

THE CENTURY
FIRE DRILL EVACUATION FORM

TODAYS DATE: _____ DATE OF DRILL: _____

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.
