



Clarks Neck Volunteer Fire Department

Pre-Incident Plan Data Sheet

County: Pitt or Beaufort

1500 gpm

0006

Date of Inspection: April 17, 2010 Committee Officer: Ada Evans

Committee Members: Bryan Dixon Sr., Luther Bailey

Location Information

Street Address: 6634 Clarks Neck Rd. Nearest Cross Street: Grissom / Bunch Lane

Facility / Business Name: Pit Stop Convenience Store

Facility Phone Number: (946-1141)

Business Owner: Nihad Bahhur Phone Number: () Mobile Number: (252-814-3702)

Operating Information and Access

Emergency contacts and titles with phone numbers:

Name: Omar Bahhur Title: Manager Contact Number: 814-8933

Name: _____ Title: _____ Contact Number: _____

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

Operating hours: Open: 8am Closed: 10pm (Monday-Saturday) 8am-9pm - Sunday

Primary access: front door entrance

Side 1 for plan purposes: _____

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

Exterior access concerns: ☐ Yes ☒ No Locations: _____

Obstructions to aerials: ☒ Yes ☐ No Locations: LP Storage at front of store 3' from entrance

Exterior door concerns: ☒ Yes ☐ No Locations: LP Storage at front of store approx 3' from entrance

Interior roof access: ☐ Yes ☒ No Locations: _____

Occupancy

Overall occupancy: one cashier on duty

High fire load: ☒ Yes ☐ No Locations: LP cylinders tanks, gasoline tanks at rear of store

Life safety concerns: _____

Evacuation assembly plan: ☐ Yes ☒ No Assembly point location: (Only one entrance and exit point)



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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: Dumpster -1

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

Hazardous Materials present: ☒ Yes ___ No Diesel, Aerosols, Ammonias, Regular gasoline, LP gas bottles

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: 1 Number of basements / full or partial: _____

Length: 76' Width: 40' Height: 12' of each floor.

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

Penthouse: Yes ☒ No ☒ Occupancy: _____

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

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

Roof construction: wood Trusses: ☒ Yes ___ No

Floor construction: concrete tile Trusses: ___ Yes ☒ No



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Construction (continued)

Wall construction: wood, osb, brick + veneer outside on N + W sides

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: 0 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: hydrant - 1.2 mile to Clayton Circle

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: Pond located 350' behind structure

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

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



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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: 1.2 miles to Clayton Circle

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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Protection System

Fire alarm system: ___ Yes ☒ No Locations: _____

Annunciator location: _____

Type of alarms: Security only

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: _____



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Protection System (continued)

Special protection systems: ___ Yes ☒ No

Type of systems: _____

Locations: _____

Extent of coverage – full or partial: _____

Utilities

Y/N	Service	Shutoff location
	Natural Gas	
	LP-Gas	
	Fuel Oil	
✓	Electric	Front right (AD corner)
	Emergency Power	
✓	Heating	Rear of store - side C at B corner
✓	Water	
	Hot Water	
	Steam	
✓	A/C and ventilation	Rear of store - side C at B corner
	Specialty gas*	
	Specialty gas*	

* Record type of gas

Occupant concerns for utilities: ___ Yes ☒ No

Responsible contact: _____

Process concerns for utilities: ___ Yes ☒ No

Responsible contact: _____

Comments: _____



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Exposures

Exposure Number	Separation (ft)	Life Hazard	Fire Load	Construction	Sprinkled	Priority (low = 5)
1	116		Low	Wood	No	5
2	168	(behind fence)		Wood	No	5

