

# FIRE EMERGENCY PLAN

Property name:

Resort:

Country:

Date:

Name of person completing plan:

Signature of property manager:

Date plan completed:

Please complete the following questions regarding the properties Fire Emergency Plan

1	Does the property have a fire alarm?	
	Yes – Continue to (a)	No – Continue to (b)
	(a) How is the fire alarm activated?	(b) In the event of a fire, how are guests and staff informed?
2	In the event of a fire, how are the local Fire Department notified?	
3	What procedures are in place to check for false alarms?	
4	How are guests informed of what actions to take should there be a fire in the property?	
5	Are staff trained regarding their roles and responsibilities on what actions to be taken in the event of a fire?	
	Yes – Continue to (a)	No
	(a) How often is this training provided?	
6	Are escape routes regularly checked to ensure they are kept clear and that proper signage is in place?	
	Yes – Continue to (a) and (b)	No

8	(a) Who performs these checks?
	(b) How often are these checks performed?

7	Where do guests and staff assemble in the event of a fire? (List all if the property has multiple assembly points)
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8	Are there plans in place for guest with reduced mobility and other special needs in the event of a fire?	
	Yes – Continue to (a)	No
	(a) Provide details of the plan:	