

# Fire Protection System Shutdown Form

To		Date	17/04/2019
Attention		Fax	
From		No of Pages	1

**Instructions**

- 24 hours notification of all programmed isolations shall be given in writing to the Fire Service and the Building Owner prior to a sprinkler system being rendered inoperative.
- NZS 4541 & 4515 (Sprinkler Systems), 4512 (fire alarm systems), requires section A and B to be completed and sent to Fire and Emergency New Zealand or their agents prior to a fire sprinkler shutdown. Section B requires OWNERS APPROVAL and for the Owners to notify their insurers if the systems are isolated for more than 12 hours.

**NOTE –**

1. Partially isolated systems – if a section or zone of a fire sprinkler system is isolated, blanked off or left impaired whilst the main system is restored a tag label shall be attached to the main sprinkler stop valve indicating which sections are affected. Building Owners must inform FENZ and their insurers that the system has been partially restored and must inform the Fire Service and their insurers when the isolated sections have been restored.
2. Send completed forms and notifications to the Fire and Emergency New Zealand by email: [fireinfo@fire.org.nz](mailto:fireinfo@fire.org.nz) or by fax 09 309 8223 and to ADT Fire Monitoring [adt.firemon.nz@tycoint.com](mailto:adt.firemon.nz@tycoint.com) or 0800 238 113. For more information please phone 0800 FIRE INFO (0800 347 346) or ADT Fire Monitoring on 0800 238 111.

OWNERS: please sign your approval of this shutdown in Section B of this form and fax to your insurer/broker agent/monitoring company.

FENZ Fax	Date	Building Owner's insurance fax	Date
Monitoring Company	ADT Fire Monitoring	Fax 0800 238 113	Date

**SectionA: Fire System / Site Details**

PFA Number/s			
Site Name			
Address			
Fire System	Sprinkler 4541 <input type="checkbox"/>	Sprinkler Pump <input type="checkbox"/>	Sprinkler 4515 <input type="checkbox"/> Fire Alarm 4512 <input type="checkbox"/>
Area affected			

**Shutdown Details**

Shutdown Date		Shutdown Time		Reinstated Daily	<input type="checkbox"/>
Reinstated Date		Reinstated Time		Continuous Shutdown	<input type="checkbox"/>
Work to be completed during system shutdown	<input type="checkbox"/> Alterations		<input type="checkbox"/> Damage to system	<input type="checkbox"/> Maintenance Work	
	Other				

**Section B: Owners Approval (please sign your approval of this shutdown)**

Name		Date		Time	
Signature		Insurers notified?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	

**Section C: System Reinstated (please sign for the fire system to be reinstated)**

Name		Date		Time	
Signature		Insurers notified?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	

OWNERS: please use this form to notify your **'building insurer's** of all shutdowns, reinstatements and of any sections of a system left isolated. NOTE: if a section or zone of a fire sprinkler system is isolated, blanked off or left impaired whilst the main system is restored, a tag label must be attached to the main sprinkler stop valve indicating which sections are affected.

**OWNER SAFETY PRECAUTIONS FOR FIRE SYSTEM SHUTDOWN**

- Forbid smoking in the area affected by the fire system shutdown
- Stop hazardous processes
- Where sprinklers are installed ensure they are operative
- Ensure all smoke stop doors are closed
- Ensure Alarm Company can re-establish evacuation sounders if required
- Where other systems (lifts, air conditioning etc.) are affected by shutdown, manual controls need to be checked
- Arrange to notify others who may use the building during the period of isolation
- Ensure building occupiers know that they must dial '111' for FIRE
- Detail 'FIRE WARDENS' to patrol affected area (1 person per 1000m<sup>2</sup>)
- No 'HOT WORK' by any parties whilst the fire system is shutdown

NOTE – If your building has smoke detectors be aware that dust, heat and fumes from building work may activate your fire alarm

Service Company Name	Phone	Fax
Any queries, please contact Name	Phone	Mobile