

# SAFETY AWARDS APPLICATION FORM FOR RESIDENTIAL APARTMENTS - 2018

## Part A

Name of the apartment and the name of the builder	
Address:	
Do you have an association of the owners if yes, give the name of the president and secretary	
Year of construction	
Telephone	
Email	
Website	
Do you have a bye law? If yes is it registered under Societies Act?	
No. of apartments in each Floor	
Total number of units in the facility including villas	
How many units are occupied	
Do you allow running guest house/ commercial activities in your apartment?	
Do you let out apartments for bachelors	
Do you allow pets in the apartments, if yes what are the controls?	
Do you have any written emergency plan	
Are you conducting any periodical motivational training to residents	
Do for the new resident residing on lease	
Do you any system for work at height	

## Part B

<b>1. FIRE PREVENTION</b>	
Does your apartment comply with the requirements of local fire safety laws?	
Do you conduct fire drills involving all team members periodically?	
Is the fire alarm system available?	

Do you have adequate fire extinguishers? How many fire extinguishers provided in each floor?	
Have you given any AMC for fire extinguishers?	
Are the residents known to operate the fire extinguishers?	
Capacity of the fire fighting water tank and its capacity	
Minimum and maximum water stored in the tank	
No of the internal stair case and its width	
Does the apartment faced any fire incidents, if yes submit the details.	
Have you called the service of the Fire and Rescue department in the last three years?	
Have you conducted any Safety Audits in your premises? If yes give the year and the name of the agency.	
Have you conducted any Fire mock drill? If yes date (attach the report)	
Is any onsite emergency plan available (attach copy)	
Are the residents familiar with the layout of the escape routes, staircases, and location of the fire alarms?	
Have you provided emergency lighting in the facility?	
Is any fire fighting training given to occupants?	
Do you have any periodical inspection system for fire water lines, fittings and hoses?	
Are you conducting training for the residents regarding use of LPG, CNG?	
Whether you have provided individual valves for the above and whether it can be operated from outside	

<b>2. SECURITY</b>	
Have you provided security cameras in the facility / lifts?	
Is the security staffs trained in fire evacuation procedures?	
<b>3. GENERAL</b>	
Have you received any notice from the Electrical Inspectorate/ fire and rescue departments for the non-compliance?	
Whether any Emergency Assembly point marked clearly in the case of fire / earthquake.	
Do the owner's carry out additions and alterations in the building?	
Do you store/obstruct in the common corridors, staircases and electrical meter rooms	
In case of fire, do not use lifts for escape sign boards kept	
Is Statutory test certificate of the examination of lift are available.	
Is the certificates are pasted in the lifts?	
<b>4. WATER HYGIENE</b>	
Do you have KWA water connection	
Do you have natural well / bore well in your facility	
Do you carry out water hygiene assessments and regular sampling	
<b>5. ELECTRICAL SAFETY</b>	
Do you have a generator set in your facility? If yes give its HP/capacity?	
How often you service the generator Set.	
<b>6. GAS SAFETY</b>	
Do you have centralised gas supplying facility	
Any notice from local bodies received	
<b>7. SWIMMING POOL</b>	
What are the safety measures taken for swimming pool safety?	

<b>8. WASTE DISPOSAL</b>	
Do you segregate the house hold wastes?	
Are you recycling the solid waste in your facility or disposing off outside?	
How often the waste materials emptied from the premises/ have you got any storage room? If yes how far is the storage room from	
1. Generator	
2. Electrical Panels	
3. Electrical poles	
Do you have any system for discharge of septic tank outlet	
<b>9. STAFF DETAILS</b>	
How many staffs are employed?	
Care taker	
House keeping	
Security	

I hereby declare that the above given particulars are true.

Signature

Association President/Secretary

Date: