE FOR USE BY TRAINED PERSONS ONLY”

(ii) Standpipe Hose Stations shall be conspicuously identified and unobstructed, and shall be used for fire protection only.

**Fire Department Connection:**  No  Yes Location(s):

**Portable Fire Extinguishers:** Types:

Locations:       (Also refer to schematic drawings in Part 4)

**Fixed Extinguishing System for Commercial Cooking Equipment**  No  Yes

Type:       (i.e. Wet Chemical, Dry Chemical, CO2)

Connected to Fire Alarm System:  No  Yes

Fuel Source:  Natural Gas  Electric  Other:

Fuel Shut Off for Appliance(s): Location(s):

40BC Extinguisher or  Class K Type: Location:

***NOTE: Commercial cooking equipment exhaust and fire protection systems shall be maintained in conformance with NFPA 96, “Standard for Ventilation Control and Fire Protection of Commercial Cooking Operations”.***

**Manual Operation of System:** The manual operation instructions are posted (usually on the faceplate of the manual pull station or on wall adjacent to the pull station - write in proper location & type over)

**System Operating Instructions:** instructions for operation of the system are to be written here or refer to an attached manual. An instruction manual can be added as an appendix to the plan (type over text)

**Other Extinguishing Systems:**  N/A

|  |  |
| --- | --- |
| Type: (i.e.pre-action,sprinkler,dry chemical) | Area/Location Protecting |
|  |  |
|  |  |
|  |  |
|  |  |

**Emergency Lighting:**  No  Yes

Location(s):

Upon failure of regular power source, Emergency Lighting for this building is required to have an alternative power supply that provides lighting for  30 minutes.  1 hour.  2 hours.

**Emergency Power:**  No  Yes Type:  Battery or  Generator

(for emergency lights, etc.)

**Generator:**  N/A

Fuel Type:  Diesel  Natural Gas  Gasoline  Other:

Fuel Supply Location:

Transfer Switch Location:

Equipment Powered by Generator:

**Extra Hazardous Area:**

Is there hazardous materials on site?  No  Yes

If YES, please list the material, quantity and location *(also mark locations on schematics)*:

**Is there Flammable Liquids (i.e. gasoline) or Combustible Liquids stored on site?**  No  Yes

**(Storage of these liquids must be stored in compliance with Part 4 of Division B of the Ontario Fire Code)**

If YES, please list the material, quantity and location *(also mark locations on schematics)*:

**Exits:** *(location of)*

(Briefly describe exit locations - type over this section) Refer to schematics for location of exits.

**Elevators:**  No  Yes

Firefighter (FF) Elevator  Firefighter Service

(RED HELMET designation) (YELLOW HELMET designation)

**The required firefighters' elevator symbol shall be maintained in identifiable condition.**

Automatic Recall by Fire Alarm:  No  Yes Manual Recall:  No  Yes

Manual Recall Switch(es):  No  Yes Location:

Homing Floor(s) for FF Elevator Recall:

Total Number of Elevators in building:     Total Number of FF Elevators:

FF Elevator Location:

Floors Served by FF Elevator:

Location of recall/operating keys:

Operating Instructions:

# Part 3

# Additional Information

(For any additional information not already covered)

This area is to provide other information on your building not already addressed, and associated with other Fire Code references such as Division B 2.2.3.5.(2)(b), 2.9.3.2., 3.5.3.3.(2) etc. Check the Fire Code to ensure all required information is included in this plan.

# Part 4

Please take time to review this page. If all icons required for your building schematics have been transferred to a legend on each drawing, this page can be deleted.

# LEGEND FOR BUILDING / UNIT FIRE EMERGENCY SYSTEM

|  |  |
| --- | --- |
|  | Pull Pin For Kitchen Fire Suppression System |
|  | Entrance / Exit |
|  | Hydrant |
|  | Siamese Fire Department Connection |
|  | Free Standing Siamese Fire Department Connection |
|  | Valves (General)  Identify The Type Of Valve (Ie. Shut Off Valve For Natural Gas, Sprinklers, Etc.) |
|  | Fire Alarm Control Panel |
|  | Fire Alarm Annunciator |
|  | Emergency Light, Battery-Powered |
|  | Illuminated Exit Sign, Single Face |
|  | Combined Battery-Powered Emergency Light & Illuminated Exit Sign |
|  | Pull Station |
|  | Heat Detector |
|  | Smoke Detector |
|  | Fire Extinguisher - BC Type |
|  | Fire Extinguisher - ABC Type |
|  | Fire Extinguisher - Water |
| **H** | Hose Cabinet |
|  | Sprinkler Riser, indicate whether Wet or Dry System |

# Site Plan

**Please insert Site Plan here.**

**(Include Legend on each page)**

**Site Plan will include location of property on city street showing street name (cross streets where applicable), and fire access route from street to building’s principal entrance (firefighters access point). The fire department connection will also be indicated, as well as any exterior utility shutoffs such as gas lines, and any outbuildings on the property. A legend showing symbols will be included on site plan drawing as well as a direction “North” symbol.**

# This page can be deleted after the Site Plan is inserted into this document in this location.Floor Plan(s)

Please insert Floor Plan here.

# (Include Legend)

**A floor plan is required for each floor storey of the building. If the building has a different layout for a basement storey and the first storey, but the 2nd to 5th story are identical, you must provide a floor plan for the basement, the 1st storey and one plan for the upper identical floors marked “Floor Plan 2 - 5 Floors”. Apartment numbers, for example, on these identical floors can be put in as \_06, which indicates 206, 306, 406, etc. If the building has roof access and machinery rooms on the roof, include this plan as well. A legend showing symbols will be included on site plan drawing as well as a direction “North” symbol.**

**Symbols on floor plan will include locations of exits, emergency lighting, fire alarm pull stations, fire extinguisher locations, hose cabinets, etc.**

**Drawings do not need to be to scale but must be drawn to a reasonable facsimile. Drawings must be neat and legible or will not be accepted. Agencies are available to assist an owner in providing detailed floor plans of their buildings.**

**This page can be deleted after each Floor Plan is inserted into this document in this location.**

# Part 5

# Persons Requiring Assistance

Persons that are handicapped and/or require assistance in the event of an evacuation of the building are requested to advise management in order that they may render assistance. The list of persons requiring assistance is required to be updated as often as necessary by management and these changes are to be provided to the Fire Department. An updated list will be kept in the same location as the approved Fire Safety Plan within the building and a copy sent to The Cavan Monaghan Fire Department. Supervisory staff are to see Part 6 - Emergency Procedures for Supervisory Staff, and offer assistance when possible.