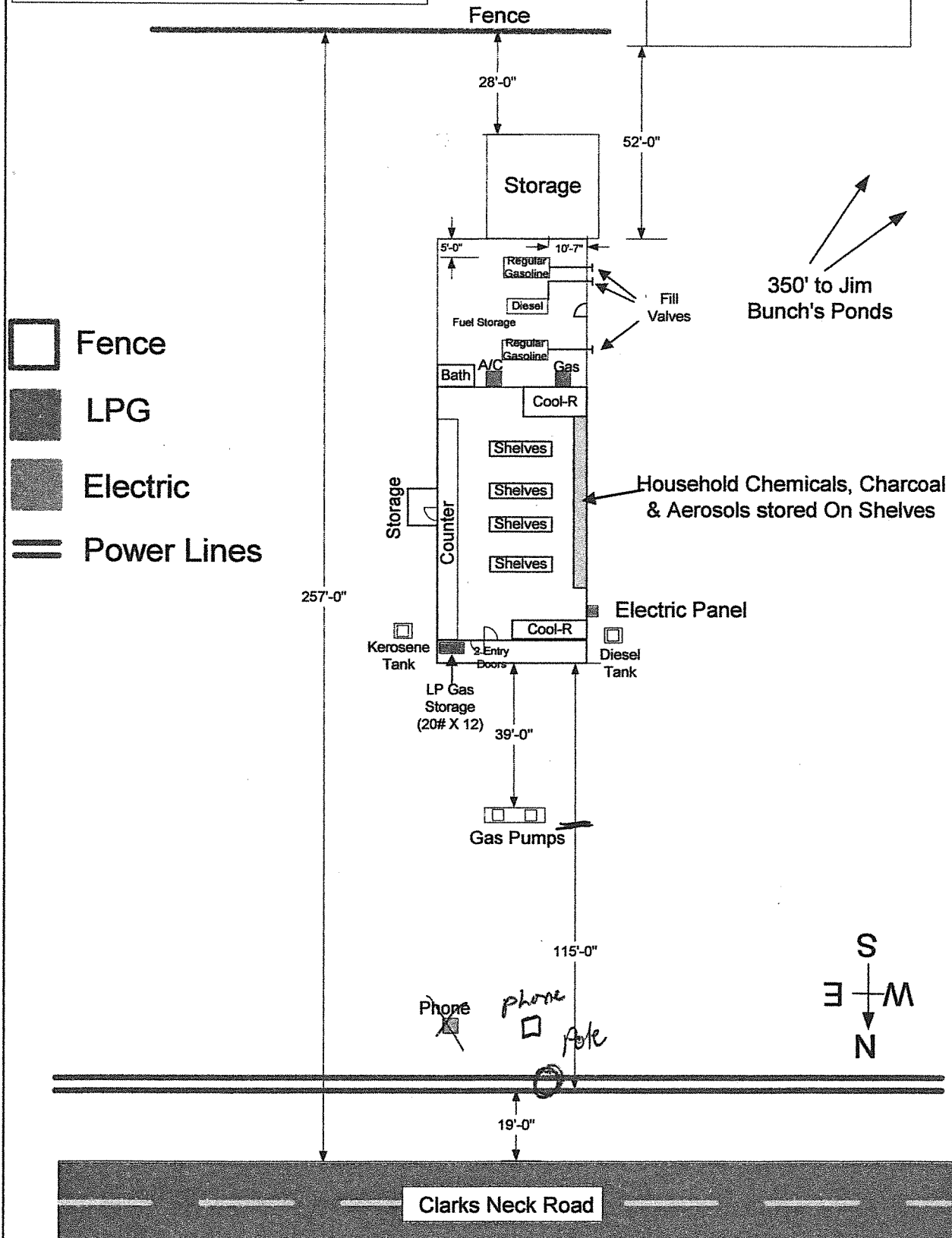
Other exposure concerns: Gasoline and Diesel storage tanks located behind store in fenced area, LP cylinders located at front of store, 2 gas pumps located in front of store, Diesel pump on D side, Kerosene pump on B side front.

