



## Pelastuslaitosten kumppanuusverkosto

## SELF-ASSESSMENT FORM FOR FIRE SAFETY IN HOUSING COMPANY

Responder

☐ Chairman  
of the board

☐ Building  
manager

☐ Other, who

Housing company

name

address

name

address

phone

email

Number of buildings

Number of dwellings

Guide page no	Matter to be checked	To be fixed	In order /fixed	Does not concern building
3	The rescue plan has been drawn up, updated and informed to the residents	<input type="checkbox"/>	<input type="checkbox"/>	
13	Everyone is aware of the responsibility for the operation of smoke alarms	<input type="checkbox"/>	<input type="checkbox"/>	
3 and 20	Residents know how to act in the event of an accident	<input type="checkbox"/>	<input type="checkbox"/>	
13	The first extinguishing equipment has been maintained and can be used without hindrance	<input type="checkbox"/>	<input type="checkbox"/>	
4	The address number is illuminated and can be seen from the driveway in accordance with the building ordinance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6	The information board is in order at the entrance road	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8 and 17	The main water shut-off, the main switchboard and the civil defence shelter are signposted (from the outside)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5	The rescue route is appropriately marked	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7	No items are stored in the stairwell and balcony corridor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15	The smoke extraction in the stairwell is in working order and has been maintained regularly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16	The periodic inspection and tightness test of the civil defence shelter have been carried out within 10 years	<input type="checkbox"/>	<input type="checkbox"/>	
7	The building and its parts are in use in accordance with the building permit	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5	Waste containers are at a sufficient distance or compartmentalized from buildings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12	Cleaning of ventilation equipment and ducts has been completed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7	Outdoor equipment and bicycle storage are in use in accordance with the building permit	<input type="checkbox"/>	<input type="checkbox"/>	
8	No flammable liquids or gases are stored in the movable property storage	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7 and 18	The fire safety of the sauna facilities is in order	<input type="checkbox"/>	<input type="checkbox"/>	
8	No flammable liquids or gases are stored in the technical rooms	<input type="checkbox"/>	<input type="checkbox"/>	
12	Fireplaces used in residential buildings have been complied with annually	<input type="checkbox"/>	<input type="checkbox"/>	
13	Fire safety equipment has been maintained and tested in accordance with the manufacturer's instructions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional information, e.g. repair time with detected deficiencies

☐ Additional information  
attached, separate paper  
or file

I confirm that the information I have provided is correct:

Place and time

Signature

Rescue authority fulfils

Form received

Separate fire inspection ☐ must be carried out ☐ no need

Rescue authority

Entries from the authority