GOVERNMENT OF NATIONAL CAPITAL TERRITORY OF DELHI
HEADQUARTERS: DELHI FIRE SERVICE, NEW DELHI – 110001

No.F6/DFS/MS/NZ/Hospital/2026/ 216 Dated: 16 /09 /2026

FIRE SAFETY CERTIFICATE

Certified that the **Tirsa Health Care (Unit of NP Health Care LLP) located at B-190, Derawal Nagar, Delhi – 110009**, owned /occupied by the NP Health Care LLP having comprised of Basement + ground + 03 upper floors have complied with the fire prevention and fire safety requirements in accordance with Rule 33 of Delhi Fire Service Rules, 2010 and verified by the officers concerned of this department on 25.08.2026 in the presence of Dr. Satish Makhija and found that the said building/ premises is fit for occupancy class **(Group-C)"Institutional Building"** with effect from .....16...../...09...../2026 for a period of **three years** in accordance with Rule 36 unless renewed under Rule 37 or sooner cancelled under Rule 40 and subjected to compliance of the conditions under Rule 38 of the Delhi Fire Service Rules, 2010.

Issued on .....16/09/2026.....at New Delhi by

(Dr. S. K. Tomar)
Chief Fire Officer
Delhi Fire Service

Copy to:-

1. Directorate General of Health Services (Nursing Home Cell), 3rd Floor, Delhi Govt. Dispensary Building, S-1, School Block, Shakarpur, Delhi – 110092.
2. The Authorized Signatory, Tirsa Health Care (Unit of NP Health Care LLP), B-190, Derawal Nagar, Delhi – 110009.

Conditions for the validity of fire safety certificate

1. All the fire safety arrangements provided therein shall be maintained in good working condition at all times.
2. Any loss of life or property due to non functional fire safety measures shall be at the responsibility of the management.
3. The trained fire fighting staff should be available round the clock.
4. Any deviation w.r.t. construction etc. shall be verified by the concerned building sanctioning authority.
5. This fire safety certificate may not be treated in any case for regularization of unauthorized construction, if any.
6. Basement shall be used as per BBL.
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. 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. Any change in the occupancy shall be intimated to this Deptt. and approval shall be obtained thereto before occupancy of the same.

INSPECTION REPORT

1.	Name and address of the building:	**Tirsa Health Care (Unit of NP Health Care LLP) located at B-190, Derawal Nagar, Delhi – 110009.**
2.	Type of occupancy with details of floors:	Institutional building (Group -C) **[Basement + Ground + 03 upper floors]**
3.	Type of case:	New
4.	Details of previous FSC:	Nil
5.	Fire safety directives no.:	NBC/UBBL- 2016
6.	Date of inspection:	25.08.2026
7.	Name of the inspecting officer:	DO (CN) &ADO (MT)
8.	Name and designation of the officer from the building side:	Dr. Satish Makhija
9.	Year of construction:	2002
10	Reference letter no.:	Letter outdoor diary no. 4993 dated 11.08.2026

S,No		Minimum standard of Fire Prevention and Fire Safety U/R 33	UBBL/NBC Requirements	Provide at site	Remarks MR/NMR
1	**Access to Building**				
	A	Road width	06 m	Provided	**MR**
	B	Gate width	4.5 m	Directly accessible	**MR**
	C	Width of internal roads	NA	NA	NA
2	**Number, Width, Type & Arrangement of Exits**				
	A	No. Of Staircase:			
		a) Upper Floor	02 nos.	02 nos.	**MR**
		b) Basements	02 nos.	02 nos.	**MR**
	B	Width of the Staircase:			
		a) Upper floors	2.0 m& 0.75 m	Provided	**MR**
		b) Basements	1.5 m& 0.75 m	Provided	**MR**
	C	Protection of Exits			
		a) Fire Check Door	Required	Provided	**MR**
		b) Pressurization	NA	NA	NA
	D	No. Of continuous staircase to terrace:	02 nos.	02 nos.	**MR**
	E	Width of the corridor	1.5 m	Provided	**MR**
	F	Door size	1.0 m	2.0 m & 0.75 m	**MR**
3	**Compartmentation:**				
	A	Fire Check doors	Required	Provided	**MR**
	B	Sealing of horizontal & vertical opening	Required	Provided	**MR**
	C	Fire rating of shaft Doors	Required	Provided	**MR**
	D	Water curtain	NA	NA	NA
	E	Fire dampers	NA	NA	NA
4	**Smoke management System:**				
	A	Basements	Required	Provided	**MR**
	B	Upper floors	Required	Provided	**MR**
5	**Fire extinguishers**				
	A	Total numbers	10 nos.	Provided	**MR**
	B	Types	CO_2 , ABC	CO_2, ABC	**MR**
	C	ISI marking	Required	Provided	**MR**

