

PEEP Questionnaire

This questionnaire can be used to gather information to assist in the development of a Personal Emergency Evacuation Plan (PEEP). Complete this form with the person requiring a PEEP.

The information in this form is used to complete the formal PEEP form.

Name:							
1	Location Which part of the building do you normally work in / visit? Specify building	, floc	or & ro	om:			
2	Do you routinely use more than one location in this building?						
	List the floors & rooms you use in each building	Yes		No		Don't know	
3	Emergency Procedures Are you aware of the emergency evacuation procedures which operate in		uilding	g(s) y	/ou at		
		Yes		No		Don't know	
4	ou require emergency evacuation procedures to be in another format, e.g. in large print, in Braille, electronic? S, specify format:						
		Yes		No		Don't know	
5	Are the signs which mark emergency routes and exits clear enough?	Yes		No		Don't know N//	A 🗌
6	Emergency Alarm Can you hear the fire alarm(s) in your place(s) or work?						
		Yes		No		Don't know N/A	A
7	Could you raise the alarm if you discovered a fire?	Yes		No		Don't know	
8	Assistance Do you need assistance to get out of your place of work in an emergency?						
		Yes		No		Don't know	
9	Is anyone designated to assist you in an emergency?	Yes		No		Don't know	
	If YES, give name(s) and location(s):						
10	Is the arrangement with your assistant(s) a formal arrangement? (A formal them by a manager or written into their job description or by some other p				sone	specified for	
		Yes		No		Don't know	
11	Are you always in easy contact with those designated to help you?	Yes		No		Don't know	

		Queensland, Australia			
12	In an emergency, could you contact the person(s) in charge of evacuating work/study and tell them where you were located?	the building(s) in which you Yes No Don't know			
13	Getting Out In an emergency, would you be able to move at a similar rate to other occ	cupants?			
		Yes No Don't know			
14	Are you confident to use the stairs from the level of the building that is yo outside?	ur normal place of work to the exit to			
		Yes No Don't know			
15	Or would you prefer to wait for assistance?	Yes No Don't know			
16	Do you use a wheelchair?	Yes No Don't know			

Thank you for completing this questionnaire.

The information you have provided will help assist to formalise your support arrangements.