

## Fire Alarm Activation Report

Section A			
Date of incident	...../...../.....		Time of Incident (AM/PM)
Campus	Hope Park	Creative Campus	Aigburth Park
Building			
Exact Location	Include room number & specific information		
Student Accommodation?	Yes	No	
Fire Alarm Activated?	Yes	No	
Fire/Smoke? <input type="checkbox"/> (Complete Section B&C)	False Alarm? <input type="checkbox"/> (Complete Section C Only)		
Please tick one box only. Examples of false alarm causes include: Steam, aerosols, smoking, contractor/building works, system faults and accidental activations			
Section B			
Type of Fire	Major	Minor	Smoke/Near Miss
<b>Major Fire:</b> Incident involving smoke, heat and flames, causing property damage to multiple building fixtures or fittings.			
<b>Minor Fire:</b> Incident involving smoke, heat and flames, causing only localised damage to property or single items of equipment.			
<b>Smoke/Near Miss:</b> Incident involving only smoke, without flames, including burnt cooking, overheating of equipment etc.			
Kitchen Fire?	Yes	No	
Fire Location	Inside Building	Outside Building	
Please briefly describe any injuries and damage caused by the fire:			
Extinguisher Used?	Yes	No	
Persons requiring assistance for evacuation	Yes (note refuge point used)	No	
Approximate time to evacuate the building	Minutes		
Section C			
Briefly describe the incident:			
Cause of Incident	Cooking	Student Fault	Other
Accident	Contractor Fault	Staff Fault	
Fire Alarm Panel/System Fault	Services Fault	Smoking	Hairdryer/Straightener
Weather	Steam	Aerosol	Unknown
Malicious alarm activation?	Yes	No	
Emergency Services attendance?	Yes	No	
Maintenance Required? Alarm contractor informed?	Yes	No	
Further action Required?	Yes	No	
If yes, please detail:			
Reported by:	Date:		