**Identification and Evacuation of Disabled Guests**

|  |  |  |  |
| --- | --- | --- | --- |
| **Unit#** | **Name** | **Telephone #** | **Difficulty** |
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**NOTE: This form is a sample of the form being used in this building. A regularly updated copy of this page will be kept with the Fire Safety Plan in its approved location with a copy sent to the Fire Department.**

# Part 6

# Emergency Procedures for Occupants

Emergency procedures signage will be affixed to the wall at all fire alarm pull stations and in elevator lobbies. Where a fire alarm system has been installed with no provisions to transmit a signal to the fire department, a legible notice, that is not easily removed, shall be affixed to the wall near each manual pull station with wording that the fire department is to be notified in the event of a fire emergency and including the emergency telephone number for the municipality or the telephone number of the fire department. At least one copy of the fire emergency procedures shall be prominently posted and maintained on each floor area. The following emergency procedures are posted in the building.

(Choose one of following that suits your building or design your own. Delete the others)

# IN CASE OF FIRE

**If You Discover a Fire:**

1. Leave fire area immediately
2. Close all doors behind you to confine the fire
3. Activate Fire Alarm
4. Call Fire Department at 9-1-1 from safe area
5. Leave building via nearest safe exit

Upon Hearing Fire Alarm:

1. Turn off all Appliances in your unit
2. Close all doors behind you to confine the fire
3. Leave building via nearest safe exit
4. Do not re-enter the building until safe to do so

# CAUTION

IF YOU ENCOUNTER SMOKE - USE AN ALTERNATE EXIT

# REMAIN CALM

Or…

# Emergency Procedures for Occupants

Emergency procedures signage will be affixed to the wall on each floor area.

# IN CASE OF FIRE

## No Fire Alarm System In Building

**If You Discover a Fire:**

1. Leave fire area immediately
2. Close all doors behind you to confine the fire
3. Alarm occupants of building. Yell “FIRE”
4. Alert as many occupants as safely possible
5. Assist other occupants in evacuating building
6. Call The Cavan Monaghan Fire Department at 9-1-1 from a safe location
7. Use safe exit to leave the building
8. Do not use elevators

**Upon Hearing of a Fire Condition:**

1. Leave building via nearest exit
2. Follow directions from staff
3. Close doors behind you
4. Do not use elevator
5. Proceed to designated outside assembly area
6. Do not re-enter the building until safe to do so

# CAUTION

IF YOU ENCOUNTER SMOKE - USE AN ALTERNATE EXIT

# REMAIN CALM

Or…

Sign is posted in close proximity to elevators

**IN CASE OF FIRE**

If You Discover a Fire:

1. Leave fire area immediately
2. Close all doors behind you to confine the fire
3. Activate Fire Alarm
4. Call Fire Department at 9-1-1 from safe area
5. Leave building via nearest safe exit or stairway
6. Proceed to designated outside assembly area

**DO NOT USE ELEVATORS**

Upon Hearing of a Fire Condition:

1. Leave building via nearest exit.
2. Close doors behind you.
3. Do not use elevator.
4. Leave building via nearest safe exit or stairway
5. Proceed to designated outside assembly area
6. Do not re-enter the building until safe to do so
7. If smoke is heavy in the corridor, it may be safer to remain in your area; Close and seal the base of door.
8. If you encounter smoke in stairway, use alternate exit or if all stairways are affected, it may be safer to stay in your area.

**CAUTION**

IF YOU ENCOUNTER SMOKE - USE AN ALTERNATE EXIT

**REMAIN CALM**

# Part 7

# Emergency Procedures for Supervisory Staff

**Upon Discovery of Fire**

1. Leave fire area immediately and close doors. Alert occupants.
2. Sound Fire Alarm and follow the fire alarm supervisory procedures.
3. Call 9-1-1 from a safe location.
4. Exit the building via the nearest exit.
5. Await the arrival of Fire Department at the main entrance.

**Upon Hearing of a Fire Condition**

1. Ensure that the other occupants have been notified of the emergency conditions.
2. Check Fire Alarm Annunciator/Panel to determine area of origin of alarm.
3. Notify the Fire Department of the emergency condition. Dial 9-1-1. If it is safe to do so, supervise the evacuation of all occupants, including those requiring assistance.
4. Upon the arrival of the Fire Department, inform the fire officer of the conditions in the building and co-ordinate the efforts of the Supervisory staff with those of the Fire Department.
5. Provide access and vital information to the Firefighters as to location of persons, master keys for this occupancy and service rooms, etc.

# Related Duties

**In general:**

1. Keep the doors in fire separations closed at all times. This includes apartment doors and stairway separation doors.
2. Keep EXITS and access to exits, inside and outside, clear of any obstructions at all times.
3. Maintain sufficient lighting in exits and corridors.
4. Do not permit combustible materials to accumulate in quantities or locations that would constitute a fire hazard. Keep stairways free of combustible storage and obstructions.
5. Outdoor storage receptacles, such as dumpsters, used for combustible materials shall be located so that they do not create a fire hazard to buildings.
6. Promptly remove all combustible waste from areas where waste is placed for disposal, if applicable.
7. Keep access roadways, fire routes and fire department connections clear and accessible for fire department use.
8. Hydrants shall be readily available and unobstructed for use at all times and shall be maintained free of snow and ice accumulations.
9. Maintain the fire protection equipment in good operating condition at all times.
10. Participate in fire drills. Occupants’ participation should be encouraged but not required.
11. Have a working knowledge of the building fire and life safety systems.
12. Ensure the building fire and life safety systems are in operating condition.
13. Be available upon notification of a fire emergency to fulfil your obligation as described in this plan.
14. Arrange for a substitute in your absence.
15. Comply with the requirements of the Ontario Fire Code.
16. In the event of any shutdown of fire and life safety systems, notify the Fire Department and initiate approved alternative measures.

