FIRE MARSHAL'S OFFICE SYSTEM IMPAIRMENT REQUEST FORM

E-MAIL TO: firesystemimpairment@dfwairport.com

REQUESTS ACCEPTED MONDAY-FRIDAY (NORMAL BUSINESS HOURS ONLY)

Minimum of 7-days notice required in advance of impairment

Business Name: Location:					Request Date/Time:	
Fire System Name / Number				Impairment Start Date and Time:		
Requested By:						
Contact Name: Sy				system Type:		
Contact Phone				Reason for Impairment: Commission De-Commission Demo Test Service Maintenance Other		
FIRE/SECURITY SYSTEM IMPAIRMENT ACTIVITY REQUEST						
Start Time	End Time	IMPAIRMENT AREA IMPACTED				
NOTIFICATION GROUP						
NO RESPONSE WITHIN 48 HRS OF NOTICE IMPLIES AGREEMENT						
Agree	Object	Airport Board Stakeholders				
		Asset Management				
		ITS Life Safety				
		Fire Marshal's Office				
		IOC Bridge Managers				
		TACCOM Supervisors				
Yes	No	Approved for Impairment				
Planned Test, Maintenance, Service Details or SIDA Protection: (Completed by Requestor)						
Precautions to Be Taken due to Impairment: (completed by Fire Prevention or Police Project Section and implemented by requestor) Notifications made and approvedHazardous Processes CeasedHot Work ProhibitedSmoking ProhibitedFire Watch RequiredTemporary Fire/SIDA Protection RequestedFire Alarm System DisabledTesting/Service/Maintenance - 11pm to 4amSecurity Systems(CCTV, SIDA, AOA)Elevator/Door#						
Impairment = Test, service or maintain fire suppression, detection, control equipment, security systems (CCTV, SIDA, AOA, Alarms, Access Control, etc.) or any sub-system including elevators / doors that would impede normal performance or function as designed and approved. Please include location and elevator / door number. This includes permanent as well as temporary impairments due to construction or any other activities. There is a 7-day minimum notification period. FIRE PREVENTION / IMPAIRMENT COORDINATOR:						

*IS COORDINATION WITH DPS COMPLETE?