ASTRALEUS SERVICES PVT LTD

1513 Shubhagan Premium Omax City 1, Indore MP-457337 www.asplcert.com , Email- info.astraleus@gmail.com

ASPL/FSI/F07, Version00

Application Form For Fire Safety Audit

- Applicant needs to share filled application form to plan the Fire Safety Audit.
- be pleased to assist you to complete this form. Please do not hesitate to write/mail.

Name of Organization:						
Address:						
Contact Person:						
Contact No.:	Website:		Email:			
Kind of Business:						
Total No. of sites:	lo. of sites:		Total No. of Blocks:			
Details about organization comply applicable standards:						
Fire safety regulations as applicable/ National Building Code 2016 Part 4 – Fire and Life Safety/any other recognized standard						
Numbers of blocks less than 15 meter height & Not more than 500 sq meter floor area						
Numbers of blocks less than 15 meter height & more than 500 sq meter floor area						
Numbers of blocks more than 15 meter height & Not more than 500 sq meter floor area						
Numbers of blocks more than 15 meter height & more than 500 sq meter floor area						
Exit signs (Yes/No):		Emergency lighting with Battery backup 90 mins (Yes/No):				
Declaration:						
 if applicant inspected under this Scheme by any other FSIA, then shall provide the previous reports to the. The may verify the information with earlier FSIA if necessary. 						
2. If applicant have any judicial proceedings relating to its fire safety related operations, any proceedings by any Regulatory						
Body/IMC/Court of Law/Local Fire Services for suspension/ cancellation/withdrawal of its fire safety related						
operation/approvals under any Regulations or otherwise shall share details copy.						
Please send in original to ASPL Head office.						
List of Documents required to be submitted along with application form are:						

- Copy of building plans including layout showing width of access road of premises
- Year of construction
- Details of previous inspection by any agency
- Details of last electrical audit/ electrical installation verification
- Copy of NOC from local fire department, if any
- PAT (Portable Appliance Test) of all biomedical equipment
- Copy of registration certificate issued by Health Department;
- Copy of Lift Certificate issued by Lift Inspector;
- Hydraulic Test Certificate issued by NABL accredited Lab for Fire Extinguishers as per regulatory requirements/ IS 2190;
- Certificate for Fire Doors installed in the premises, if any;
- · Details of LPG storage in the premises, if any;
- List of trained fire personnel and details of firefighting training to other staff including security personnel;
- Details of fire pumps and water storage tank(s) for firefighting;

Signature	:		
Name	:		
Designation	n:		
Date	:		