	DEPARTMENT OF PUBLIC SAFETY	EFFECTIVE DATE: JUN 17, 2008	POLICY NO.: ADM.08.02
	DEPARTMENT ADMINISTRATION POLICY AND PROCEDURES	SUPERSEDES (Policy No. & Date): ADM.08.02 of 8/19/97	
	SUBJECT: DEPARTMENT FIRE SAFETY PROGRAM		Page 1 of 9

1.0 PURPOSE

To provide guidelines for developing a fire safety operational plan for correctional institutions and District/Circuit Court cellblocks.

2.0 REFERENCES

.1 References

- a. NFPA 101 Life Safety Code 1991.
- b. National Electrical Code.
- c. American Correctional Association Standards for Adult Correctional Institutions.
- d. OSHA Respiratory Standards.

.2 Definitions

- a. Facility: for purposes of this policy, a facility means a correctional institution or a district/circuit court cellblock unit operation.
- b. Branch Administrator: For purposes of this policy, a Branch Administrator means the administrator of a Correctional Facility branch or the administrator of the Court Branch, Special Services Division.

3.0 POLICY

- .1 To reduce the potential of loss of life, personal injury, and property damage resulting from fires, explosions or related incidents, each facility shall provide a means to alert inmates and staff to the problems of fire safety within the constraints of facility security. To accomplish this, a fire safety operation plan shall be developed which involves frequent inspections to identify fire safety deficiencies.
- .2 Although the total elimination of fire incidents is difficult to achieve in a prison setting, each branch administrator shall develop plans for the prompt evacuation, elimination of fire hazards, appropriate testing and maintenance of fire protection

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systems and equipment, proper training of staff and inmates, and enforcement of fire safety policies and procedures.

- .3 The Department Fire Safety Officer, within the Inspections and Investigations Office, shall be the focal point for departmental fire safety. The Department Fire Safety Officer shall provide technical service, direction and overall Department fire safety program management.
- .4 Facility fire safety programs shall be managed by a Fire Safety Officer appointed by the Branch Administrator.
- .5 This policy shall be reviewed annually.

4.0 **PROCEDURE**

.1 Fire Safety Operation Plan

A standardized fire safety operations plan shall be established at all facilities. The provisions of this policy shall provide the guidelines for establishment of the plan. Facilities shall develop and insert specifics and maintain current information germane to individual facilities in the fire safety operation plan. The fire safety operation plan shall include information and procedures for:

- a. Controlling ignition sources to reduce the potential for fires.
- b. Controlling fuels within the prison to reduce fire development rates and total fire size.
- c. Providing evacuation information and training so staff and inmates will be prepared in the event evacuation becomes necessary.
- d. Providing fire-fighting training so staff will be able to properly attack and control or extinguish small incipient fires with equipment available.
- e. Requiring staff training regarding emergency drill, inspection, maintenance or other tasks assigned pursuant to the plan. No departmental staff member will be assigned to work in any offender housing unit without first knowing the fire safety procedures for that unit.
- f. Requiring inmates training regarding behavior required in case of fire emergency which shall be included in orientation drills and the Inmate Handbook.

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.2 Authority Having Jurisdiction

Where the Authority Having Jurisdiction (AHJ) is not otherwise identified by statute, the Director has designated the Departmental Fire Safety Office the AHJ.

As the AHJ, the Departmental Fire Safety Officer, after approval from the Director or his designee, shall have the final authority:

- a. To grant requests for variances and modifications based on equivalency concepts or existing conditions.
- b. To provide interpretation and clarification on fire safety matters.

.3 Inspections

Fire safety inspection shall be conducted by the Inspections and Investigations Office, and supervisory personnel delegated by division and branch administrators to identify deviations from applicable laws, codes, standards and policy. Acceptable compliance with all deficiencies cited on inspection reports must be achieved to ensure safety of all inmates and staff.

These inspections will assist branch administrators in preparing funding requests for correction of deficiencies which are beyond the financial capabilities of the institution.

- a. An annual fire safety inspection of all institutions shall be conducted by a qualified independent source recommended by the Departmental Fire Safety Officer and approved by the Inspections and Investigations Office. The annual inspection will be for compliance where applicable with the National Fire Protection Association (NFPA) Life Safety Code (LS); American Correctional Association (ACA) Standards for Adult Correctional Facilities, Safety and Emergency Section; and this policy directive. The inspection report will be issued by the Departmental Fire Safety Officer and the applicable law, code, standard, or policy section and number shall be listed for each deficiency cited.

