



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:

- Fire Brigade Notified
- Public Fire Dept. Notified
- Hot Work Prohibited
- Smoking Prohibited
- Hazardous Operations Stopped in Area
- Fire Watch Ongoing
- Fire Hose Laid Out
- Hydrant Connected to Riser
- Pipe Plugs on Hand
- Other: _____

System/Precautions verified by: _____ Title _____

Telephone # _____

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

Fax # _____



Risk Logic Inc.