

FORM-III

APPLICATION FOR FIRE SAFETY CERTIFICATE

[See rule-13(1) of the Odisha Fire Prevention and Fire Safety Rules, 2017]

To

The Director, Fire Services,
Odisha, Cuttack

Sir/Madam,

I/We

(i).....son/daughter/wife of
.....address with phone number
.....

(ii)son/daughter/wife of
.....address with phone number
.....

(iii).....son/daughter/wife of
.....address with phone number
.....

(iv).....son/daughter/wife of
.....address with phone number
.....

are the owners/developers/builders/promoters of following buildings or premises:

2.1 Detailed location with full address of the buildings/premises (Plot No., Khata No., street,
Mouza/locality and Dist.):

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.....
.....

2.2 Plot area (with dimensions)

2.3 Width of the road abutting the building or premises:

2.4 Type of occupancy of the Building or Premises.....

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3. Details of the buildings/premises:

Sl. No.	Particulars	Requirement as per National Building Code of India	Requirement as per the approved plan	Provision made in the building	Deviation/ Shortfall/ deficiency if any
1.	Plot area with dimensions				
2.	Total covered /constructed area (at ground level)				
3.	No. of buildings (occupancy wise)				
4.	Height of each building from ground level				
5.	Total number (including all underground, basement, stilt, mezzanine and ground) of floors				
6.	Covered area of a Typical floor (total).				
7.	No. of underground or basements (indicate level below ground in each case).				
8.	Area of each underground or basement floor				
9.	If underground or basement extends beyond the building line please indicate the load bearing strength of the roof or basement.				
10.	Occupancy (usage) (mention separately for each underground, basement, stilt , mezzanine, ground and other floors).				
11.	Details of Parking areas (mention separately the underground, covered and open parking areas)				
12.	Details of property/features surrounding the premises				
13.	No. of gates provided at the boundary for entrance and exit. (indicate their width and height)				
14.	Open spaces around each of the buildings or blocks or towers. Note: <i>If there is no interconnection between any two blocks or towers at every floor level, then each of those blocks or towers will be treated as separate buildings for the purpose of fire safety measures.</i>				

	Front				
	Rear				
	Left				
	Right				
15.	Has drive way been provided around each building? If so, indicate its width, turning radius and load bearing capacity.				
16.	How many staircases have been provided in the building? Please indicate in each case.				
	a)The width of the stairway				
	b)The width of treads				
	c)The height of riser				
17.	Has "Fire tower" been provided in the building? If so, please indicate.				
	a)Fire rating of the walls.				
	b)Fire rating of the Exit doors at each floor.				
18.	What is the average occupant load per floor?				
19.	Number and details of all lifts? Please indicate in each case.				
	a) The floor between which lift runs.				
	b) The type of doors fitted to the lift car and each landing.				
	c) Fire resistance rating of lift car landing doors if known.				
	d)Floor area of the lift car				
	e) Loading capacity of the lift car.				
	f) Has communication system installed in the lift car.				
	g) Has a "Fireman" switch been installed in the lift for grounding it in the event of fire?				
20.	Where more than one lift are installed in the common enclosure, have individual lifts been separated by fire rating?				
21.	Has the lift shafts, lift lobby or stair well been pressurized?				

22.	Have the lift lobby and stair cases been effectively enclosed to prevent fire/smoke entering them from outside at any floor?				
23.	Have all the "Exits" and "Way to Exits" been signposted with illuminated signages?				
24.	Has Wet Riser(s) /Dry Riser(s) been provided? If so please indicate the no. of risers and internal diameter of each.				
25.	Has Down Comer(s) been provided? If so please give details.				
26.	Have internal hydrants been provided? If so, please indicate.				
	a) No. of hydrants on each floor(Indicate whether single or twin out lets).				
27.	Have first-aid hose reels been provided? If so, please indicate.				
	a) No. of hose reels in each floor including basement(s).				
	b) Bore and length of hose reel tubing on each reel drum.				
	c) Size (Bore) and type of nozzle fitted to each hose reel.				
	d) Is the hose reel connected directly to the riser or to the hydrant outlet?				
28.	Has fire hose been provided near each hydrant in hose box? If so, please indicate.				
	a)The type of hose				
	b)The size of (bore) of hoses.				
	c)The length of each hose				
	d) Total no of hoses provided in each hydrant.				
29.	Have branch pipe been provided? If so, please indicate.				
	a)The type of branch pipe				
	b) Size of nozzle fitted to each branch.				
30.	Is the building equipped with automatic fire detection and alarm system? If so, please indicate.				

