



City of Somersworth Fire Department

195 Maple Street – Somersworth, NH 03878-1594



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Policy for Pre-Approving Conditional/Temporary Emergency Use Shelter

Scope:

The scope of this policy is to create guidelines intended for pre-approving and permitting the emergency use of buildings as a temporary shelter in adverse weather conditions. Specifically, to ensure facilities used as shelters for a temporary/emergency nature, that are not designed or designated as shelters, provide a reasonable degree of life safety for the occupants.

Definitions:

Conditional/Temporary Use Shelter- A facility whose primary use is for something other than sheltering activities; however, from time to time may end up providing sheltering services for a limited number of persons for a pre-determined period of time.

Approval Required:

Any facility owner requesting use of their facility for conditional/temporary emergency sheltering purposes shall apply for approval from the City of Somersworth Fire Chief, or designee, and must meet the provisions outlined below.

When operating under approved terms, the Conditional/Temporary Emergency Use Shelter will be allowed to remain open under a timeframe established at the time of application, as defined by the conditions of a specific weather event. Permits will typically not be approved beyond a 7-day timeline. Extensions may be granted by the Fire Chief or designee, upon specific written request by the original applicant. In no case shall the conditional/temporary permitted use exceed 15 days total, unless a State of Emergency has been declared by the Governor and the extended use of the shelter has been approved by the Fire Chief or designee. Applications requests must be signed by the recorded owner or legal representative of the property listed on the application.

During the shelter activity, the notice of approval (permit) must be conspicuously posted at the entrance to the facility. The notice will indicate the dates and times of operation, the specific location in which occupants are being shelter and the total number of occupants permitted in the shelter. The allowable occupant load of the shelter will be determined by the Fire Chief or designee after review of the submitted application and inspection of the facility.

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Egress:

Any area used for sheltering and/or sleeping must have a primary and secondary means of egress that has the appropriate exit capacity. The emergency egress/emergency rescue opening (5.7 square foot opening) complying with the NFPA 101 Life Safety Code is required unless the building is protected with a fully operational fire sprinkler system and travel distance to an exit does not exceed 75 feet along an accessible route.

The egress route must be clearly identified by exit signs and emergency lighting and maintained clear at all times the building is occupied.

Fire Protection System:

An approved automatic fire alarm system with occupant notification shall be provided throughout buildings used as a shelter. The area where sheltering is done must have interconnected smoke detection inside and directly outside all sleeping areas.

Exception: An interconnected smoke detection system is not required where the building is equipped throughout with a full operational fire sprinkler system, and individual/local smoke alarms are provided inside and directly outside areas used for sleeping purposes. Battery powered devices are permitted.

Carbon monoxide detector(s) are required in the immediate vicinity of the sleeping areas. Combination Smoke/CO alarms are permitted. Plug in detectors with battery back-ups are permitted.

In buildings without an approved automatic fire sprinkler system, a fire watch detail must be in place the entire time the shelter facility is in use.

For buildings without an approved, automatic fire alarm system, the fire watch detail must consist of a fire watch member approved by the Fire Chief or his designee.

Cooking:

Cooking will only be allowed in facilities with preapproved, code compliant commercial cooking facilities that are protected with hood vents and fire protection systems and have required state and local approvals for commercial cooking.

Emergency plans:

A Fire Safety and Evacuation Plan must be presented for review and accepted at the time of application. This plan must be available on site for review by the persons being sheltered.

The Fire Safety and Evacuation Plan shall include the following elements:

1. Emergency egress or escape, including alternate routes.
2. Procedures for accounting for employees and occupants after evacuation has been completed (a current roster of all persons being sheltered, and staff, must be

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- maintained at all times the shelter is in operation). The roster must be available for immediate review upon request by emergency personnel during any emergency.
3. The preferred and any alternative means of notifying occupants of a fire or other emergency.
 4. The preferred and any alternative means of reporting fires and other emergencies to the appropriate emergency response department.
 5. Identification and assignment of personnel who can be contacted for further information or explanation of duties under the plan.
 6. A description of the emergency voice/alarm communication system alert tone and preprogrammed voice messages, where provided.
 7. Procedures for the evacuation of the special need occupants.

