Pre-Event Checklist for Crowd Managers

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Name of the Facility:			
Address:			
Event Name:			
Event Date:	Time of Inspection:		
Occupant Load:	Number of Crowd Managers on Duty:	:	
	(list names, certification numbers , 1 for each 250 d	occupant load	d)
	EXITS	YES	N0
Are all exit doors unlocked?			
Area all exit doors operational?			
Are any exit doors chained closed	?		
Is there a clear path from the exit egress routes)?	door to a public way (i.e., no storage or parking blocking		
Are all exit signs visible and illum	inated?		
Is emegency lighting functional?			
Are all exit ways, aisles, corridors	s, stairways, etc. clear of any obstructions?		
	FIRE ALARM SYSTEM	YES	N0
Does the system have power? (Gr	reen light glowing)		
Does the system have any trouble	signals? (Yellow light glowing)		
Is the system in alarm? (Red light	t glowing)		
Note: No lights should be illum	inated other than the power light; if other lights are illumin immediately.	ated, conta	act UTPD
If the system has pull stations, are	e they unobstructed and available for use?		
Is the voice evacuation system av	ailable for emergency announcements?	X	
Any notable issues with smoke de	tectors, heat detectors, etc.?		
F	IRE PROTECTION SYSTEMS	YES	N0
EH&S does regular inspections on sprinkler system.		Х	

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PORTABLE FIRE EXTINGUISHERS			NO
Are fire extinguishers available, visible, and ready to use?			
Have fire extinguishers been inspected by a licensed contractor in the last 12	months?		
SPECIAL CONDITIONS			NO
Have pyrotechnics use been approved by the Fire Marshall?			
Have any flame effects been approved by the Fire Marshall?			
Are all decorations flame resistant or treated with an approved flame retarda			
Is inclement weather expected?			
OUTDOOR EVENTS			N0
Is emergency access clear of obstructions?			
Have large tent installations been approved by Facilities & EH&S?			
Are cooking fires (charcoal, propane) located outside or in a separate tent from attendees?			
Is the event overcrowded (less than 10 sq.ft. per person)?			
Is there any indication of contraband items in the location?			
NOTES AND COMMENTS			
NAME OF CROWD MANAGER ON DUTY	MANAGER ON DUTY CERTIFICATION EXPIRATION		I DATE
Name of person completing report (print):			
Signature:			

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