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| DATOS GENERALES | | | | |
| **Razón Social** | ${CompanyName} | **R.F.C.** | | ${CompanyRFC} |
| **Sucursal** |  | **Representante Legal** | | ${CompanyLegalRepresentative} |
| **Gerente o Encargado** | ${CompanyManagerFullName} | | | |
| **Población Fija** |  | **Población Flotante** | |  |
| **Días Laborales** |  | **Horario de Trabajo** | |  |
| **Compañía de Seguros** |  | **Póliza** | |  |
| **DOMICILIO COMPLETO** | | | | |
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| **DATOS DEL INMUEBLE** | | | | |
| **Régimen de Propiedad** |  | **No. Niveles** | |  |
| **Superficie del Terreno m2** |  | **Superficie Construido m2** | |  |
| **Actividad Principal** |  | | | |
| **Antecedentes de accidentes en la sucursal.** |  | | | |
| **Antecedentes de desastres en la región.** |  | | | |
| **¿Cuentan con análisis de Riesgos?** |  | | **¿Cuentan con Planes de Emergencia?** |  |
| **¿Cuentan con sistema de alertamiento?** |  | | **¿Cuentan con Planes de Emergencia?** |  |
| **Personal por turnos** |  | |  |  |
| Matutino | | Vespertino | Nocturno |

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| **INTEGRACIÓN DE LA UNIDAD INTERNA DE PROTECCIÓN CIVIL** | | | |
| **Fecha de Constitución de la UIPC** |  | **Horario de Constitución** |  |
| **Puestos Estratégicos de la UIPC** | | | |
| **Coordinador UIPC** |  | **Subcoordinador UIPC** |  |
| **Jefe de Brigada de Primeros Auxilios** |  | **Jefe de Brigada de Prevención y Combate de Incendios** |  |
| **Jefe de Brigada de Evacuación** |  | **Jefe de Brigada de Búsqueda y Rescate** |  |
| **Brigadistas** | | | |
| **Brigadista de Evacuación** |  | **Brigadista de Evacuación** |  |
| **Brigadista de Evacuación** |  | **Brigadista de Evacuación** |  |
| **Brigadista de Primeros Auxilios** |  | **Brigadista de Primeros Auxilios** |  |
| **Brigadista de Primeros Auxilios** |  | **Brigadista de Primeros Auxilios** |  |
| **Brigadista de Búsqueda y Rescate** |  | **Brigadista de Búsqueda y Rescate** |  |
| **Brigadista de Búsqueda y Rescate** |  | **Brigadista de Búsqueda y Rescate** |  |
| **Brigadista de Prevención y Combate de Incendios** |  | **Brigadista de Prevención y Combate de Incendios** |  |
| **Brigadista de Prevención y Combate de Incendios** |  | **Brigadista de Prevención y Combate de Incendios** |  |

