

# LEEDS KIRKGATE MARKET

## FIRE RISK ASSESSMENT FORM – 2022/23

### SECTION 1 - UNIT AND TENANT DETAILS

*Guidance notes ref*

<b>1a. Name of Tenant</b>			
<b>1b. Unit number</b>		Area of market	

1.1 &  
1.2

### SECTION 2 – FIRE HAZARDS/IGNITION SOURCES IDENTIFIED

**2a.** Please tick all applicable boxes indicating which of the following materials you have on your unit, whether for sale or any other purpose:

2.1

Paper	<input type="checkbox"/>	Adhesives	<input type="checkbox"/>
Packaging	<input type="checkbox"/>	Lighter Fuel	<input type="checkbox"/>
Electrical Goods	<input type="checkbox"/>	Paints/Varnishes	<input type="checkbox"/>
Wood	<input type="checkbox"/>	Polishes	<input type="checkbox"/>
Upholstery Materials	<input type="checkbox"/>	Aerosols	<input type="checkbox"/>
Cloth (Soft Furnishings etc)	<input type="checkbox"/>	Cooking Fat/Oils *	<input type="checkbox"/>
Clothing (Cotton/Man Made Fibres)	<input type="checkbox"/>		<input type="checkbox"/>
Plastic	<input type="checkbox"/>		<input type="checkbox"/>
Rubber	<input type="checkbox"/>		<input type="checkbox"/>
Other (please list)	<input type="checkbox"/>		

\*2.2

2.3

**2b**      **Note – the use of gas cylinders is prohibited in the indoor market**

**2c**      Do you have an extract system for removal of fumes etc?    Yes ☐    No ☐

2.4

**If yes you must contact Kevin Bradbury in the Information Centre for more information as additional checks and measures for the general maintenance of such systems are required.**

## 2d Smoking Legislation

2.5

**It is against the law to smoke inside the market**  
**– see 2.5 in the guidance notes for more info**

**2e** Do you use any electrical equipment on your unit? Yes ☐ No ☐  
*If No go to 2g.*

**2f** Please tick all applicable boxes, indicating the number of electrical items and how often each item is tested:

APPLIANCE	No	TESTING FREQUENCY
Freezers		
Refrigerators		
Air Conditioning Units		
Oven		
Grill		
Hot Plate		
Electric Till		
Other (please specify)		

2.6

**2g** Unit alterations -please contact the Information Centre if you require advice/information regarding undertaking work in your unit or any general maintenance issues with regard to completing the fire risk assessment.

2.7

## SECTION 3 - PERSONS AT RISK

**3a** What is the maximum number of employees, and other persons, who could be in the unit at any point in time? .....

3.1

**3b** **Are customers allowed inside the unit?** Yes ☐ No ☐  
*If Yes go to 3c if No go to section 4*

**3c** What additional arrangements are in place to ensure the safe evacuation of all persons from your unit including the elderly, customers with pushchairs, wheelchair users etc?

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## **SECTION 4 – FIRE EMERGENCY PROCEDURES**

A summary of the market general fire procedures, including arrangements for units, are listed in the accompanying notes. The following questions relate to these procedures.

4.1

- 4a** Have all your staff been informed of these procedures?  
Yes ☐ No ☐

**IF NO YOU MUST IMMEDIATELY INFORM ALL STAFF**

- 4b** Do you consider the Market unit fire procedure in the guidance notes covers all aspects relevant to the business you undertake on your unit?  
*If yes go to section 5, if no go to 4c*  
Yes ☐ No ☐

- 4c** Please list any specific issues that are not included in the procedure but are relevant to your unit and also list the action you are going to take to address this shortfall:

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## **SECTION 5 - MEANS OF ESCAPE**

- 5a** How long will it take for all occupants of your unit (employees/customers) to leave the unit once a fire has been detected in your unit?

5.1 to 5.6

Number of seconds -----  
*If 1 minute or less go to Section 6*

**Note that 1 minute is considered the maximum time for all occupants to exit from a unit in an emergency evacuation.**

**IF MORE THAN 1 MINUTE YOU MUST INTRODUCE MEASURES TO REDUCE THIS TIME**

- 5b** Therefore what measures are you now going to introduce to reduce the escape times to within 1 minute or less?

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- 5c** Considering your response to 5(a) and the introduction of the new control measures you are to introduce and listed in 5(b), are you now

satisfied that all occupants in your unit(s) will have a reasonable means of escape within 1 minute?

Yes ☐ No ☐

**If still no please contact the Information Centre for further information**

## **SECTION 6 - PROVISION OF FIRE DETECTION/FIGHTING EQUIPMENT AND SIGNAGE**

**6a** Is there a sprinkler head / valve in your unit? Yes ☐ No ☐

**If yes you must maintain a minimum clear space of 500 mm beneath and around each sprinkler head at all times.**

**6b** Is there a smoke / heat detector in your unit? Yes ☐ No ☐

**If yes you must maintain a minimum clear space of 500 mm beneath and around each smoke/heat detector.**

**6c** Is there a fire alarm break glass point in your unit? Yes ☐ No ☐

**6d** If yes do you, and your staff, know how to activate it? Yes ☐ No ☐

**If no to any of the above, see 6.1 in the guidance notes.**

**Do not obstruct clear sight and access to the break glass device for example by display of goods. Anything projecting in front of the device should be a minimum of 500mm away.**

**6f** Do you consider that there are **sufficient** and **suitable** fire extinguishers in the unit considering the hazards you have identified in section (2) and the information contained within the guidance notes?

Yes ☐ No ☐

**6g** If no what action are you going to take?

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**6h** In general do you consider that the fire detection/prevention equipment (including signage) provided in the unit is appropriate for the hazard(s) identified in Section (2) of this assessment?  
*If Yes go to 6j if No go to 6i*

Yes ☐ No ☐

**6i** What action are you going to take to ensure adequate detection and prevention is available on your unit?

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**6j** Are the fire safety provisions (e.g. extinguishers) on your unit(s) regularly maintained?

Yes ☐ No ☐

**If yes go to Section 7, if no then you must make the necessary arrangements to ensure regular maintenance**

## **SECTION 7- TRAINING**

**7a** Do all your new employees receive training that covers fire procedures?

Yes ☐ No ☐

**7b** Do your employees receive any sort of fire training? (e.g. the correct use of fire fighting equipment)

Yes ☐ No ☐

**7c** Have you shown your employees how to use fire fighting equipment?

Yes ☐ No ☐

**7d** Have all your employees been instructed on what to do in case of fire?

Yes ☐ No ☐

7.1

If you have answered no to any of the questions in this section then please list the training that you will now arrange for your employees:

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**SECTION 8- ANY OTHER INFORMATION**

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Signature .....

Print name .....

Date: .....

**PLEASE NOTE:**  
**Completing a fire risk assessment does not preclude tenants and traders from possible prosecution or termination of your trading agreement should a subsequent inspection reveal unsatisfactory standards.**