



# FIRE DRILL EVALUATION CHECKLIST

## DRILL INFORMATION

Name of Facility:  
 Location of Drill:  
 Date Drill initiated:  
 Time Drill initiated:  
 Drill Monitor Name:

Address:  
  
 Time all Occupants Vacated:  
 Title/Position:

## PRE DRILL ASSESSMENT

Evacuation routes posted  Yes  No  
 Evacuation signs in good cond.  Yes  No  
 Exits clearly marked  Yes  No  
 Exit signs illuminated  Yes  No  
 Exit doors operating  Yes  No  
 Egress routes clear of obstructions  Yes  No  
 Egress routes properly lighted  Yes  No

## COMMUNICATION

Method of drill activation  
 Alarm Activated  PA system  
 Word of mouth  Other:  
 Drill preannounced  Yes  No  ?  
 Fire Department Present  Yes  No  ?  
 Alarm Monitoring co. notified  Yes  No  ?  
 Security Notified  Yes  No  ?

## FIRE CONTAINMENT

Doors and windows closed  Yes  No  ?  
 Rooms check prior to closing doors  Yes  No  ?  
 Doors left unlocked  Yes  No  ?  
 Fire extinguisher taken to location of fire  Yes  No  ?  
 Door hold-open devices operated correctly  Yes  No  ?

## EVACUATION

All occupants participated and evacuated  Yes  No  ?  
 Restrooms were checked for occupants  Yes  No  ?  
 Evacuation was orderly  Yes  No  ?  
 Visitors escorted and accounted for  Yes  No  ?  
 Special need persons accommodated  Yes  No  ?  
 Elevators were used during evacuation  Yes  No  ?  
 Overall response of occupant's  Sat.  Unsat.  
 Noise level of evacuation  Sat.  Unsat.

## UTILITIES

Electrical appliances turned off  Yes  No  
 Lights were turned off  Yes  No  
 HVAC units shut down  Yes  No

## PLAN

Evacuation performed according to plan  Yes  No  ?  
 Occupants met at designated place  Yes  No  ?  
 Designated meeting place safe distance from building  Yes  No  ?  
 Designated meeting place does not interfere with fire lane  Yes  No  ?  
 Fire drill team responded according to plan  Yes  No  ?

## FIRE ALARM SYSTEM

Fire alarm clearly heard in all areas  Yes  No  N/A  
 Alarm monitoring company received alarm  Yes  No  N/A  
 Public address system clearly heard in all areas  Yes  No  N/A  
 Elevators recalled to correct floor  Yes  No  N/A

## PERSONNEL

Designated personnel to call 911 and receive GJFD with pertinent information  Yes  No  ?  
 Accountability of occupants  Yes  No  ?  
 Fire extinguisher personnel  Yes  No  ?  
 Designated personnel checking rooms  Yes  No  ?  
 Designated personnel coordinating unevacuated areas  Yes  No  ?  
 Designated personnel moving residents to secure location if necessary  Yes  No  ?  
 Designated personnel notifying family if necessary  Yes  No  ?  
 Designated personnel activating facilities  Yes  No  ?

*Any item receiving a "No" or "Unsat." Is an item that the facility should work on to correct.*

*Comments on Reverse*

