

**GOVERNMENT OF NATIONAL CAPITAL TERRITORY OF DELHI  
HEADQUARTERS: DELHI FIRE SERVICE: CONNAUGHT PLACE  
NEW DELHI-110001**

No. F.6/DFS/MS/Hospital/2024/SZ/ 354

Dated: 12/06/2024

**FIRE SAFETY CERTIFICATE**

Certified that the **Fortis Lafemme** Situated at **S-549, Greater Kailash, Part-II, New Delhi 110048** comprised of Basement, ground plus three upper floors owned/occupied by Fortis Hospitals Limited was issued Fire Safety Certificate by this department vide letter No. F6/DFS/MS/Hospital/2021/SZ/378 dated 06-08-2021. The premise was re-inspected by officers concerned of this department on 06/06/2024 in the presence of Mr. Sourab Bhardwaj (Admin) and observed that the said premises have deemed complied with the fire prevention and fire safety requirements in accordance with rule 33 of Delhi Fire Service Rules, 2010 and that the building is fit for occupancy class **Group-C Institutional (Hospital)** as above with effect from 12/06/2024 for period of **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 12/06/2024 at New Delhi by

(ATUL GARG)  
DIRECTOR  
DELHI FIRE SERVICE

Copy to: -

1. M/s Fortis Lafemme located at S-549, Greater Kailash, Part-II, New Delhi 110048
2. The Executive Engg. (Bldg) SDMC, Jal Vihar, Lajpat Nagar, New Delhi-110024

**Conditions for the validity of Fire Safety Certificate:**

1. All the means of escape/entry/exit shall be kept free from any obstruction.
2. All the fire safety arrangement provided therein shall be maintained in good working condition at all time as seen during inspection. Any loss of life property due to non-functional fire safety measures shall be at the responsibility of the management.
3. All the staff members must know the correct method of operation of fire fighting system.
4. The use of Basement shall be as per clause 14.2 of BBL 1983.
5. 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](http://www.dfs.delhigovt.nic.in)
6. This fire safety certificate may not in any way be treated as regularization (Clause 2.8 of UBBL-2016) of unauthorized construction or Alteration (Clause 1.4.3 of UBBL-2016), if any.
7. The owner/occupier shall apply for renewal of this Fire Safety Certificate to the Director in form 'J' [sub rule (I) of rule 37] along with a copy of this Certificate, six month prior to its expiry.

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**INSPECTION REPORT**

1	Name & Address of the Building	Fortis La Femme, S-549, Greater Kailash, Part-II, New Delhi-110048		
2	Type of Occupancy	Institutional building, "Group-C" (Hospital)		
3	Building Comprised of	Basement, Ground plus Three Upper Floors		
4	Type of Case	Renewal		
5	Details of Previous NOC	F6/DFS/MS/Hospital/2021/SZ/378 dated 06-08-2021		
6	Fire Safety Directives Letter No	Nil		
7	Date of Inspection	06/06/2024		
8	Name of the Inspecting Officers	DO (South) & ADO (BCP)		
9	Name & Designation of Officers from the building side	Sh. Sourab Bhardwaj (Admin)		
10	Year of construction	1999		
11	Applicant letter No.	Outdoor diary no 2303 dated 31-05-2024		
<b>S. No.</b>	<b>Minimum standards on Fire Prevention and Fire Safety U/R 33</b>	<b>BBL/NBC Requirements</b>	<b>Provided at Site</b>	<b>Remarks MR/NMR</b>
1	<b>Access to Building.</b>			
	<ul style="list-style-type: none"> <li>Road width</li> <li>Gate width</li> <li>Width of internal road</li> </ul>	9 mtr NA (About on road) -NA-	9 mtr 2 Nos of 3.7 m -NA-	MR MR -NA-
2	<b>Number, width, type &amp; arrangement of exits.</b>			
	<b>a) Number of Staircase</b>			
	➤ Upper floors.	02 Nos	Provided	MR
	➤ Basement floor.	02 Nos	Provided	MR
	<b>b) Width of Staircase</b>			
	➤ Upper floors	2 m	02 mtr & 2 mtr	MR
	➤ Basement floor	1.25 m	1.25 mtr & 1.25 mtr	MR
	<b>c) Protection of exits</b>			
	➤ Fire check door	Required in basement	Provided	MR
	➤ Pressurization	-NA-	-NA-	-NA-
	<b>d) No. of continuous staircase to terrace</b>	Required	02 Nos	MR
	<b>e) Width of corridor</b>	Required	1.50 m	MR
	<b>f) Door size</b>	Required	1 m	MR
3	<b>Compartmentation.</b>			
	<ul style="list-style-type: none"> <li>Fire check door.</li> <li>Sealing of electrical shafts.</li> <li>Fire rating of shaft door.</li> <li>Water curtain</li> <li>Fire dampers.</li> </ul>	Required in basement -NA- -NA- -NA- -NA-	Provided -NA- -NA- -NA- -NA-	MR -NA- -NA- -NA- -NA-
4	<b>Smoke Management system.</b>			
	<ul style="list-style-type: none"> <li>Basement</li> <li>Upper floors</li> </ul>	30 ACPH 12 ACPH	Provided Provided	MR MR
5	<b>Fire Extinguishers.</b>			
	<ul style="list-style-type: none"> <li>Total numbers</li> <li>Types</li> <li>ISI Marking</li> </ul>	Required ABC/W.CO2 ISI marked	32 Nos ABC, CO2 & W.CO2 Provided	MR MR MR
6	<b>First Aid Hose Reels.</b>			
	<ul style="list-style-type: none"> <li>Total numbers on each floor.</li> <li>Length of hose-reel hose.</li> <li>Nozzle Diameter</li> </ul>	01 each block 30m 5mm	Provided Provided Provided	MR MR MR
7	<b>Automatic fire detection &amp; alarming system.</b>			
	<ul style="list-style-type: none"> <li>Type of detectors</li> <li>Location of Main Panel</li> <li>Location of Repeater Panel</li> <li>Alternate source of power</li> </ul>	Required Required NA Required	Heat & Smoke Ground floor NA Provided	MR MR NA MR

