

Fire Fighting Facilities Checklist v9

This check sheet is not mandatory but should be completed and included with other documentation that is required as part of the Building Consent Process. It is intended that this information form part of the Fire Engineering Brief process as detailed within the International Fire Engineering Guidelines.

The applicant is to complete Part A and B before consulting with the New Zealand Fire Service.

Part C will be completed in consultation with a New Zealand Fire Service representative.

The representative will be appointed by the Fire Region in which the building will be located. Please refer to the telephone directory white pages for contact details under FIRE SERVICE.

Disclaimer: Please note that neither the New Zealand Fire Service, nor any member or representative of the New Zealand Fire Service assumes responsibility for the accuracy of this Fire Fighting Facilities Checklist. The role of the New Zealand Fire Service with the checklist is to be carried out in conjunction with the applicant. While the New Zealand Fire Service endeavours to carry out these functions accurately, it does not assume responsibility for the information or claims contained on this checklist.

Part A - Administration (to be completed by applicant)

1. Address of Pro	ddress of Property			
Street Number		Lot Number		
Street Name				
Town/Suburb		City/Region		
Premises / Company Name				

2. Applicants Details			
Applicants Name			
Street Number		Street Name	
Town/Suburb		City/Region	
Phone Number		Fax Number	
Mobile Number		E-mail Address	

3. Project Details	
Tick the appropriate box: New building	
Addition/Alterations	
Change of use	

Part B – Building Use (to be completed by applicant)

Number of floors above lowest final exit Number of basement floors Floor area (largest floor) 2. Predominant Building Use Tick the appropriate box: Residential, Apartment, Terrace Transient Sleeping – Hotel, Motel, Boarding House, Hostels Community Care – Rest Home, Hospital				
Floor area (largest floor) 2. Predominant Building Use Tick the appropriate box: Residential, Apartment, Terrace Transient Sleeping − Hotel, Motel, Boarding House, Hostels				
2. Predominant Building Use Tick the appropriate box: Residential, Apartment, Terrace Transient Sleeping – Hotel, Motel, Boarding House, Hostels				
Tick the appropriate box: Residential, Apartment, Terrace Transient Sleeping − Hotel, Motel, Boarding House, Hostels				
Tick the appropriate box: Residential, Apartment, Terrace □ Transient Sleeping – Hotel, Motel, Boarding House, Hostels □				
Residential, Apartment, Terrace Transient Sleeping – Hotel, Motel, Boarding House, Hostels				
Transient Sleeping – Hotel, Motel, Boarding House, Hostels				
Community Care – Rest Home, Hospital				
Community – Public, Church, School, Recreation				
Merchandising – Shop, Shopping Centre, Exhibitions □				
Industrial – Factory, Office				
Other (please specify)				
3. Does Building require a Liquor License?				
Yes □ No □				
4. Owners Details (if different from Applicant)				
Owners Name				
Street Number Street Name				
Town/Suburb City/Region				
Phone Number Fax Number				
5 (a). All Buildings				
Tick the appropriate box:				
Are hazardous substances stored? Yes □ No □				
Are early childhood facilities provided? Yes □ No □				
Is specialised care for people with a disability provided? Yes □ No □				
Is specialised nursing, medical or geriatric care provided? Yes □ No □				
Are people in lawful detention? Yes □ No □				

Does the building have a sprinkler system compliant with NZS 4541 or NZS 4515? If Yes, go to 5(c). If not, go to Part 5(b).

5 (b). Unsprinklered Buildings	
Tick the appropriate box:	
Are there facilities for more than 10 employees? Yes] No □
Do 100 or more people gather?] No □
Is accommodation provided for more than 5 people? Yes D] No □
5 (c). Sprinklered Buildings	
Tick the appropriate box:	
Do 100 or more people gather in a common venue? Yes D] No □
If you have replied Yes to any of the questions in Section 5 the	
an Evacuation Scheme as required under Section 21B of the Fir	
	Fire Comice use
6. Firefighting Water Refer Fire Fighting Water Supplies Code of Practice NZS PAS 4509:2008	Fire Service use only
Available on NZFS Website (http://www.fire.org.nz/)	Omy
6.1 Detail which method from NZS PAS 4509:2008 is being used:	
Method 1 used - go to question 6.2:	
Method 2 used - go to question 6.5:	
6.2 Building water supply classification Method 1:	Agree with values:
Fire Load Energy Density FLED	Yes □ No □
Largest Floor Area/Firecell m ²	Yes □ No □
	Yes □ No □
Required water supply classfication FW	
6.3 Available firefighting water supply	
0.5 Available illelighting water supply	Agree with values:
RETICULATED:	Yes □ No □
Flow rate within 135 m //s No. of hydrants	Yes □ No □
Flow rate within 270 m //s No. of hydrants	
	Adequate flow & no.:
At least one hydrant within 135m Yes ☐ No ☐	Yes □ No □
NB.The NZFS National Commander has directed that the NZFS will check	[6.6 Refers]
these supplies in line with the Water Supplies C.o.P. NZS PAS 4509:2008 and N5 POP Firefighting Water Supplies	[o.o.ve.e.e.]
NON-RETICULATED:	Agree with values:
Minumum Water storage within 90m Yes ☐ No ☐	Yes □ No □
Volume res in water storage within 30m res in we in m ³	
Volume	Yes □ No □
Available water events alreadisation 514	Agraci
Available water supply classfication FW	Agree:
	Yes □ No □