# Emergency Procedures

Additional Information/Comments

|  |
| --- |
|  |

# Part 8

# Responsibilities of the Owner / Occupant

The building owner/occupant has numerous responsibilities related to fire safety and must ensure that the following measures are enacted:

1. Establishment of emergency procedures to be followed at the time of an emergency.
2. Appointment and organization of designated supervisory staff to carry out safety duties.
3. Instruction of supervisory staff and other occupants so that they are aware of their responsibilities for fire safety.
4. Ensure you, or your supervisory staff, are available upon notification of a fire emergency to fulfil your obligation as described in the Fire Safety Plan.
5. Holding of fire drills in accordance with the Fire Code, incorporating Emergency Procedures appropriate to the building.
6. Control of fire hazards in the building.
7. Maintenance of building facilities provided for safety of the occupants.
8. Provisions of alternate measures for safety of occupants during shut down of fire protection equipment.
9. Ensure that checks, tests and inspections as required by the Ontario Fire Code are completed on schedule, and that the original or a copy of these records are retained at the building premises for examination by the Chief Fire for a minimum period of two (2) years.
10. Ensure the continuation of the monitoring of the fire alarm system when building required to transmit a signal to the fire department and that the central station operator is Fire Code compliant.
11. Ensure the initial verification of test reports for fire protection systems installed after November 21, 2007, are retained throughout the life of the systems.
12. Post and maintain at least one (1) copy of the fire emergency procedures.
13. Keep a copy of the approved Fire Safety Plan on the premises in an approved location.
14. Notification of the Chief Fire Official regarding changes in the Fire Safety Plan.
15. **Review Fire Safety Plan as often as necessary, but at intervals not greater than 12 months** to ensure that it takes account of changes in the use and other characteristics of the building.
16. Designate and train sufficient alternates to replace supervisory staff during any absence.
17. Where testing is required for compliance with this Code, the tests shall be carried out by the owner or the owner's agent within such reasonable time as the Chief Fire Official may determine.

# Part 9

# Fire Hazards

**Residential Properties:**

**To avoid fire hazards in the building, occupants must:**

1. Never put burning materials such as cigarettes and ashes into the garbage chute.
2. Never dispose of flammable liquids or aerosol cans in these chutes.
3. Never force cartons, coat hangers, bundles of paper into the chute because it may become blocked.
4. Avoid unsafe cooking practices: deep fat frying, too much heat, unattended stoves, loosely hanging sleeves.
5. Avoid careless smoking. Never smoke in bed.
6. Never leave anything that may burn or cause a trip hazard in the halls, corridors and/or stairways.
7. Always clean out clothes dryer lint collector before and after use.
8. Do not use unsafe electrical appliances, frayed extension cords, over-loaded outlets or lamp wire for permanent wiring.

**In general, occupants should:**

1. Know how to alarm occupants of building, know where exits are located.
2. Call Fire Department immediately (9-1-1) whenever you need assistance.
3. Know the correct address of the building.
4. Notify the building owner/property management if special assistance if required in the event of an emergency.
5. Know the fire alarm signals and the procedures established to implement safe evacuation. Read and follow the manufacturers smoke alarm (and CO detector if applicable) instructions, available from building owner/property management.
6. Know the supervisory staff in your building.
7. Report any fire hazard to supervisory staff.
8. Know the stairwell designation and the crossover floors (if any).

# Part 9

# Fire Hazards

**Commercial, Retail and Industrial Properties:**

A high standard of housekeeping and building maintenance is probably the most important single factor in the prevention of fire. Listed below are some specific hazards.

1. Combustible material stored in non-approved areas.
2. Fire and smoke barrier door not operating properly or wedged open.
3. Improper storage of flammable liquids and gases.
4. Defective electrical wiring and appliances, over-fusing, and the use of extension cords as permanent wiring.
5. Clothes dryer lint collector full or improperly vented.
6. Careless use of smoking materials.
7. Kitchen hoods and filters not cleaned properly/grease laden.
8. Improper disposal of oily rags.

**In general, occupants should:**

1. Know how to alarm occupants of building, know where exits are located.
2. Call Fire Services immediately (9-1-1) whenever you need assistance.
3. Know the correct address of the building.
4. Notify the building/property management if special assistance is required in the event of an emergency.
5. Know the fire alarm signals and the procedures established to implement safe evacuation.
6. Know the supervisory staff in your building.
7. Report any fire hazard to supervisory staff.
8. Know stairwell designation and the crossover floors (if any).

# Part 10

# Fire Extinguishment, Control or Confinement

Most fires start small. Except for explosions, fires can usually be brought under control if they are attacked correctly with the right type and size of extinguisher within the first two minutes. In the event a small fire cannot be extinguished with the use of a portable fire extinguisher, or smoke presents a hazard for the operator, the door to the area should be closed to confine and contain the fire. If fighting the fire, ensure that the Fire Alarm System has been activated and Cavan Monaghan Fire Department has been notified prior to any attempt to extinguish the fire. Only those persons who are trained and familiar with extinguisher operation may attempt to fight the fire.

The decision to use a fire extinguisher is one that is made after considering the following:

• Type of fire (Class A, B, C, D or K)

• Type of fire extinguisher available for the fire

• Size and intensity of fire

• Size and capacity of the fire extinguisher

• Exit location and clear route away from fire

**When not to fight a fire…**

• If the fire could block your only exit

• If the fire is spreading quickly

• If the type or size of the extinguisher is wrong

• If the fire is too large

• If you don’t know how to use the fire extinguisher

# Suggested Operation of Portable Fire Extinguishers

Remember the (**PASS**) acronym

**P** - Pull the safety pin

**A** - Aim the nozzle

**S** - Squeeze the trigger handle

**S** - Sweep from side to side (watch for fire restarting)

Never re-hang extinguishers after use. Ensure they are properly recharged by a person that is qualified to service portable fire extinguishers and that a replacement extinguisher is provided.

Keep extinguishers in a visible area without obstructions around them.

# Part 11

# Alternative Measures for Occupant Fire Safety

In the event of any shut-down of fire protection equipment systems or part thereof, in excess of 24 hours, the fire department shall be notified in writing. Occupants will be notified and instructions will be posted as to alternative provisions or actions to be taken in case of emergency. These provisions and actions must be acceptable to the Chief Fire Official.

