GOVERNMENT OF NATIONAL CAPITAL TERRITORY OF DELHI HEAD QUARTERS: DELHI FIRE SERVICE: NEW DELHI - 110001



No F 6/DFS/MS/2025/Hospital/WZ/ 540

Dated 08/10/2025

FIRE SAFETY CERTIFICATE

Certified that the M/s Sushila Hospital located at Safiabad Road, Narela, Delhi-110040 comprised of Ground + Four upper floors owned/ occupied by Sushila Hospital have complied with the fire prevention and fire safety requirements in accordance with Rule 33 of the Delhi Fire Service Rules, 2010 and verified by the officer concerned of this department on 26.09.2025 in the presence of Sh. Ajit Singh and found that the building/ premises is fit for occupancy class Institutional "Group C" with effect from the building/ for a period of 03 (Three) years in accordance with Rule 36 unless renewed under Rule 37 or sooner cancelled under Rule 40 and subject to compliance of the conditions under Rule 38 of the Delhi Fire Service Rules, 2010.

Issued on .08. ... 2025.... at New Delhi by

(M.K. Chattopadhyay) Dy. Chief Fire Officer

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Copy to:-

1. M/s Sushila Hospital located at Safiabad Road, Narela, Delhi-110040.

2. The Medical Superintendent- Nursing Home, Govt. of NCT, Delhi, Directorate General of Health Services, Nursing Home Cell, 3rd floor, Delhi Govt. Dispensary Building, S-1, School Block, Shakarpur, Delhi- 110092.

Conditions for the validity of Fire Safety Certificate:

- 1. All the fire safety arrangement provided there-in shall be maintained in good working conditions at all times.
- 2. Loss of life or property due to non functional fire safety measure shall be at the responsibility of the management.

3. The trained fire fighting staff should be available round the clock.

- 4. Any deviation with regard to the construction etc shall be verified by the concerned building sanctioning agency.
- 5. This certificate cannot be treated in any case for regularizations of unauthorized construction.
- 6. The owner/occupier shall apply for renewal of this Fire Safety Certificate to the Director of Form 'J' [sub rule (1) of rule 37] along with a copy of this Certificate, six months prior to its expiry".
- 7. The owner / occupier shall submit a declaration every year in form "K" provided in the first schedule of Delhi Fire Service Rules 2010. The form is available on www.dfs.delhigovt.nic.in
- 8. All the means of escape shall be kept free of any obstruction all the time to evacuate the occupant, in a safe manner, in the event of emergency.

INSPECTION REPORT

1. Name & address of the building : M/s Sushila Hospital located at Safiabad Road, Narela, Delhi- 110040.

2. Type of Occupancy Hospital (Institutional) 3. Building Comprised of Ground+ 04 upper floors.

4. Type of Case New 5. Details of Previous NOC Nil

6. Fire Safety directives letter No : F6/DFS/MS/BP/Hospital/2025/24 Dated- 17/01/2025

7. Date of inspection 26/09/2025

8. Name of Inspecting Officer R.K.Sinha, ADO (BW)

9. Name and designation of officers

From the building side : Sh. Ajit Singh 10. Year of Construction : 2024-25

| S No. | Minimum Standards prevention and fire sa | | As per Directive dated 17/01/2025 | | Provided at site | Remarks MR/NMR | | |
|----------|--|-------------|---|---------|------------------------|-------------------|--|--|
| 1. | Access to building | | | | | | | |
| | Road width | | 6 m | | Provided | MR | | |
| | Gate width | | 6 m | | Directly Accessible | MR | | |
| | Width of intern | al road | NA | | NA | NA | | |
| 2. | Number, Width, Type & Arrangement of Exits | | | | | | | |
| | a. Number of staircases | | | | | | | |
| | Upper Floors | | 03 | | Provided | MR | | |
| | Basements | | NA | | NA | · NA | | |
| | b. Width of staircases | | | | | | | |
| | Upper Floor | | 2 m × 2 & 1.6 m × 1 | | Provided | MR | | |
| | Basements | | NA | | NA | NA | | |
| | c. Protection of exits | | | | 1,111 | | | |
| | Fire check door | | Required | | Provided | MR | | |
| | Pressurization | | Required | | Provided | MR | | |
| | d. No. of continuous staterrace | aircases to | 03 | | Provided | MR | | |
| | e. Width of Corridor | | 2.8 m to 2.4 m | | Provided | MR | | |
| | f. Door Size | 5 | 1.25(Single & Dou bedded) & 2 m (Thi bedded, ICU & Pati Ward) | ee | Provided | MR | | |
| | Compartmentation | | , ara) | | | | | |
| | Fire check door | | Required | | Provided | | | |
| | Sealing of electric | cal shafts | Required | | Provided | MR | | |
| | Fire Rating of sha | | | | | MR | | |
| | Water Curtain | 4001 | Required | | Provided | MR | | |
| | Fire Dampers | | NA NA | | Provided | MR | | |
| | Smoke Management Sys | tom | Required | | Provided | MR | | |
| | • Basements | | | | | | | |
| | Upper floors | | NA | | NA | NA | | |
| | ì | | Required | Natural | / Exhaust fan provided | MR | | |
| | Fire Extinguishers | | | | | | | |
| | Total numbers | | 20 N | | | | | |
| | • Types | | 20 Nos. | | Provided | MR | | |
| | IS marking | | ABC/Co2 Type | | Provided | MR | | |
| | | | Required | | Provided | MR | | |

