

FIRE & EMERGENCY SERVICES

(MUNICIPAL CORPORATION, CHANDIGARH)

APPLICATION/PERFORMA FOR OBTAINING/RENEWAL OF FIRE SAFETY NOC FOR ASSEMBLY BUILDINGS LESS THAN 10 METER IN HEIGHT (MORE THAN 300 PERSON).

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.	Down Comer System with Accessories in Box			
04.	Automatic Sprinkler System required to be installed in Basement, if area of Basement exceeds 200 m ²			
05.	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			
06.	An additional Terrace Tank over respective tower terrace capacity 5000 Liter exclusively for Fire-fighting purpose alongwith Pump capacity 450 LPM at the terrace tank level with minimum pressure of 3.5 Kg/cm ² (if basement area exceed 200m ²)			
07.	Two-way Fire brigade connection with NRV in Box			

B) DETECTION AND ALARAM SYSTEM		YES	NO	Remarks of inspection Authority Ok or not
01.	Manually Operated Electronic Fire Alarm System			
C) EVACUATION PROVISIONS		YES	NO	Remarks of Inspection Authority Ok or not
01.	Provision of minimum 2.0 meter wide EXIT Door			
02.	Prohibition on Turnstiles			
03.	Seats shall be securely fastened to the floor			
04.	Rows of seats between aisles shall have not more than 14 seats			
05.	Rows of seats opening on to an aisle at one end only shall have not more than 07 seats			
	Seat without dividing arms shall have their capacity determined by allowing 450 mm per person			
06.	The spacing of row from back to back shall neither be less than 850 mm nor be less than 700 mm plus the sum of thickness of the back and inclination of the back			
07.	There shall be a space of not less than 350 mm between the back of one seat and the front of seat immediately behind it as measured between plumb lines.			
08.	Provision of Illuminated type EXIT Signboards at all escape routes			
D) FIRE PREVENTION MEASURES				
01.	Decoration shall be of Non-flammable Material and should be treated with Flame Retardant Material			
02.	Stage setting made of combustible material should be treated with Fire Retardant Material of Class 1 Flame Spread			
03.	No Open Flame Lightning Devices shall be used in place of Assembly. If used, adequate precautions should be taken to prevent ignition of combustible material			
DOCUMENTS TO BE ATTACHED				
1.	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 a 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 _____	