

**QUESTIONNAIRE**

**FOR HIGH RISE BUILDINGS (Building having height below 15 meter)**

**Haryana FIRE SERVICE**

		Requirements As per N.B.C.	Proposed provision
1.	Name of the Building		
2.	Classification of Building as per NBC		
3.	Address of the Building		
4.	Name and address of builder / promoter		
5.	Name and address of owners / occupiers of individual flats		
6.	Plot Area		
7.	Covered area (at ground level)		
8.	Height of the Building		
	a) Overall height (from grade level)		
	b) Occupied Height		
9.	Number of floors (including ground floor)		
10.	Nos. of Basement , Area & Level		
11.	If the Basement extend beyond the building line . Indicate the load bearing strength of the roof of basement.		
12.			
13.			
14.			
15.			
	Compass direction in relation to the building.	Type of property / feature	
	NORTH		
	SOUTH		
	EAST		
	WEST		
16.	Approach to proposed building, width of the road and connecting roads, if any		

17	Please give details of water supply available exclusively for fire fighting		
18	Has wet riser(s) been provided ? If so, please indicate the number of risers and internal dia of each		
19..	Has any down comer been provided ? If so, please give details.		
20	Have internal hydrants been provided. If so, please indicate:- a) No. of hydrants on each floor including basement(s) and terrace.		
	b) Have these hydrants single or twin outlets.		
21.	Have first aid hose reels been provided ? If so, please indicate:-		
	a) No. of hose reels on each floor including basement (s)		
	b) Bore and length of hose-reel tubing on each reel.		
	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 ?		
22	Has fire hose been provided near each hydrant ? If so, please indicate:-		
	a) the type of hoses.		
	b) the size (bore) of hoses.		
	c) the length of each hose.		
	d) total number of hoses provided near each hydrant.		
23.	Have branch pipes been provided ? If so, please indicate :-		
	a) the type of branch pipes		
	b) Size of nozzle fitted to each branch		
24.	a) If the basement is used for car parking or storage, has it been sprinkled ?		
	b) Whether segregation/compartimentation of the basement has been provided. If so please detail-		

25.	Is the building equipped with automatic fire detection and alarm system ? If so, please indicate the type of detector used :-		
26.	Have manual call point been installed in the building for raising an alarm in the event of an outbreak of fire ? If so, please give details.		
27.	How many staircases have been provided in the building ? please indicate in each case :-		
	a) width of the stairway		
	b) width of treads.		
	c) height of risers		
28.	Have any stationary fire pump(s) been installed for pressurizing the wet riser ?		
	a) The number of pumps.		
	b) The output of each pump.		
	c) Is the pump automatic in action		
29.	Has any yard hydrant been provided from the building's fire pump ?		
30.	Have all exists and direction of travel to each exit been sign-posted with illuminated signs.		
31.	Has false ceiling been provided in any portion of the building ? If so, please indicate location and also mention if the material used for the false ceiling is combustible or non-combustible.		
32.	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) The type of lagging used, if any for insulating any portion of the duct ; please also indicate how the lagging is secured.		
	d) If false ceiling is provided, please give information as at (42) above.		
	e) If plenum is used a return air passage has it been protected with fire detectors? please give details.		
	f) Has a separate A.H.U been provided for each floor ?		

	g) Whether automatic shut ddown of A.H.U. is coupled with detection system ?		
	h) Is the ducting for each floor effectively isolated or is it continuous on more than one floors ?		
	l) Is the fire dampers being provided?		
33.	Where are the switchgear and transformers located ? If inside the building, please indicate		
	a) If the switchgear and transformer(s) have been housed in separate compartments, effectively separated from each other and from other portions of the buildings by a four hours' fire resistive wall ?		
	b) What precautions have been taken to prevent a possible fire in the transformer(s) from spreading ?		
34.	Ventilation in basement-		
	a) Whether Natural ventilation is relied upon? If so, give detail of the vents for the stairwell lift lobby and lift shaft		
	b) Whether Mechanical ventilation has been proposed? If so give detail of the proposed system indicating the no. of air changers for the basement and upper floors.		
	c) Whether mechanical ventilation is coupled with automatic detection system ? Please give details of the system.		
35.	Please indicate the number and type of fire extinguishers provided at various locations and the arrangement for the maintenance of the extinguishers.		

Signature of the Fire Consultant

With date & Stamps

Name.....

(In Block Letters)

Organization

Place: -

Dated: -

Signature of the Architect

with date & Stamps

Name

(In Block Letters).....

Designation

Organization

Signature of the APPLICANT/OWNER'S

Name

Designation

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Note :- every page of questionnaire is duly signed by fire consultant, ventilation consultant, fire alarm detection consultant, architect & owner/authorize signatory