



PRE-INCIDENT SURVEY

Building Name: _____ Survey #: _____

Street Address: _____

City, State, Zip: _____

Primary Use: _____ Construction Type: _____

Possible Entry: _____

Possible Occupancy: A.M. _____ P.M. _____

Known Handicapped Personnel: _____

NOTIFY IN CASE OF EMERGENCY

Name: _____ Name: _____

Phone: _____ Phone: _____

BUILDING CONSTRUCTION

Roof Type: _____ Floor Construction: _____

Roof Construction: _____

Basement Construction Type: _____ Height of Basement: _____

Number of Stories: _____ Height of Each Story: _____

Building Length: _____ Width: _____ Height: _____

Attic Area: _____ Size: L _____ X W _____ X H _____

UTILITY TYPES

Gas: _____ Type: _____

Gas Shut Off Valve Location: _____

Electric: _____ Phase: _____

Panel Location: _____

Alarm Location: _____



EXPOSURES

North: _____ FT. West: _____ FT. South: _____ FT. East: _____

Type: _____ Type: _____ Type: _____ Type: _____

SUPPRESSION CRITERIA

Needed Fire Flow: _____ Total Water Supply: _____

Fuel Load: _____ Rate of Flow: _____

HYDRANT LOCATIONS

(1) _____ Flow: _____ Unit: _____

(2) _____ Flow: _____ Unit: _____

(3) _____ Flow: _____ Unit: _____

(4) _____ Flow: _____ Unit: _____

OTHER WATER RESOURCES

(1) _____

(2) _____

(3) _____

SPECIAL RESOURCES

(1) _____

(2) _____

(3) _____

MUTUAL AID

(1) _____ Assignment: _____

(2) _____ Assignment: _____

(3) _____ Assignment: _____

STAGING AREA

Primary: _____

Secondary: _____



MISCELLANEOUS INFORMATION

Sprinkler Connection: _____

Standpipe Connection: _____

SKETCH OF PROPERTY

Return Form To:

Havana Volunteer Fire Department
711 N. Main Street
Havana FL 32333
fire@townofhavana.com