



# Fire Protection Plan – Construction / Alteration / Demolition (2018 NC Fire Code Chapter 33 & NFPA 241)

## 1. Project Information

Project Name: \_\_\_\_\_

Project Address: \_\_\_\_\_

City / State / Zip: \_\_\_\_\_

Permit Number: \_\_\_\_\_

Owner / Developer: \_\_\_\_\_

General Contractor: \_\_\_\_\_

Project Superintendent: \_\_\_\_\_

Start Date: \_\_\_\_\_

Estimated Completion Date: \_\_\_\_\_

## 2. Fire Prevention Program Manager (FPPM)

Name: \_\_\_\_\_

Company: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Responsibilities: Implement Fire Prevention Plan, conduct inspections, maintain equipment, and coordinate with the fire department.



### 3. Site Emergency Contacts

Fire Department (Non-Emergency): \_\_\_\_\_

Emergency: 911

Site Supervisor: \_\_\_\_\_

Safety Officer: \_\_\_\_\_

Fire Watch Personnel: \_\_\_\_\_

### 4. Fire Department Access

Primary Access Route: \_\_\_\_\_

Secondary Access Route:

\_\_\_\_\_ Hydrant Locations:

\_\_\_\_\_

Distance to nearest hydrant:

\_\_\_\_\_ Fire lanes maintained at all

times: Yes / No

### 5. Fire Protection Systems

Systems on site: Sprinkler / Standpipe / Alarm / Fire Pump /

None Status during construction: Operational / Impaired / Not

installed Impairment responsible person: \_\_\_\_\_

Fire Watch Required: Yes / No

Fire Department notified: Yes / No



## 6. Temporary Fire Protection

Portable Fire Extinguishers Type: \_\_\_\_\_

Minimum Rating: \_\_\_\_\_

Spacing: \_\_\_\_\_ ft

Locations:

\_\_\_\_\_

Standpipes: Installed / Temporary / Not required

Sprinkler system activated as construction progresses: Yes / No

## 7. Hot Work Program

Hot work activities: Welding / Cutting / Brazing / Torch Roofing

Hot work permit system used: Yes / No

Hot work permit location:

\_\_\_\_\_ Fire watch duration after

work: 30 min / 60 min

Hot work supervisor:

\_\_\_\_\_

## 8. Housekeeping

Combustible debris removal: Daily / Weekly / Other

Trash container locations: \_\_\_\_\_

Combustible storage separation distance: \_\_\_\_\_ ft

Smoking policy: Designated areas only / No smoking



## 9. Flammable and Combustible Liquids

Materials stored: Gasoline / Diesel / Propane / Solvents /

Other Storage method: Safety cans / Cabinet / Outdoor

storage Maximum quantity stored:

\_\_\_\_\_ Storage location:

\_\_\_\_\_

## 10. Temporary Heating Equipment

Type: Electric / Indirect Fired Heater / LP Gas Heater

Manufacturer clearance maintained: Yes / No

Fuel storage location: \_\_\_\_\_

## 11. Temporary Electrical

Electrical installations comply with NEC: Yes /

No Temporary wiring inspected: Yes / No

Main power shutoff location: \_\_\_\_\_

## 12. Site Security / Arson Prevention

Site fencing: Yes / No

Lighting provided: Yes / No

Security patrol: Yes / No

After-hours contact name:

\_\_\_\_\_ After-hours contact

phone: \_\_\_\_\_



### 13. Emergency Procedures

Emergency evacuation signal: Air horn / Alarm / Verbal  
Evacuation assembly point: \_\_\_\_\_

Procedure if fire discovered: Call 911, notify personnel, attempt extinguishment if safe, evacuate, meet at the assembly point.

### 14. Fire Safety Training

Training topics: Fire extinguisher use, evacuation procedures, hot work safety, fire reporting  
Training frequency: Orientation / Weekly / Monthly

### 15. Site Inspections

Inspection frequency: Daily / Weekly  
Responsible person: \_\_\_\_\_  
Inspection items: Housekeeping, extinguishers, permits, fire systems, access roads

### 16. Plan Approval

Prepared By: \_\_\_\_\_  
Title: \_\_\_\_\_  
Signature: \_\_\_\_\_  
Date: \_\_\_\_\_  
General Contractor Approval Name: \_\_\_\_\_  
Signature: \_\_\_\_\_  
Date: \_\_\_\_\_  
AHJ Reviewer: \_\_\_\_\_  
Date: \_\_\_\_\_