All attempts to minimize the impact of malfunctioning equipment will be initiated. Where portions of a sprinkler or fire alarm system are placed out of service, service to remaining portions must be maintained, and where necessary, the use of watchmen, bull-horns, walkie-talkies, etc. will be employed to notify concerned parties of emergencies. Assistance and direction for specific situations will be sought from The Cavan Monaghan Fire Department.

Procedures to be followed in the event of shutdown of any part of a fire protection system are as follows:

1. Notify Cavan Monaghan Fire Department, dial 705-932-2765 (DO NOT USE 9-1-1). Give your name, address and a description of the problem and when you expect it to be corrected. The Cavan Monaghan Fire Department is to be notified in writing of shutdowns longer than 24 hours.
2. Post notices at all exits and the main entrance, stating the problem and when it is expected to be corrected.
3. Have staff or other reliable person(s) patrol the affected area(s) at least once every hour.
4. Notify Cavan Monaghan Fire Department and the building occupants when repairs have been completed and systems are operational.

**Note:** All shutdowns will be confined to as limited an area and duration as possible. Cooking operations shall be suspended until the commercial cooking fixed extinguishing system is restored.

(See attached Fire Watch Duties and Report Log)

|  |  |
| --- | --- |
|  | Fire Watch Duties |

**Definition***:* The term “fire watch” is used to describe a dedicated person or persons whose sole responsibility is to look for fire within an established area. Fire watch is required in the event of temporary failure of the fire alarm system or where activities require the interruption of any fire detection, suppression or alarm system component.

**Note: All building occupants are to be notified in writing that the fire protection systems in the building are not currently functional and that a Fire Watch has been instituted until repairs have been made. Occupants should take immediate actions to notify other occupants and evacuate the building when notified of a fire emergency.**

1. At least one (1) qualified staff person shall be employed to complete fire watch duties of the unprotected building area whenever the building is occupied. Each person assigned to Fire Watch duties must be provided with the following equipment;
2. Suitable means of communication (cell phone, portable radio, etc.) for notifying the Fire Dept.
3. A portable air horn or other approved means of sounding an alarm
4. Flashlight
5. Clipboard and pen
6. Copy of fire watch duties
7. Copy of the Fire Watch Log Sheet
8. Keys and/or access codes to provide entry to all rooms/spaces
9. Floor plan(s) of the building under Fire Watch
10. Fire Watch personnel are to be familiar with the building and procedures for alerting the fire Department and all building occupants in the event of a fire.
11. Rounds shall be diligently completed at least once each hour, and recorded immediately upon the conclusion of each round on the Fire Watch Log Sheet. The person completing the rounds will record the time each round was completed.
12. Fire watch personnel are to have fire extinguishing equipment readily available and be trained in its use.
13. If fire or smoke conditions are discovered, alert all building occupants by sounding a portable air horn or another device approved by the Chief Fire Official. Attempt to **extinguish the fire when it is safe** to do so.
14. A telephone must be readily available at all times to notify The Cavan Monaghan Fire Department by calling 9-1-1. Always call from a safe area.
15. Coordinate evacuation in fire compartment and close door in fire room. Keep all doors closed to limit smoke migration. Continue to assist those with physical of cognitive limitations during evacuation.
16. Once building evacuation is completed, await emergency response personnel at a safe location and direct them to the fire. NEVER re-enter the building without permission from The Cavan Monaghan Fire Department.
17. “Hot Works” such as welding or cutting shall be prohibited in the area where the sprinkler protection is impaired or be limited to areas where approved precautions have been put into place.
18. While the sprinkler and/or fire alarm system(s) are shut down, assigned fire watch personnel shall patrol the area until both the fire alarm system and the sprinkler system has been restored.
19. Exit doors, access to exits and corridors are to be kept closed and checked periodically for proper operation and obstructions while performing Fire Watch duties.

# Fire Watch Log Report

|  |  |  |
| --- | --- | --- |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ System out of service | Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Time: \_\_\_\_\_\_\_\_ |
| System Out of Service-Notification to Fire Department | Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Time: \_\_\_\_\_\_\_\_ |

|  |  |  |
| --- | --- | --- |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ System Back in Service | Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Time: \_\_\_\_\_\_\_\_ |
| System Back in Service-Notification to Fire Department | Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Time: \_\_\_\_\_\_\_\_ |

**Persons assigned to fire watch duties shall follow the requirements listed on the fire watch duties sheet and shall patrol all unprotected areas of the building every hour to check for signs of fire or smoke conditions. All patrols are to be recorded on this log report immediately following each round. Records of fire watch shall be kept for 2 years after they are made and shall be made available upon request to the chief fire official.**

**Fire Watch Duties Conducted By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

(PRINT NAME & POSITION)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Rounds** | **Start Time** | **Finished** | **Signature** | **Comments** |
| **1** |  |  |  |  |
| **2** |  |  |  |  |
| **3** |  |  |  |  |
| **4** |  |  |  |  |
| **5** |  |  |  |  |
| **6** |  |  |  |  |
| **7** |  |  |  |  |
| **8** |  |  |  |  |
| **9** |  |  |  |  |
| **10** |  |  |  |  |
| **11** |  |  |  |  |
| **12** |  |  |  |  |
| **13** |  |  |  |  |
| **14** |  |  |  |  |
| **15** |  |  |  |  |
| **16** |  |  |  |  |
| **17** |  |  |  |  |
| **18** |  |  |  |  |
| **19** |  |  |  |  |
| **20** |  |  |  |  |
| **21** |  |  |  |  |
| **22** |  |  |  |  |
| **23** |  |  |  |  |
| **24** |  |  |  |  |

**Fire Watch Commenced: Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Time: \_\_\_\_\_\_\_\_\_\_\_**

**Start a new Fire Watch Log Report Sheet for each new day of fire watch**

# Part 12

# Fire Drills

Fire drills will be held at least once every       month(s) for this building to ensure efficient execution of the Emergency Procedures by supervisory staff. Fire drill records are required to be retained for a period of 12 months after the fire drill and made available to the Chief Fire Official upon request.

The Fire Code (2.8.3.1.(1) of Div. B) states that the procedure for conducting fire drills shall be included in the fire safety plan, taking into consideration

(a) the building occupancy and its fire hazards,

(b) the safety features provided in the building ,

(c) the desirable degree of participation of occupants other than supervisory staff ,

(d) the number and degree of experience of participating supervisory staff , and

(e) the testing and operation of the emergency systems installed in buildings within the scope of Subsection 3.2.6. of Division B of the Building Code .

The fire drill procedures shall be prepared in consultation with the Chief Fire Official.

**The Procedure is as follows:**

1) Notify all occupants 24 hours in advance of the approximate time when the drill is to take place and include the date of the drill.

2) Post signs containing the above information in the lobby and other locations where guests are most likely to see them.

3) Notify the Fire Department and monitoring agency (if alarm is monitored) before the fire alarm is activated.

**Fire Department Phone Number: 705-932-2765** **(Not 911 for this purpose)**

4) Commence drill.

5) Reset alarm system and verify with the alarm company that alarm is reset.

6) Notify the Fire Department when drill has been completed if the alarm was activated.

7) Post-drill de-briefing meeting(s) will be held after drill to assess:

a) any problems that may have occurred

b) that all required fire protection equipment functioned as designed

8) Complete the appropriate fire drill document (as shown in fire safety plan) and retain the record for at least 12 months after the drill.

# Fire Drill Record

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Date: |  | Time: |  | Full Drill or Table-top exercise: |
| Device Activated: | | | |  |

|  |  |
| --- | --- |
| On-Duty Manager/Supervisor Conducting Drill: |  |

|  |  |
| --- | --- |
| Staff Present: |  |
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| --- | --- |
| Deficiencies Noted: |  |
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| --- | --- |
| General Comments: |  |
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# Part 13

# Requirements of the Ontario Fire Code

**Check/Test/Inspect requirements of the Ontario Fire Code:**

To assist you in fulfilling your obligations, included is a list of the portions of the Fire Code that requires checks, inspections and/or tests to be conducted of the facilities. It is suggested that you read over this list and perform or have performed the necessary checks, inspections and/or tests for the items which may apply to your property.

This list has been prepared for purposes of convenience only. For accurate reference, the Fire Code shall be consulted. Where specific references to checking, inspection and testing of fire safety devices are not made in this Code, such devices shall be maintained to ensure they operate as per their design requirements.

Where a building or its contents must be tested for compliance with this Code, the tests shall be carried out by the owner or the owner's agent within such reasonable time as the Chief Fire Official may determine.

Any appliance, device or component of a device that does not operate or appear to operate as intended when checked, inspected or tested as required by this Code shall be repaired or replaced if the failure or malfunctioning of the appliance, device or component would adversely affect fire or life safety.

Fire Prevention Officers may check to ensure that the necessary checks, inspections and/or tests are being done, when conducting their inspections, and asked to see the required written records.

**Definitions for key words are as follows:**

**Check:**means visual observation to ensure the device or system is in place and is not obviously damaged or obstructed

**Test:** means the operation of a device or system to ensure that it will perform in accordance with its intended operation or function

**Inspect:** means physical examination to determine that the device or system will apparently perform in accordance with its intended function

**It is stated in the Fire Code that written records of all tests and corrective measures are required to be retained for a period of two years after they are made, and shall be available upon request to the Chief Fire Official. Records shall be made and the original or a copy shall be retained at the building premises for examination by the Chief Fire Official. Records of tests and corrective measures or operational procedures shall be retained so that at least the current and the immediately preceding reports are available, however; records shall be retained for a period of at least two years afterbeing prepared.**

**NOTE: The initial verification or test reports for fire protection systems installed after November 21, 2007 shall be retained on the premises throughout the life of the systems. This requirement applies to systems installed in accordance with this Code or the Building Code.**

# General Fire Protection Systems/Equipment

**General Responsibility**

(example: Owner, Superintendent, Contractor)

|  |  |
| --- | --- |
| Doors in fire separations shall be **checked** as frequently as necessary to ensure that they remain closed. |  |
| Exit signs shall be clearly visible and maintained in a clean and legible condition. |  |
| Internally illuminated exit signs shall be kept clearly illuminated at all times, when the building is occupied. |  |

**Weekly**

|  |  |
| --- | --- |
| When subject to accumulation of combustible deposits, hoods, filters and ducts shall be **checked** weekly and be cleaned when such deposits create an undue fire hazard. |  |

**Monthly**

|  |  |
| --- | --- |
| Doors in fire separations shall be **inspected** monthly for proper operation. |  |

**Yearly**

|  |  |
| --- | --- |
| Fire dampers and fire-stop flaps shall be **inspected** annually, or based on a schedule via contractor acceptable to the Chief Fire Official. |  |
| Every chimney, flue and flue pipe shall be **inspected** annually and cleaned as often as necessary to keep them free from ccumulations of combustible deposits. |  |
| Disconnect switches for mechanical air-conditioning and ventilating systems shall be **inspected** annually to establish that the system can be shut down. |  |
| Spark arresters shall be cleaned annually or more frequently where accumulations of debris will adversely affect operations. Burnt-out arresters shall be repaired or replaced. |  |

# Portable Fire Extinguishers

**General Responsibility**

|  |  |
| --- | --- |
| Each portable extinguisher shall have a tag securely attached to it showing the maintenance or recharge date, the servicing agency and the signature of the person who performed the service. |  |
| A permanent record containing the maintenance date, the examiner’s name and a description of any work or hydrostatic **testing** carried out shall be prepared and maintained for each portable extinguisher. |  |
| All extinguishers shall be recharged after use or as indicated by an inspection or when performing maintenance. When recharging is performed, the recommendations of the manufacturer shall be followed. |  |

**Monthly Responsibility**

|  |  |
| --- | --- |
| Portable extinguishers shall be **inspected** monthly. |  |

**Yearly**

|  |  |
| --- | --- |
| Extinguishers shall be subject to maintenance not more than one year apart or when specifically indicated by an inspection. |  |
| Maintenance procedures shall include a thorough examination of the three basic elements of an extinguisher: a) mechanical parts b) extinguishing agent c) expelling means |  |
| Every twelve months, pump tank water, and pump tank calcium chloride base antifreeze types of extinguishers shall be recharged with new chemicals or water, as applicable |  |

**5 Years**

|  |  |
| --- | --- |
| Every five years, pressurized water and carbon dioxide fire extinguishers shall be hydrostatically **tested**. |  |

