

FIRE & EMERGENCY SERVICES

(MUNICIPAL CORPORATION, CHANDIGARH)

APPLICATION/PERFORMA FOR OBTAINING/RENEWAL OF FIRE SAFETY NOC FOR STORAGE BUILDINGS [BELOW 15 METER IN HEIGHT AND COVERED AREA LESS THAN 250 m²].

Application Date- ___ / ___ /20__

DETAIL OF BUILDING/PREMISES				
01.	Name of building premises (Location and Address)			
02.	Name, Address and Contact No. of Building Owner			
03.	Name, Address and Contact No. of Applicant			
04.	No. of inhabitants/occupants			
05.	Plot Area (in Sq. Meters)			
06.	Total covered area (in Sq. Meters)			
07.	Over all Height (From Ground Level to Parapet) in Meters			
08.	Height upto terrace of last livable floor (in Meters).			
09.	Height of each floor (in Meters)			
10.	Number of sanctioned floors			
11.	Number of actual floors			
12.	Number of staircase with size			
13.	Please indicate floors to whom NOC is required			
14.	Motorable space provided all around the building			
15.	Number of Basement and its area			
16.	Detail of Means of escape			
17.	Detail of Parking area			
18.	Details of surrounding properties:- a) Front side b) Rear side c) Right side d) Left side			
19.	Number of entry and exit gates with size			
20.	Location of Gen-set with size			
MANDATORY FIRE SAFETY MEASURES AS PER NATIONAL BUILDING CODE OF INDIA-2016				
A) FIRE FIGHTING EQUIPMENTS		YES	NO	Remarks of Inspection Authority Ok or not
01.	Fire Extinguishers ISI Mark			
02.	First Aid Hose Reel			
03.	Automatic Sprinkler System			
04.	Terrace Tank over respective tower terrace capacity 25000 Liter exclusively for Fire-fighting purpose alongwith Pump capacity 900 LPM at the terrace tank level with minimum pressure of 3.5 Kg/cm ²			
05.	Four-Way Fire Brigade Connection with NRV in Box			
B) DETECTION AND ALARM SYSTEM				
01.	Manually Operated Electronic Fire Alarm System			
02.	Automatic Detection and Alarm System			
C) EVACUATION PROVISIONS		YES	NO	Remarks of Inspection Authority Ok or not
01.	Every area for storage of Hazardous Commodities shall have provision of EXIT within 22.5 meter of any point in the area where person may be present or 35 meter for sprinkled building			

02.	Provision of at least 02 EXIT access doors leading to the corridors in EXIT access for every storage area exceeding 1400 m ² gross area or where normally 10 persons remain present and the same should be readily opened as long as persons are inside and should be remote to each other			
03.	Provision of at least one stair tower from basement to first floor to the top floor of workhouse enclosed in a dust-tight non-combustible shaft for Grain Elevators			
04.	Provision of non-combustible doors of self-closing type at each floor landing in Grain Elevator			
05.	Provision of Exterior Fire Escape/Basket Ladder from the roof of the workshop to ground level or the roof of an adjoining annexe with access from with access from all floor above the first for Grain Elevators			
06.	Provision of Illuminated Type EXIT Signboards at all escape routes			
D) FIRE PREVENTION MEASURES		YES	NO	Remarks of Inspection Authority Ok or not
01.	Provision of Roof vents or vent in walls at or near ceiling level for warehouses; such vent shall be normally open and if closed, the same shall be designed for automatic opening by release of smoke sensitive device			
02.	Provision of at least 02 'Dwarf' or 'Smash' doors should be provided as EXIT for Aircraft Hangers at interval of not more than 45 meter on all exterior walls and shall kept unlocked in the direction of EXIT Travel			
03.	Prohibition on Flame Generating Devices in the area of storage of volatile flammable substances			
04.	Provision of Exhaust Ventilation System			
DOCUMENTS TO BE ATTACHED				
01.	Approved Fire Safety Layout Plan	YES	NO	
**The inspecting officer may also suggest further requirements as deemed necessary in Public Interest at the time of inspection.				

(SIGNATURE OF THE APPLICANT)

Recommendations of the Inspection Officer	
Note: - the inspection officer should mention the deficiencies found during the inspection and copy of the report to be issued to the owner/occupier.	
	Signature _____ Name of inspecting officer _____ Designation _____ Date of Inspection _____ Contact No. _____
RECEIPT	
Name of the Recipient _____ Signature _____ Contact No. _____ Date of receipt ___/___/___ E-Mail ID _____	