YORK CONDOMINIUM CORPORATION 323

COMMUNICATION COMMITTEE

SUBJECT: BUILDING FIRE SAFTEY - UPDATED FIRE CODES

Over the last several months, our building has undergone detailed fire inspections performed by Toronto Fire Services.

Several issues required attention and the management office responded very quickly. For instance, the doors in the lobby must remain closed and not propped open. These doors are fire resistant and heavier than a standard door. Automatic door openers have been installed for the hallway leading to the meeting room and entrance into the room for assistance.

The lobby was modified with the installation of overhead sprinklers. You may have to look carefully to see the sprinkler heads. Improved exit signs on all floors are much brighter with an additional advantage of small floodlights to improve visibility in a power outage situation.

Another major item will affect all residents. Your hall entrance door requires, by law, a self closing mechanism. The building can be fined \$50,000 if there is evidence Management has ignored this requirement. The Board of Directors, therefore, has approved the installation of self closing units in all suites where the unit has been removed or currently disabled. Once this project has been completed the building will comply.

Fire department inspectors have the authority to enter any building to ensure the new fire code is in place. Should you tamper with the device, penalties starting at \$500 will be laid against the resident. A subsequent event increases the fine substantially.

During the review the inspector noted that emergency assistance forms may not be kept current. In the event of an emergency, the first responders access this information (red fire box in lobby). Individuals in need of assistance will be prioritized. If you have a physical challenge and it is not noted, emergency responders consider you capable of exiting the structure without assistance. An *Emergency Assistance Form* is attached should you need to update your information.

A related issue is the **Resident Information Form**. Completion of this form (also attached) is not mandatory. It does, however, provide the Management Office with the name or names of individuals to contact should you be in distress. This form is not readily available to first responders (fire department). It will be of great benefit however, to paramedics and/or police should they need access to your suite.

Additional Comment:

The website for our building: <u>www.ycc232.com</u> provides suggestions for your health and safety. Under the main menu, click on committees, then health and safety.

June 24, 2019

YCC323 - RESIDENT INFORMATION FORM

Please provide the following contact information to your condominium corporation **on an annual basis**. It will be held in strict confidence and will be used in case of emergency only.

| | REQUIRED INFORMATI | ON | |
|-----------------------|---|--------------|-----|
| Suite/Unit No: | Phone Number in suite: () |) Cell: () | |
| Name(s) of one or two | primary Resident(s): | | |
| Names(s) of any other | resident(s) living in unit: | | |
| Emergency Contact: | | | |
| Name | Phone | e Number: () | |
| | e that your Emergency Contact(s) is awar ou are encouraged to provide a copy of th | • | , , |

| OPTIONAL IN | |
|---|---|
| The following information is provided on a voluntary by your family in the event of an emergency. | basis and will help emergency responders care for |
| Family Doctor: Name: | Telephone: () |
| Important Health Information: | |
| List of Medications: | |
| | |

I/We hereby grant the condominium corporation the authority to disclose the information contained in this form to emergency personnel if my/our health/safety, as determined by the condominium corporation acting reasonably, is/are in jeopardy.

Dated: _____ (MM/DD/YYYY)

Copies can be obtained through the Management Office.

| Signature: | Signature: | |
|-------------|-------------|--|
| | | |
| Print Name: | Print Name: | |

Confidential

YCC323

EMERGENCY ASSISTANCE FORM

You may have noticed a locked safety box as you enter the front door of the building. In the event of an emergency in the building, first responders will open this metal box to obtain vital information to assist them in addressing the threat.

Stored within the box is a schedule listing residents who require assistance if an evacuation is initiated. If you feel that you will require assistance in an emergency, please provide the following information to the management office. Even if your situation is temporary, you are encouraged to complete the form. You never know when an emergency will happen.

Completion of this form is strictly voluntary; however, the information you provide may assist first responders in expediting evacuation and post-evacuation treatment.

PLEASE NOTE THAT THIS INFORMATION IS KEPT IN STRICT CONFIDENCE. IT IS FOR USE BY FIRST RESPONDERS,

AND MAY BE USED BY THE MANAGEMENT OFFICE ONLY DURING EMERGENCIES SUCH AS POWER OUTAGES.

PLEASE COMPLETE A SEPARATE SCHEDULE FOR EACH PERSON REQUIRING ASSISTANCE

| Name: |
|---|
| Apartment Number: |
| Telephone number: Home () Cell: () |
| Brief Description of the mobility issue: |
| |
| |
| Is this a permanent situation? Yes No |
| If not, when do you expect to return to normal activities: |
| Are there any pets in your suite? Yes No |
| If yes, please indicate type and number |
| Is there someone you wish to be contacted in the event of an emergency? If yes, |
| Person's name |
| Telephone: Home: () Cell: () Office: () |
| Date: Signature: |