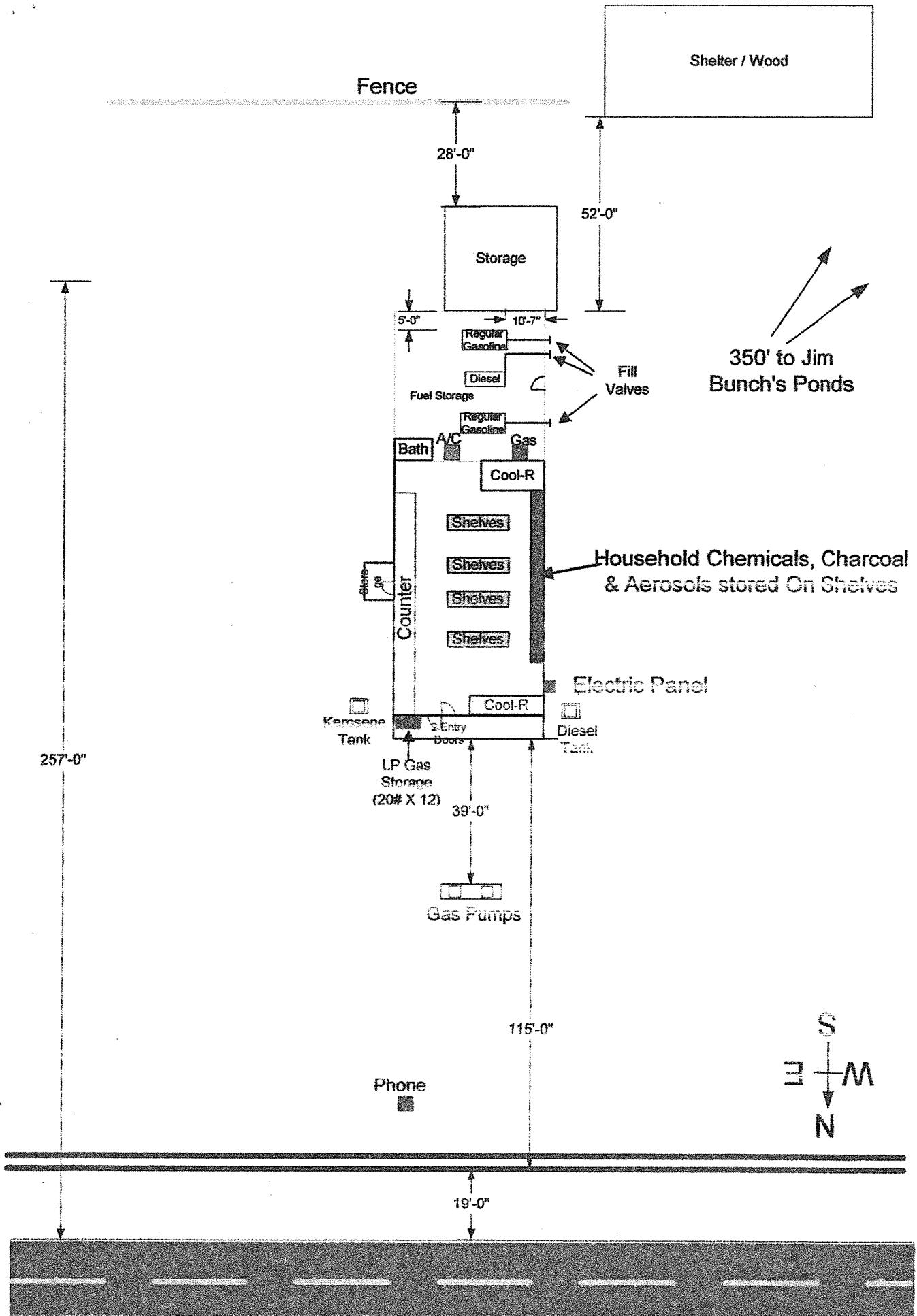
Special Resource Consideration: _____

Confined Spaces: ___ Yes ☒ No Locations: _____

Remarks:





