**Form 4a**

**Fire Risk Assessments Checklist**

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| --- |
| **Section A – Premises Detail** |
| Location:  | No Of Occupants: |
| Premises Address:  |
| Occupier (S):  |
| Premises Use: |
| This assessment is based on the findings of the premise inspection recorded on Fire Inspection Checklist dated:  |
| **Section B – Fire Hazards**  |
| Ignition Sources | Fuel Sources | Oxygen Sources |
|  |  |  |
| **Section C – People at Risk** |
| People at risk in and around the premises | Vulnerable people especially at risk and why |
|  |  |
| **Section D – Evaluation of significant findings**  |
|  |
| **Section E – Assessment Summary**  |
| The risk of a fire occurring is  | HIGH | MEDIUM | LOW |
| The risk to people from a fire starting is  | HIGH | MEDIUM | LOW |
| Actions to be taken to remove or reduce the hazards that may cause a fire are |
|  |
| Actions to be taken to remove or reduce the risks to people from fire are |
|  |
| Signed: | Name: | Date: |
| This assessment must be reviewed before – Date: |
| Signed:  | Name: | Date: |
| **Section F – Assessment Review** |
| Summary of review (If findings are significant complete a new form)  |
|  |
| Signed: | Name: | Date: |