

## PERFORMA FOR HARYANA FIRE SERVICE

1. Name & address of the building :
2. Type of Occupancy :
3. No. of Blocks/ Towers :
4. Height of the Building :
5. Permissible Height :
6. Number of floors :
7. Covered area at ground floor :
8. Typical floor area/ area at each floor :
9. No. of Basements :
10. Basement floor area, if any :
11. Total plot area :

12. Check list according to HFS Act 2009/HBC-2017/NBC -2016

S. No.	Minimum standards on fire prevention and fire safety (Clause/Code/BIS)	HBC-2017 / NBC-2016 requirement	Provisions proposed
1	<b>Access to fire appliances (4.6/ NBC-3)</b>		
	• Road width		
	• Gate width		
	• Width of internal road		
	Remarks. if any:		
2.	<b>Size (width) Number, type &amp; arrangement of exits</b>		
	Travel distance (4.4.2.2/ NBC-4)		
	Dead end travel distance (4.4.2.2 (C))		
	Number of staircases (4.4.2.1/ NBC-4)		
	• Upper floors		
	• Basements		
	Width of staircases (4.4.2.4.3.2/ NBC-4)		
	• Upper floors		
	• Basements		
	Provisions of Staircase (4.4.2.4.3/ NBC-4 )		
	<b>Firefighting Shaft/Fire Tower (2.24 &amp; E2/NBC-4)</b>		
	No. Of continuous staircases to terrace [4.4.2.4.3.2-h4/ NBC-4]		
	Ramp, if any (width ) (4.4.2.4.3.5/ NBC-4)		
	Protection of exits(4.4.2.5/ NBC-4)		
	• Fire check door (4.4.2.4.3.2-h2/ NBC-4)		
• Pressurization (4.4.2.5(b)& E2/ NBC-4)			
Width of Corridor (4.4.1 & 4.4.2.4.2 / NBC-4)			
Door Size (4.4.2.4.1/ NBC-4)			
Remarks. if any:			

3.	<b>Compartmentation (4.5/ NBC-4)</b>		
	<ul style="list-style-type: none"> <li>No. of fire compartments at basement level</li> </ul>		
	<ul style="list-style-type: none"> <li>Type of compartmentation               <ul style="list-style-type: none"> <li>a) By fire resisting wall of 02 hrs rating</li> <li>b) By fire curtain of 02 hrs rating</li> <li>c) By water curtain</li> </ul> </li> </ul>	Yes / No Yes / No Yes / No	
	<ul style="list-style-type: none"> <li>Fire check door</li> </ul>		
	Remarks. if any:		
4.	<b>Smoke management system (3.4.8, 4.6/ Annex F NBC-4)</b>		
	Mechanical/ Natural		
	<ul style="list-style-type: none"> <li>Basements air changes (12ACPH )</li> </ul>		
	<ul style="list-style-type: none"> <li>Upper floors air changes(12ACPH)</li> </ul>		
	Remarks, if any		
5.	<b>Fire Extinguishers (5.1 / NBC-4/IS 2190)</b>		
	Total numbers on each floor		
	Remarks. if any:		
6.	<b>First-aid Hose Reels (5.1 / NBC-4/IS 884)</b>		
	Total number on each floor		
	Remarks. if any:		
7.	<b>Automatic Fire Detection and Alarming system(4.9/ NBC-4/IS 2189)</b>		
	Type of Detectors		
	Above false Ceiling. if any		
	Remarks. if any:		
8.	<b>MOEFA (4.9/ NBC-4/IS 2189)</b>		
9.	<b>Public Address System (3.4.12/ NBC-4)</b>		
10.	<b>Automatic Sprinkler System (5.1.3/NBC -4/IS-15105)</b>		
	<ul style="list-style-type: none"> <li>Basement</li> </ul>		
	<ul style="list-style-type: none"> <li>Upper floor</li> </ul>		
	<ul style="list-style-type: none"> <li>Sprinkler above false ceiling</li> </ul>		
	<ul style="list-style-type: none"> <li>Fire Service inlet</li> </ul>		
11.	<b>Internal Hydrants (5.1/ NBC-4/ IS 3844)</b>		
	<ul style="list-style-type: none"> <li>Size of Riser/ Down comer</li> </ul>		
	<ul style="list-style-type: none"> <li>Number of Hydrants per floor</li> </ul>		
	<ul style="list-style-type: none"> <li>Total no. of Hydrants in the premises</li> </ul>		
	<ul style="list-style-type: none"> <li>Hose boxes near landing valve</li> </ul>		
	<ul style="list-style-type: none"> <li>Fire Service inlet</li> </ul>		
Remarks. if any:			
12.	<b>Yard Hydrants (5.1/ NBC-4/IS-13039)</b>		
	<ul style="list-style-type: none"> <li>Total number of yard hydrants</li> </ul>		
	<ul style="list-style-type: none"> <li>Hose box</li> </ul>		
	Remarks. if any:		