A written plan for compliance with all deficiencies cited shall be prepared by the Branch Administrator. Any deficiencies which cannot be corrected forthwith shall have a tentative date for compliance which is acceptable to the Departmental Fire Safety Officer.

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b. Inspections by Facility Staff

1. Monthly Fire Safety Inspections - A comprehensive fire safety inspection of all areas of a facility shall be conducted each month by the facility's Fire Safety Officer. This inspection shall include the inspection, testing and maintenance of fire protection systems and equipment, as required by the applicable codes and standards. The inspection shall be reported on PSD-0141, "Monthly Fire Safety Inspection Checklist" (See Attachment "A"). An acceptable plan for compliance with all deficiencies cited shall be developed, including an acceptable timetable for correction, on PSD-0142, "Fire Safety Deficiencies and Plan of Correction" (See Attachment "B"). Flagrant or life-threatening violations shall be corrected immediately or the area evacuated until acceptable correction of the deficiency is achieved.

2. Weekly Fire Safety Inspections - A fire safety inspection of all areas of the facility shall be conducted by a staff person normally assigned to the specific areas inspected, who has received basic fire safety training by the facility Fire Safety Officer. This inspection is very basic and intended to monitor fundamental fire safety measures, and familiarize staff with fire safety and prevention methods. The inspection shall be reported on PSD-0143, "Weekly Fire Safety Inspection Checklist" (See Attachment "C"). A plan of correction and an acceptable tentative timetable for completion shall be developed for all deficiencies cited. A copy of the report shall be provided to the Facility Fire Safety Officer, Division and Branch Administrator. Serious deficiencies will receive immediate attention by the branch administrator.

.4 Fire Exit Drills

The facility is required, at a minimum, to run one drill per shift per quarter for a total of 3 drills per quarter. Fire drills should include where applicable, staff areas, offices, food service and medical unit. Fire drills should include evacuation of all inmates except when there is clear and convincing evidence that facility security is jeopardized; upon such showing, actual evacuations drills is not required, although staff supervising such inmates shall be required to perform their roles/activity in quarterly drills. Fire department assistance should be practiced also in order to ensure familiarization with the physical layout. PSD-0144, "Evacuation Drill Report" shall be completed for each fire exit drill held with

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submittal to the branch administrator and the facility's administrator and the Department Fire Safety Officer (See Attachment "D").

.5 Monthly Report

The facility's Fire Safety Officer shall prepare a monthly report to the facility's head, Division Administrator and the Inspections and Investigations Office on PSD-0141 (See Attachment "A"). The report shall follow the format developed by the Department's Fire Safety Officer. The report will list deficiencies and corrective action taken.

.6 Fire Incident Reporting

All fires, false alarms and activations of any automatic or manual fire protection system at any facility shall be reported on PSD-0145, "Fire Incident Report" (See Attachment "E"). Fire incident data shall be compiled monthly on PSD-0140, "Monthly Fire Incident Summary" (See Attachment "F") and submitted to the Department Fire Safety Officer. All fires resulting in death, injury, or damage in excess of \$500 shall be reported immediately to the Department Fire Safety Officer.

Any fire protection systems or equipment activated or used shall be restored to service or replaced promptly.

.7 Fire Protection

- a. **Fire Hydrants** - Fire hydrants and water distribution systems shall be tested and maintained in accordance with NFPA Standards #24, "Private Fire Service Mains and their Appurtenances", and #291, "Hydrant Flow Test Report", PSD-0146 (See Attachment "G"). Annual tests shall be conducted and reported to the Fire Safety Officer on forms provided.
- b. **Fire Hose and Standpipe Systems** - Fire hose and standpipe systems shall be maintained in accordance with NFPA #14, "Standards for Installation of Standpipe and Hose Systems". Weekly and monthly inspections shall be documented on PSD-0147, "Fire Hose Standpipe Inspection Record" tag (See Attachment "H").
- c. **Automatic Sprinkler Systems** - Automatic sprinkler systems shall be inspected, tested and maintained in compliance with NFPA Standards #13, "Installation of Sprinkler Systems", and #13A, "Inspection, Testing and Maintenance of Sprinkler Systems". Documentation of quarterly tests shall

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be on PSD 0141, "Monthly Fire Safety Inspection Checklist" (See Attachment "A").

