

Pre-Fire Plan

Occupancy ID#: _____

Occupancy Name: _____

Address: _____ Apt/Suite #: _____

Phone #: _____

Emerg. Contact #1: Name: _____ Phone #: _____ Cell #: _____

Emerg. Contact #2: Name: _____ Phone #: _____ Cell #: _____

WATER SOURCE

Closest Hydrant Location #1: _____ Distance: _____

Closest Hydrant Location #2: _____ Distance: _____

SIZE

Length: _____ Above Ground: _____

Width: _____ Below Ground: _____

Total: _____

STORIES

BUILDING STATUS

- Under Construction Vacant & Secured
 Occupied Vacant & Unsecured
 Idle; Not Routinely Used

CONSTRUCTION TYPE

- Fire Resistive Unprotected Non-Combustible Protected Ordinary Protected Wood Frame
 Heavy Timber Protected Non-Combustible Unprotected Ordinary Unprotected Wood Frame

Walls: _____ Floors: _____ Roof: _____

ROOF COVERING

- Tile (clay, cement, slate, etc.) Wood Shingles (treated / untreated) Built Up
 Composite Shingle (asphalt) Metal No Roof

UTILITIES

Shut Off Locations

- Natural Gas _____
 Electric _____
 Water _____
 Propane _____

ALARM SYSTEMS

Alarm Present? Y / N Automatic Manual Pull Station Combination

DETECTORS

- | <u>Type</u> | | <u>Power Supply</u> |
|--------------------------------------|--|---|
| <input type="checkbox"/> Smoke | <input type="checkbox"/> Carbon Monoxide | <input type="checkbox"/> Battery |
| <input type="checkbox"/> Heat | <input type="checkbox"/> Sprinkler w/ Water-Flow Detectors | <input type="checkbox"/> Hardwire |
| <input type="checkbox"/> Combination | | <input type="checkbox"/> Plug In |
| | | <input type="checkbox"/> Plug In w/ Battery Backup |
| | | <input type="checkbox"/> Hardwire w/ Battery Backup |

Enunciator Panel? Y / N Location: _____

Alarm Company: _____ Phone #: _____

EXTINGUISHING SYSTEM

Fire Department Connection? Y / N Location: _____

- Wet Pipe Dry Chemical Halogen System Class K System
 Dry Pipe Foam System CO2 System Standpipes

Pre-Fire Plan Diagram

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Occupancy Name: _____

Completed By: _____

Date: _____