	a) The type of detectors used.				
	b) The standard to which it conforms.				
	c) Whether detectors provided above false ceiling.				
	d) The code to which the installation conforms.				
31.	Have manual call boxes been installed in building for raising an alarm in the event of an outbreak of fire? If so, please give details.				
32.	Have public address system been installed in the building with loudspeakers on each floor?				
33.	Has any yard hydrant been provided from the building's fire pump?				
34.	Is the building sprinklered? If so, indicate.				
	a) The type of sprinklers used.				
	b) Standard to which it conforms.				
	c) Whether sprinklers provided above false ceiling.				
	d) Has the basement been sprinklered?				
	e) The code to which the installation conforms.				
35.	Have any stationary fire pumps been installed for pressurizing the Wet Riser? If so, please indicate.				
	a) The number of pumps				
	b) The size of suction and delivery connections of each pump.				
	i) Suction (mm)				
	ii) Delivery (mm)				
	c) The output of each pump				
	d) The maximum head against which the pump can operate at the output mentioned at (C) above.				
	e) Is the pump automatic in action?				
36.	Please give the capacity and size of the underground static tank if any exclusively for fire fighting.				
37.	Please indicate the present arrangements for				

	replenishment of the underground tank.				
38.	Is any public or other water storage facility available nearby? If so, please give the capacity and distance from the building. Is it readily accessible?				
39.	Number and type of fire extinguishers provided at various locations (building wise).				
40.	Whether all fire extinguishers bear the ISI certification mark.				
41.	Has a stand by source of power been provided? If it is through a generator, please indicate.				
	a)The capacity (output)				
	b)The functions that can be maintained simultaneously by the use of generator such as operating lifts, fire pumps, emergency lighting etc.				
	c) Is the generator automatic in action or has to be started manually?				
42.	Provision of fire control room and its location.				
43.	Is the building centrally air conditioned? If so, please indicate.				
	a) The material used for construction of ducts and its fittings.				
	b) The type of lining used for ducts if any.				
	c) Type of legging used, if any for insulating any portion of ducts and indicate how the legging is secured.				
	d) If false ceiling is provided please give the fire resistance rating of the ceiling material.				
	e) If plenum is used as returned air passage, has it been protected with fire detectors? Please give details.				
	f) Has a separate AHU been provided for each floor?				
	g) Is the AHU having auto shut off system in case of actuation of detector.				

	h) Has fire dampers been provided inside ducts, if so indicate the no. and type of dampers.				
44.	Is the ducting for each floor effectively isolated or is it continuous for more than one floor?				
45.	Basement ventilation detail:-				
	a) Whether natural ventilation is relied upon? If so, give details of vents with area for the stairwell, lift shafts.				
	b) Whether mechanical ventilation has been provided If so, give details of the system indicating the numbers of air changes for the basement and other floors.				
	c) Whether mechanical ventilation is coupled with automatic detection system? Please give details of the system.				
46.	Where are the switch gear and transformers located? If inside the building, please indicate.				
	a) If the switch gear and transformer(s) have been housed in separate compartments effectively separated from each other and from portion of the buildings by 04 hrs. fire resistive wall?				
	b) What precautions have been taken to prevent a possible fire in transformer (s) from spreading?				
47.	Where electric cables, telephone cables, dry/wet risers/down comers pass through a floor or wall, have the spaces (apertures) round the cables /pipes been effectively sealed/plugged with non combustible, fire resistive materials?				
48.	Are the occupants of the building periodically trained in use and operation of fire safety measures and emergency procedure? If so, please give details of training. If not, why?				

49.	Does an emergency organization exist in the building? If so, please give detail and append a copy of emergency (Fire) orders.				
50.	Has a qualified fire safety supervisor been appointed for the building or premises? If so, his full details. If not, why?				
51.	Has the building been protected against lightning? If so, does the lightning protector conform to any code? Please indicate details.				
52.	Has Helipad been provided over the building? If so, whether it has been approved by the authority?				

4. Self-attested copies of the following documents are enclosed herewith (originals should be produced for inspection and comparison as and when asked for):

- (i) Approved building plans (complete set) and approval letter issued by the Development Authority/Regional Improvement Trust/ Planning Authority.
- (ii) Ownership documents and development agreement if any.
- (iii) Resolution of Board of Directors authorising the applicant(s) (If the building or premises is owned by a Company).
- (iv) Photo Identification proof of all owners(s) or all applicant(s).
- (v) Appointment letter with salary details of Fire Safety Supervisor, if any, appointed under rule 9 of the Fire Prevention and Safety Rules.

5. You are requested to take necessary action for issue of Fire Safety Certificate for occupancy of the aforementioned buildings or premises.

- 1.
- 2.
- 3.
- 4.

Date: (Signatures of all applicants)

Contact person details:

Name in full.....

Tel. No.

Mobile No.