- d. Kitchen Hood Fire Suppression Systems - Kitchen hood fire suppression systems shall be installed, inspected, tested, and maintained in compliance with NFPA Standards #96, "Vapor Removal from Cooking Equipment". Semi-annual service shall be performed by a certified firm and reported on PSD-0148, "Cooking Appliance Suppression System Semi-Annual Inspection Report" (See Attachment "I").
- e. Automatic Fire Alarm and Detection Systems - Fire alarm and detection systems shall be inspected, tested and maintained in compliance with NFPA Standards #72A, "Installation and Use of Local Protective Signaling Systems for Guard's Tower, Fire Alarm, and Supervisory Service"; #72D, "Installation, Maintenance and Use of Proprietary Signaling Systems"; #72E, "Automatic Fire Detectors"; and #72H, "Testing Procedures for Local, Auxiliary, Remote Station and Proprietary Signaling Systems". Documentation of quarterly tests shall be on PSD-0141, "Monthly Fire Safety Inspection Checklist" (See Attachment "A"). Annual testing and maintenance shall be performed by a certified firm and reported on PSD-0149, "Systems Annual Tests and Maintenance Inspection Report" (See Attachment "J").
- f. Fire Extinguishers - Portable fire extinguishers shall be provided throughout the facility and shall be placed and maintained in compliance with NFPA Standard #10, "Standard for Portable Fire Extinguishers". Weekly and monthly inspections of all extinguishers shall be documented on PSD-0151, "Fire Extinguisher Inspection Record" tag. Portable extinguishers shall be replaced or recharged immediately after use (See Attachment "K").
- g. Self-Contained Breathing Apparatus - Self-contained breathing apparatus (SCBA) may be installed and used in facilities upon obtaining written authorization from the appropriate Deputy Director. The Branch Administrator will ensure that sufficient staff will be trained to provide qualified SCBA staff. It is intended that the SCBAs be available for evacuation of segregation units where it is necessary to place restraints on prisoners.

The Department Fire Safety Officer will evaluate segregation and court cellblock units and provide recommendations concerning this matter to the Deputy Director for Corrections and Law Enforcement.

Where SCBAs are provided, the following requirements must be followed:

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1. Two fully operational sets shall be installed within the segregation unit. The SCBAs shall be installed with quick release wall mounts.
2. The use of SCBA shall be limited to staff who have been adequately trained and can demonstrate continued proficiency in its use.
3. The institution must have a general respiratory protection program that meets Department of Labor, DOSH standards.
4. The SCBA shall be provided, used, tested and maintained in compliance with current NFPA standards 1404 and 1500. Weekly and monthly inspections shall be documented on "SCBA Inspection Record" tag, PSD-0152 (See Attachment "L").

.8 Emergency Power

Emergency generators shall be provided, tested and maintained in compliance with NFPA standards #70, "The National Electric Code", and #110, "Emergency and Standby Power Systems", and a written record of testing and maintenance maintained.

.9 Fire and Emergency Keys

Fire and emergency keys are those keys necessary for unlocking doors installed in means of egress and those keys necessary to access fire protection systems and equipment. All fire and emergency keys shall be individually identified by touch and sight by attaching a silver "button rivet" to the head of the key. A spare set of fire and emergency keys shall be maintained at a separate secure location and be readily identifiable as to area/room to facilitate immediate use. The spare set shall be checked monthly and documented on PSD-0153.

"Fire and Emergency Key Inspection Record" tag (See Attachment "M").

.10 Electrical Use

The use of electricity shall be in compliance with the NFPA Standard #70, "National Electrical Code". When authorized by the Facility Administrator, prisoners may possess and use one Underwriters Laboratory (U.L.) listed extension cord, not exceeding nine feet in length, and minimum 16-gauge wire. All appliances used shall be U.L. listed and shall be used as intended. "Home-made lamp shades and electrical devices are prohibited. Daily living

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unit inspections by ACOs will be used to look for and prevent inmates from constructing "home-made" lamps and electrical hook-ups.

