**Workplace Fire Risk Assessment Form**

**Assessment Information:
Workplace Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Assessor’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Date of Assessment: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

### **Identification of Fire Hazards:**

| **Potential Hazard** | **Present (✔)** | **Details** | **Control Measures in Place** |
| --- | --- | --- | --- |
| **Overloaded Electrical Circuits** | **☐** |  |  |
| **Flammable Materials Stored Improperly** | **☐** |  |  |
| **Blocked Emergency Exits** | **☐** |  |  |
| **Inadequate Fire Signage** | **☐** |  |  |

**People at Risk:**

* **Employees: ☐ Yes ☐ No**
* **Visitors: ☐ Yes ☐ No**
* **Vulnerable Individuals (elderly, disabled): ☐ Yes ☐ No**

**Fire Response Preparedness:**

* **Fire Wardens Appointed: ☐ Yes ☐ No**
* **Evacuation Plan Posted: ☐ Yes ☐ No**

**Signature of Assessor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**