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| **SECTION A** |
| **To be completed by the applicant** |

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| What type of device(s) is requested: | Choose an item. |

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| Location of device | Building: | Room no./ corridor: | Level: |

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| Requested by: |  | Department: |  |
| Reason for request: |  | Date of request: |  |

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| **1** | Is this to be fitted to a fire door of a room? | Choose an item. |
| **2** | Is this to be fitted to a fire door on an escape route? | Choose an item. |
| **3** | Is this a request for a new or replacement device? | Choose an item. |
| **4** | Will the manual release device be accessible *(acoustic & magnetic hold open devices)*? | Choose an item. |
| **5** | Will the door be closed each day *(hold open devices only)*? | Choose an item. |

*Once you have completed Section A (above), you should forward this form to the University Fire Safety adviser at* *wesley.boulstridge@strath.ac.uk**. If you have any questions, you should call the University Fire Safety Adviser of ext. 2121*

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| **SECTION B** |
| **To be completed by the University Fire Safety Adviser** |

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| **A** | Is this door accessible by the general public and or students? | Choose an item. |
| **B** | Is the occupancy capacity of the room/area served by this door greater than 60? | Choose an item. |
| **C** | Is the occupancy capacity of the storey(s) served by this door greater than 60? | Choose an item. |
| **D** | Is this to be fitted to a door that provides the **only** route of escape from the building or part of the building? | Choose an item. |
| **E** | Does the alternative escape route have an electric locking or hold open device fitted? | Choose an item. |
| **F** | Does this door serve a fire-fighting shaft? | Choose an item. |
| **G** | Does the device require interfacing with the existing fire alarm system to fail safe on activation of the fire alarm or in the event of electrical power or system error? | Choose an item. |
| **H** | Will the device be provided with a manual door release unit (green override box)? | Choose an item. |
| **I** | Is a manual door release unit required for both sides of the door? | Choose an item. |
| **J** | Is a building warrant application required? | Choose an item. |

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| Request approved: | **Choose an item.** | Request denied: | **Choose an item.** |
| Comments: |  |
| Signed: |  | Date: |  |