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

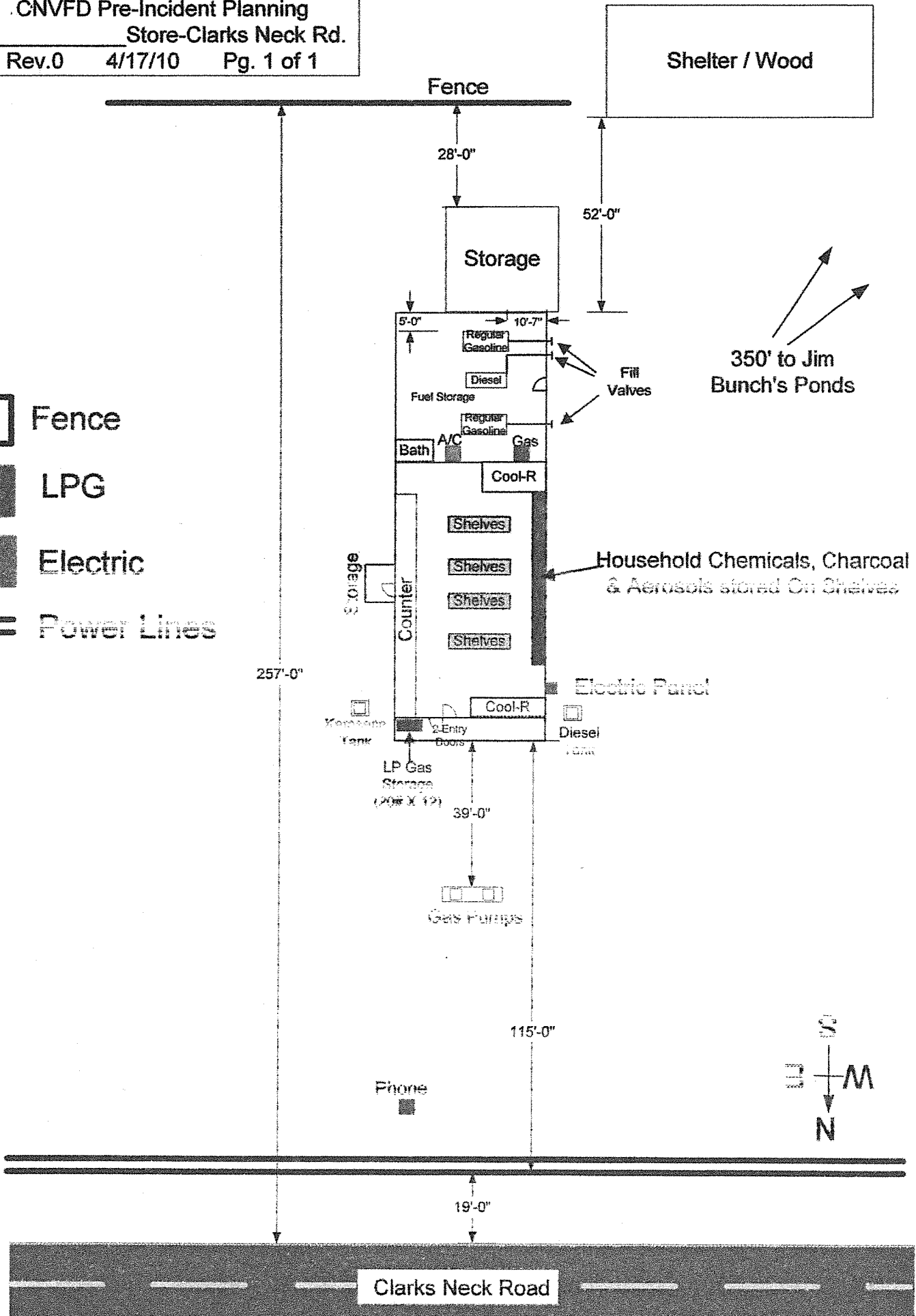




CNVFD Pre-Incident Planning
Store-Clarks Neck Rd.

