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| --- | --- | --- | --- | --- | --- | --- | --- |
| **Building Evacuation Checklist** | | | | | | | |
| **Building** | | |  | | | | |
| **Time commenced:** | | |  | **Day/Date:** |  | | |
| *If Fire Alarm -* | | | | | | | |
| **Detector activated** | | | TYPE: Smoke/Heat/Break Glass-Fire **\*** Circle as applicable  ZONE: | | | | |
| **Location** | | | (Floor or specific area) | | | | |
| **Confirm:**   * Sentries deployed and building/s cordoned-off * Traffic control measures in place * Evacuees assembled at safe location/s * TFS informed * University Security informed * Contractors accounted for * Any persons with disabilities accounted for and safely positioned | | | | **Remember:**  When reporting building evacuation status to emergency services, include any areas that were unable to be checked | | | |
| **Building Evacuation Status Checklist** | | | | | | | |
| **AREA** | **Remarks** | | | | | | Confirmed Evacuated |
| **Level 1** | Check: (Offices, Classrooms, Lecture Theatres, Laboratories, etc). | | | | | |  |
| **Level 2** | Check: | | | | | |  |
| **Level 3** | Check: | | | | | |  |
| **Level 4** | Check: | | | | | |  |
| **Level 5** | Check: | | | | | |  |
| **Time Evacuation completed** | |  | | **Overall Evacuation Time** | |  | |
| **Time Re-Entry permitted** | |  | | **Print Name** | |  | |