6	**First Aid Hose reel**				
	A	Total no. at each floor	01 no	Provided	**MR**
	B	Length of Hose Reel	30 mtrs	30 mtrs	**MR**
	C	Nozzle diameter	5 mm	5 mm	**MR**
7	**Automatic Fire Detection and Alarm System (ADAS)**				
	A	Type of Detectors	Smoke /Heat	Provided	**MR**
	B	Location of main Panel	Ground Floor	Provided	**MR**
	C	Location of Repeater Panel	NA	NA	NA
	D	Alternate power Source	Required	Provided	**MR**
	E	Hooter's location	Required	Provided	**MR**
8	**MOEFA**		Required	Provided	**MR**
9	**Public Address System**		NA	NA	NA
10	**Automatic Sprinkler System**				
	A	Basement	Required	Provided	**MR**
	B	Upper Floor	Required	Provided	**MR**
	C	Sprinklers above false ceiling	NA	NA	NA
11	**Internal hydrants**				
	A	Size of the riser/down comer	100 mm	100 mm	**MR**
	B	No. Of hydrants per floor	01 no.	Provided	**MR**
	C	Hose box	01 no.	Provided	**MR**
12	**Yard Hydrants**				
	A	Total no. of hydrants	NA	NA	NA
	B	Hose box	NA	NA	NA
13	**Pumping arrangements**				
	A	Ground Level			
		a) Discharge &Head of main pump	1620 LPM	Provided	**MR**
		b) Head of main pump	60 m	Provided	**MR**
		c) Number of main pump	01 no.	Provided	**MR**
		d) Jockey pump out put	180 LPM	Provided	**MR**
		e) Head of jockey pump	60 m	Provided	**MR**
		f) Standby pump out put	1620 LPM	Provided	**MR**
		g) Head ofStandby pump	60 m	Provided	**MR**
		h) Auto starting/ manual stopping	Required	Provided	**MR**
		Pump House Access	Required	Provided	**MR**
	B	Terrace Level			
		a) Discharge of terrace pump	900 LPM	Provided	**MR**
		b) Head of terrace pump	40 m	Provided	**MR**
		c) Alternate power supply	Required	Provided	**MR**
		d) Auto starting of pump	Required	Provided	**MR**
14	**Captive Water Storage for Fire Fighting**				
	A	Underground tank capacity	75,000 Ltrs.	Provided	**MR**
	B	Draw off connection	Required	Provided	**MR**
	C	Fire Service Inlet	Required	Provided	**MR**
	E	Access to tank	Required	Provided	**MR**
	D	Overhead tank capacity	10,000 ltrs.	Provided	**MR**
15	**Exit Signage**		Required	Provided	**MR**
16	**Provision of lift**				
	A	Pressurization of lift shaft	NA	NA	NA
	B	Pressurization of lift lobby	NA	NA	NA
	C	Communication in lift car	Required	Provided	**MR**
	D	Fireman switch	Required	Provided	**MR**
	E	Lift signage	Required	Provided	**MR**
17	**Standby Power Supply**		Required	Provided	**MR**

(Tirsa Health Care (Unit of NP Health Care LLP) located at B-190, Derawal Nagar, Delhi – 110009)

18	**Refuge Area**				
	A	location	NA	NA	NA
	B	Total area	NA	NA	NA
19	**Fire Control Room**				
	A	Fire Detection System panel	NA	NA	NA
	B	Flow switch panel	NA	NA	NA
	C	P A system panel	NA	NA	NA
	D	Battery backup	NA	NA	NA
	E	Building floor plan	NA	NA	NA
20	**Special Fire Protection for special risk if any:**				NA

The fire protection system was randomly checked and tested and was found functional at the time of inspection.

The shortcomings issued vide letter no. F6/DFS/MS/WZ/Hospital/2026/217 dated 04.06.2026 by this department has been rectified by the hospital management.

Keeping in view of the substantial compliance of minimum standards of fire prevention and fire safety measures as required under the rules, it is **recommended to grant Fire Safety Certificate** under rule 35 of the Delhi Fire Service Rules, 2010.

Accordingly, DFA is put up for approval & signature please.

Signature of the Inspecting Officer
Name Rajesh Kumar
Designation DO (CN)

Signature of the Inspecting Officer
Name Sumit Kumar
Designation ADO (MT)

CFO/NZ

Principal Director

CFO to ...

CFO (NZ)

ADO/MT F.T. letter is put up for Signature, Please.

CFO (NZ)

MS