

Appendix B - Fire Watch Notification Form

This form must be completed and sent to all parties listed below whenever a Fire Watch is required as specified in the EH&S Fire Watch Program.

Today's Date: _____ **Facility Name:** _____

Campus Building Number: _____

Floor Number and Room Numbers:

Start Date and Start Time of Fire Watch: _____

Predicted End Date and End Time of Fire Watch: _____

Description of Work Requiring Fire Watch: _____

Name and Title of Person Performing Fire Watch: _____

Name and Title of Person Responsible for Fire Watch Activities: _____

Fax this form to the following numbers:

- Orange County Fire Association (OCFA) (949) 854-8823
- UC Irvine Police Department (UCI PD) (949) 824-8567
- Fire Safety Division (949) 824-8539