

Occupant Instructions

2050 Main



2050 Main Street Irvine CA 92614

Prepared by
Universal Fire/Life Safety Services
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11. Occupant Instructions

Introduction

The management of this building, in cooperation with the Orange County Fire Authority, has compiled this booklet to help insure the safety of the building occupants in the event of an emergency and to comply with the provisions of the California Code of Regulations, Title 19.

The material in this booklet pertaining to CCR Title 19, are required by law. Additional procedures outlined for Bomb Threat, Medical Emergency, Civil Disorders, etc., are recommendations only. For further legal requirements and information regarding such situations, refer to the appropriate agency.

The provisions of Sections 3.09 and 3.10 of Title 19, of the California Code of Regulations, require that persons responsible for new and existing buildings comply with the Emergency Pre-Fire Planning and Evacuation Requirements as set forth therein. Owners, managers, operators, administrators, and **TENANTS** of each high-rise building in the City of Irvine shall comply with these requirements or be subject to prosecution and penalties, including fines, as set forth in Title 19 of the California Code of Regulations.

This book and its contents shall remain the property of the building and be made readily available to members of the Orange County Fire Authority upon demand.

Fire Procedures

IF FIRE OR SMOKE IS DISCOVERED:

1. **SAFETY OF LIFE:** If the fire is in an occupied room, remove anyone from the immediate danger. Confine the fire or smoke by closing doors as you leave the area.
 - b. **NOTIFICATION:** Activate the manual pull station.
 - a. Notify the Fire Department. **Dial 9-1-1.** The following seven-digit emergency number for your area, as a secondary contact, should be used only if a problem occurs in the **9-1-1** system. **(949) 770-6016**

Give them the following information:

- Building Name: **2050 Main Street**
- Building Address: **2050 Main Street
Irvine, CA 92614**
- Nearest Cross Street: **Gillette**
- Floor / Suite Number:
- Nature of Emergency:
- Your Call-Back Telephone Number:

**NOTE: DO NOT HANG UP UNTIL
THE EMERGENCY OPERATOR DOES FIRST!**

- b. If time permits, notify Building Management at **(949) 407-7363** or Building Security at **(949) 285-2589**.
3. **FIRE FIGHTING:** --- Use a fire extinguisher if safe to do so and if you are trained to do so. **NEVER** attempt to put out a fire alone.
4. **EVACUATION:** Proceed to the safest exit or stairwell and begin to evacuate, unless told to do otherwise by the Building staff or the Fire Department.

My Floor Warden is: _____

My nearest exit is: _____

My secondary exit is: _____

The following phone numbers are alternate emergency numbers, use only if a problem occurs in the 9-1-1 system. (Dial additional digit if needed for outside line).

Fire Department: **(949) 770-6016**

Paramedics **(949) 770-6016**

Police Department **(949) 724-7000**

UPON HEARING A FIRE ALARM

- a. If leaving a room, feel the doors before opening them and do not open any that are hot. Remember to close doors behind you, but do not lock them.
- b. Do not return to your office or area for personal belongings.
- c. If smoke is present, stay low. The best quality air is near the floor. Do not attempt to run through heavy smoke or flames.
- d. Do not use the elevators. If you are in an elevator when the alarm sounds, do not push the emergency stop button.
- e. Proceed to the safest stairwell and exit the building, unless told to do otherwise by your floor warden or the building staff.

NOTE: You may be called upon to assist the Floor Warden with people who may need assistance on your floor.

IF TRAPPED INSIDE AN OFFICE OR AREA:

- a. Close as many doors as possible between you and the fire.
- b. Wedge cloth material along the bottom of the door to keep out smoke.
- c. Use telephone (if available) and notify fire department, **(949) 770-6016** of your problem. Next, call your alternate and building manager at **(949) 407-7363** and tell them your situation and that you are unable to carry out your assigned duties.
- d. If windows can be opened and you must have air, open the window. Break window only as a last resort as it will become impossible to close if it is necessary.

Earthquake Procedure

DURING THE EARTHQUAKE

During an earthquake you will be safer inside the building than you are outside if you do feel a tremor:

DUCK – Duck or drop down to the floor.

