**FIRE LOG BOOK**

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# Notes on test procedures and frequencies

## Fire extinguishers

Monthly inspection to ensure they are in their proper position and have not been discharged, or lost pressure (applies to those with a pressure gauge) or suffered obvious damage.

Annual inspection by a competent contractor with all defects recorded.

## Fire alarm system

Daily inspection of the panel to ensure that there are no fault indications

Weekly test using a different call point each week to ensure that the alarm system is working and that it can be heard in all locations. It is recommended that this test takes place at the same time each week so that, should the alarm not be heard, staff can report this. It should also be carried out when the building is occupied so faults can be identified and reported e.g. alarm not heard.

Any automatically closing doors linked to the fire alarm system should be checked during the weekly test. This also includes automatically released doors held open by, for example, Dorgard units.

Monthly check of smoke/heat detectors to ensure no damage or unusual accumulations of dust or paint likely to interfere with their operation.

6 monthly and annual checks should be carried out by a competent contractor.

## Emergency lighting

Monthly check of general condition of fittings (cleanliness, etc.) and operation by simulation of mains failure (e.g. use of “fish” key)

Annual checks should be carried out by a competent contractor.

## Fire doors

Monthly check that smoke and fire seals are intact and undamaged and that door leaves are not damaged or excessively bowed or deformed.

Monthly check that gaps between doors and doors and frames are not so small that the door is likely to bind and not so large that they would prevent effective fire and smoke sealing.

Annual check of fire doors by an accredited competent contractor.

## Fire drills

Ensure fire drills are conducted at least termly for schools, 6 monthly for annually for other operational buildings.

# Visits by Fire Service Inspectors or Fire Crews

Fire and Rescue Service crews periodically visit premises for familiarisation purposes. Fire inspectors may visit after a fire has been reported.

|  |  |  |
| --- | --- | --- |
| Date | Inspector/Lead fire officer | Comments/Observations |
| Name (Print) | Signature |
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# Fire alarm Break Glass Unit Locations (BGU) (Call points)

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| Break glass point number | Location | Specify floor(Gnd, 1st, 2nd, etc.) |
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# Fire detection and alarm system record of tests

Record all weekly, monthly, quarterly and annual tests and inspections

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Date | BGU activated | Automatic door release satisfactory | Fault (Specify) | Remedial action taken | Date fault cleared | Name of tester (Print) |
| Yes | No |
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# Emergency lighting record of tests

Record all monthly and annual tests and inspections

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Date | Satisfactory | Fault (Specify) | Remedial action taken | Date fault cleared | Name of tester (Print) |
| Yes | No |
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# Fire extinguishers record of tests and inspections

Record monthly checks (M) and annual tests and inspections (A)

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Date | Type of check M or A | Satisfactory | Location and Fault (Specify) | Remedial action taken | Date completed | Signature |
| Yes | No |
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# Fire resisting doors record of inspections

Enter details of monthly checks and annual inspection

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| --- | --- | --- | --- | --- |
| Date | Location or number | Satisfactory (Yes/No) | Remedial action | Signature |
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# Fire evacuation drills

Actual fires and “false alarms” should also be recorded here. Note, in the case of schools, evacuation should be termly, 6 monthly elsewhere.

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| --- | --- | --- | --- | --- |
| Date | Persons/sections taking part | Evacuation time | Details of any deficiencies noted | Name(Print) |
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# Staff fire training and instruction

Enter details of training during induction, classroom based fire safety, fire warden training, etc.

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| --- | --- | --- | --- | --- |
| Employee name | Date | Type of training (Full, refresher, induction) | Review date | Employee signature |
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