

2000 9pm HANDOUT #17
402-11

PRE-INCIDENT SURVEY

Building Name: Peace Chapel Free Will Baptist Church Survey #: 19
Street Address: 2480 W. 5th Street
City, State, Zip: Washington, N.C. 27889
Primary Use: place of worship Construction Type: Ordinary
Possible Entry: Back double doors
Possible Occupancy: 60 Sunday 9 A.M. P.M. 12:30 + 4pm - 7:30pm
Wednesday 6pm - 8pm
Known Handicapped Personnel: _____

NOTIFY IN CASE OF EMERGENCY

Name: Bud Brooks Sr. (Deacon) Name: Scott Brooks
Phone: 946-3025 Phone: 402-5047

BUILDING CONSTRUCTION

Roof Type: Shingle Floor Construction: concrete / tile
Roof Construction: wood trusses
Basement Construction Type: N/A Height of Basement: N/A
Number of Stories: 2 Height of Each Story: 1st story - 9' / 2nd - 8'
Length: _____ Width: _____ Height: _____
Attic Area: _____ Size: L _____ X W _____ X H _____

UTILITY TYPES

Gas: Yes (Natural Gas) Type: _____
Gas Shut Off Valve Location: _____
Electric: Washington Utilities Phase: _____
Panel Location: _____
Alarm Location: At side door (D) + back door (side C) - Fire alarm

EXPOSURES

North: _____ FT. West: _____ FT. South: _____ FT. East: _____
Type: _____ Type: _____ Type: _____ Type: _____

SUPPRESSION CRITERIA

Needed Fire Flow: _____ Total Water Supply: _____

Fuel Load: _____ Rate of Flow: _____

HYDRANT LOCATIONS

(1) _____ Flow: _____ Unit: _____

(2) _____ Flow: _____ Unit: _____

(3) _____ Flow: _____ Unit: _____

(4) _____ Flow: _____ Unit: _____

OTHER WATER RESOURCES

(1) _____

(2) _____

(3) _____

SPECIAL RESOURCES

(1) _____

(2) _____

(3) _____

MUTUAL AID

(1) _____ Assignment: _____

(2) _____ Assignment: _____

(3) _____ Assignment: _____

STAGING AREA

Primary: _____

Secondary: _____

MISCELLANEOUS INFORMATION

Sprinkler Connection: _____

Standpipe Connection: _____



Clarks Neck Volunteer Fire Department

Pre-Incident Plan Data Sheet

County: Pitt or Beaufort

Date of Inspection: 4-02-11 Committee Officer: Ada Brown

Committee Members: Dary Holland, Jim Swans, Parker Woodard

Location Information
Street Address: 2480 West 5th St Nearest Cross Street: Crown drive E

Facility / Business Name: Peace Chapel Free Will Baptist Iron creek - W

Facility Phone Number: 916 4364

Business Owner: _____ Phone Number: (_____) Mobile Number: (_____)

Operating Information and Access

Emergency contacts and titles with phone numbers:

Name: Bud Brooks Sr. Title: Deacon Contact Number: 916-3025

Name: Scott Brooks Title: _____ Contact Number: 402-5047

* If more room is required for emergency contacts, please use the back of this form.

Operating hours: Open: _____ Closed: _____

Primary access: Back double doors

Wed - 6pm - 8pm
Sun - 9am - 12:30 / 4pm - 7:30p

Side 1 for plan purposes: _____

Key box: ☐ Yes ☒ No Key box location: _____

Exterior access concerns: ☐ Yes ☐ No Locations: _____

Obstructions to aerials: ☐ Yes ☐ No Locations: _____

Exterior door concerns: ☐ Yes ☒ No Locations: _____

Interior roof access: ☐ Yes ☒ No Locations: _____

Occupancy
Overall occupancy: 60 when services are being held

High fire load: ☐ Yes ☒ No Locations: _____

Life safety concerns: _____

Evacuation assembly plan: ☐ Yes ☒ No Assembly point location: _____



Clarks Neck Volunteer Fire Department

Pre-Incident Plan Data Sheet

Hazards

Trash and waste hazards: _____

Incinerator or compactor inside: ___ Yes ☒ No Locations: _____

Incinerator or compactor chutes: ___ Yes ☒ No Locations: _____

Chutes sprinkled: ___ Yes ___ No

Outside compactors or dumpsters: ___ Yes ☒ No Locations: _____

Compactors or dumpsters attached or exposed to the interior: ___ Yes ☒ No

Hazardous Materials present: ___ Yes ☒ No

Location of MSDS sheets: _____

Hazardous Material inventory attached: ___ Yes ___ No

Location for use in emergency: _____

Materials reactive with air, water, or other materials present: ___ Yes ___ No

Type of materials: _____

Typical location: _____

Radioactive materials present: ___ Yes ___ No

Typical location: _____

Process hazards present: ___ Yes ___ No

Typical location: _____

Construction

Number of stories: 2 story Number of basements / full or partial: NO

Length: _____ Width: _____ Height: _____ of each floor. 1st - 9' (Chapel -

* If more room is required for clarification of each floor, please use the back of this form.

