**FIRE & RESCUE SERVICE CONSULTATION PRO-FORMA**

|  |
| --- |
| 1. **Project Details**
 |
| **Date of Consultation** |  |
| **Consultation Stage**(Please indicate)(Note: If additional or design change please quote original FRS reference) | Preliminary Design Advice |  |
| Statutory Consultation(first) |  |
| Statutory Consultation(additional information) |  |
| Statutory Consultation(design change) |  |
| **Site Address** | **Scope of Works** |
| **BCB Project Reference** |  |
| **Building Control Body** (Name/Address/Phone/Email) | **CFRS Protection Office** (Name & Address) |
| **Applicant Owner** (Name/Address/Phone/Email) | **Principal Designer**(Name/Address/Phone/Email) |

|  |
| --- |
| **2.0 Project Information** |
| **Nature of Building Work** | New Build | Extension | Alteration | Change of Use |
| **Purpose Group / Risk Profile** (state all as detailed in standard design to) |  |
| **Approx. floor area (m2)**(Diagram D3 – ADB 2019) |  | **Height to top storey (m)**(Diagram D6 – ADB 2019) |  |
| **Height to building (m)**(Diagram D4 – ADB 2019) |  |
| **Total no. of storeys** (Diagram D5 – ADB 2019) |  | **No. of basement storeys**(Diagram D5 – ADB 2019) |  |
| **Total proposed no. of occupants** |  |
| **Fire resistance of elements of structure (please indicate all minimum levels)** |
| **Scheme Complexity**  | Simple Premises | Complex Premises |
| Fire Engineered Premises | New premises in scope (e.g. Higher risk residential building) |
| Specialist/other (please give details) |
| **Structural Frame Design & Fire Resistance** (Note: information required to inform potential complexity, innovation, deviation from traditional e.g. timber frame with extensive voids and plasterboard as FR protection method.) | **Combustibility** |
| Combustible | Non-Combustible |
| Please give details: |
| **Fire Resistance (FR)** |
| Inherent FR | Proposed protection method (if non-inherent) |
| Please give details: |
| **Creation of Voids** |
| Minimal (Monolithic) | Extensive voids/cavities |
| Please give details: |
| **Passive fire protection**(please provide details) |  |
| **Is the premises façade/ part of the façade to be clad?** | Yes | No |
| If yes, please give specifications/details and in particular does Regulation 7(2) apply to any part of the proposal? |
| **Does Regulation 7(2) apply to any part of the proposal?** | Yes all | Yes partial | No |

|  |
| --- |
| **3.0 Fire Suppression, Smoke Control, Fire Detection & other Fire Safety Systems** |
| **Is a Fire Suppression System proposed?** | Yes (full coverage) | Yes (partial) | No |
| If yes, provide general commentary and any areas of code deviation: |
| **Type of Installation:** | Sprinkler | Watermist | Gas | Other |
| Details of ‘other’ installation (where applicable) and standard installed to: |
| **Is Automatic Fire Detection proposed?** | Yes | No |
| If yes, provide general commentary and any areas of code deviation: |
| **Details of smoke control provision:** (please specify) |  |
| **Is emergency escape lighting proposed?** | Yes | No |
| If yes, provide general commentary and any areas of code deviation: |

|  |
| --- |
| **4.0 Evacuation Strategy** |
| **Please indicate the proposed evacuation strategy:** |
| Simultaneous | Phased | Staged | Stay Put | Progressive Horizontal |
| Please provide commentary/detail if required: |

|  |
| --- |
| **5.0 Access and Facilities for Firefighting**  |
| **Are access & facilities provided in accordance with B5 statutory guidance?** | Yes | No |
| If no, provide detail on how the functional requirement B5 will be met: |
| **Is water provision in accordance with B5 statutory guidance?** | Yes | No |
| If no, provide detail on how the functional requirement B5 will be met: |

|  |
| --- |
| **6.0 Building Control Body Assessment** |
| **Principal fire safety design documents used in the assessment**(If ‘other’ then please specify) | ADB V1 |  |
| ADB V2 |  |
| BS9999 |  |
| BS9991 |  |
| BS/PD 7974 |  |
| BB100 |  |
| HTM |  |
| Other |  |
| **Is there any deviation or design proposal not covered in the indicated documents above?** | Yes | No |
| Is yes provide details |
| **Has a performance based (fire engineered) solution been adopted?** | Yes | No |
| If yes, please confirm the BCB have verified: |
| **Has a quantitative analysis (e.g. CFD Modelling, structural fire engineering) enclosed with this consultation already been reviewed by the BCB or their nominated consultant, and if so by whom?** | Yes | No |
| If no provide details, is yes see below: |
| If ‘yes’, please provide reviewer’s comments of the quantitative analysis, together with evidence of competency and any other comments: |
| **Are there any features considered as ‘compensatory’ in this submission e.g. to allow a relaxation in another area?** | Yes | No |
| If ‘yes’, please provide further detail: |

|  |
| --- |
| **7.0 Comments from the Building Control Body**  |
| **The BCB confirms that the details submitted have been reviewed in accordance with the Building Regulations and can confirm that:** | The submission is considered satisfactory | The submission is considered satisfactory subject to additional information as noted below: |
| Additional Comments: |

|  |
| --- |
| **8.0 List of Supplied Information incl. document and drawing schedule** |
| **Supplied information:**E.g. Fire Strategy |
| Title | Reference | Version |
|  |  |  |
| **Drawing Schedule** |
| Title | Reference | Version |
|  |  |  |