

Fire Fighting Checklist

Fire Fighting Drawing Check List					
Project Name _____		Drawing Checked _____			
Project Number _____		Date _____			
Checked By _____		Verified By _____			
S.No	Checkpoints	Response			Remarks
TITLE SHEET					
1.1	Has correct sheet size, format and title block been used?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
1.2	Is the Project logo and address shown?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
1.3	Is the project name shown?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
1.4	Is the design stage and date shown?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
1.5	Is the Key plan shown?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
1.6	Is the north arrow shown?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
1.7	Is the scale shown and appropriate?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
1.8	Is the drawing number & drawing name shown?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
GENERAL					
2.1	Are legends, general notes and abbreviations shown correctly?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
2.2	Are the grid-lines shown correctly and halftone?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
2.3	Are all the architecture & structure element halftone?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
2.4	Are wall element cut pattern visibility unchecked?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
2.5	Are ceilings & patterns are shown?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
2.6	Are match-line and reference text shown?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
2.7	Are view name shown as per BIM manual?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
2.8	Are all room tags are shown and aligned properly?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
2.9	Are all unwanted architecture elements are hide?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
FLOOR PLAN					
3.1	Are all the pipe center line must be turned off?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
3.2	Are all the pipe system must match with legend?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
3.3	Are all pipes are given with pipe tag (Size & COP)?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
3.4	Are all pipes up & down mention clearly?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
3.5	Are the sprinkler detail item match with legend?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
3.6	Are all the fire extinguisher & blanket detail item match legend?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
3.7	Are all the fire hose cabinet detail item match with abbreviation & legend?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
3.8	Are all tags not overlap with other architecture & structural elements?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
3.9	Are all tags not overlap with each other?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
3.10	Are all tags not overlap with Room tags?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	

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3.11	Are all pipe are given with reference dimension?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
3.12	Are all tags as per BIM standard manual?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
3.13	Are all dimensions as per BIM standard Manual?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
3.14	Are all pipe riser mention clearly?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
3.15	Did the false ceiling level indicated?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
BUILDING SECTION					
4.1	Did the section mark & name matched with plan?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
4.2	Did the finished floor level marking with level indication mark given?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
4.3	Did the floor to floor height & total height of structure given?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
4.4	Did the grid line & grid name mention as per BIM standard manual?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
4.5	Did the fire protection pipes are annotated properly with system, size, & BOD	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
4.6	Did the horizontal & vertical reference dimensions are shown in pipe?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
PUMP ROOM SECTION					
5.1	Did the section mark & name matched with plan?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
5.2	Did the finished floor level marking with level indication mark given?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
5.3	Did the floor to floor height & total height of structure given?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
5.4	Did the all mechanical equipment (pump) name mentioned clearly?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
5.5	Did all the valve package indicated?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
5.6	Did the vertical dimension of pipe indicated?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
QUANTITY TAKEOFF					
6.1	Heads	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
6.2	Pipes	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
6.3	Pumps, Valves, Storage Tanks	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
COLOR CODING					
7.1	FIRE LINE/STANDPIPE-RED (BRIGHT)	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
7.2	SPRINKLER LINE-RED (BRIGHT)	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
7.3	SPRINKLER/FIRE PROTECTION-RED (BRIGHT)	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	