Penthouse: Yes ___ No ☒ Occupancy: 2nd -

Roof covering: Tile (clay, cement, slate, etc.): ☐; Wood Shingles (treated / untreated): ☐; Metal: ☐;

Composite Shingle (asphalt): ☒; Built Up: ☐; No Roof: ☐; other: _____

Roof construction: wood trusses Trusses: ☒ Yes ___ No

Floor construction: concrete / tile Trusses: ___ Yes ☒ No



Clarks Neck Volunteer Fire Department

Pre-Incident Plan Data Sheet

County: Pitt or Beaufort

Construction (continued)

Wall construction: Sheet rock

Construction type: Fire Resistive: ☐ Unprotected Non-Combustible: ☐ Protected Ordinary: ☐ Protected Wood Frame: ☐
Heavy Timber: ☐ Protected Non-Combustible: ☐ Unprotected Ordinary: ☐ Unprotected Wood Frame: ☐

Combustible concealed spaces: ___ Yes ☒ No Location: _____

Interior fire barriers and walls: ___ Yes ☒ No Locations: _____

Wall penetrations: ___ Yes ☒ No Locations: _____

Openings protected by: ☒ Doors ☐ Shutters ☐ Sprinklers ☐ No protection

Interior stairs: Number: _____ Location: _____

Obstruction to stairways: _____

Elevators: Number: 0 Location: _____

Area served – full or partial: _____

Fire service mode: ___ Yes ___ No Elevator key location: _____

Elevator controls location: _____

Unprotected vertical openings: ___ Yes ___ No Type and Locations: _____

Water Supply

Primary water supply: _____

Test results: Location: _____ Date: _____

Static pressure: _____ Residual pressure: _____ Flow rate: _____

Alternate supplies:

Private supply: ___ Yes ___ No Type: ☐ Gravity tank; ☐ Other tank; ☐ Cistern; ☐ Reservoir; ☐ Process system;

☐ Other: _____

Fire Pump: ___ Yes ___ No Supplied by: ☐ Public supply; ☐ Private supply

Start-up: ☐ Automatic ☐ Manual Number of pumps: _____



Clarks Neck Volunteer Fire Department

Pre-Incident Plan Data Sheet

County: Pitt or Beaufort

Water Supply (continued)

Location of pumps: _____

On-site hydrants: ____ Yes ____ No Supplied by: ☐ Public supply; ☐ Private supply

Size of outlets and threads: _____

Location of hydrants: _____

Hydrant Flow Rate(s):

Red (500gpm or less) ☐; Orange (500gpm to 1000gpm) ☐; Green (1000gpm to 1500gpm) ☐; Blue (1500gpm or greater) ☐

Which system supplies what protection systems: _____

Nearest large volume water supply (greater than 2000 GPM): _____

Needed fire flow calculations:

Largest single area: _____

Needed Fire Flow

| Building or Area | Area Measurements | | | Hazard Factors: Low, Moderate, High Severe | | | Total Flow Needed |
|------------------|-------------------|-------|--------|---|--------------------|-----------------|-------------------|
| | Length | Width | Height | Fire Load Factor | Life Hazard Factor | Exposure Factor | |
| | | | | | | | |
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Clarks Neck Volunteer Fire Department

Pre-Incident Plan Data Sheet

County: Pitt or Beaufort

Protection System

Fire alarm system: ☒ Yes ☐ No

Locations: At side door + back door

Annunciator location: _____

Type of alarms: fire alarm

Extent of coverage: _____

Monitored system: ☐ Yes ☒ No

Fire alarm company: _____

Phone number: _____

Detector type and power supply: Smoke: ☐; Heat: ☐; Battery: ☐; Hardwire w/ Battery Backup: ☒