13.	<b>Pumping arrangements (5.1.2.2/22&amp;23 of table 7/NBC-4)</b>		
	Ground Level		
	<ul style="list-style-type: none"> <li>• Number of pump sets</li> <li>• Discharge of main pump (LPM)</li> <li>• Head of main Pump</li> <li>• Number of main pumps</li> <li>• Jockey pump output (LPM)</li> <li>• Head of Jockey Pump</li> <li>• Standby pump output (LPM)</li> <li>• Pressure at Terrace level</li> <li>• Direct access to Pump house from ground level</li> </ul>		
	Terrace level		
	<ul style="list-style-type: none"> <li>• Discharge of pump</li> </ul>		
	Remarks. if any:		
14.	<b>Captive water storage for firefighting (5.1.2.1/NBC-4/ IS 15105)</b>		
	Underground tank capacity		
	Draw off Connection		
	Fire Service Inlet		
	Access to tank		
	Overhead tank capacity		
	Remarks, if any		
15.	<b>Exit signage (3.4.7/ NBC-4)</b>		
16.	<b>Provision of lifts (E-3/ NBC-4)</b>		
	Fireman's lift switch		
	<ul style="list-style-type: none"> <li>• Pressurization of lift shaft</li> <li>• Pressurization of lift lobby</li> </ul>		
	Remarks. if any:		
17.	<b>Standby power supply (3.4.6.2, 3.4.6.4/ NBC-4)</b>		
18.	<b>Refuge area (E-4/NBC part-4)</b>		
	<ul style="list-style-type: none"> <li>• level</li> <li>• direct access to nearest staircase</li> </ul>		
	Remarks. if any:		
19.	<b>Fire Command Centre (3.4.12/NBC-4 )</b>		
	Proposed Location	Ground floor	
	Provision of fire safety officer (4.10/NBC-4)		
	Remarks. if any:		
20.	<b>Provision of Helipad (E-8/NBC-4)</b>		
21.	<b>Special fire protection systems for protection of special risks, if any 3.4.6, 3.4.9, 4.7, 4.8</b>		
	(special risks-transformer/Sub-station, electrical panel, petroleum products, boiler room, LPG / PNG installation, lightning etc, if any)		

**DECLARATION**

I, \_\_\_\_\_, S/W/D /o Sh. \_\_\_\_\_, the Architect of the building (Name) \_\_\_\_\_ proposed at (Location) \_\_\_\_\_ do hereby solemnly affirm and declare as follows:

1. That I am duly registered with \_\_\_\_\_ Building Authority having registration number \_\_\_\_\_. My office address is \_\_\_\_\_ and contact Number is \_\_\_\_\_.
2. That the aforesaid building has been planned and designed strictly as per the provisions of HBC-2017/ National Building Code of India.
3. The fire and life safety provisions in the aforesaid building have been planned as per the provisions of National Building Code of India 2016 and relevant code of standards.

**Signature of Owner /Occupier**

Name :

Date : \_\_\_\_\_

Place : \_\_\_\_\_

**Signature of Architect**

Name :

Stamp :

**Verified by Local / Building Authority:**

Name :

Designation :

Stamp :

Date : \_\_\_\_\_

Place : \_\_\_\_\_