COVER – Take cover under a sturdy desk, table or other furniture. If that is not possible, seek cover against an interior wall and protect your head and neck with your arms. Avoid danger spots near windows, hanging objects, mirrors or tall furniture.

HOLD – If you take cover under a sturdy piece of furniture, hold on to it and be prepared to move with it. Hold the position until the ground stops shaking and it is safe to move.

DO NO ENTER OR EXIT the building during the shaking. There is danger of falling debris.

DO NOT USE THE ELEVATORS. Elevators will automatically move to the next floor in direction of travel and open.

IF YOU ARE OUTDOORS, move away from buildings, falling objects, and power lines.

AFTER THE EARTHQUAKE

BE PREPARED FOR AFTERSHOCKS. If you are outside, do not return to your office until authorized.

CHECK FOR INJURIES and administer first aid if necessary (and if qualified). Do not move victims unless absolutely necessary.

REPLACE TELEPHONE HANDSETS that have been shaken off, but do not use the telephones except to report fires or medical emergencies.

DO NOT USE ELEVATORS. When exiting, make sure that the exit is safe to use.

Other Emergencies

Medical Emergencies

- A. Do not move the person.
- B. **Call Paramedics, 9-1-1.** If the following emergency phone number should be used if a problem occurs in the 9-1-1 system: **(949) 770-6016**
 - Building Name: **2050 Main Street**
 - Building Address: **2050 Main Street
Irvine, CA 92614**
 - Nearest Cross Street: **Gillette**
 - Nature of Emergency: _____
 - Victim's Name and Location _____
 - Your Call Back Number: _____
- C. Call the Office off the Building: **(949) 407-7363**
- D. Try to make the victim comfortable. If you trained in First Aid or CPR, assist as needed.
- E. Gather as much information as you can about the person and his/her injury. Signs/symptoms and chief complaint of victim.
- F. Have someone at the elevator lobby on the floor to direct Security Personnel and Paramedics to victim's location.

BOMB THREAT

- A. Attract the attention of a co-worker. Have your co-worker call 9-1-1 to request the call on your line be traced and for Police Department response.
- B. Get as much information as possible from the caller about the bomb's location, type and time of detonation.
- C. Ask about the bomb's appearance and who is placing it.
- D. Listen for background noises or distinguishing voice characteristics that might aide police.
- E. Assure that the Irvine Police Department has been notified **(9-1-1)** and relay all the information. The following 7 digit emergency number should be used only if a problem occurs in the 9-1-1 system. **(949) 724-7000.**

- F. Survey your immediate work area and report all suspicious items to building security. Do not touch a suspected bomb or unusual device.
- G. SEE BOMB THREAT FORM ON NEXT PAGE

POWER OUTAGES

- A. Remain calm and in place.
- B. If possible, notify building management at **(949) 407-7363** or Building Security at **(949) 285-2589**.
- C. Turn on battery-powered radio to find out what is happening in the area.
- D. Unplug all electrical equipment, televisions, computers, audio visual equipment, and turn off light switches unless needed. When power returns, it may be in a surge and blow out light bulbs and other equipment.
- E. Open window shades as it will provide natural lighting.
- F. If evacuation is necessary, use flashlights or light sticks to evacuate to your designated areas.

BOMB THREAT REPORT

Name of person receiving call _____

Date of call _____ Time _____ am pm

QUESTIONS TO ASK:

11. **When** is the bomb going to explode?

12. **Where** is the bomb right now?

13. **What** kind of bomb is it?

14. **What** does it look like?

15. **Why** did you place the bomb?

