

**QUESTIONNAIRE
FOR HIGH RISE BUILDINGS
Haryana FIRE SERVICE**

		Requirements As per N.B.C.	Proposed provision		
1.	Name of the Building				
2.	Classification of Building as per NBC Part IV				
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(Tower/Block wise)				
8.	Height of the Building(Tower/Block wise)				
	a) Overall height (from grade level)				
	b) Occupied Height				
9.	Number of floors (including ground floor) (Tower/Block wise)				
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.	Occupancy (use - please mention separately for each building /tower) Sanctioned Basement = Ground floor= Upper floor= Actual Basement = Ground floor= Upper floor=				
13.	Covered area of typical floor. (Tower/Block wise)				
14.	Parking areas (Please give details)				
15.	Details of surrounding property / features:-				
	Compass direction in relation to the building.	Type of property / feature	Height in case of building		
	NORTH				

Sign. Of Fire, Ventilation
& Electrical Consultant

Sign. Of Project
Architect

Sign of Owner/Auth. Signatory

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 Underground . Fire Tank = Overhead Fire Tank =			
18.	Has wet riser(s) been provided? If so, please indicate the number of risers and internal dia of each			
19.	Has any Downcomer been provided? If so, please give details.			
20.	Please indicate the present arrangement for replenishment of water for fire fighting.			
21.	Is a public or other water storage facility available nearby ? If so, please give the capacity and distance from your building; also please indicate if it is readily accessible.			
22.	Please give any other information that you can regarding availability of water supply for fire fighting.			
23.	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.			
24.	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 ?			
25.	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			

Sign. Of Fire, Ventilation
& Electrical Consultant

Sign. Of Project
Architect

Sign of Owner/Auth. Signatory

	hydrant.		
26.	Have branch pipes been provided ? If so, please indicate :-		
	a) the type of branch pipes		
	b) Size of nozzle fitted to each branch		
27.	If the basement is used for car parking or storage, has it been sprinkled ?		
28	Whether segregation/compartimentation of the basement has been provided. If so please detail-		
29	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 the detectors confirm.		
	c) the code to which the installation confirms.		
30.	Have manual call boxes been installed in the building for raising an alarm in the event of an outbreak of fire ? If so, please give details.		
31..	Has public address system been installed in the building with loudspeakers on each floor ?		
32.	Has an intercom system been provided between the various floors and the fire control room in entrance lobby ?		
33	Has a fire control room been provided in the entrance lobby of the building?		
34	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		
	d) If the treads are of the non-slip type		
35.	What is the average occupant load per floor (Tower/Block wise)		
36.	How many lifts have been installed in the building ? (Tower/Block wise)		
	Please indicate in each case:		
	a) The floors between which the lift runs		
	b) Floor area of the lift car.		
	c) Loading capacity of the lift car.		
	d) Has communication system been installed		

Sign. Of Fire, Ventilation
& Electrical Consultant

Sign. Of Project
Architect

Sign of Owner/Auth. Signatory

	in the lift for car ?		
	e) Has a Fireman's switch been installed in the lift for grounding it in the event of fire ?		
37.	Have any stationary fire pump(s) been installed for pressurizing the wetriser ?		
	a) The number of pumps.		
	b) The size of suction and delivery connection of each pump.		
	c) The output of each pump.		
	d) The head of each Pump		
	e) Is the pump automatic in action		
38	Has a standby source of power supply 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 lift(s) fire pumps emergency lighting etc.		
	c) Is the generator automatic in action or has to be started manually ?		
39	Has any yard hydrant been provided from the building's fire pump ? Specify nos. with distance		
40..	Where more than one lifts are installed in a common enclosure, have individual lifts been separated by fire resisting walls or 2 hours fire rating ?		
41.	Has the lift shaft(s) lift lobby or stairwell been pressurized? If so, give details.		
42	Have the lift lobbies and staircases been effectively enclosed to prevent fire / smoke entering them from outside at any floor ?		
43	Have all exists and direction of travel to each exit been sign-posted with illuminated signs.		
44	Has false ceiling been provided in any portion of the building ? If so, please indicate location Gap ,fire system above false ceiling and also mention if the material used for the false ceiling is combustible or non-combustible.		
45.	Is the building centrally air-conditioned? If so, please indicate :-		
	a) The material used for construction of ducts and its fittings.		

Sign. Of Fire, Ventilation
& Electrical Consultant

Sign. Of Project
Architect

Sign of Owner/Auth. Signatory

	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 (43) 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 down 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?		
46.	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 ?		
47	Where electric cables, telephone cables, dry/ wetrisers/ down comers pass through a floor or wall have the spaces (apertures) round the cables/pipes been effectively sealed/plugged with non-combustible, fire resistant material ?		
48.	Ventilation-		
	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.		
49.	Whether building is sprinklered or not.		
50.	Please indicate the number and type of fire extinguishers provided at various locations and the arrangement for the maintenance of		

Sign. Of Fire, Ventilation
& Electrical Consultant

Sign. Of Project
Architect

Sign of Owner/Auth. Signatory

	the extinguishers.		
51.	Please indicate if all fire extinguishers bear the ISI Certification mark.		
52.	Whether the refuge area has been provided ? If so, the floor on which provided and the total area provided floor-wise.		
53.	Are the occupants of the building systematically trained in fire prevention, use of fire extinguishers and emergency procedures ? If so, please give details.		
54.	Does an emergency organization exist in the building? If so, please give details and append a copy of the emergency (Fire) orders.		
55.	Has a qualified Fire Officer been appointed for the building either individually or jointly with other building(s).		
56.	Has the building been protected against lightening? If so, does the lightening protect confirm to any code ? Please indicate details.		
57.	Weather fire tender movement road shown around the tower as per NBC.(minimum 6mtr)		

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

Sign. Of Fire, Ventilation
& Electrical Consultant

Sign. Of Project
Architect

Sign of Owner/Auth. Signatory