



**FIRE SYSTEM IMPAIRMENT NOTIFICATION FORM**

Please check

\*Notify RLI at <http://www.risklogic.com/fireform> prior to impairment and upon restoration of system(s).

IMPAIRED

RESTORED

Plant:

City, State:

Date & Time of Impairment:	Date: _____	Time: _____
Anticipated Date & Time to Restore:	Date: _____	Time: _____
Reason for Impairment:	_____	
Type of System:	_____	
System/Valve #:	_____	
Area(s) Affected:	_____	
Date & Time Restored:	Date: _____	Time: _____

NOTIFY RISK LOGIC AT: <http://www.risklogic.com/fireform>  
OR IF AN EMERGENCY: Phone: (201) 930-0700

Date of Notification: \_\_\_\_\_  
Time of Notification: \_\_\_\_\_

**PRECAUTIONS TAKEN:**

- |   |   |
|---|---|
| <input type="checkbox"/> Fire Brigade Notified                | <input type="checkbox"/> Fire Watch Ongoing         |
| <input type="checkbox"/> Public Fire Dept. Notified           | <input type="checkbox"/> Fire Hose Laid Out         |
| <input type="checkbox"/> Hot Work Prohibited                  | <input type="checkbox"/> Hydrant Connected to Riser |
| <input type="checkbox"/> Smoking Prohibited                   | <input type="checkbox"/> Pipe Plugs on Hand         |
| <input type="checkbox"/> Hazardous Operations Stopped in Area | <input type="checkbox"/> Other: _____               |

System/Precautions verified by: \_\_\_\_\_ Title \_\_\_\_\_

Telephone # \_\_\_\_\_

Was a 2 in. drain test performed?  Yes  No  DNA

Fax # \_\_\_\_\_



Risk Logic Inc.