.11 Furnishings

All furnishings for offender housing units shall meet the applicable NFPA requirements regarding combustibility and flammability. Furniture or mattresses containing polyurethane foam or materials of a highly flammable character shall be prohibited in prisoner housing units. Wastebaskets, unit trash receptacles, and ashtrays shall be non-combustible or made of other approved non-metallic material.

.12 Personal Property Storage

Books, clothing and other combustible personal property allowed in sleeping rooms, cells and dormitories shall be stored in collapsible metal lockers or fire resistant containers when not in use. Department personal property limitation for inmates will be followed.

.13 Remodeling, Renovating and Occupancy Changes

No remodeling, renovating or occupancy changes shall be undertaken at any institution without prior written approval of the Capital Improvements Office, Department Fire Safety Office and Division Administrator.

.14 Operating Procedures

Administrators shall ensure that operating procedures which clearly incorporate each aspect of this policy directive are developed within sixty days of its effective date and forwarded to the appropriate Division Administrator.

5.0 SCOPE


This policy applies to correctional facilities, correctional industry programs, correctional facility Health Care Services, and District/Circuit court cellblocks.

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APPROVAL RECOMMENDED:


 Deputy Director for Administration

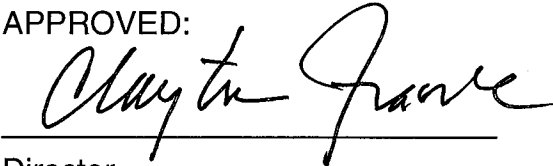
6/6/08
 Date


 Deputy Director for Corrections

6/13/08
 Date


 Deputy Director for Law Enforcement

6-16-08
 Date

APPROVED:

 Director

6/17/08
 Date

HAWAII DEPARTMENT OF PUBLIC SAFETY MONTHLY FIRE SAFETY INSPECTION CHECKLIST

An inspection for compliance with the 1991 Life Safety Code (NFPA-101), Policy and Procedure ADM.08.02, and the American Correctional Association Standard for Correctional Facilities was conducted. All items for non-compliance are cited in the "Statement of Deficiencies and Plan of Correction" section of the report. All references except Chapter 31 pertain to Chapter 14 (New Occupancy) and/or Chapter 15 (Existing Occupancy) as applicable.

Sec#	LSC CHAPTER: 14 and/or 15	C	NC	NA	Sec#	LSC CHAPTER:	C	NC	NA
1.	APPLICATION - GENERAL				3.6	Corridors.			
1.2	Mixed occupancies, Separation egress thru, etc.				3.7	Subdivision of building spaces, smoke barriers.			
1.4	Classification of occupancy. Circle: I II III IV V				3.8	Special features.			
1.5	Classification of contents. Circle: Low Med High				4.	SPECIAL PROVISIONS			
1.6	Minimum construction requirements.				4.1	Windowless buildings.			
1.7	Occupant load - Rated _____, Present _____				4.2	Underground buildings.			
2.	MEANS OF EGRESS				5.	BUILDING SERVICES			
2.1	Compliance with Chapter 5				5.1	Utilities - Electricity code, emergency power, etc.			
2.2	Type of exits - doors, stairs, horizontal.				5.2	Heating, ventilation, & air conditioning.			
2.3	Capacity of means of egress.				5.3	Elevators, dumb waiters, etc.			
2.4	Number of exits.				5.4	Rubbish chutes, incinerators & laundry chutes.			
2.5	Arrangement of means of egress.					LSC CHAPTER 31-OPERATING FEATURES			
2.6	Travel distance to exit or smoke barrier.				1.2	Means of egress maintained clear & unobstructed.			
2.7	Discharge from exits.				1.3.5	Quarterly sprinkler flow test. Date of last test:			
	Egress illumination.				1.3.7	Emergency lighting test-monthly. Date of last test:			
	Emergency lighting.				1.4.3	Flame retardant coatings maintained effective.			
2.10	Marking of means of egress.				1.5	Quarterly fire drills. Date of last drill:			
2.11	Special features - doors.				5.1	Adequate start, staff trng, evac. plan & extinguishers.			
3.	PROTECTION				5.2	Personal combustibles (storage).			
3.1	Vertical openings - stairs, etc.				5.3	Electrical use.			
3.2	Hazard areas - storage, heating, fuel storage, etc.				5.4	Fittings & decor-flame-proofed apprvd waste recep.			
3.3	Interior finish.				5.5	Emergency keys, available, coded by touch & sight.			
3.4	Detection, alarm & communication systems.								
3.5	Extinguishment - sprinklers, portable exting.								

