

प्रेषक:

दमकल केन्द्र अधिकारी,
नगर निगम, रोहताक।

सेवा में,

उपायुक्त महोदय,
रोहताक।

क्रमांक

दिनांक

विषय:- **Renewal of Arms Dealers Licence of Form XIII and XIV.**

उपरोक्त विषय पर आपके कार्यालय के पत्र क्रमांक

दिनांक के सन्दर्भ में।

..... के स्थान का निरीक्षण किया गया। जगह सुरक्षित है। प्रार्थी ने अग्नि सुरक्षा लिये अग्नि शमन यंत्र लगा रखे है। इसलिये अस्त्र व शस्त्र लाईसेंस डीलरशिप, नवीनीकरण जारी करने में अग्नि शमन विभाग की ओर से कोई आपत्ति नहीं है।

दमकल केन्द्र अधिकारी,
नगर निगम, रोहताक।

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Checklist for fire fighting arrangement in the Industrial Buildings

| Sr. No. | Particulars | Fire Extinguishers | Hose Reel | Down corner | Wet riser | Yard Hydrant | Sprinkler | M.C.P./Alarm System. | Water tank U.G. | Water Tank O.H. | Pumps | Remarks |
|---------|--|--------------------|-----------|-------------|-----------|--------------|-----------|----------------------|-----------------|-----------------|-------|---------|
| 1. | Covered area up to 250 Sq. Mtrs. | | | | | | | | | | | |
| 2. | Covered area up to 500 Sq. Mtrs. | | | | | | | | | | | |
| 3. | Covered area up to 500 Sq. Mtrs. to 1000 Sq. mtrs. | | | | | | | | | | | |
| 4. | Covered area above 1000 Sq. mtrs. | | | | | | | | | | | |

Checked By: _____

**REQUIREMENTS FOR FIRE FIGHTING INSTALLATIONS IN HIGH RISE BUILDINGS AS
PER NBC 2005**

NAME OF THE BUILDING =

CLASSIFICATION OF BUILDING AS PER NBC=

ADDRESS OF THE BUILDING =

Height of the Building =

| Sr. NO. | Particulars | Requirement as per NBC | Provided | Remarks |
|---------|--|------------------------|----------|---------|
| 1 | Fire Extinguishers | | | |
| 2 | Hose Reel | | | |
| 3 | Dry Riser | | | |
| 4 | Wet Riser | | | |
| 5 | Down Comer | | | |
| 6 | Yard Hydrant | | | |
| 7 | Automatic Sprinkler System | | | |
| 8 | M.C.P. (Manual Call Point) | | | |
| 9 | Automatic Detection & Alarm | | | |
| 10 | U.G. Static water Tank | | | |
| 11 | Terrace Tank | | | |
| 12 | Pumps | | | |
| 13 | Terrace Pump | | | |
| 14 | Domestic Tank is Connected with Overflow of Fire tank. | | | |
| 15 | Signage | | | |

Sign of Owner/Auth. Signatory
With Seal
Name =
Telephone No. =