6 Years

|  |  |
| --- | --- |
| Every six years, stored pressure extinguishers that require a 12 year hydrostatic **test** shall be emptied and subjected to the applicable maintenance procedures. |  |

# Fire Alarm System

**General Responsibility**

|  |  |
| --- | --- |
| Fire alarm and voice communication system components shall be kept unobstructed. |  |
| Fire alarm shall be kept unobstructed. |  |
| Fire alarm system power supply disconnect switches shall be locked on in an approved manner. |  |

**Daily Responsibility**

|  |  |
| --- | --- |
| The following daily checks shall be conducted if a fault is established, appropriate corrective action shall be taken.  a) **Check** the principle and remote trouble lights for trouble indication;  b) **Inspection** of the AC power-on light shall be done to ensure its normal operation. |  |

**Monthly**

|  |  |
| --- | --- |
| Every month the following **tests** shall be conducted under battery back up power and if a fault is established, appropriate corrective action shall be taken:  a) one manual fire alarm initiating device shall be operated, on a rotating basis, and shall initiate an alarm condition  b) function of all signal devices shall be ensured  c) the annunciator panel shall be checked to ensure correct annunciation  d) intended function of the audible and visual trouble signals shall be ensured  e) fire alarm batteries shall be checked to ensure that:  i) terminals are clean and lubricated where necessary;  ii) terminal clamps are clean and tight;   1. electrolyte level and specific gravity, where applicable, meet manufacturer’s specifications |  |
| Voice paging capability to one zone shall be **tested** monthly on a rotational basis. |  |
| One emergency telephone shall be **tested** monthly on a rotational basis for operation and correct indication at control unit. |  |
| Loudspeakers shall be **tested** monthly as an all-call signal to ensure they function as intended. |  |
| At least one firefighter’s emergency telephone shall be **tested** monthly on a rotational basis to ensure communication with the control unit. All telephones shall be **tested** each year. |  |

**Yearly Responsibility**

|  |  |
| --- | --- |
| Yearly **tests** conducted by a certified alarm contractor as required by The Ontario Fire Code. **Tests** shall be in conformance with CAN/ULC S536, “Inspection and Testing of Fire Alarm Systems”. |  |
| Voice communications between floor areas and the central alarm control facility shall be **tested** annually, as required for fire alarm initiating and signally devices. |  |

# Inter-connected Smoke Alarms

**Weekly (As Required By Code)**

|  |  |
| --- | --- |
| The power supply shall be **checked** weekly. |  |

**Monthly**

|  |  |
| --- | --- |
| The operability of the interconnected system shall be confirmed monthly, by **testing** at least one smoke alarm using its **test** function, on a rotational basis. |  |

**Yearly**

|  |  |
| --- | --- |
| Where installed, each manual pull station shall be **tested** to ensure activation of the interconnected smoke alarms on an annual basis. |  |
| Interconnected smoke alarms shall be tested and maintained in operating condition in conformance with CAN/ULC – S552, Standard for the Maintenance & Testing of Smoke Alarms & as required by the Fire Code. |  |

# Smoke Alarms

**General Responsibility**

|  |  |
| --- | --- |
| Ensure dwelling unit smoke alarms are maintained in operating condition. |  |
| Ensure a copy of the smoke alarm manufacturer’s Maintenance instructions or approved alternative has been provided. |  |

# Standpipe Systems

**Monthly Responsibility**

|  |  |
| --- | --- |
| Hose cabinets shall be **inspected** monthly to ensure that the hose and equipment are in the proper position and appear to be operable. |  |

**Yearly**

|  |  |
| --- | --- |
| Plugs or caps on Fire Department connections shall be removed annually and the threads **inspected** for wear, rust or obstruction. Re-secure plugs or caps, wrench tight. |  |
| If plugs or caps are missing, examine the Fire Department connections for obstructions, back flush if necessary, and replace plugs or caps. |  |
| Hose valves shall be **inspected** annually to ensure that they are tight and that there is no water leakage into the hose. |  |
| Standpipe hose shall be removed and re-racked annually and after use. Any worn gaskets in the couplings, at the hose valve and at the nozzle shall be replaced. |  |

# Sprinkler Systems (Wet)

**General Responsibility**

|  |  |
| --- | --- |
| Auxiliary drains shall be **inspected** as required to prevent freezing. |  |
| Fire Dept. connections shall be equipped with plugs or caps that are secured wrench-tight |  |

**Weekly**

|  |  |
| --- | --- |
| Except for electrically supervised valves, all valves controlling water supplies to sprinklers and alarm connections shall be **checked** weekly to ensure that they are sealed or locked in the open position. |  |
| Water supply pressure and system air or water pressure shall be **checked** weekly by using gauges to ensure that the system is maintained at the required operating pressure. |  |

**Monthly Responsibility**

|  |  |
| --- | --- |
| On all sprinkler systems, an alarm **test**, using the alarm test connection located at the sprinkler valve, shall be performed monthly. |  |

**Two Months Responsibility**

|  |  |
| --- | --- |
| All transmitters and water flow devices shall be **tested** at two month intervals. |  |

**Six Months**

|  |  |
| --- | --- |
| Gate-valve supervisory switches and other sprinkler system supervisory devices shall be **tested** at six month intervals. |  |

**Yearly**

|  |  |
| --- | --- |
| Exposed sprinkler piping hangers shall be **checked** yearly to ensure that they are kept in good repair. |  |
| Sprinkler heads shall be **checked** at least once per year to ensure that they are kept in good repair. |  |
| Sprinkler heads shall be **checked** at least once per year to ensure that they are free from damage, corrosion, grease, dust, paint, or whitewash. They shall be replaced where necessary as a result of such conditions. |  |
| On wet sprinkler systems, water-flow alarm **test** using the most hydraulically remote test connection, shall be performed annually. |  |
| Sprinkler system water pressure shall be **tested** annually or after any sprinkler system control valve has been operated, with the main drain valve fully open, to ensure that there are no obstructions or deterioration of the main water supply. |  |
| Plugs or caps on Fire Department connections shall be removed annually and the threads inspected of wear, rust or obstruction. Re-secure plugs or caps, wrench tight. If plugs or caps are missing, examine the Fire Department connection for obstructions, back flush if necessary and replace plugs or caps. |  |