Rev.0 4/17/10 Pg. 1 of 1

-  Fence
-  LPG
-  Electric
-  Power Lines



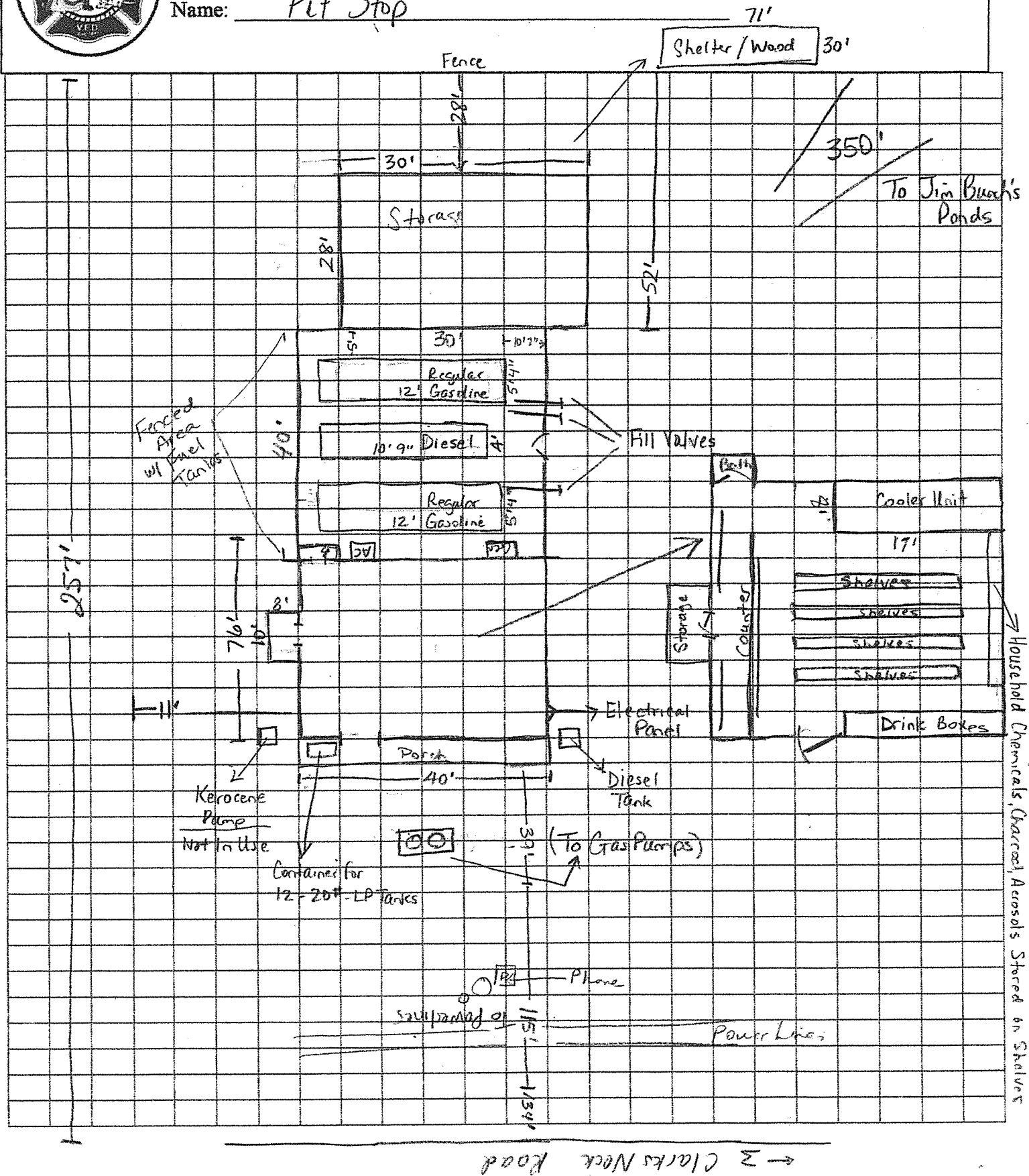


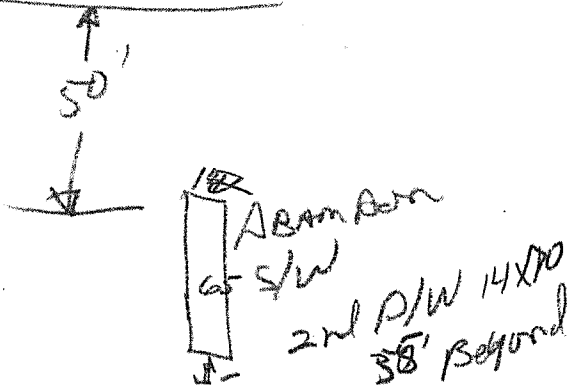
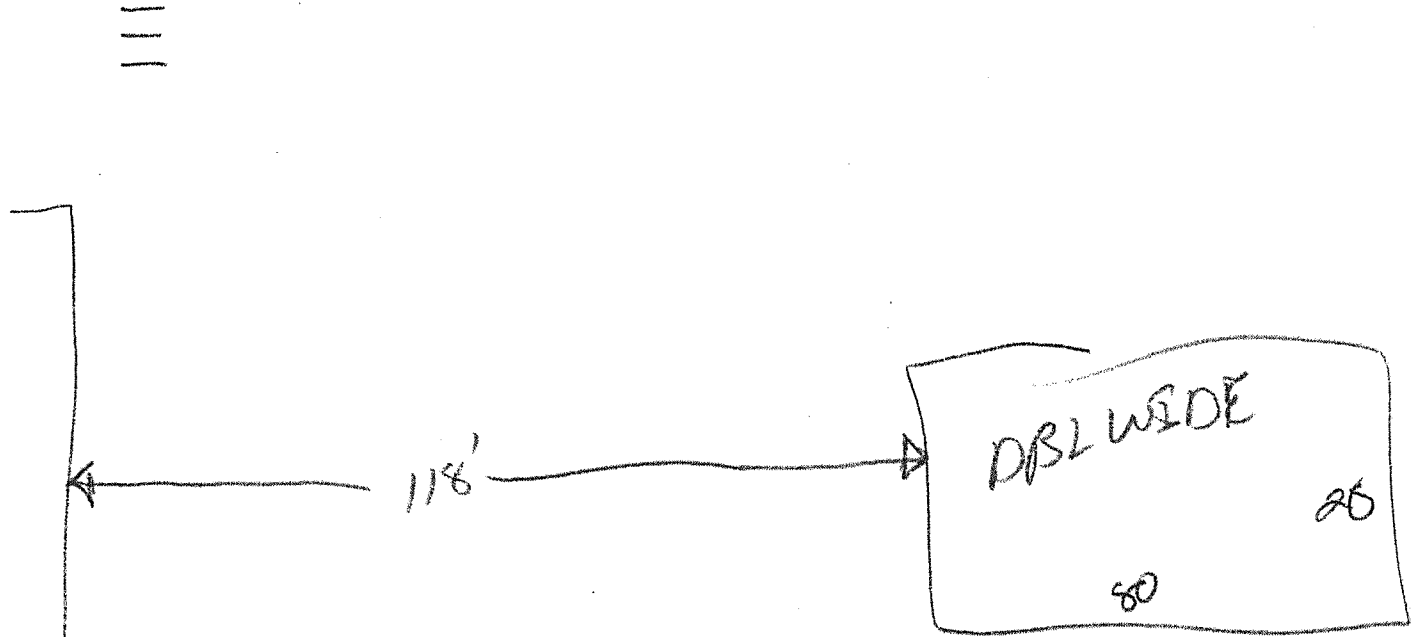
Address: 6634 Clark's Neck Rd.

