



TOWN OF BRIGHTON
Office of the Fire Marshal
 2300 Elmwood Avenue
 Rochester, New York 14618
 (585) 784-5220 Office
 (585) 784-5207 Fax

Fire Protection System - Out of Service Notification

This standard shall set forth the requirement of a fire watch when a building or premises presents a hazard to life or property as the result of a fire or other emergency, or when it is determined that any fire protection equipment or life safety system is inoperable, defective, inadequate, has been taken out of service for > 8 hours in a 24 hour period.

****BESIDES NOTIFYING THE MONITORING STATION****

The below information MUST be faxed to (585) 784-5207 when taking any fire protection system OUT OF SERVICE

Please refer to Fire Code of New York State Section 901.7 if you have any questions.

§F901.7 Systems out of service. Where a required fire protection system is out of service, the fire department and the code enforcement official shall be notified immediately and, where required by the code enforcement official, the building shall either be evacuated or an approved fire watch shall be provided for all occupants left unprotected by the shut down until the fire protection system has been returned to service.

Where utilized, fire watches shall be provided with at least one approved means for notification of the fire department and their only duty shall be to perform constant patrols of the protected premises and keep watch for fires.

Fire Protection System Information	Date System OUT OF SERVICE	Impairment Information	Automatic Fire Sprinkler	Reason System is OUT OF SERVICE	Repairs	Type of Impairment	Pre-Scheduled
	Time System Taken OUT OF SERVICE		Fire Alarm		Testing		Emergency
			Kitchen Fire Suppression		Alterations		Damage or Hidden
			Fire Suppression		Other		Maintenance
Business Address Information	BUSINESS NAME					PHONE NUMBER	
	BUSINESS CONTACT NAME						
	ADDRESS			CITY		STATE	ZIP CODE
Fire Protection Company Info	BUSINESS NAME					PHONE NUMBER	
	ADDRESS			CITY		STATE	ZIP CODE
	CONTACT NAME			TITLE		CONTACT NUMBER	
	IMPAIRMENT COORDINATOR						

Fire Protection System Return to Service Information

Please complete the information below when system is back in service and FAX to (585) 784-5207

THE ABOVE SYSTEM WAS PUT BACK IN SERVICE AND FULLY OPERATIONAL EXCEPT AS NOTED BELOW

Name (Print)	Signature	Date

Fire Protection System - Out of Service Notification

Requirements

§F901.7 Systems out of service. Where a required fire protection system is out of service, the fire department and the code enforcement official shall be notified immediately and, where required by the code enforcement official, the building shall either be evacuated or an approved fire watch shall be provided for all occupants left unprotected by the shut down until the fire protection system has been returned to service.

Where utilized, fire watches shall be provided with at least one approved means for notification of the fire department and their only duty shall be to perform constant patrols of the protected premises and keep watch for fires.

Exception: The code enforcement official is permitted to waive the requirement for evacuation or a fire watch where there is not a substantial risk to life safety or where alternatives to maintain an equivalent level of safety are prescribed.

§F901.7.1 Impairment coordinator. The building owner shall assign an impairment coordinator to comply with the requirements of this section. In the absence of a specific designee, the owner shall be considered the impairment coordinator.

§F901.7.2 Tag required. A tag shall be used to indicate that a system, or portion thereof, has been removed from service.

<p>ATTACH TO VALVE, FDC • READ INSTRUCTIONS ON OTHER SIDE •</p> <h1 style="margin: 0;">SPRINKLER VALVE</h1> <h1 style="margin: 0;">SHUT</h1>	
THIS VALVE CONTROLS SPRINKLERS IN BUILDING(S):	
SHUT BY (SIGNATURE):	DATE:
<p>→ After valve is opened, make 50-mm (2-in.) drain test. Drop in pressure should be normal. If pressure drop is extreme and does not build up, the system is impaired and immediate investigation is necessary.</p>	
DRAIN TEST RESULTS	
STATIC PRESSURE bar (psi)	FLOWING PRESSURE bar (psi)
DRAIN TEST MADE BY (SIGNATURE)	DATE:

FRONT

Before Impairment:
<input type="checkbox"/> Notify Fire Department <input type="checkbox"/> Notify Building Owner/Supervisors <input type="checkbox"/> Shut Down Hazardous Operations (Hot Work) <input type="checkbox"/> No Smoking <input type="checkbox"/> Portable Fire Extinguisher(s) Ready
During Impairment:
<input type="checkbox"/> Work Exclusively on Impairment Project <input type="checkbox"/> No Smoking in Building <input type="checkbox"/> No Unrelated Cutting or Welding (Hot Work) <input type="checkbox"/> Check if Fire Watch Required
After Impairment:
<input type="checkbox"/> Perform Main Drain Test <input type="checkbox"/> Notify Fire Department <input type="checkbox"/> Notify Building Owner/Supervisors <input type="checkbox"/> Remove Tag

BACK

§F901.7.3 Placement of tag. The tag shall be posted at each fire department connection, system control valve, fire alarm control unit, fire alarm annunciator and fire command center, indicating which system, or part thereof, has been removed from service. The code enforcement official shall specify where the tag is to be placed.

§F901.7.4 Preplanned impairment programs. Preplanned impairments shall be authorized by the impairment coordinator. Before authorization is given, a designated individual shall be responsible for verifying that all of the following procedures have been implemented:

1. The extent and expected duration of the impairment have been determined.
2. The areas or buildings involved have been inspected and the increased risks determined.
3. Recommendations have been submitted to management or building owner/manager.
4. The fire department has been notified.
5. The insurance carrier, the alarm company, building owner/manager, and other authorities having jurisdiction have been notified.
6. The supervisors in the areas to be affected have been notified.
7. A tag impairment system has been implemented.
8. Necessary tools and materials have been assembled on the impairment site.

§F901.7.5 Emergency impairments. When unplanned impairments occur, appropriate emergency action shall be taken to minimize potential injury and damage. The impairment coordinator shall implement the steps outlined in §F901.7.4.

§F901.7.6 Restoring systems to service. When impaired equipment is restored to normal working order, the impairment coordinator shall verify that all of the following procedures have been implemented:

1. Necessary inspections and tests have been conducted to verify that affected systems are operational.
2. Supervisors have been advised that protection is restored.
3. The fire department has been advised that protection is restored.
4. The building owner/manager, insurance carrier, alarm company and other involved parties have been advised that protection is restored.
5. The impairment tag has been removed.