

**Quick Access PrePlan Form**

Business Name \_\_\_\_\_

Building ID # \_\_\_\_\_ Map# \_\_\_\_\_

Business Address \_\_\_\_\_ Suite \_\_\_\_\_

Emergency Contact #1 \_\_\_\_\_ Phone #1 \_\_\_\_\_

Contact #1 Address, City, Zip \_\_\_\_\_ Phone #2 \_\_\_\_\_

Emergency Contact #2 \_\_\_\_\_ Phone #1 \_\_\_\_\_

Contact #2 Address, City, Zip \_\_\_\_\_ Phone #2 \_\_\_\_\_

Fixed Property Use \_\_\_\_\_ 24 Hour Personnel \_\_\_\_\_

Fire Department Elevators \_\_\_\_\_ Number of Stories \_\_\_\_\_ Basement \_\_\_\_\_

Key Box Location \_\_\_\_\_ UBC Bldg Const Type \_\_\_\_\_

Floor Construction \_\_\_\_\_ Wall Construction \_\_\_\_\_

Structural Framework of Roof \_\_\_\_\_ Roof Design \_\_\_\_\_

Roof Covering \_\_\_\_\_

Command Center Location \_\_\_\_\_

Automatic Sprinklers \_\_\_\_\_

FDC Location \_\_\_\_\_

Interior Standpipe Location & Size \_\_\_\_\_

Smoke Removal and/or Control Systems \_\_\_\_\_

Alarm Reset Location \_\_\_\_\_

Gas Shutoff Location \_\_\_\_\_

Electrical Shutoff Location \_\_\_\_\_

Water Shutoff Location \_\_\_\_\_

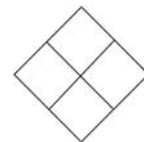
Chemicals in Bldg \_\_\_\_\_

Firefighter Precautions \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Include floor/site plan on reverse side



Station Officer \_\_\_\_\_ Date \_\_\_\_\_ Battalion Chief \_\_\_\_\_ Date \_\_\_\_\_