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| **COLINDANCIAS A LOS ALREDEDORES EN UN RADIO DE 500M.** | | |
| **Nombre** | **Descripción** | **Ubicación y Distancia** |
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| **PELIGROS INTERNOS** | | | |
| **Ubicación** | **Descripción de la condición o actividad** | **Riesgo** | **Evidencia Fotográfica** |
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| **EVALUACIÓN DEL GRADO DE RIESGO DE INCENDIO** | |
| **Inventario de Líquidos Inflamables** | |
| **Nombre** | **Cantidad en Litros** |
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| **Inventario de Líquidos Combustibles** | |
| **Nombre** | **Cantidad en Litros** |
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| **Inventario de Gases Inflamables** | |
| **Nombre** | **Cantidad en Litros** |
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| **Materiales Pirofóricos** | |
| **Nombre** | **Cantidad** |
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| **INVENTARIO DE RECURSOS HUMANOS** | | | | | |
| **Nombre** | **Apellido Paterno** | **Apellido Materno** | **Puesto Desempeñado** | **Tipo de Sangre** | **Enfermedad**  **/ Alergia** |
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| **INVENTARIO DE RECURSOS MATERIALES** | | | | |
| **Equipo Contra Incendio** | | | | |
| **Descripción** | **Cantidad** | **Ubicación** | **Fecha del Ultimo Mantenimiento** | **Evidencia Fotográfica** |
| **Extintor de PQS de 4KG** |  |  |  |  |
| **Extintor de PQS de 2.5KG** |  |  |  |  |
| **Extintor de CO2 de 10 Libras** |  |  |  |  |
| **Extintor de CO2 de 5 Libras** |  |  |  |  |
| **Hidrantes** |  |  |  |  |
| **Red contra Incendios** |  |  |  |  |
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| **SISTEMAS DE ALARMA Y DETECCIÓN** | | | | |
| **Descripción** | **Cantidad** | **Ubicación** | **Fecha del Ultimo Mantenimiento** | **Evidencia Fotográfica** |
| Alarma Manual |  |  |  |  |
| Alarma Automática |  |  |  |  |
| Megáfono |  |  |  |  |
| Detector de Gas |  |  |  |  |
| Detector de Humo |  |  |  |  |
| Lámparas de Emergencia |  |  |  |  |
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| **EQUIPO DE PRIMEROS AUXILIOS** | | | | |
| **Descripción** | **Cantidad** | **Ubicación** | **Fecha del Ultimo Mantenimiento** | **Evidencia Fotográfica** |
| Botiquín de Primeros Auxilios |  |  |  |  |
| Camilla |  |  |  |  |
| DEA |  |  |  |  |
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| **EQUIPO DE PROTECCION PERSONAL PARA LOS BRIGADISTAS** | | | | |
| **Descripción** | **Cantidad** | **Ubicación** | **Fecha del Ultimo Mantenimiento** | **Evidencia Fotográfica** |
| Chalecos de Identificacion |  |  |  |  |
| Brazaletes de Identificacion |  |  |  |  |
| Traje de Bombero |  |  |  |  |
| Cascos contra Impacto |  |  |  |  |
| Botas de Seguridad |  |  |  |  |
| Gafas de Seguridad |  |  |  |  |
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| **EQUIPO DE PROTECCIÓN PERSONAL PARA EL PERSONAL** | | | | |
| **Descripción** | **Cantidad** | **Puesto que lo utiliza** | **Ubicación** | **Evidencia Fotográfica** |
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| **CONTENIDO DEL BOTIQUÍN DE PRIMEROS AUXILIOS (1)** | | |
| **Ubicación** |  | |
| **Descripción** | | **Cantidad** |
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| **CONTENIDO DEL BOTIQUÍN DE PRIMEROS AUXILIOS (2)** | | |
| **Ubicación** |  | |
| **Descripción** | | **Cantidad** |
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| **INVENTARIO DE SEÑALIZACIÓN** | | |
| **Descripción** | **Cantidad** | **Evidencia Fotográfica** |
| Ruta de Evacuación |  |  |
| Salida de Emergencia |  |  |
| Extintor |  |  |
| Hidrante |  |  |
| Botiquín |  |  |
| Riesgo Eléctrico |  |  |
| Punto de Reunión |  |  |
| No fumar |  |  |
| Punto de Reunión |  |  |
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| **NORMAS DE SEGURIDAD DENTRO DEL INMUEBLE** | |
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| **PROGRAMA DE CAPACITACION Y ADIESTRAMIENTO 2020** | | | | | | | | | | | | | |
| **Tema** | | **Ene** | **Feb** | **Mar** | **Abr** | **May** | **Jun** | **Jul** | **Ago** | **Sep** | **Oct** | **Nov** | **Dic** |
|  | P: |  |  |  |  |  |  |  |  |  |  |  |  |
| R: |  |  |  |  |  |  |  |  |  |  |  |  |
|  | P: |  |  |  |  |  |  |  |  |  |  |  |  |
| R: |  |  |  |  |  |  |  |  |  |  |  |  |
|  | P: |  |  |  |  |  |  |  |  |  |  |  |  |
| R: |  |  |  |  |  |  |  |  |  |  |  |  |
|  | P: |  |  |  |  |  |  |  |  |  |  |  |  |
| R: |  |  |  |  |  |  |  |  |  |  |  |  |
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| R: |  |  |  |  |  |  |  |  |  |  |  |  |
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| Responsable: | | | | | | | | | | | R: Real\*\*  P: Programado\* | | |

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| **PROGRAMA DE MANTENIMIENTO 2020** | | | | | | | | | | | | | |
| **Elemento de Mantenimiento** | | **Ene** | **Feb** | **Mar** | **Abr** | **May** | **Jun** | **Jul** | **Ago** | **Sep** | **Oct** | **Nov** | **Dic** |
| Instalaciones Eléctricas | P: |  |  |  |  |  |  |  |  |  |  |  |  |
| R: |  |  |  |  |  |  |  |  |  |  |  |  |
| Instalaciones Estructurales | P: |  |  |  |  |  |  |  |  |  |  |  |  |
| R: |  |  |  |  |  |  |  |  |  |  |  |  |
| Instalaciones de Gas | P: |  |  |  |  |  |  |  |  |  |  |  |  |
| R: |  |  |  |  |  |  |  |  |  |  |  |  |
| Instalaciones Hidro-Sanitarias | P: |  |  |  |  |  |  |  |  |  |  |  |  |
| R: |  |  |  |  |  |  |  |  |  |  |  |  |
| Equipo Contra Incendios | P |  |  |  |  |  |  |  |  |  |  |  |  |
| R: |  |  |  |  |  |  |  |  |  |  |  |  |
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| Responsable: | | | | | | | | | | | R: Real\*\*  P: Programado\* | | |

