COMMON APPLICATION FORM FOR NURSING HOME

* = Mandatory Field

Sr. No.	Description	To be filled by Applicant
1*	Name of Applicant	
2*	Contact No. of Applicant	
3*	Email ID of Applicant	
4*	Name & Address of Nursing Home	
5*	Existing CFO Fire Safety Requirements available	
6*	Composition of Building	
7*	Location of Nursing Home	
8*	Total area of Nursing Home	
9*	No. of Entrance for Nursing Home	
10*	No. of Exits for Nursing Home (Other than Entrance)	
11*	No. Of Staircases & its Width in mtrs	
12*	Whether Separate Staircase provided to Nursing Home	
13*	Whether Building Having Glass Façade	
14*	Loft in premises	
15*	Mezzanine floor in premises	
16*	Total No. of Beds	
17*	No. of Operation Theatre & Floor Location	
18*	Details of Fire Marshal / Fire Safety Officer	
19*	Oxygen gas Cylinders used	
20*	Location of Oxygen gas Cylinders	
21*	Pantry / Canteen & Location	
22*	Fuel used in Pantry / Canteen	