**Route this form to:**

See Distribution Instructions in Section 1.

**U Wide Form:**

**UM1738**

**Rev: 01.10.19**



# Fire Protection Impairment Notice

## **Impairment Definition:**

An impairment is defined as any planned or unplanned shutdown of a fire protection system. This can include a closed sprinkler valve, an obstruction in the city water supply to the building, a non-operating fire pump or controller, an isolated gaseous suppression system, a dry/pre-action valve that won’t trip, etc. Note that the duration of the impairment does not matter – Impairments must be reported any time a system is impaired,

**Instructions:**

## **Complete Sections 1 – 3 before impairment begins. Distribute as indicated in Section 1.**

## **Complete Section 4 upon restoration of system. Forward completed notice** **stlo.custserv@fmglobal.com**

## **1. IMPAIRMENT NOTICE DISTRIBUTIONS**

|  |  |  |  |
| --- | --- | --- | --- |
| **Name** | **Telephone** | **Fax** | **E-mail** |
| **[ ]** FM Global Service Desk | 800-320-6760 | 800-320-6762 | stlo.custserv@fmglobal.com |
| **[ ]** PSECC – Twin Cities Campus | 612-624-7828 |  | jdlessar@umn.educarterr@umn.eduspan0009@umn.edu |
| **[ ]** Building Code Office | 612-625-3318 | 612-625-6667 | wilbu024@umn.edu |
| **[ ]** Local Fire Department – Outstate Campus Locations |  |  |  |

2. FACILITY INFORMATION

|  |  |  |
| --- | --- | --- |
| **Campus Location****[ ]** Minneapolis**[ ]** Rochester | **[ ]** St. Paul **[ ]**  Crookston  | **[ ]** Duluth **[ ]** Morris **[ ]** Other       |
| Building Name:       | Building Number       | College/School/Department:       |

**3. IMPAIRMENT INFORMATION**

|  |  |
| --- | --- |
| Start Date:       Start Time       [ ] AM [ ] PM  | Planned Completion Date:       Planned Completion Time:       [ ] AM [ ] PM |
| Type of Impairment: [ ]  Planned **[ ]** Emergency Equipment Tagged? [ ]  Yes **[ ]** No |
| Area(s) of Impairment:       |
| Reason for Impairment:       |
| Precautions Taken: *[ ]* Continuous Work Authorized *[ ]* Hazardous Operations Ceased [ ]  Fire Department Notified [ ]  Fire Extinguishers/Hoses Available*[ ]* Lockout/Tagout Implemented *[ ]* Hot Work Prohibited*[ ]* Ongoing Patrol of Area *[ ]* Emergency Organization Notified [ ]  Other, specify:        | Type of Equipment Impaired:*[ ]* Sprinkler System *[ ]* Fire Pump [ ]  Fire Water Tank [ ]  Gaseous Protection System *[ ]* Fire Alarm/Detection System *[ ]* Other Fixed Protection System *[ ]* Public Water Supply*[ ]* Smoke Detection[ ]  Other, specify:        |
| Person Responsible for this Impairment:       Phone:       E-mail:       |
| Impairment Coordinator Name:       |

**4. IMPAIRMENT RESTORATION**

|  |  |
| --- | --- |
| System Restored Date:       Time       [ ] AM [ ] PM  | Restoration Notification by:       |
| *[ ]* Alarm System Normal *[ ]* Main Drain Test Conducted – Static Pressure       PSI [ ]  Valve(s) Re-opened, Sealed/Locked and/or Tamper Switch Tested – Residual Pressure       PSI  |
| **After impairment is restored, forward completed notice to stlo.custserv@fmglobal.com** |

The University of Minnesota is an equal opportunity educator & employer.

© 2000 by the Regents of the University of Minnesota.

Page 1 of 1