Carbon Monoxide: ☐; Combination: ☐; Plug In: ☐; Plug In w/ Battery Backup: ☐

Sprinkler system: ☐ Yes ☒ No

Location of the FDC: _____

Size of FDC threads: _____

Type of system: Wet Pipe: ☐; Dry Chemical System: ☐; Halogen System: ☐; Class K System: ☐;

Dry Pipe: ☐; Foam System: ☐; CO2 System: ☐; Standpipes: ☐

Extent of coverage – full or partial: _____

Areas protected (if partial): _____

Location of main valve: _____

Location of sectional valves: _____

System coverage plan at valves: ☐ Yes ☐ No

Standpipe and inside hoses: ☐ Yes ☐ No

Combined with sprinkler system: ☐ Yes ☐ No

FDC same as for sprinkler system: ☐ Yes ☐ No

Location of FDC: _____

Size of FDC threads: _____

Type of standpipes: _____

Extent of coverage – full or partial: _____

Outlet locations: _____

Outlet size and type: _____



Clarks Neck Volunteer Fire Department

Pre-Incident Plan Data Sheet

County: Pitt or Beaufort

Protection System (continued)

Special protection systems: ___ Yes ___ No

Type of systems: _____

Locations: _____

Extent of coverage – full or partial: _____

Utilities

| Y/N | Service | Shutoff location |
|-----|---------------------|------------------|
| Y | Natural Gas | |
| / | LP-Gas | |
| / | Fuel Oil | |
| Y | Electric | |
| Y | Emergency Power | Battery |
| Y | Heating | |
| Y | Water | |
| Y | Hot Water | |
| | Steam | |
| Y | A/C and ventilation | |
| | Specialty gas* | |
| | Specialty gas* | |

* Record type of gas

Occupant concerns for utilities: ___ Yes ___ No

Responsible contact: Wash. Whites

Process concerns for utilities: ___ Yes ___ No

Responsible contact: _____

Comments: _____



Clarks Neck Volunteer Fire Department

Pre-Incident Plan Data Sheet

County: Pitt or Beaufort

Exposures

| Exposure Number | Separation (ft) | Life Hazard | Fire Load | Construction | Sprinkled | Priority (low = 5) |
|-----------------|-----------------|-------------|-----------|--------------|-----------|--------------------|
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Other exposure concerns: _____

Special Resource Consideration: _____

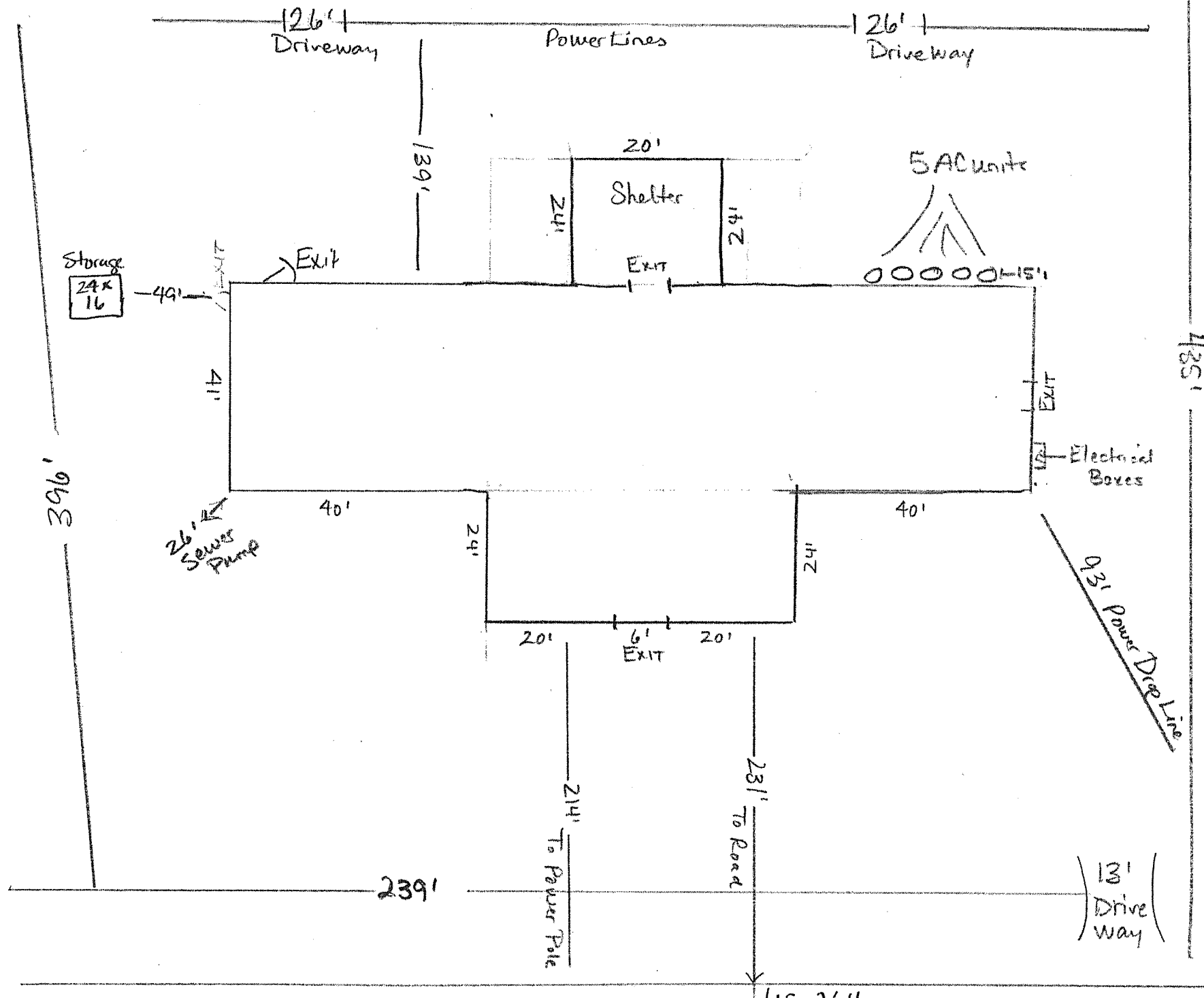
Confined Spaces: ___ Yes ___ No Locations: _____