	C	NC	NA
Fire prevention plan - written and available.			
Adequate fire protection service.			
State and local fire service coordination. Date of last fire department visit:			
Training of staff and inmates in Fire Control Plan.			
Smoking regulations, developed and complied with.			
Remodeling or occupancy changes - prior approval required (BAS Physical Plant).			
SCBA (2 per housing unit where required) properly mounted and serviceable.			
Fire reporting procedures followed.			
Extension cord use.			
Housekeeping.			

DISTRIBUTION: White - Fire Safety Inspector, Canary - Division Head, Pink - Branch Administrator, Goldenrod - Unit inspected.

HAWAII DEPARTMENT OF PUBLIC SAFETY FIRE SAFETY DEFICIENCIES AND PLANS OF CORRECTION

Each citation of non-compliance is to be briefly described and the specific location identified, if applicable. Suggestions for achieving compliance may also be made. A plan of correction, or explanation for non-compliance, and a completion, or tentative completion date shall be given for each citation made.

RULE OR POLICY #	DESCRIPTION OF NON-COMPLIANCE	PLAN OF CORRECTION	COMPLETION DATE

DISTRIBUTION: White - Fire Safety Inspector; Canary - Division Head; Pink - Branch Administrator; Goldenrod - Unit Inspected

[PSD0142(01/92)]

HAWAII DEPARTMENT OF PUBLIC SAFETY WEEKLY FIRE SAFETY INSPECTION CHECK LIST

Facility _____ Date of Inspection _____

Building/Area _____ Inspector _____

Exit Interview With _____ Signature _____

An inspection for compliance with the 1991 Life Safety Code (NFPA 101), Policy and Procedure ADM.08.02 and the American Corrections Association Standards for Correctional Facilities was conducted. All items of non-compliance are cited in the "Statement of Deficiencies and Plan of Correction" section. All references except Chapter 31 pertain to Chapter 14 (New Occupancy) and/or chapter 15 (Existing Occupancy) as applicable.

C = COMPLIANCE, NC = NON-COMPLIANCE, NA = NOT APPLICABLE

LSC CHAPTER:	14 and/or 15	C	NC	NA		C	NC	NA	
2.8	Egress Lighting - Stairs, corridors, etc.				5.2	Heating - Portable heaters prohibited			
2.9	Emergency lighting operational				CHAPTER 31				
2.10	Exit signs: Illuminated where required				5.1	Staffing-As required for type of occupancy			
2.11	Egress doors: Operable				5.2	Personal combustibles: in lockers or cabinets			
3.1	Verticle opening protection: Stair, doors, etc.				5.3	Electrical & Appliances-incompliance with policy			
3.2	Hazard area protection: Fire doors closed				5.4	Furnishings & Decocations-flame proofed: app. waste containers			
3.4	Detection/Alarm systems: Operable check panel				5.5	Emergency keys-identified by touch & size-extras available			
	Sprinkler systems: Valve open-18" clearance								
	Portable extinguishers in place-serviceable					Smoking-regulations complied with			
3.5.5	Standpipe & Hose-serviceable					Public Assembly-Capacity posted & incompliance			
3.6	Corridors: clear & unobstructed					SCBA-Provided and serviceable where required			
3.7	Smoke barriers: doors closed or on auto-hold open					Housekeeping			

Each citation of non-compliance is to be briefly described and the specific location identified, if applicable. Suggestions for achieving compliance may also be made. A plan of corrective, or explanation for non-compliance, and a completion, or tentative completion, date shall be given for each citation.

