## Alternative Life Safety Measure Assessment

Date: ___________________ Facility: ___________________ Project Name: ___________________

Start Date: ___________ Est. Completion Date: ___________________ Project Manager: _______________

Project Location: ___________________________________________ Project Number: __________________

Use the following criteria to determine appropriate Alternative Life Safety Measures for your project.

List the specific deficiency: ____________________________________________

1. **Will all exits be free from obstructions?**
   - Yes. No further action required.
   - No. Post conspicuous signs directing occupants to alternate exit. Distribute notices to occupants advising them of designated exit. Inspect exits daily.

2. **Will the fire alarm system remain in good working order?**
   - Yes. No further action required.
   - No. A Fire Watch must be implemented. Fill out a Fire Watch Implementation form and submit to Security for execution.

3. **Will the fire suppression systems (sprinklers, Halon, FM-200 systems) remain in good working order?**
   - Yes. No further action required.
   - No. A Fire Watch must be implemented. Fill out a Fire Watch Implementation form and submit to Security for execution.

4. **Will temporary construction barriers be used in this project?**
   - Yes. Must be built smoke tight and constructed of non-combustible, or limited combustible materials.
   - No. No further action required.

5. **Will additional portable fire extinguishers be provided?**
   - Yes. No further action required.
   - No. Obtain a spare 10-lb. ABC fire extinguisher and place in conspicuous location in project area.

6. **Will packaging, debris and discarded materials be removed daily to minimize combustible loads?**
   - Yes. No further action required.
   - No. STOP! All discarded material must be removed daily to minimize combustible loads.

7. **Will additional fire drills be required in affected areas, due to change in exiting or other impairments?**
   - Yes. Notify Safety Officer for implementation.
   - No. No further action required.

8. **Will increase hazard surveillance of the project area be conducted daily by the Project Manager?**
   - Yes. No further action required.
   - No. STOP! Project Manager must perform increase hazard surveillance of project area on a daily basis.

9. **Will building occupants need to be trained to compensate for impaired Life Safety features?**
   - Yes. Notify Safety Officer for implementation.
   - No. No further action required.

10. **Will an organization-wide safety education program be required to promote awareness of hazards?**
    - Yes. Notify Safety Officer for implementation.
    - No. No further action required.

11. **Will temporary systems be tested or inspected on a monthly basis?**
    - Yes. No further action required.
    - No. STOP! Temporary systems must be tested or inspected monthly.

12. **Other considerations:** ________________________________________________

    ALSM Assessment filled out by: ________________________________