

Berkeley Police Dept.:
Route to Team Six

Berkeley Fire Dept.:
Fire Prevention Inspectors
Fax to: 510-981-5579

**UC/Co-op/City of Berkeley
 EVENT NOTIFICATION FORM**

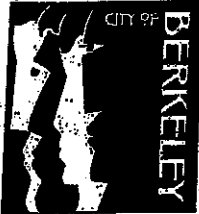
Instructions: This form is used to notify the City of Berkeley Police and Fire Departments of events occurring within the UC Greek System and properties owned and operated by the University Student's Co-operative Association. Please fill out this

Name /Address of where event is being held: _____	
Date of Event	Theme
Person in charge of event Name Address Phone	Event Emergency Contact Person Name Address Phone
Person submitting report Name Address Phone	Name of Organization giving event

form, and forward to the fax numbers listed below. This is not an event permit.

Location Information											
Type: (circle one) Fraternity Sorority Co-op Group Living Single family home Apartment Other (specify):	Have you planned for the following? (circle all that apply): Excessive Noise Complaints Excessive Trash Fire Code Violations Parking Occupancy Standards Fire Retardant Décor Exterior Building Clean-up										
Will alcohol be served? Yes No	For official use only:										
Attendant at door? Yes No											
Security hired? Yes No Company Name No. of Guards											
No. of attendees expected?											
Start and End times?											
Fax copies to: UC Student Services (Greek Advisor) UC Police Department (Event Liaison, Patrol) Berkeley Fire Department (Fire Prevention) Berkeley Police Department (Team 6) Other:	Important Phones: <table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">Phones</td> <td style="width: 33%;">Fax</td> </tr> <tr> <td>UC Student Services 643-6916</td> <td>642-1672</td> </tr> <tr> <td>UC Police 642-6760</td> <td>642-6434</td> </tr> <tr> <td>Berk. Fire Prevention 981-5585</td> <td>981-5579</td> </tr> <tr> <td>Berkeley Police 981-5806</td> <td>981-5819</td> </tr> </table>	Phones	Fax	UC Student Services 643-6916	642-1672	UC Police 642-6760	642-6434	Berk. Fire Prevention 981-5585	981-5579	Berkeley Police 981-5806	981-5819
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Please complete this form and send/fax copies to the agencies above. Please read and tear off the attached "Guidelines for Safe Event Planning" and keep them for future reference.



Department of Fire and Emergency Services
Division of Fire Prevention
Gilbert K. Dong, Assistant Chief/ Fire Marshal

BERKELEY FIRE DEPARTMENT

INDOOR ENTERTAINMENT EVENTS **SELF-INSPECTION CHECK LIST**

Complete this self-inspection form before calling for a Fire Department party clearance inspection. If you have answered 'yes' to all of the items on the form, fire clearance will most likely be granted on the initial inspection. Call (510) 981-5585 for an inspection appointment or if you have any questions.

1. Fire Protection Equipment

- A. Is the fire alarm system in an operable condition? (AC power light on and no trouble lights or signals on at the fire alarm control panel)
- Yes _____
 - No _____
- B. Has the fire sprinkler system received its 5-year Title 19 certification within the last 5 years? (Label with holes punched out for the year, month and date of last service which is usually affixed to the main sprinkler riser pipe)
- Yes _____
 - No _____
- C. Has the kitchen range suppression system received its servicing within the last 6 months? (Tag with holes punched out for the year, month and date of last servicing which is usually affixed to the remote activation switch near a kitchen exit)
- Yes _____
 - No _____

D. Are all the fire extinguishers in their proper place and have they received their annual servicing within the last year? (Tag affixed to top of extinguisher which indicates date of last servicing)

- Yes _____
- No _____

E. Have all the smoke detectors in sleeping rooms been tested and found to be in working order?

- Yes _____
- No _____

2. Exits, exit signs and exit/fire doors.

A. Do all exit and fire doors close and latch tightly?

- Yes _____
- No _____

B. Are all exit and fire doors free of any obstructions that would prevent them from operating as designed?

- Yes _____
- No _____

C. Are all exits and exit pathways clear of any obstructions?

- Yes _____
- No _____

D. Are all of the exit corridors illuminated at all times the building is occupied?

- Yes _____
- No _____

E. Are all illuminated exit signs maintained with operating bulbs?

- Yes _____
- No _____

F. Are all exit signs in place designating required exits from each floor?

- Yes _____
- No _____

G. Are all fire escapes (if applicable) cleared of objects and in good condition?

- Yes _____
- No _____

H. Are all exit doors free of chains, padlocks or other unauthorized locking devices?

- Yes _____
- No _____

I. Are the paths of exit travel free of tripping hazards? (extension cords, decorations, torn carpets, etc.)

- Yes _____
- No _____

3. Decorations

A. Will the event be free of any candles, torches, or other open flame devices?

- Yes _____
- No _____

B. Will all combustible material decorations be fire retardant treated by a state licensed applicator? (A list of approved applications can be obtained from the Office of Student Life for the Greek system and from Central Office for the Co-ops prior to the initial inspection)

- Yes _____
- No _____

4. General Maintenance & Housekeeping

A. Are all electrical appliances in good working condition, grounded and without any frayed cords or splices?

- Yes _____
- No _____

B. Is the building free of any flammable liquids except for small amounts necessary for maintenance of the building?

- Yes _____
- No _____

C. Is the laundry area kept clean, the dryer properly vented and lint filter cleaned?

- Yes _____
- No _____

D. Has a Knox Box been installed on the outside of the building near the main entrance? (Knox Box is a security box that is used to house the master key to the front entrance (or access code) in order to provide rapid entry by the Fire Department during an emergency)

- Yes _____
- No _____

E. Are the master and fire alarm keys or front door access codes inside the Knox Box current? (Fire Department assistance required to open Knox Box if unsure)

- Yes _____
- No _____

F. Have all holes in walls or ceilings been repaired in an approved manner?

- Yes _____

- No _____

G. Has combustible storage been removed underneath exterior exit stairways?

- Yes _____
- No _____

H. Has permanent wiring been installed in place of extension cords in the common areas?

- Yes _____
- No _____

5. Business and Health Department Licenses

- Is the business license updated to the current year?

Yes _____

No _____

- Is there a health department license for the kitchen and use?

Yes _____

No _____

Event Address: _____

Chapter or Building name: _____

Signature of Person
Conducting self-inspection: _____

Print name: _____ Date: _____

Fax completed form to Berkeley Fire Dept. (510) 981-5579