### Obverse

**FIRE PROTECTION EQUIPMENT OUT OF SERVICE**

<table>
<thead>
<tr>
<th>Authorized by (Signature)</th>
<th>Date</th>
</tr>
</thead>
</table>

**Protection system impaired:**

**This valve/device controls:**

**Area protected:**

**Estimated date/time of restoration:**

**Time system taken out of service:**

**Time system restored to service:**

**Time security/alarm company notified:**

**Time fire department notified:**

**Time Axis US Property notified:**

**Check list completed (see reverse of tag):**

- [ ] YES  
- [ ] NO

**Drain test results (for water-based systems):**

<table>
<thead>
<tr>
<th>Static</th>
<th>Residual</th>
</tr>
</thead>
<tbody>
<tr>
<td>psi</td>
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### Reverse

**FIRE PROTECTION EQUIPMENT OUT OF SERVICE**

**Fire Protection Impairment Checklist**

- Inform department heads in building or areas where fire protection is out of service
- Shut down hazardous operations or processes
- Extend smoking restrictions to affected area and 25’ beyond
- Notify fire brigade or shift captains
- Supplement manual fire protection with auxiliary fire extinguishers and/or charged hose lines
- Provide continuous fire watch throughout affected area
- Position individual at closed valve in event of emergency