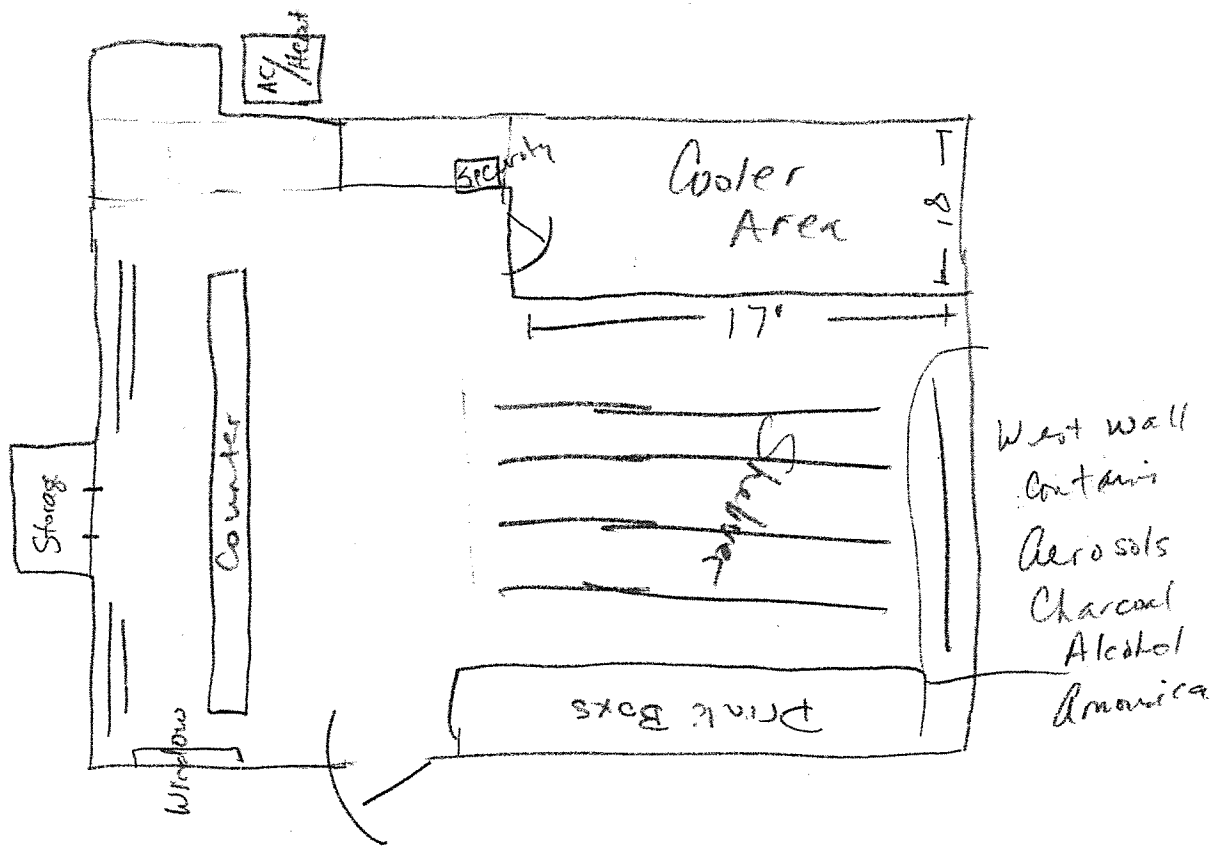
945-1070





Name: Pit Stop

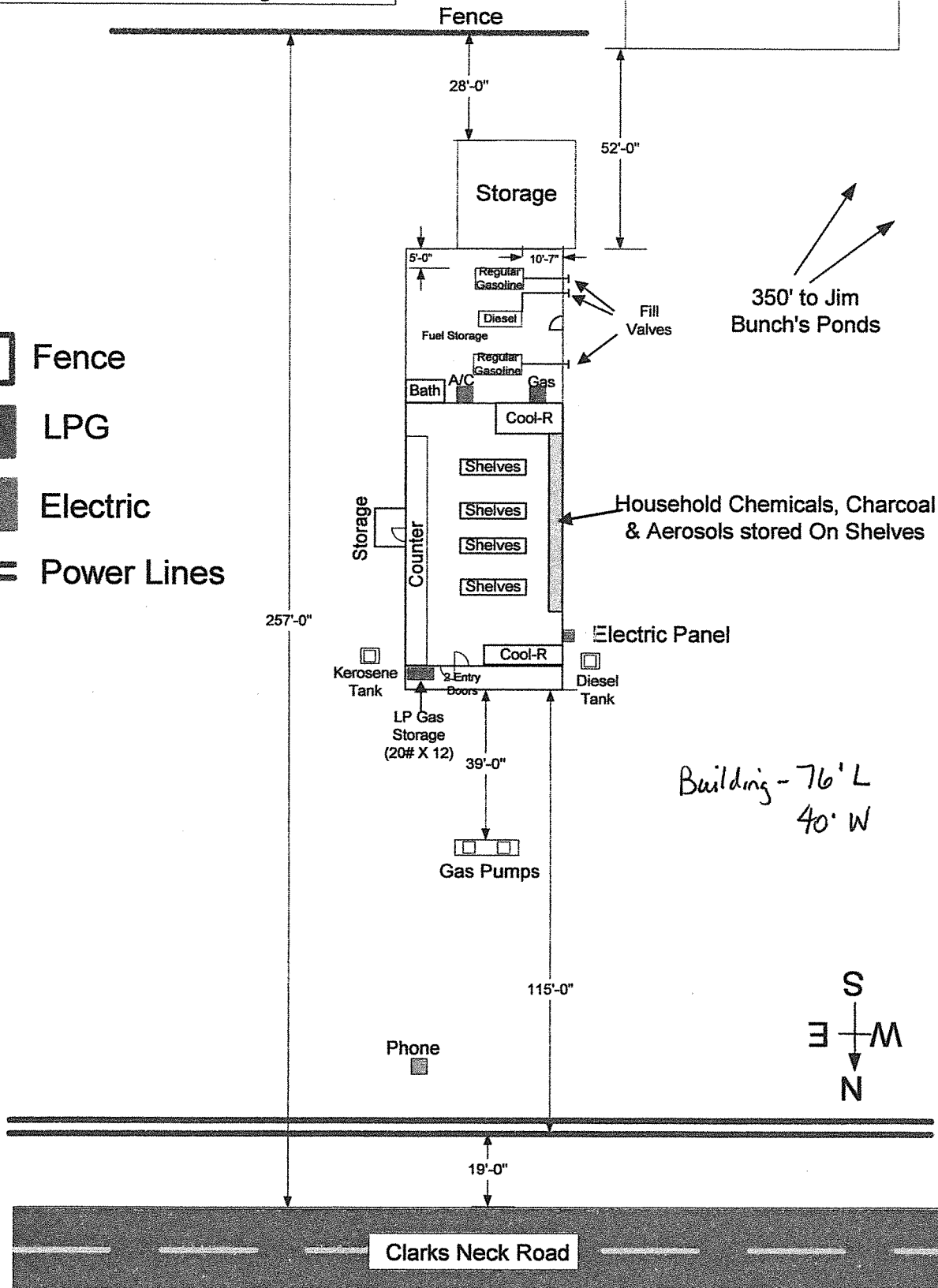