Evacuation routes must be clearly posted in each area being occupied by persons being sheltered.

When a shelter is activated there must be a review of the fire safety and evacuation plan with each person(s) being admitted to the shelter, and a fire evacuation training drill shall be performed with participation of all persons being sheltered.

This policy is enacted to insure the safety of the occupants in a conditional/temporary emergency shelter in maintained. In accordance with this overall objective, other requirements may need to be considered and/or imposed at the sole discretion of the Fire Chief or designee prior to issuance of a permit.

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Conditional/Temporary Use Sheltering Center

The following shall be provided for review and approval before a site visit can be scheduled.

Known As: _____

Location: _____

Contact Person and Phone number: _____

Yes	No	NA	Primary and secondary egress/exit provided.
Yes	No	NA	Exits clearly marked with exit signage and emergency lighting.
Yes	No	NA	Egress routes clearly posted
Yes	No	NA	Emergency plan provided for review.
Yes	No	NA	Provide current fire alarm and sprinkler inspection reports, where applicable.
Yes	No	NA	Cooking appliance available with vent hood, kitchen suppression and fire extinguisher. Units must have current inspection and current cleaning tag posted.
Yes	No	NA	Smoke detectors provided inside and outside the sleeping area.
Yes	No	NA	Carbon monoxide detection provided in the immediate area of the sleeping area.
Yes	No	NA	Fire extinguishers mounted with current inspection
Yes	No	NA	Fire watch required. To be provided by approved trained personnel.
Additional Notes:			

Occupant Load (to be determined after site inspection): _____

Inspected By: _____ Date: _____

Adopted: 01/15/2020

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Somersworth, NH 03878
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Application for a Certificate of Occupancy for TEMPORARY WARMING CENTER

Map # _____ Lot # _____
Zoning District: _____

Principle Use of Structure: _____
(From City of Somersworth Ordinances, Chpt. 19, Tables: 4.A.2, 4.A.4 or 4.A.5)

Property Owner: _____ Mailing Address: _____

City: _____ ST: _____ Zip: _____

Phone: _____ Cell _____ Email _____

Proposed Business Name: _____ Business Owner: _____

Business Phone: _____ Responsible Party Best Number Of Contact: _____

Section "A" Existing/Previous Conditions:

Existing: _____

Existing # of Units in Building: _____

Square Feet of Existing Use: _____

Existing # of Parking Spaces on site: _____

Date(s) requested: _____ - _____
Must be consecutive

Section "B" Proposed Use:

Description of Shelter Use: _____

Proposed # of Units for Use: _____

Square Feet of Centers Use: _____

Proposed Cooking on site? Y N

If non sprinklered building
Name of Fire Watch _____

PLEASE DO NOT WRITE BELOW THIS LINE - OFFICE USE ONLY

Building Inspector (692-9520) _____ Date: _____

Fire Department: (692-3457) _____ Date: _____

Conditions of CO: _____

Temporary, Date Expires: _____

Building Department Comments: _____

Edition of Code Used: _____ Design Occupant Load: _____

Sprinkler System: Installed Fire watch

Type of Construction: _____

- | | |
|---|--|
| <input type="checkbox"/> A-1 Assembly Use Group A-1 | <input type="checkbox"/> I-1 Factory and Industrial Use Group I-1 |
| <input type="checkbox"/> A-2 Assembly Use Group A-2 | <input type="checkbox"/> I-2 Factory and Industrial Use Group I-2 |
| <input type="checkbox"/> A-3 Assembly Use Group A-3 | <input type="checkbox"/> I-1 Institutional Use Group I-1 |
| <input type="checkbox"/> A-4 Assembly Use Group A-4 | <input type="checkbox"/> I-2 Institutional Use Group I-2 |
| <input type="checkbox"/> A-5 Assembly Use Group A-5 | <input type="checkbox"/> I-3 Institutional Use Group I-3 |
| <input type="checkbox"/> B Business Use Group B | <input type="checkbox"/> I-4 Institutional Use Group I-4 |
| <input type="checkbox"/> E Educational Use Group E | |

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Adopted 01/15/2020