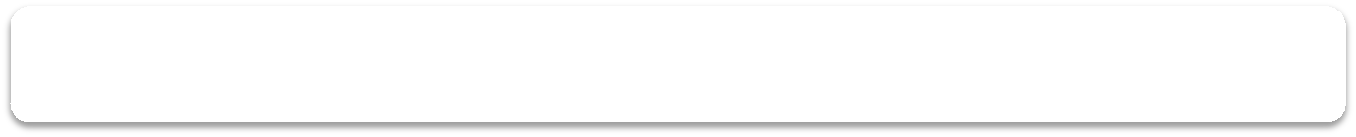
Alert Number: 2014.10.001



08 October 2014



**GIO TMF Coverage Alert**

**Re: Fire Impairment Notices**

**Purpose**

The aim of this Coverage Alert is to make agencies aware of the need for Fire Impairment

Notices, its objective and how to complete.

**Background**

It has been identified there is a requirement to raise the agencies awareness of their responsibilities and the need to ensure the mitigation of increased risk.

**Objectives**

The objective of the fire impairment notice is to:

1. Advise and keep GIO informed of circumstances where the risk to a covered site is increased.

2. Provide GIO with details of the precautions and/or measures taken by the agency to minimise the risk at the covered site due to:

I. The fire security system being impaired for any period, or

II. The carrying out of hazardous activities such as cutting and welding work.

3. Ensure the agency takes full responsibility and to put in place a mitigation strategy to minimise risk in the circumstances where risk is increased.

**Agency Requirements**

1. Complete the Fire Impairment Notice for all impairments to fire security systems, and hazardous activities such as cutting and welding works.

2. All Fire Impairments should be strictly controlled and authorised by Site

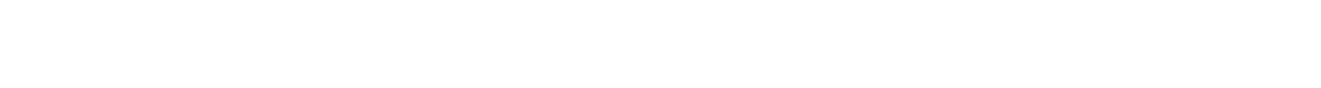
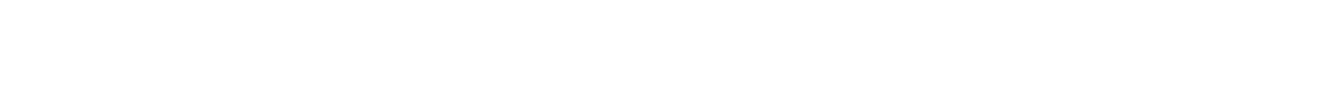
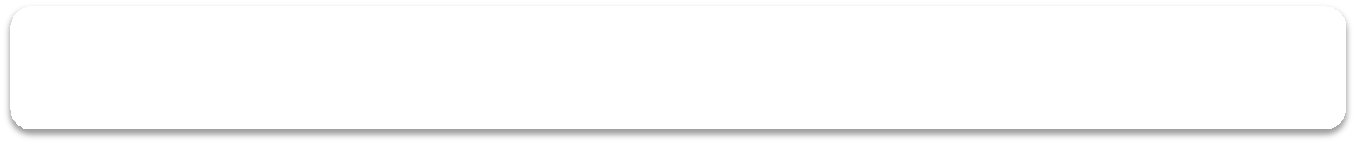
Management.

3. Send the completed Fire Impairment Notice to your Client Services Manager via email.

**Note:** The Fire Impairment Notice document is attached.

**Please contact your GIO Client Services Manager for further information.**

ON BEHALF OF



**FIRE PROTECTION IMPAIRMENT NOTIFICATION**

|  |  |  |
| --- | --- | --- |
| **Email To:** | [insert Client Services Manager’s email address] | **Phone:** [insert CMS’s] |
| **Agency Name:** |  | |
| **Location:** |  | |
| **Impairment From:** | Date: | Time: |
| **Impairment To:** | Date: | Time: |
| **Equipment**  **& Areas**  **Effected:** |  | |
| **Reason for**  **Impairment:** |  | |
| **Precautions Taken: (circle Y or N)** | 1. Fire Brigade Notified Y or N  2. Cutting & Welding work banned Y or N  3. System reinstated overnight Y or N  4. Extra fire extinguishers provided in impairment area Y or N  5. Extra security patrols in impairment area Y or N  6. Area of impairment should be minimised Y or N (I.e. part of floor, or whole floor; not whole of bld.)  7. If sprinkler system is impaired it should be ensured that after the area involved is drained down, the following equipment should be put back on line by the contractor:  a) Diesel and/or Electric pump: Y or N b) Fire Indicator Panel: Y or N c) All valves restored to normal operating condition: Y or N | |
| **TMF Notified:** | Date: | Time: |
| **Notified By:** | Name:  Position: | Signature:  Phone: |
| **SYSTEM RESTORED** | | |
| **System Restored:** | Date: | Time: |
| **TMF Notified By:** | Name:  Position: | Signature:  Phone: |

Page | 2

