

GOODYEAR AIRPORT

FIRE PROTECTION SYSTEM IMPAIRMENT NOTICE

Notice # _____

Fire Dept. Permit # _____

DATE: _____

IMPAIRMENT DURATION – Date: _____ Time: _____
through Date: _____ Time: _____

LOCATION OF IMPAIRMENT –

Location: _____

Level: _____ Area: _____

List of equipment being impaired:

--

Activity causing the impairment:

--

CONTRACTOR – _____

Representative (*on site*): _____

Phone Number: _____

IMPAIRMENT COORDINATOR –

Name: _____ Contact Number: _____

**Per Phoenix Fire Code Section 901.7.3, the tag shall be posted at each
fire department connection, system control valve, fire alarm control unit,
fire alarm annunciator and fire command center.**