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| **BITACORA DE MANTENIMIENTO DE INSTALACIONES HIDRO-SANITARIAS** | | | | |
| **No.** | **Tipo de Mantenimiento** | **Actividad Realizada** | | **Fecha** |
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| Responsable; | | |  | |

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| **BITACORA DE MANTENIMIENTO DE INSTALACIONES ELECTRICAS** | | | | |
| **No.** | **Tipo de Mantenimiento** | **Actividad Realizada** | | **Fecha** |
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| 2 |  |  | |  |
| 3 |  |  | |  |
| 4 |  |  | |  |
| 5 |  |  | |  |
| 6 |  |  | |  |
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| Responsable | | |  | |

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| **BITACORA DE MANTENIMIENTO DE INSTALACIONES DE GAS** | | | | |
| **No.** | **Tipo de Mantenimiento** | **Actividad Realizada** | | **Fecha** |
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| 4 |  |  | |  |
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| Responsable | | |  | |

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| **BITACORA DE MANTENIMIENTO DE INSTALACIONES ESTRUCTURALES** | | | | |
| **No.** | **Tipo de Mantenimiento** | **Actividad Realizada** | | **Fecha** |
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| Responsable | | |  | |

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| **BITACORA DE MANTENIMIENTO DE EXTINTORES** | | | | | | | | | | | | |
| **Responsable:** | |  | | | | | | | | | | |
| **Fecha de Inspeccion:** | |  | | | | | | | | | | |
| **No.** | **Ubicacion** | **Fecha de Ultima Recarga** | **Tipo de Agente** | **Capacidad** | **Manometro** | **Pasador de Seguridad** | **Señalizacion** | **Visibilidad** | **Acceso al extintor** | **Pintura** | **Acciones a Tomar** |
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| B: Bueno  R: Regular  M: Malo | | | | | | | | | | | | |

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| **CRONOGRAMA DE SIMULACROS** | | | | | | | | | | | | | | | |
| **Hipotesis** | **Escenario** | **Actividad** | **ESTATUS** | **ENE** | **FEB** | **MAR** | **ABR** | **MAY** | **JUN** | **JUL** | **AGO** | **SEP** | **OCT** | **NOV** | **DIC** |
|  |  | **Simulacro de Gabinete** | **P** |  |  |  |  |  |  |  |  |  |  |  |  |
| **R** |  |  |  |  |  |  |  |  |  |  |  |  |
| **Simulacro de Campo** | **P** |  |  |  |  |  |  |  |  |  |  |  |  |
| **R** |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  | **Simulacro de Gabinete** | **P** |  |  |  |  |  |  |  |  |  |  |  |  |
| **R** |  |  |  |  |  |  |  |  |  |  |  |  |
| **Simulacro de Campo** | **P** |  |  |  |  |  |  |  |  |  |  |  |  |
| **R** |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  | **Simulacro de Gabinete** | **P** |  |  |  |  |  |  |  |  |  |  |  |  |
| **R** |  |  |  |  |  |  |  |  |  |  |  |  |
| **Simulacro de Campo** | **P** |  |  |  |  |  |  |  |  |  |  |  |  |
| **R** |  |  |  |  |  |  |  |  |  |  |  |  |
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| **Responsable de Seguimiento:** | |  | | | | | | | | | | | | | | |

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| Servicios de Emergencia | | |
| Descripción | Ubicación | Teléfono |
| Hospital |  |  |
| Cruz Roja |  |  |
| Bomberos |  |  |
| Corporativo interno de la empresa |  |  |
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| **EVIDENCIA FOTOGRAFICA** | |
| **Fachada** |  |
| **Empresas a los alrededores** |  |
| **Espectaculares a los alrededores** |  |
| **Postes Electricos a los alrededores** |  |
| **Vialidades Cercanas** |  |
| **Pastizales** |  |
| **Peligros a los alrededores** |  |

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| **Control de Cambios** | | | |
| **Fecha** | **Responsable** | **Descripción** | **Revisión** |
| 30/04/00 | José Roberto López Carballo | Elaboración del documento | 00 |
| 13/02/2020 | Jesús Ortiz Yépez | Adecuación de Puntos Específicos para protección civil | 01 |
| 19/04/2020 | Jesús Ortiz Yépez | Adecuación para PIPC Riesgo Alto | 02 |
| 19/04/2020 | Jesús Ortiz Yépez | Adecuación para PIPC Riesgo Bajo | 03 |