LAUREL PARK PLACE OFFICE CENTER FIRE DRILL EVALUATION

SUBMITTED BY: COMPANY NAME: SUITE NUMBER: 1. Did all employees participate in the drill? 2. Were employees aware of the drill prior to its occurrence? 3. Were there outside visitors in the suite at the time of the drill? If so, did they participate? 4. Approximately how much time passed before all employees were safely outside of the building? 5. Did all employees who participated report to the designated meeting location? 6. Did all fire alarm strobes within your suite and in the corridors operate properly? 7. Was the fire alarm audible in all areas of your suite? 8. Did all mag locks at fire exits disengage to an unlocked status as designed? 9. Did all fire doors close on alarm? 10. Was the overall effort achieved in an organized fashion? Please provide any additional comments that might be helpful in our evaluation of this program. Feel free to use an additional sheet of paper if needed.	TODA	YS DATE:	
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