| | | N-18 | | -/. | | |
|-----|---|-------------------------|------------------------------|----------|--|--|
| | First-Aid Hose Reels | | | MR | | |
| | Total numbers on each floor | 01 | Provided | MR | | |
| | in each block | | | MR | | |
| | Length of hose reel hose | 30 m | Provided | MR | | |
| | Nozzle diameter | 5 mm | Provided | | | |
| 7. | Automatic fire detection and alarming | system | | MR | | |
| | Type of detectors | Smoke/ Heat | Provided | MR | | |
| | Location of Main Panel | Required | | | | |
| | Location of Repeater Panel | NA | NA | MR | | |
| | Alternate source of power | Required | Provided | MR | | |
| | Hooters' Location | Required | Provided at strategic places | MR | | |
| 8. | MOEFA | Required | Provided | NA | | |
| | | NA | NA | | | |
| 9. | Public Address System NA | | | | | |
| 10. | Automatic Sprinkler System | | NA | NA MR | | |
| | Basement | NA | Provided | MR | | |
| | Upper Floor | Required | NA | NA | | |
| | Sprinkler above false ceiling | NA | 1111 | | | |
| 11. | Internal Hydrants | | Provided | MR | | |
| | c: C: //awm.comer | 100 mm | | MR | | |
| | Si I Chadrants per floor | 01 | Provided | MR | | |
| | | 01 | Provided | | | |
| 92 | | | | | | |
| 12. | | 01 | Provided Provided | MR | | |
| | Total number of hydrants | 01 | Provided | | | |
| | Hose Box | | | | | |
| 13. | Pumping Arrangements | | | | | |
| | Basement Carrie Pump | 1620 lpm Provided | | MR MR | | |
| | > Discharge of main Pump | 60 m | Provided | MR | | |
| | > Head of Main pump | 01 | Provided | MR | | |
| | > Number of main pumps | 180 lpm | Provided | MR | | |
| | > Jockey Pump out put | 40 m | Provided | | | |
| | > Jockey pump head | 1620 lpm | Provided | MR | | |
| | Standby Pump out put | 60 m | Provided | MR MR | | |
| | Standby Pump Head Auto Starting/Manual | Required | Provided | MK | | |
| | Stopping | | Provided | MR | | |
| 14. | > Pump House Access | Required Provided | | | | |
| | Terrace level | | 900 lpm | NA | | |
| | > Discharge of pump | NA NA | 40 m | NA | | |
| | > Head of the pump | NA NA | Provided | NA | | |
| | > Power Supply | NA NA | Provided | NA | | |
| | Auto Starting of pump NA | | | | | |
| | Captive Water Storage for fire fighting Provided | | | | | |
| | tonk canacity | 75,000 ltrs | Provided | MR MR | | |
| | cc | Required | | | | |
| | 4 14 | Required | Provided | MR | | |
| | Fire service inlet | G18 (1997) | Provided | MR | | |
| | > Access to tank | Required 10,000 ltrs | Tiovided | MR | | |

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| 7 | Signage. | Required | Provided | MR | | | |
|--|--------------------------------------|----------|--------------------------|------|--|--|--|
| / " | Signage. | | | 32.5 | | | |
| V | Provision of Lifts. | | | | | | |
| / | | Required | Provided | MR | | | |
| | Pressurization of Lift Shaft | Required | Provided | MR | | | |
| | Pressurization of Lift lobby | Required | Provided | MR | | | |
| | Communication In lift Car | Required | Provided | MR | | | |
| | Fireman's Grounding Switch | Required | Provided | MR | | | |
| | Lift Signage | | Provided | MR | | | |
| | Standby power supply | Required | | | | | |
| <u>. </u> | | | N/A | NA | | | |
| }. | Refuge Area. | NA | NA | | | | |
| | > Total Area | NA | NA | NA | | | |
| | > Location | | | | | | |
| _ | Fire Control Room | *** | NA | NA | | | |
|) | Detector System Panel | NA | NA | NA | | | |
| | Flow Switch Panel | NA | NA | NA | | | |
| | | NA | NA NA | NA | | | |
| | PA System Panel | NA | New Martin | NA | | | |
| | Battery backup | NA | NA | | | | |
| | Building Floor Plans | Required | Co2 extinguishers | MR | | | |
| 0. | Special Fire Protection System for | Required | Provided | | | | |
| | Protection of special Risks, if any: | | building were tested, ch | | | | |

The fire protection systems provided in the building were tested, checked and found functional at the time of inspection. The management had rectified the shortcomings issued vide letter no. F6/DFS/MS/2025/WZ/449 dated 10/09/2025.

Keeping in view of satisfactory compliance of the minimum standards of fire prevention and fire safety measures as required under rules it is recommended to grant fire safety certificate under Rule 35 of the Delhi Fire Service Rules, 2010.

> Signature of Inspecting Officer Name: Rajeev Kumar Sinha Designation: ADO (BW)

Do(Na)- Provoted on Dy(Fo

In Coto (162) 03/10/25

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