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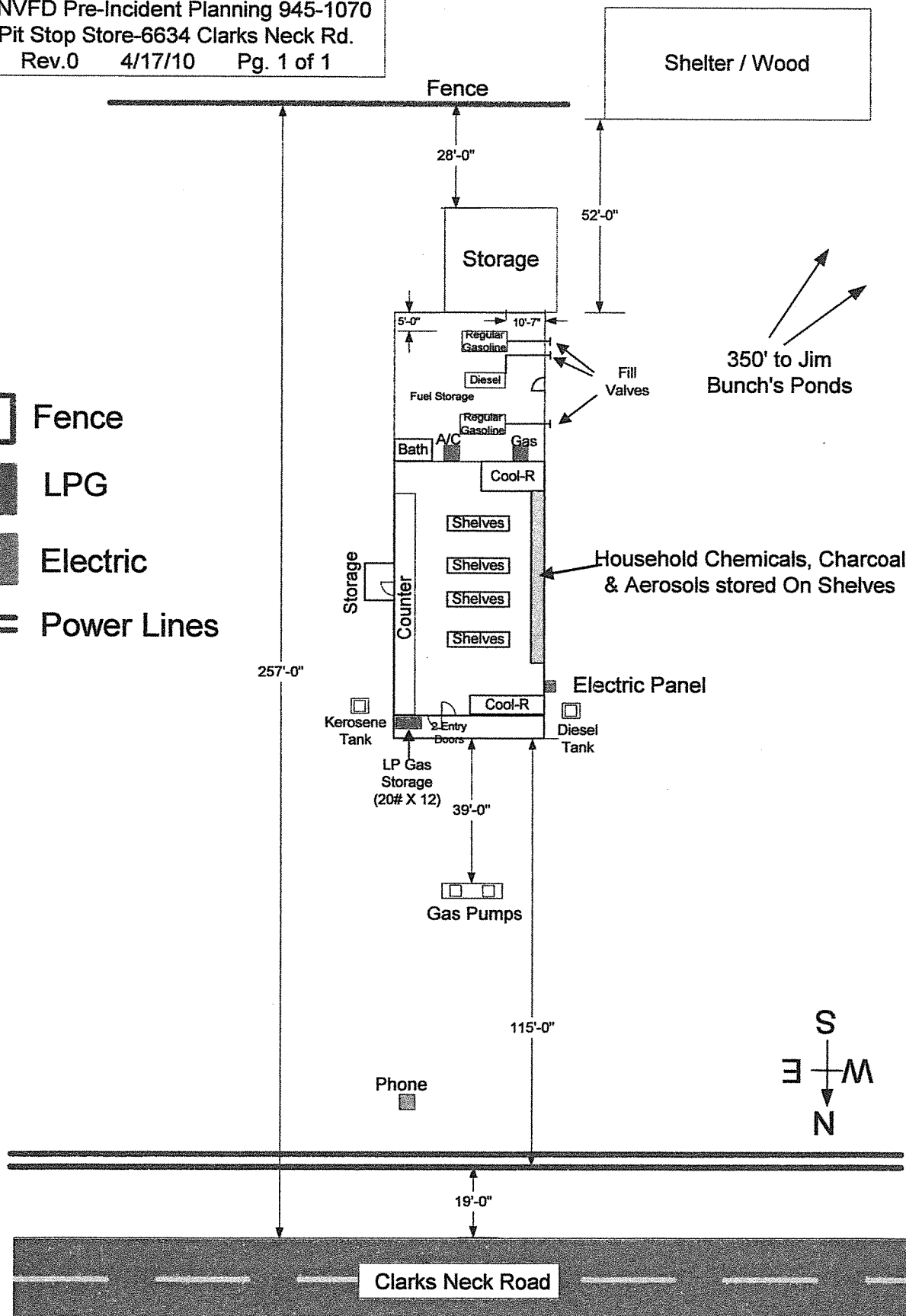