# Sprinkler Systems (Dry)

**General Responsibility**

|  |  |
| --- | --- |
| Auxiliary drains shall be **inspected** as required to prevent freezing. |  |
| Dry-pipe valve rooms or enclosures in unheated buildings shall be **checked** as often as necessary when the outside temperature falls below 0o Celsius to ensure that the system does not freeze. |  |

**Weekly Responsibility**

|  |  |
| --- | --- |
| Except for electrically supervised valves, all valves controlling water supplies to sprinklers and alarm connections shall be **checked** weekly to ensure that they are sealed or locked in the open position. |  |
| Water supply pressure and system air or water pressure shall be **checked** weekly by using gauges to ensure that the system is maintained at the required operating pressure. |  |
| System pressure gauges shall be **checked** weekly. The system shall be maintained at the required operating pressure. |  |

**Monthly**

|  |  |
| --- | --- |
| On all sprinkler systems, an alarm **test**, using the alarm test connection located at the sprinkler valve, shall be performed monthly. |  |

**2 Months Responsibility**

|  |  |
| --- | --- |
| All transmitters and water flow devices shall be **tested** at two month intervals. |  |

**3 Months**

|  |  |
| --- | --- |
| The priming water supply for dry pipe systems shall be **inspected** every three months to ensure that the proper level above the dry pipe valve is maintained. |  |

**6 Months**

|  |  |
| --- | --- |
| Gate-valve supervisory switches and other sprinkler system supervisory devices shall be **tested** at six month intervals. |  |

**Yearly Responsibility**

|  |  |
| --- | --- |
| Exposed sprinkler piping hangers shall be **checked** yearly to ensure that they are kept in good repair. |  |
| Sprinkler heads shall be **checked** at least once per year to ensure that they are free from damage, corrosion, grease dust, paint, or whitewash. They shall be replaced where necessary as a result of such conditions. |  |

**Yearly Sprinkler Systems (Dry) (cont’d) Responsibility**

|  |  |
| --- | --- |
| Sprinkler system water pressure shall be **tested** annually or after any sprinkler system control valve has been operated, with the main drain valve fully open, to ensure that there are no obstructions or deterioration of the main water supply. |  |
| Plugs or caps on Fire Department connections shall be removed annually and the threads inspected for wear, rust or obstruction. Re-secure plugs or caps wrench tight. If plugs or caps are missing, examine the Fire Department connection for obstructions, back flush if necessary and replace plugs or caps. |  |
| Dry pipe valves shall be tripped annually by means of the system test pipe, to ensure that they operate satisfactorily and that the sprinkler alarms are in operating condition. A full flow trip test, with the control valve fully open, shall be conducted at least every three years. |  |

**15 Years Responsibility**

|  |  |
| --- | --- |
| Every fifteen years, dry pipe systems shall be **inspected** for obstructions in the sprinkler piping and if necessary, the entire system shall be flushed of foreign material. |  |

# Water Supplies for Firefighting (Fire Pumps)

**Daily Responsibility**

|  |  |
| --- | --- |
| The temperature of pump rooms shall be **checked** daily during freezing weather. |  |

**Weekly**

|  |  |
| --- | --- |
| Valves controlling water supplies exclusively for fire protection systems shall be **inspected** weekly to ensure that they are fully open and sealed or locked in that position. |  |
| Fire pumps shall be started once per week at rated speed. The fire pump discharge pressure, suction pressure, lubricating oil level, operative condition of relief valves, priming water level and general operating conditions shall be **inspected.** |  |
| Internal combustion engine fire pumps shall be operated once per week for a sufficient time to bring the engine up to normal operating temperature. The storage batteries, lubrication systems and fuel supplies shall be **inspected**. |  |

**Yearly**

|  |  |
| --- | --- |
| Fire pumps shall be **tested** annually at full rated capacity to ensure that they are capable of delivering the rated flow. |  |

# Private Fire Hydrants

**General Responsibility**

|  |  |
| --- | --- |
| Hydrants shall be readily available and unobstructed for use at all times. |  |

**Yearly**

|  |  |
| --- | --- |
| Hydrants shall be **inspected** annually after each use. |  |
| Ensure hydrants are equipped with port caps secured wrench tight. The port caps shall be removed annually and **inspected** for wear, rust or obstructions. |  |
| The hydrant barrel shall be **inspected** annually to ensure that no water has accumulated. |  |
| The drain valve shall be **inspected** for operation if water is found in the hydrant barrel when main valve is closed. |  |
| Hydrant waterflow shall be **inspected** annually and a record shall be kept. |  |

# Water Supplies for Firefighting (Water Tanks)

**Daily Responsibility**

|  |  |
| --- | --- |
| Water tank heat equipment, tank enclosure and/or water temperature shall be **checked** daily during freezing weather. |  |

**Weekly**

|  |  |
| --- | --- |
| Water levels and air pressure in pressure tanks shall be **checked** weekly and the relief valves on the air and the water lines shall be **inspected** weekly. |  |

**Monthly**

|  |  |
| --- | --- |
| Water level in gravity tanks shall be **inspected** monthly. |  |

**Yearly**

|  |  |
| --- | --- |
| An annual **inspection** shall be made of water tanks for fire protection, tank supporting structures and water supply systems including piping, control valves, check valves, heating systems, mercury gauges and expansion joints to ensure that they are in operating condition. |  |
| Cathodic protection equipment in water tanks shall be **inspected** annually. |  |

**2 Years Responsibility**

|  |  |
| --- | --- |
| Water tanks shall be **checked** every two years for corrosion. |  |

**5 Years**

|  |  |
| --- | --- |
| Water tanks shall be **inspected** every five years and scraped and repainted as required. |  |

# Smoke Shafts and Venting Equipment

**General Responsibility**

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| --- | --- |
| Access to windows and panels required for venting floor areas and vents to vestibules permitted to be manually openable shall be kept free of obstructions, openable without keys and operable at times. |  |

**6 Months**

|  |  |
| --- | --- |
| All elevators in an elevator shaft, that is intended for use as a smoke shaft, be **inspected** semi-annually to ensure that on activation of the fire alarm system, the elevators will return to the street floor and remain inoperative. |  |