Remarks:

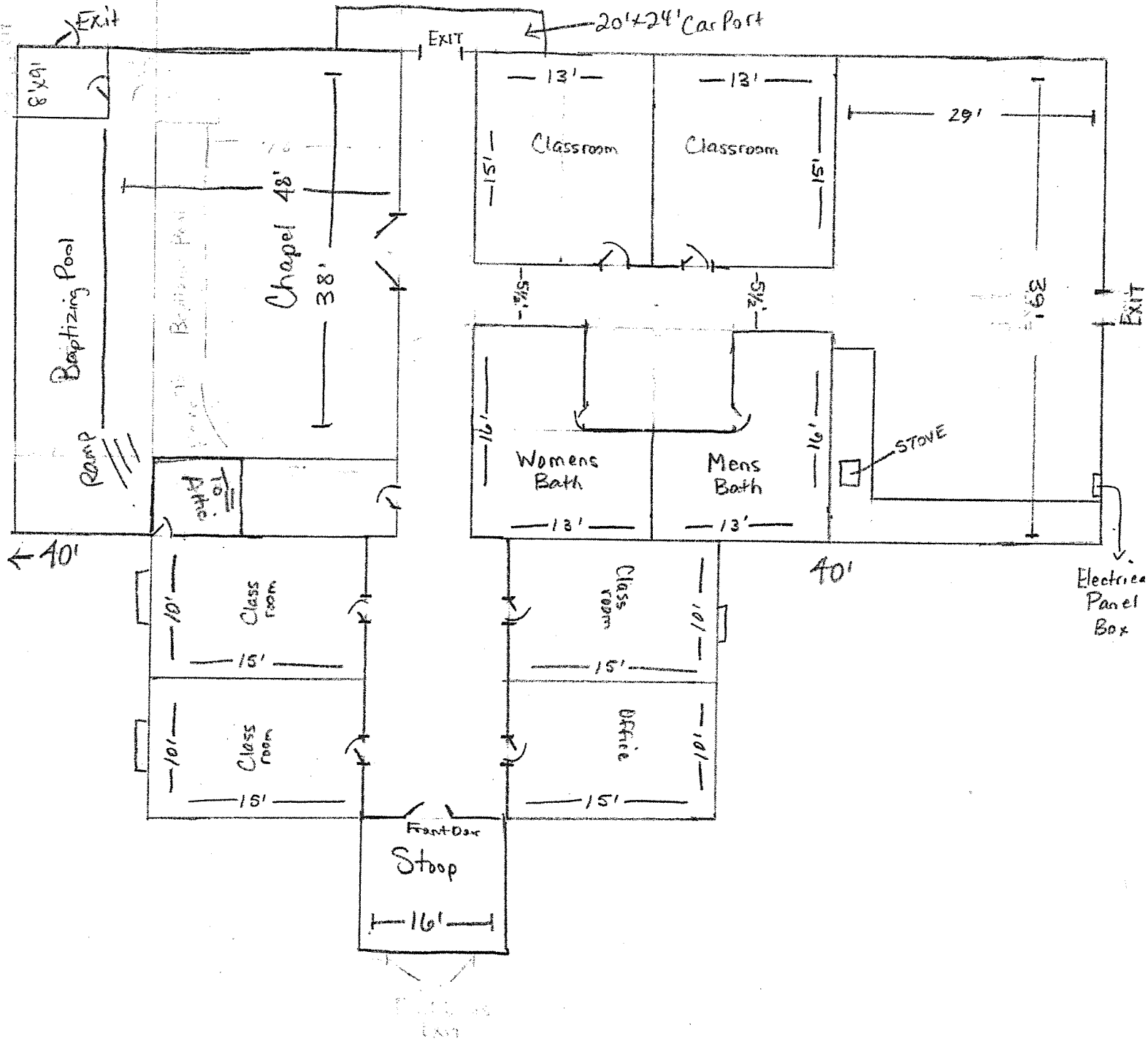
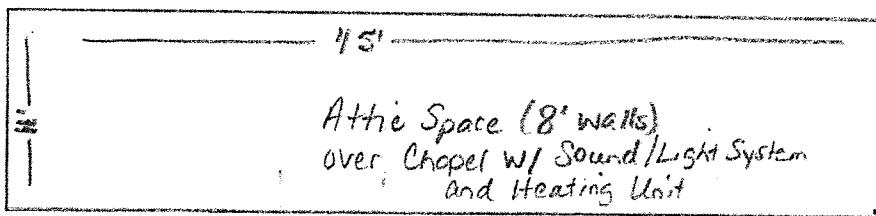
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☐ If more room is required for notes, please use the back of this form.