Rule or Policy#	DESCRIPTION OF NON-COMPLIANCE	PLAN OF CORRECTION	Comp. Date

DISTRIBUTION: White - Fire and Safety Inspector; Canary - Division Head; Pink - Branch Administrator; Goldenrod - Unit Inspected

**HAWAII DEPARTMENT OF PUBLIC SAFETY
EVACUATION DRILL REPORT**
(Refer to PD-BCF for complete information & form distribution)

Facility/Institution: _____ Date: _____

Area: _____ Time: _____

This report will be completed by the supervising employee in any area where such a drill occurs. An evacuation drill is required at least on a quarterly basis from each area of the institution where staff or prisoners are located. Time of drills will vary so all shifts are involved. In instances where the Warden/Superintendent has directed actual evacuation of prisoners will not occur, reflected by a signed document, staff will practice evacuation procedures and the supervisor will complete the appropriate portions of this report.

Time Alarm Sounded: _____

Time Total Evacuation is Completed: _____ Elapsed Time: _____

Problem Areas Encountered:

Corrective Action Taken/Recommendations:

Signature

Date

[PSD0144(01/92)]

HAWAII DEPARTMENT OF PUBLIC SAFETY FIRE INCIDENT REPORT

A report shall be submitted for all fires and alarms.

Facility: _____ Date: _____ Time: _____

Building/Area: _____ Submitted by: _____

Location: _____ Signature: _____

EQUIPMENT: Detection/Alarm _____ Sprinkler _____ Fire Extinguisher _____ Fire Hose _____ SCBA _____
 Device No. _____ Restoration - Action to Restore _____

COMPLETE ABOVE FOR ALL FIRES AND ALARMS, BELOW FOR FIRES ONLY

DISCOVERED BY: _____

MATERIAL BURNING: _____
 (Briefly describe type of material burning)

POINT OF ORIGIN: _____
 (Describe exact location fire started if possible)

CAUSE: _____
 (Briefly describe if known)

EXTINGUISHMENT

How: _____ Time of: _____

By who: _____

Area evacuated: _____

Injuries (number): _____ (List names and extent under Remarks)

Damage estimate: \$ _____ Extent: _____

NOTIFICATIONS

DATE AND TIME

REQUIREMENT

Control Center	_____	All Fires
Warden	_____	If evacuation or F.D. response
Fire Safety Inspection	_____	If evacuation or F.D. response
Physical Plant	_____	If evacuation or F.D. response
Fire Department	_____	
State Fire Marshall	_____	
Other	_____	If injury or over \$500 damage

REMARKS: (Witnesses, statements, person(s) responsible, disciplinary action, etc.) _____

REVIEWED BY:

Shift Supervisor _____ Signature: _____

DISTRIBUTION: White - Fire Safety Inspector; Canary - Unit Custody; Pink - Inspector; Goldenrod - Shift Supervisor

**HAWAII DEPARTMENT OF PUBLIC SAFETY
MONTHLY FIRE INCIDENT SUMMARY**

Organization: _____ Month: _____ Year: _____

	MONTH	YEAR TO DATE	LAST YEAR TO DATE
TOTAL FIRES			
CASUALTIES/ INJURIES			
VALUE OF PROPERTY DAMAGED			
FALSE ALARM			

TYPE OF OCCUPANCY	IGNITION ANALYSIS			METHOD OF EXTINGUISHMENT		
	Incendiary	Natural Accident	Unknown	Portable Exting.	Auto Sup- pression	Other
Housing Unit						
Industries						
Office/Administration						
Storage						
Kitchen/Dining						
Engineering/Maintenance						
Health Care						
Outside						
Other						

Remarks: _____

HYDRANT FLOW TEST REPORT

LOCATION _____ DATE _____

TEST MADE BY _____ TIME _____

REPRESENTATIVE OF _____

WITNESS _____

STATE PURPOSE OF TEST _____

CONSUMPTION RATE DURING TEST _____

IF PUMPS AFFECT TEST, INDICATE PUMPS OPERATING _____

FLOW HYDRANTS A₁ A₂ A₃ A₄

Size Nozzle _____
Pilot Reading _____
Discharge Coefficient _____ TOTAL GPM _____
GPM _____

STATIC B _____ psi RESIDUAL B _____ psi

PROJECTED RESULTS @ 20 psi Residual _____ gmp; or @ _____ psi Residual _____ gmp

REMARKS _____

LOCATION MAP Show line sizes and distance to next cross connected line. Show valves and hydrant branch size. Indicate North. Show flowing hydrants - Label A₁, A₂, A₃, A₄. Show location of State and Residual - Label B.

