

Whippany Fire District No. 2
Bureau of Fire Prevention
440 Route 10
Whippany, NJ 07981
Tel: (973) 887-7340
Fax: (973) 887-4559
www.whippanyfire.com

BUSINESS INFO SHEET

Name of Business:
Address:
Phone #:
Nature of Business:

Fire Alarm Installed Yes _____ No _____
Activated into or Monitored By: _____
Phone #:

OFFICIALS OF THE BUSINESS

(1)
Phone # or Call Out #:
(2)
Phone # or Call Out #

EMERGENCY NOTIFICATION

(1)
Address:
Phone # or Call Out #:
(2)
Address:
Phone # or Call Out #:
(3)
Address:
Phone # or Call Out #:

OWNER OF THE BUILDING

Name:
Address:
Phone # or Call Out #:
Building or Tenant Square Footage:
Number of Exits:

INSURANCE INFO

Type of Insurance:
Insurance Company:
Address: _____
Phone #:
Policy#:
Coverage(\$):

KNOX BOX INFORMATION

Does building have a Knox Box: () yes () no Location of Knox Box: _____ Types of keys: () master () utility closets () sprinkler/alarm room () elevator room () all tenant keys () no tenant keys

BUILDING INFORMATION

Floor construction: () concrete () wood () truss () light weight wood Bearing Walls: () concrete () block () wood () brick () metal () other Ceiling: () plaster () sheet rock () tin () wood () acoustic () metal () other Roof construction: () concrete () Reinf. Concrete () wood () brick () metal () other Heating: () oil () gas () electric () other () hot water () hot air () steam Location: () roof () ground floor () suspended () other _____ Electric: () fuses () circuit breakers Wiring: () good () poor () N/A Location of Main Electric Panel: _____ Location of Gas Main/Shut-off: _____ Location of Water Main/Shut-off: _____

SPRINKLER INFORMATION

Sprinklers: () yes () no () N/A () Full () Basement () Partial () Spray Booth Sprinkler main Location: _____ Fire Pump: () yes () no FD Connection: () yes () no FDC Location: _____	Standpipes: () yes () no () wet () dry FD Connection: () yes () no FDC Location: _____ Hose Stations: () yes () no
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OTHER INFORMATION

Fire Detection System: () Yes () No Alarm Control Location: _____ Emergency Generator: () Yes () No Elevators: () Yes () No Elevator key/Fireman's Key onsite: () Yes () No Attic: () Yes () No Basement: () Yes () No Roof Hatches: () Yes () No Sky Lights: () Yes () No
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