Emergency Evacuation Report

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| **1. EVACUATION DETAILS** | |
| **Date and time of evacuation** |  |
| **Office location** |  |
| **Person/s leading the evacuation** | **** Fire Safety Officer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **** WHS Representative: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **** Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **** Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Type of evacuation** | **** Planned exercise **** False alarm**\*** **** Real emergency**\*** |
| **\* Cause and details** |  |
| **2. EVACUATION SEQUENCE** | |
| **Method for initiating evacuation** |  |
| **Time of initial alarm** |  |
| **Time evacuation commenced** |  |
| **Time office / building cleared** |  |
| **Time all arrived at assembly point** |  |
| **Time emergency declared over** |  |
| **3. EVACUATION REVIEW** | |
| **Did all staff and visitors evacuate the office immediately upon hearing the alarm?**  **If not, detail who and the reasons** | ** Yes ** **No** |
| **Time taken to complete evacuation** |  |
| **Were emergency exits unobstructed?**  **If no, detail the obstruction** | ** Yes ** **No** |
| **Were all staff, clients and visitors accounted for at the assembly point?**  **If no, provide details** | ** Yes ** **No** |
| **Were emergency services required and contacted?**  **If yes, provide details** | ** Yes ** **No** |
| **Was fire safety equipment used prior to evacuation?**  **If yes, provide details** | ** Yes ** **No** |
| **Additional comments/observations** |  |
| **4. ACTIONS REQUIRED** | |
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| Report completed by: |
| Signature: |
| Date: |