



CHECKLIST

Fire Risk Assessment Checklist

Work through the key duties placed on the Responsible Person by the Regulatory Reform (Fire Safety) Order 2005.

This checklist supports — but does not replace — a suitable and sufficient fire risk assessment. Premises with sleeping accommodation, complex layouts or high-risk processes should be assessed by a competent fire risk assessor.

1. Fire hazards and sources of ignition

Check	Y / N / N.A.	Evidence or action required
Ignition sources identified (heaters, cooking, hot works, electrical equipment, smoking areas)		
Portable appliance and fixed wiring inspection records in date		
Combustible materials stored away from ignition sources and escape routes		
Waste removed regularly and external bins secured away from the building		
Hot works permit system in place for contractors		

2. People at risk

Check	Y / N / N.A.	Evidence or action required
Maximum occupancy known for each area		
Lone workers, night workers and contractors accounted for		
Personal Emergency Evacuation Plans (PEEPs) in place where needed		
Visitors signed in and briefed on evacuation arrangements		

3. Means of escape, detection and warning



Check	Y / N / N.A.	Evidence or action required
Escape routes clear, unobstructed and of adequate width		
Final exit doors open easily without a key in the direction of travel		
Emergency lighting tested monthly and annually (records held)		
Fire detection and alarm system tested weekly from a rotating call point		
Signage compliant and visible along the full escape route		
Fire extinguishers correct type, in position and serviced within 12 months		

4. Management, training and records

Check	Y / N / N.A.	Evidence or action required
Responsible Person formally appointed and aware of their duties		
Sufficient trained fire wardens for all shifts and areas		
Evacuation drill carried out within the last 12 months and debriefed		
Fire safety log book maintained and up to date		
Fire risk assessment reviewed within the last 12 months or after change		

Completed by: _____ Role: _____ Date: _____ Next review: _____