**Yearly**

|  |  |
| --- | --- |
| A closure in an opening to the outdoors at the top of a smoke shaft, shall be **inspected** annually to ensure that it will open:  a) manually, outside from the building  b) on a signal from the smoke/heat actuated device in the smoke shaft, and;  c) when a closure in an opening between a floor area and the smoke shaft opens |  |
| Controls for air-handling systems for venting in the event of a fire, shall be **inspected** annually to ensure that air is exhausted from each floor area to the outdoors. |  |

**5 Years**

|  |  |
| --- | --- |
| Closures in vent openings into smoke shafts from each floor shall be **inspected** sequentially over a period not to exceed 5 years. |  |

# Smoke Control Measures

**General Responsibility**

|  |  |
| --- | --- |
| Where smoke control measures contained in the supplement to the National Building Code of Canada 1995, Chapter 3, “Measures for Fire Safety in High Buildings” are used, the **inspections** and **tests** shall be as outlined in Section 7.3 of the National Fire Code of Canada. |  |
| Where a smoke control system is designed to meet the requirements of The Ontario Building Code, the **inspections** and **tests** shall be in accordance with procedures established by the designer of the system. |  |

# Commercial Cooking Equipment

**General Responsibility**

|  |  |
| --- | --- |
| Commercial cooking equipment exhaust and fire protection systems shall be installed and maintained in conformance with NFPA 96, “Ventilation Control and Fire  Protection of Commercial Cooking Operations”. |  |
| Ensure wet chemical or alkali based dry chemical portable fire extinguishers are provided to protect commercial cooking equipment and are readily available for use in an emergency. |  |

**Weekly**

|  |  |
| --- | --- |
| Hoods, grease removal devices, fans, ducts, and other equipment shall be **checked** weekly and cleaned at frequent intervals, prior to surfaces becoming heavily contaminated with grease or oily sludge. |  |

**6 Months**

|  |  |
| --- | --- |
| **Inspection** and servicing of the fire extinguishing system shall be made at least every six months by properly trained and qualified persons in conformance with Ontario Fire Code, Section 6.8.1.1. |  |

# Emergency Lighting System

**Daily Responsibility**

|  |  |
| --- | --- |
| Check pilot lights for indication of proper operation. |  |

**Monthly**

|  |  |
| --- | --- |
| Batteries shall be **inspected** monthly and maintained as per manufacturer’s specifications. |  |
| Ensure that battery surface is clean and dry. |  |
| Ensure that terminal connections are clean, free of corrosion and lubricated. |  |
| Ensure that the terminal clamps are clean and tight as per manufacturer’s specifications. |  |
| Emergency lighting equipment shall be **tested** monthly to ensure that the emergency lighting will function upon failure of the primary power supply. |  |

**Yearly**

|  |  |
| --- | --- |
| Emergency lighting equipment shall be **tested** annually to ensure that the units will provide emergency lighting for a duration equal to the design criteria under simulated power failure conditions. |  |
| After completion, the charging conditions for voltage and current and the recovery period will be **tested** annually to ensure that he charging system is in accordance with the manufacturer’s specifications. |  |

# Elevators (High Buildings)

**General Responsibility**

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| --- | --- |
| Ensure keys required to recall elevators and to permit independent operations are in their approved location. |  |
| Maintain correct signage for firefighters’ elevator. |  |

**3 Months**

|  |  |
| --- | --- |
| Every three months the elevator door opening devices operated by means of photo-electric cells shall be **tested** to ensure that the devices become inoperative after the door has been held open for more than 20 seconds with the photo-electric cell covered. |  |
| The key operated switch located outside an elevator shaft shall be **tested** to ensure that the actuation of the switch will render the emergency stop button in each car inoperative and bring all cars to the street floor or transfer lobby by cancelling all other calls after the car has stopped at the next floor at which it can make a normal stop. |  |
| Key operated switches in each elevator car shall be **tested** to ensure that the actuation of the switch will:  a) enable the elevators to be operable independently of other elevators  b) allow operation of the elevator without interference from floor call buttons  c) render door re-opening devices inoperative  d) control the opening of power operated doors only by the continuous pressure on the “door open” button to ensure that if the button is released while the door is opening, the doors will automatically close |  |

**Emergency Power Systems**

**General Responsibility**

|  |  |
| --- | --- |
| Emergency power systems shall be **inspected**, **tested** and maintained in conformance with CSA C282, “Emergency Electrical Power Supply for Buildings”. |  |
| To ensure continued reliable operation, the emergency power supply equipment shall be operated and maintained in accordance with manufacturer’s instructions. |  |
| At least two copies of the instruction manual shall be maintained. |  |

**Monthly**  **Responsibility**

|  |  |
| --- | --- |
| The emergency electrical power shall be completely **tested** monthly as follows:  a) Simulate a failure of the normal power supply.  b) Arrange so that:  i) an engine generator set operates under at least 30% of the rated load for 60 minutes and;  ii) all automatic transfer switches are operated under load.  c) Include an inspection for correct function of all auxiliary equipment such as radiator shutter control, coolant pumps, fuel transfer pumps, oil coolers and engine room ventilation controls.  d) Record all instrument readings associated with the prime mover and generator and a verification that they are normal.  e) Log and report as further prescribed in the manual of instruction for operation and maintenance.  Check fuel supply for sufficient quantity. |  |

**Annually**

|  |  |
| --- | --- |
| Test the generator, control panel, and transfer switch in conformance with CSA C282, “Emergency Electrical Power Supply for Buildings”. |  |

# Maintenance

# Additional Comments

# Part 14

# Fire Safety Plan Review Record

The Fire Safety Plan must be reviewed as often as necessary, but at intervals not greater than 12 months to ensure that it takes account of changes in the use and other characteristics of the building. It is the responsibility of the owner to ensure that the information contained within the Fire Safety Plan is accurate and complete. (*Ontario Fire Code 2.8.2.1.(4) of Division B*).

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Date of Review: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Reviewed By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Owner/Position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Owner/Position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Fire Safety Plan Training Sign-off Record**

Date of Training:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Duties and responsibilities:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I have been provided with a copy of the fire safety plan, I have received training in the plan and understand my duties and responsibilities and evacuation procedures as described in the plan.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print name (trainee) Signature Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print name (trainer) Signature Date