6.4 Is 'Available water supply' at 6.3 greater than or equal to 'Required Water Supply' at 6.2 Yes □ No □ If No, then Mitigation Policy is required.	Agree with assessment: Yes □ No □ Mitigating policy adequate: Yes □ No □ N/A □
6.5 Building water supply classification Method 2: Is calculation in accordance with Code of Practice? Yes □ No □ (NZS PAS 4509:2008 appendix H and J provides the method of calculation approved and accepted by the NZ Fire Service)	Agree with assessment: Yes □ No □ Adequate water supply: Yes □ No □ [6.6 Refers]
6.6 Water testing Results and map provided Yes□No□ Hydrant locations shown on drawing Yes□No□ (Water authority has a list of approved testers that carry out water testing on their network. A full copy of water testing results including a map of the building/s and all hydrants used in the test is required)	Adequate for design: Yes □ No □

Part C – Fire Fighting Facilities Checklist (to be completed in conjunction with the local District Chief Fire Officer/Area Manager or appointed representative (most often local FRMO/VSO/Operational Officer) prior to submitting documentation for building consent)

1.	Firefighting Water	Fire Service use only
1.1	Firefighting Water availability from Part B Section 6 meets NZFS requirements.	Yes □ No □
2. N	lew Zealand Fire Service access to site	Fire Service use only
2.1	Gate key required	Yes □ No □
2.2	Access width adequate	Yes □ No □
2.3	Hardstanding to within 20 m of main entrance or	Yes □ No □
2.4	Hardstanding to within 20 m of sprinkler inlet or	Yes □ No □ N/A □
2.5	Hardstanding to within 20 m of building hydrant system inlet	Yes □ No □ N/A □
2.6	Hardstanding for aerial appliances provided	Yes □ No □ N/A □
3. N	ew Zealand Fire Service access to building	Fire Service use only
3.1	Building access points for Fire Service identified	Yes □ No □
3.2	Doors open on activation of fire alarm	Yes □ No □
3.3	Door keys required	Yes □ No □
3.4	Lift control provided Key Type: Lobby control Car control Lift motor room	Yes □ No □ N/A □
4. V	Vaterway – Refer to NZS4510:2008 and NZS4541:2007	Fire Service use only
4.1	Brigade inlet location(s) suitable:	
	Hydrant	Yes D No D N/A D
	Sprinkler	Yes □ No □ N/A □
4.2	NB. This section is to be completed in conjunction with NZFS Fire Engineers who have sight of overall design and access to relevant drawings. Hydrant outlet locations suitable and safe All points within reach of a. 40 m arc if sprinklered protected floor (or) b. 32 m arc if Non-sprinkler protected floor Min. Pressure (≥ 600 kpa) Type of key securing outlet	Yes No N/A Yes No N/A N/A
	To assist with assessment the above should be clearly marked up on drawings	Yes □ No □ N/A □

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4.3	Sprinkler house (pump/valve set) location suitable Type of door key Type of key securing valves	Yes □ No □ N/A □
4.4	Sprinkler floor isolation valves location suitable Floor isolation valves location clearly indicated	Yes □ No □ N/A □ Yes □ No □ N/A □
5. Fii	re Alarm Panel	Fire Service use only
5.1	Control panel required	Yes □ No □
5.2	Addressable panel location suitable or VDU required at mimic panel location	Yes □ No □ N/A □
5.3	Fire alarm panel location suitable	Yes □ No □ N/A □
5.4	Suitable indicating light required which is either coloured red or incorporates a white strobe with the word "FIRE" coloured red illuminated	Yes □ No □ N/A □
5.5	Mimic panel(s) required	Yes □ No □ N/A □
5.6	Sector panel(s) required	Yes □ No □ N/A □
5.7	ATS connection required	Yes □ No □ N/A □
5.8	Fire alarm brigade connection required by Exact August 1984 È	/ /
6. Fii	re Systems Centre	Fire Service use only
6.1	Emergency Warning Intercommunication System (EWIS) provided EWIS panel located within Fire Systems Centre EWIS co-located with FIP	Yes No N/A Yes No No N/A Yes No No N/A
6.2	Fire Systems Centre location suitable for FS operations State Location (must have direct access to outside)	Yes □ No □ N/A □
6.3	Fire Fan Control Panel (FFCP) instructional schematic provided Beside FFCP at Location?	Yes □ No □ N/A □
7. Fii	rst Aid Firefighting	Fire Service use only
7.1	Fire hose reels provided in accordance with NZS 4503	Yes □ No □ N/A □
7.2	Fire extinguishers provided in accordance with NZS 4503	Yes □ No □ N/A □

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Drawing Number	Version	Date	Drawn By

Additional Information/notes

Reference	Commentary

New Zealand Fire Service Sign Off (ensure all relevant drawings are date stamped)

The above features are acceptable to the Chief Fire Officer/Area Manager

Name (print)	Rank	
Signature	Date	
District		
Region		