ORIGIN OF CALL:

Local Long Distance Phone Booth Internal

IDENTITY OF CALLER:

Voice: Male Female

Loud Soft High Pitch Deep

Raspy Pleasant Nasal Poor

Intoxicated other _____

Speech

Fast Slow Distant Distorted

Stutter Other _____

Accent:

Local Foreign Regional _____ (type)

Manner:

- | | | | |
|--|-------------------------------------|--------------------------------------|-------------------------------------|
| <input type="checkbox"/> Calm | <input type="checkbox"/> Angry | <input type="checkbox"/> Rational | <input type="checkbox"/> Incoherent |
| <input type="checkbox"/> Emotional | <input type="checkbox"/> Coherent | <input type="checkbox"/> Righteous | <input type="checkbox"/> Deliberate |
| <input type="checkbox"/> Nervous Laugh | <input type="checkbox"/> Irrational | <input type="checkbox"/> Other _____ | |

Background Noise:

- | | | | |
|--|--------------------------------------|------------------------------------|---|
| <input type="checkbox"/> Office Machines | <input type="checkbox"/> Trains | <input type="checkbox"/> Music | <input type="checkbox"/> Factory Machines |
| <input type="checkbox"/> Animals | <input type="checkbox"/> Quiet | <input type="checkbox"/> Airplanes | <input type="checkbox"/> Voices |
| <input type="checkbox"/> Street Traffic | <input type="checkbox"/> Other _____ | | |

Who did you inform about the call?

If the caller seemed familiar with our plant, building, or operation, indicate how:

As best as you can, write what the caller said:

| |
|---|
| <p>KEEP THE CALLER ON THE PHONE AS LONG AS POSSIBLE. DO NOT HANG UP FIRST!</p> |
|---|

Safe Refuge – Outside

EXTERIOR SAFE REFUGE MAP

2050 Main Street – Irvine, CA 92614

IRVINE CONCOURSE

LEGEND

EXTERIOR SAFE REFUGE MEETING AREAS

This map is provided for your convenience. Please print a copy and mark your company's designated safe refuge meeting area and distribute to all employees.

NOTE – In the event of a bomb threat, earthquake or other emergency situations, alternate safe refuge area(s) may be established at that time.

EXIT PATH

Go to the safest area that is up hill and up wind from smoke, fire or harmful liquids. Stay at least 300 feet away from danger and have a secondary path to safety.

NEVER RE-ENTER A BURNING BUILDING!

If properly trained to do so, use appropriately rated fire extinguisher(s) to fight small fires.

Never fight a fire alone and always have a clear exit path away from the fire.

ASSUME ALL ALARMS ARE REAL.

TRAINING SAVES LIVES!

IN CASE OF FIRE

- 1) ALERT OTHERS CALMLY BUT FIRMLY TO EVACUATE IMMEDIATELY.
- 2) DIRECT PEOPLE AWAY FROM THE DANGER AREA.
- 3) CLOSE (do not lock) AS MANY DOORS AS POSSIBLE TO CONTAIN THE FIRE.
- 4) EVACUATE IMMEDIATELY AND CALL 911.
- 5) MOVE QUICKLY (do not run) TO THE SAFEST EXTERIOR SAFE REFUGE AREA.

It is important for occupants to precede a minimum of 300 feet from the building (in case of falling glass) and out of the way of incoming emergency personnel. Use caution crossing driveways. Occupants who evacuate the building will meet their Floor Wardens the designated outside Safe Refuge Area. Floor Wardens will take a head count there.

IN THE EVENT OF A BOMB THREAT, IF EVACUATION IS REQUIRED, A SAFE REFUGE AREA WILL BE DETERMINED AT THAT TIME.

Impaired Physical Condition Temporary or Permanent

“assure that the requirements of subsection (d)(4)(F),” procedures to identify and assist the non-ambulatory and physically disable” are accomplished as follows:

(B) owner(s) or operator(s) of buildings shall maintain a list of permanent building tenant who have disabilities. **Building owner(s) or operator(s) shall be notified in writing by those who have disabilities.**

(C) Information provided in the list shall include any special emergency evacuation needs and permanent work location of such physically disabled persons. The list shall be located in the Building Manager’s office.

PLEASE PROVIDE THE FOLLOWING INFORMATION

If you have any physical condition, temporary or permanent, that may hinder you in the event that your area must be evacuated, please provide the following information to your Floor Warden and the Office of the Building. They will then assign people to you who will assist you in the event of an evacuation.

NAME _____

SUITE/ROOM OR DEPARTMENT _____

TELEPHONE NUMBER _____ EXT. _____

SPECIAL NEEDS _____

INCLUSIVE DATES (If applicable) _____