N/23

	• Hooter's location	Required	All area	MR
8	MOEFA	Required	Provided	MR
9	Public Address System	NA	NA	NA
10	Automatic Sprinkler System			
	• Basement	Required	Provided	MR
	• Upper floors.	NA	NA	NA
	• Sprinkler above false ceiling	NA	NA	NA
11	Internal Hydrants.			
	• Size of Riser/Down-comer	100 mm	100 mm	MR
	• Number of Hydrant per floor	Required	01 Provided	MR
	• Hose box.	Required	01 Provided	MR
12	Yard Hydrants.			
	• Total number of hydrants.	NA	08 Nos	NA
	• Hose box.	NA	08 Nos	NA
13	Pumping arrangements.			
	• Ground Level			
	➤ Discharge of main pump.	1620 LPM	Provided	MR
	➤ Head of main pump.	60m	Provided	MR
	➤ Number of main pumps.	One	Provided	MR
	➤ Jockey Pump output.	180 LPM	Provided	MR
	➤ Jockey Pump head.	60m	Provided	MR
	➤ Standby Pump output.	1620 LPM	Provided	MR
	➤ Standby Pump head.	60m	Provided	MR
	➤ Auto Starting/Manual Stopping.	Required	Provided	MR
	➤ Pump house access.	Required	Provided	MR
	• Terrace Level			
	➤ Discharge of pump.	-NA-	1200 LPM	-NA-
	➤ Head of pump.	-NA-	40m	-NA-
	➤ Power supply.	-NA-	Provided	-NA-
	➤ Auto starting of pump.	-NA-	Provided	-NA-
14	Captive water storage for fire fighting.			
	• Underground tank capacity.	1,00,000 Ltr	Provided	MR
	➤ Draw-off connection.	Required	Provided	MR
	➤ Fire Service Inlet.	Required	Provided	MR
	➤ Access to tank.	Required	Provided	MR
	• Overhead tank capacity.	10,000 Ltr	Provided	MR
		Required	Provided	MR
15	Exit Signage.			
16	Provision of Lifts.			
	• Pressurization of lift shaft.	-NA-	-NA-	-NA-
	• Pressurization of lift lobby.	-NA-	-NA-	-NA-
	• Communication in lift car.	Required	Provided	MR
	• Fireman's switch.	Required	Provided	MR
	• Lift signage.	Required	Provided	MR
17	Standby Power Supply	Required	Provided (DG Set)	MR
18	Refuge Area			
	• Total area	-NA-	-NA-	-NA-
	• Location	-NA-	-NA-	-NA-
19.	Fire Control Room.			
	• Detector system panel.	Required	Provided	MR
	• Flow switch panel.	-NA-	-NA-	-NA-
	• PA system panel.	-NA-	-NA-	-NA-
	• Battery backup.	Required	Provided	MR
	• Building floor plan.	-NA-	-NA-	-NA-
20.	Special Fire Protection System for the Protection of special Risk, if any.	Required	Co2 Flooding system is provided in LT Panels	MR

N/24

The Fire protection systems provided in the building were checked/ tested at random and found functional at the time of inspection.

Keeping in view the deemed compliance of the minimum standards on fire prevention and fire safety measures as required under the rules, the Fire Safety Certificate issued vide letter No. F6/DFS/MS/Hospital/2021/SZ/378 dated 06-08-2021, renewal under rule 37 of the Delhi Fire Service Rules, 2010 is recommended.

Accordingly DFA is put up for approval and signature please.

*[Handwritten signature]*

Signature of the Inspection Officer  
Name: Sh. Manoj Kumar Sharma  
Design: DO (South)

*[Handwritten signature]*

Signature of the Inspecting Officer  
Name: Sh. Rajesh Kumar  
Design: ADO (BCP)

CFO (HQ)

*[Handwritten signature]*  
10/6/2024

~~Director~~ *[Handwritten signature]*  
10/6/24

~~ADY/OL~~

As approved, f.s. letter is put up for your signature M

*[Handwritten signature]*  
11/6

~~Director~~ *[Handwritten signature]*  
11/6/24  
*[Handwritten signature]*