PEACE CHAPEL FWB (Building + Property)



PEACE CHAPEL F.W.B.



US 264 Hwy

Structure Name Peace Chapel Free Will Baptist
 Structure Address 2480 W 5th St.

| Length | Width | Sq Ft | Sq Root | X 18 | X construction type | GPM sum 1 | X Occupancy | GPM sum 2 |
|--------|-------|--------|---------|---------|---------------------|-----------|-------------|-----------|
| 128 | 49.75 | 6268.5 | 79.17 | 1425.13 | 1.5 | 2137.69 | 0.85 | ##### |

| Exposure % add | Exposure add GPM | Exposure per side (75% max) Total Side A | Exposure per side 75% max Side B | Exposure per side 75% max Side C | Exposure per side 75% max Side D | Total GPM with exposures |
|----------------|------------------|--|----------------------------------|----------------------------------|----------------------------------|--------------------------|
| 25% | 454.26 | 0 | 254 | 0 | 0 | 2071.04 |
| 19% | 345.24 | | | | | |
| 14% | 254.39 | | | | | |
| 9% | 163.53 | | | | | |
| 75% | 1362.78 | Total A, B, C, D | | | | |
| | MAX | 254 | | | | |

Round off to nearest 250 GPM for flows less than 2500 GPM the nearest 500 GPM over 2500 GPM

| Column F |
|---------------------|
| Fire Resistive 0.6 |
| Non-combustible 0.8 |
| Ordinary 1 |
| Wood Frame 1.5 |

| Column H |
|---|
| .75 if Mostly non-combustible contents |
| .85 if Limited combustibles (apartments, churches, schools, hospitals) |
| 1.0 if Mostly combustible (restaurants, sheds, garages) |
| 1.15 if Free burning contents (post offices, horse stables, feed mills, repair garages, ag storage) |
| 1.25 if Rapid burning (aircraft hangers, tires, flammable liquids, wood working) |

| Column J, K, L and M |
|-----------------------------------|
| If up to 10 feet add 25% per side |
| If 11 to 30 feet add 19% per side |
| If 31 to 60 feet add 14% per side |
| If 61 to 100 feet add 9% per side |

| Total GPM with exposures | Add 50% for each floor above ground floor | # of floors | Total to add for floors above | Sub-total with floors added | If wood shingles on roof add 500 GPM |
|--------------------------|---|-------------|-------------------------------|-----------------------------|--------------------------------------|
| 2000.00 | 1000 | 0 | 0.00 | 2000.00 | 0 |
| | | | | | 2000.00 |

| FIRE FLOW NEEDED GPM |
|----------------------|
| <u>2000.00</u> |