

Fire Safety Checklist: In-House Risk Assessment Sheet

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|-----------------------|
| Date of Check: |
| Assessor: |
| Location: |
| Date: |

| A. Fire Extinguishers | YES | NO |
|--|-----|----|
| 1. Are all Extinguishers in the correct place? | | |
| 2. Are all pins and seals provided? | | |
| 3. Are all fire extinguishers ready for use? | | |
| 4. Are clear procedures in place for use of extinguishers? | | |
| 5. Are all fire marshals clean on fire escape plan? | | |

| B. Means of Escape | YES | NO |
|--|-----|----|
| 1. Are all means of escape clearly indicated? | | |
| 2. Are all means of escape clear and available? | | |
| 3. Do the doors devices on all means of escape operate satisfactory? | | |
| 4. Are all external routes clear? | | |



| C. Fire Warning System | YES | NO |
|---|-----|----|
| 1. Are all operating points (i.e., break class units) of the fire warning systems unobstructed? | | |
| 2. Are all operating points ready for use? | | |

| D. Electrical | YES | NO |
|--|-----|----|
| 1. Are all electrical supply points operating within safe limits (i.e., none are overloaded) | | |
| 2. Are all cables protected? | | |
| 3. Are all cables, plugs etc, damage-free? | | |

| E. Hazard Control | YES | NO |
|--|-----|----|
| 1. Are appropriate (red on white) Non-Smoking Signs available as required? | | |
| 2. Are correct/suitable process control in place? | | |
| 3. are flammables being correctly used and stored within the premises? | | |
| 4. Are ignition sources being correctly used within the premises? | | |

In the situation of a fire leave all personal belonging behind, meet at the nearest assembly point and dial 999.

For fire aftermath clean up please call Ideal Response on 0808 2394 082.

