	Title:		Ľ	Document No.:	Approved By:
Interior Hea	Fire Protection In	npairment Permit			
	Author:		F	Revision No.:	Date Approved:
Work Order I	lumbor.				
Work Order Number:     Method Statement / Risk       Permit Number:     Assessment Number:					
Section 1 to be completed by the Permit Requester					
		e completed by the Pe	ermit Re		
Permit Requester	Name: Company:   Building: Location Number:				
Intended Work Area	Building:		Locat	ion Number:	
Affected Area(s):					
Cause of Impairment:					
Section 2 to be completed by the Permit Requester					
Type of Equipment Impaired:					
Sprinkler					
Fire pump					
Water Tank					
Water Supply					
Underground Main					
Alarm Panel					
Fire Detection					
Smoke Detection					
Other (Describe)					
Other (Describe)					
Precautions Taken:					
Management Notified					
Insurance Company(s) Notified					
Emergency Response Team / Fire Department Notified					
Additional Fire Rounds (Describe)					
Inside Hoses in Service					
Fire Extinguishers Available and Serviceable					
Hazardous Operations Stopped					
Temporary Water Supply Available					
System to be Restored by the End-of-Shift					
Other (Describe)					
Other (Describe)					
Section 3 to be completed by the Permit Requester and the Permit Authorizer					
Permit Valid From:	Start Date:		Ś	Start Time:	
To:	End Date:		E	End Time:	
Duration:					
	Print Name	Signature		Date	Time
Permit Requester:					
Permit Authorizer:					
Section 4 to be completed by the Permit Requester and the Permit Authorizer					
I am satisfied that this work has been completed satisfactorily and that the area has been left in a safe and clean condition.					
	Print Name	Signature		Date	Time
Permit Requester:					
Permit Authorizer:					