Indicate B Hydrant _____ Sprinkler _____ Other (Identify) _____

[PSD0146(01/92)]

**FIRE HOSE
STANDPIPE INSPECTION RECORD**

LOCATION: _____			
MONTHLY			
DATE	BY	DATE	BY

[PSD0147(01/92)]

COOKING APPLIANCE SUPPRESSION SYSTEM SEMI-ANNUAL INSPECTION REPORT

FACILITY	DATE
ADDRESS	PHONE
BUILDING	FACILITY REPRESENTATIVE

SYSTEM MANUFACTURER	DATE INSTALLED
----------------------------	-----------------------

TYPE OF EXTINGUISHING AGENT: Potassium Bicarbonate Potassium Chloride
 Monammonium Phosphate Urea Potassium Bicarbonate
 Sodium Bicarbonate Other: _____

CHEMICAL CYLINDER:	Normal Pressure _____		PSI
	Manufacturer's Minimum Pressure _____		PSI
	Normal Weight _____		Pounds
	Manufacturer's Minimum Weight _____		Pounds

EQUIPMENT PROTECTED Deep Fat Fryer(s) Upright Broiler(s)
 Grills Griddle(s)
 Char-Broiler(s) Range Top(s)

Expellant Gas Cartridge - Any provided? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, Normal Weight (If Carbon Dioxide) _____ Pounds Normal Pressure (If Nitrogen) _____ Pounds	Connected to fire alarm system? <input type="checkbox"/> Yes <input type="checkbox"/> No
--	---

AUTOMATIC SHUT DOWN OF COOKING EQUIPMENT: IF YES:	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Gas <input type="checkbox"/> Electric
--	--

SYSTEM LOCATION:	
-------------------------	--

INSPECTION CHECKLIST

YES - SATISFACTORY NO - UNSATISFACTORY

	YES	NO
CHEMICAL CYLINDER PRESSURE		
EXPELLENT GAS CARTRIDGE: WEIGHT (Carbon Dioxide) PRESSURE (Nitrogen)		

FIRM NAME	CERTIFICATION #
ADDRESS	PHONE
SIGNATURE	DATE

**HAWAII DEPARTMENT OF PUBLIC SAFETY
FIRE DETECTION AND ALARM SYSTEMS ANNUAL TESTS AND
MAINTENANCE INSPECTION REPORT**

FACILITY		DATE	
ADDRESS		PHONE	
BUILDING		FACILITY REPRESENTATIVE	

YES - SATISFACTORY	NO - UNSATISFACTORY	N/A - NON-APPLICABLE	YES	NO	N/A
Supervisory Device Circuits were tested and are operational.					
The primary power supply was tested and is operational.					
The secondary power supply was tested and is operational.					
The lamp and LED circuits were tested and are satisfactory.					
Smoke detectors were recalibrated and operate satisfactorily.					
Batteries in Telegraphic Fire Alarm systems were discharged for 2 hours and remain operational.					
The meters for monitoring the power supply adequacy in Telegraphic Fire Alarm systems were recalibrated and are accurate.					
Nickel-Cadmium Batteries in Telegraphic Fire Alarm systems had the float voltage measured in each cell and are satisfactory.					

The following test must be conducted at 15 years and every 5 years thereafter.

Two fixed temperature heat detectors for every 100 percent were removed and satisfactorily tested by a testing laboratory. The two fixed temperature detectors were replaced with new detectors.			
--	--	--	--

Date the system was installed: _____
Date the fixed temperature heat detectors were last tested: _____

NOTE: If the tested fixed temperature heat detector fail, all fixed temperature heat detectors in the building must be replaced.

FIRM NAME	CERTIFICATION #
ADDRESS	PHONE
SIGNATURE	DATE

**FIRE EXTINGUISHER
INSPECTION RECORD**

I.D. NUMBER: _____
LOCATION: _____

**MONTHLY
INSPECTION RECORD**

DATE	BY	DATE	BY

[PDS 0151 (01/92)]

ATTACHMENT K

Attachment K

SCBA INSPECTION RECORD

S/N: _____			
LOCATION: _____			
MONTHLY			
DATE	BY	DATE	BY

[PSD 0152(01/92)]

**FIRE AND EMERGENCY
KEYS INSPECTION RECORD**

LOCATION:			
MONTHLY			
DATE	BY	DATE	BY

[PSD0133(01/92)]