

Combined Fire Safety/Emergency Action Plan (Appendix A-2)

Table 7

Complete this table to indicate, in the event of an emergency, what actions may be taken with regard to specific building components, and those individuals, identified by title, that will be responsible to take such actions and communicate their findings back to the EAP Director. If procedures for one type of emergency are identical (in whole or in part) to those for another emergency, a statement to that effect is sufficient and the information need not be repeated. Add additional sheets as needed.

1. Access to and egress from entrances/exits and stairways:

Building entrances/exits

Location/designation	EAP or other title

Stairways

Letter designation	EAP or other title

2. Elevator operations:

Elevator bank and car numbers <i>(i.e. Bank A, Cars 1 through 6)</i>	EAP or other title

3. Fuel oil storage systems and associated pumps and piping, and electrical, natural gas, steam and other utility operations:

	EAP or other title
Fuel oil	
Electrical	
Natural gas	
Steam	
Other utility	

Building Address _____

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4. Ventilation system operations: (including heating, ventilation and air conditioning equipment and smoke management systems)

Zone # _____

EAP or other title

HVAC equipment	
Smoke management systems	

5. Communication: List the primary and alternate means available for communicating within the building to EAP staff, building occupants and critical operations staff (*i.e. class E-PA system, two way radios, cell phones, etc*):

	EAP Staff	Building occupants	Critical operations staff
Primary			
Secondary			
Additional			
Additional			

Designate an alternate location for communication and control of incident in the event the lobby fire command station has been compromised.

Building Address _____
