**TORRANCE FIRE SAFETY OFFICER REPORT**

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| Name of Producition/Event: | |  | Address: | |  |
| Contact Person: |  | | | Phone: |  |

The following requirements shall comply with the California Fire Code (CFC), National Fire Protection Association (NFPA), and the Torrance Fire Department Ordinance.

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| **I. Access and Parking** | **Yes** | **No** | **N/A** | **Corrected** |
| A. Fire department vehicle access maintained. (20' minimum) | ☐ | ☐ | ☐ | ☐ |
| B. Fire hydrants, sprinkler and standpipe FDC unobstructed. (3' mirnmum) | ☐ | ☐ | ☐ | ☐ |
| C. Parked or stopped vehicles not blocking exit doors. | ☐ | ☐ | ☐ | ☐ |
| D. Special effects truck(s) parked In designated location. | ☐ | ☐ | ☐ | ☐ |
| E. Vehicles parked 20' minimum from any tent. | ☐ | ☐ | ☐ | ☐ |
| **II. Exiting** |  |  |  |  |
| A. All required exits kept clear and unobstructed. | ☐ | ☐ | ☐ | ☐ |
| B. Exit signs (Illuminated) provided and visible. | ☐ | ☐ | ☐ | ☐ |
| C. Exit pathway illumination provided and operational. | ☐ | ☐ | ☐ | ☐ |
| D. No hazardous or flammable materials near exits. | ☐ | ☐ | ☐ | ☐ |
| E. Minimurn 3' aisles and 4' perimeter aisles in Approved Production Facilities. | ☐ | ☐ | ☐ | ☐ |
| **III. Electrical and Lighting** |  |  |  |  |
| A. Cords, cables, boxes, fixtures and appliances in good condition. | ☐ | ☐ | ☐ | ☐ |
| B. Cables properly protected, bundled, etc. | ☐ | ☐ | ☐ | ☐ |
| C. Cables flown or bridged crossing exit ways or paths of travel. | ☐ | ☐ | ☐ | ☐ |
| D. Electrical panels unobstructed with dead fronts or tagged by Bldg & Safety. | ☐ | ☐ | ☐ | ☐ |
| E. Combustible materials kept clear of light fixtures. | ☐ | ☐ | ☐ | ☐ |
| **IV. Fire Protection Equipment** |  |  |  |  |
| A. Fire extinguishers charged, tagged and readily accessible. | ☐ | ☐ | ☐ | ☐ |
| B. 40-8:C extinguisher provided for generator and kitchen area. | ☐ | ☐ | ☐ | ☐ |
| C. Sprinkler system riser, valves and heads unobstructed. | ☐ | ☐ | ☐ | ☐ |
| D. Proper extinguishers provided for type of special effects. | ☐ | ☐ | ☐ | ☐ |
| **V. Generators** |  |  |  |  |
| A. Generator parked in approved location attended while operating. | ☐ | ☐ | ☐ | ☐ |
| B. Generator free of fuel leaks and not refueled while operating. | ☐ | ☐ | ☐ | ☐ |
| **VI. Smoking Control** |  |  |  |  |
| A. No interior smoking is permitted, unless part of performance. | ☐ | ☐ | ☐ | ☐ |
| B. NO SMOKING signs posted and enforced by responsible party. | ☐ | ☐ | ☐ | ☐ |
| C. No smoking within 50' of special effects or 25' of flammable liquids. | ☐ | ☐ | ☐ | ☐ |
| **VII. Heat Producing Appliances** |  |  |  |  |
| A. LPG -fueled appliances not allowed without separate permit. | ☐ | ☐ | ☐ | ☐ |
| B. Adeguate clearance between appliances and combustibles maintained. | ☐ | ☐ | ☐ | ☐ |
| **VIII. Flammable Liquids and Gases** |  |  |  |  |
| A. Flammable gases & liquids stored in approved containers & ldenlified. | ☐ | ☐ | ☐ | ☐ |
| B. No refueling of vehicles or equipment while operating. | ☐ | ☐ | ☐ | ☐ |
| C. No LPG permitted without separate Fire Dept. Permit. | ☐ | ☐ | ☐ | ☐ |
| D. Spray finishing operations with flammable liquids done in spray booth | ☐ | ☐ | ☐ | ☐ |

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| **REPORT COMPLETED BY:** | **OWNER/RESPONSIBLE PARTY NOTIFIED:** |

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| NAME: |  | | | | NAME: |  | | |
| PRODUCTION/EVENT DATE: | | | |  | SIGNATURE: |  | DATE: |  |
| OTHER FSO’s: | | |  | | | | | |
| COMMENTS: | |  | | | | | | |