



PLEASE PRINT

PER – 3006

Department of Planning, Engineering and Regulatory Services

FIRE SAFETY EVALUATION FORM

A completed Building Permit and a Building/Development Application (PER - 3003) must accompany this questionnaire.

DESCRIPTION

SECTION 1

Civic address of property _____

Property owner's name _____

Applicant name (if not owner) _____

Address _____

Address _____

City _____ Postal Code _____

City _____ Postal Code _____

Telephone _____ Cell _____

Telephone _____ Cell _____

Email _____

Email _____

Description of project or proposed occupancy:

PROPERTY DESCRIPTION

SECTION 2

Number of storeys _____ Number of streets faced _____

Basement? Yes No

Landlocked at rear? Yes No

Is building attached? Yes No If yes, on how many sides _____

Footprint area of building and approximate dimensions _____

Concealed spaces and location(s) (i.e. crawl spaces, dropped ceilings etc.) _____

Distance from building entrance to fire hydrant (metres) _____

General description of use by floor level:

Basement _____

First _____

Second _____

Third _____

SPRINKLER, FIRE DETECTION AND SECURITY SYSTEMS

SECTION 3

Is the building equipped with sprinkler protection? Yes No

If yes, please provide a general description of the sprinkler protection, water line size, and observed water pressure _____

Is the building equipped with a security system? Yes No

If yes, is the security system monitored by an outside agency? Yes No

Please provide a general description of the security system _____

Is the building equipped with a fire detection and alarm system? Yes No

If yes, please provide a general description of the system _____

CONSTRUCTION DESCRIPTION

SECTION 4

How is a typical floor assembly constructed? (i.e. size and spacing of floor joists, beams, columns, ceiling finish) _____

How is a typical wall assembly constructed? (i.e. wood or steel studs, wall finishes) _____

How are party walls constructed? (i.e. wood, masonry or both) Also, please describe wall finishes. _____

Note any assemblies that deviate from typical conditions and their location _____

POTENTIAL HAZARDOUS AREAS

SECTION 5

Where present, indicate the location of any of the following:					Additional comments:
Multiple tenants, leaseholders	Basement	First	Second	Third	_____
Janitorial/refuse/recycling	Basement	First	Second	Third	_____
General storage	Basement	First	Second	Third	_____
Fuel-fired appliances	Basement	First	Second	Third	_____
Electrical/data	Basement	First	Second	Third	_____
Usable space below stairs	Basement	First	Second	Third	_____
Concealed spaces	Basement	First	Second	Third	_____

EXITING AND FIRE SAFETY

SECTION 6

Are the stairs enclosed? Yes No

Provide a general description of the stairs: (i.e. typical construction wood/gyprock, rise/run headroom, fire rated doors) _____

For each floor level, indicate the following:					Additional comments:
Direct access to the exterior	Basement	First	Second	Third	_____
Fire escapes or balconies	Basement	First	Second	Third	_____
Egress windows	Basement	First	Second	Third	_____
Emergency lighting	Basement	First	Second	Third	_____

Does this building have a fire safety plan? Yes No

If yes, when was it last reviewed by the St. John's Regional Fire Department (yyyy-mm-dd)? _____

For each level, indicate the expected number of occupants: Basement _____ First _____ Second _____ Third _____

APPLICANT SIGNATURE OF AGREEMENT

SECTION 7

I hereby submit this application and confirm that the information supplied is, to the best of my knowledge, correct. In addition, I agree to comply with all City of St. John's regulations and by-laws, agree to develop in accordance with the plans approved by the City of St. John's, and agree not to commence development without applicable written approval and permits from the City of St. John's. I acknowledge that I have reviewed this application and agree to provide any additional information as requested.

Note: Where the applicant and property owner are not the same, the signature of the property owner is required.

Applicant _____ Date (yyyy-mm-dd) _____

Property owner _____ Date (yyyy-mm-dd) _____

The City of St. John's, as the authority having jurisdiction, reserves the right to approve or reject applications using this document at its discretion.

Please mail completed form to:	Access St. John's 10 New Gower Street P.O. Box 908 St. John's, NL A1C 5M2	Call: 311 or 709-574-2489 Where 311 is unavailable, call 709-754-CITY (2489) Fax: 709-576-7688 Email: service@stjohns.ca
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