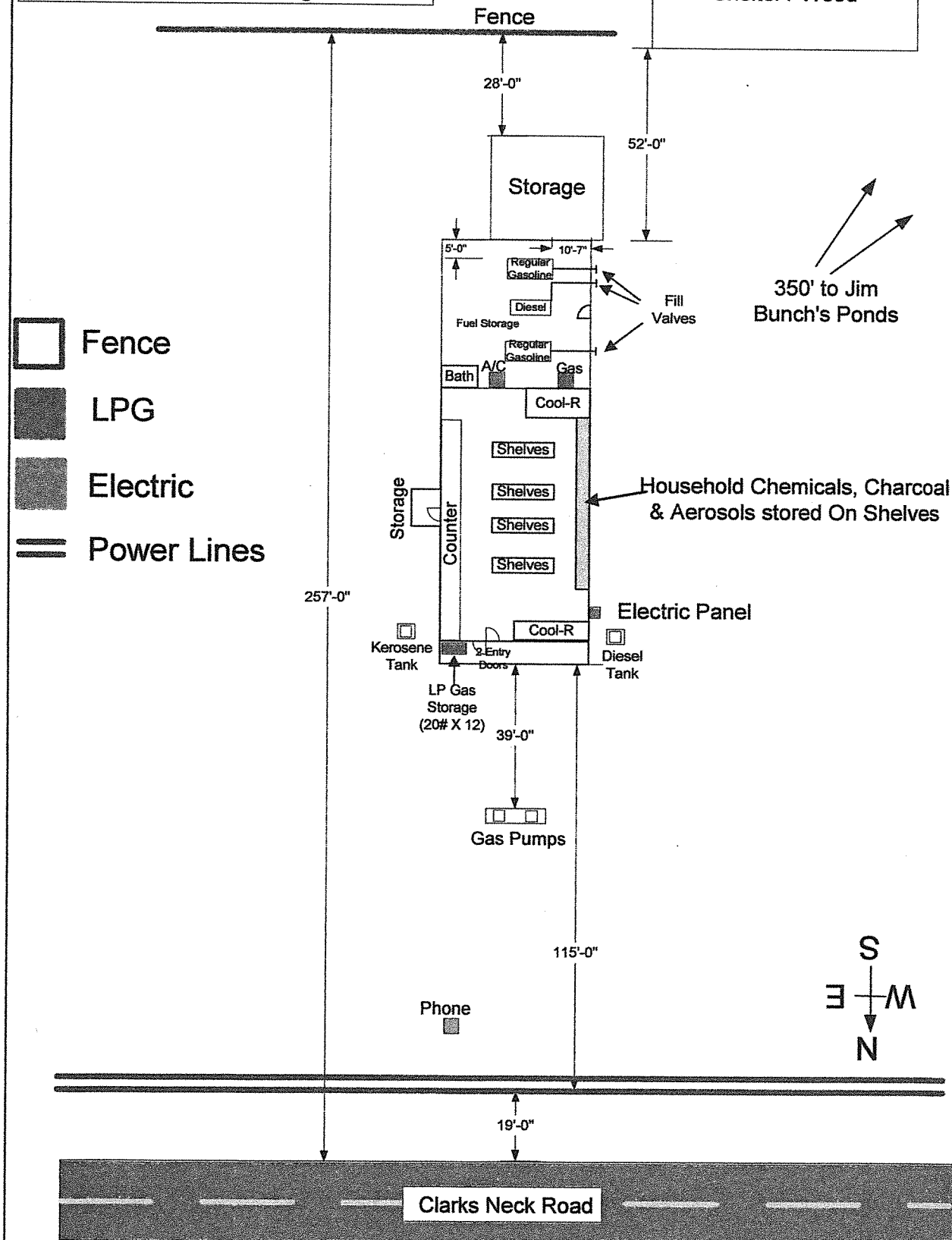


-  Fence
-  LPG
-  Electric
-  Power Lines



-  Fence
-  LPG
-  Electric
-  Power Lines





Structure Name Tranters Creek Mini Mart.
 Structure Address 0634 Clarks Neck Rd.

Length	Width	Sq Ft	Sq Root	X 18	X construction type	GPM sum 1	X Occupancy	GPM sum 2
76	40	3040	55.14	992.45	1.5	1488.68	1	#####

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%	372.17		0	0	0	1488.68
19%	282.85					
14%	208.41					
9%	133.98					
75%	1116.51	Total A, B, C, D				
	MAX	0				

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

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

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
1500.00	750	0	0.00	1500.00	0 1500.00

FIRE FLOW NEEDED GPM
1500.00