



TOWN OF ISLIP – BUREAU OF FIRE PREVENTION

OFFICE OF THE FIRE MARSHAL

Michael Catalano, Chief Fire Marshal

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Fire Protection Systems Notification Worksheet

Today's Date: ____ / ____ / ____

Address of Premises: _____

Name of Business: _____

System Being Serviced: ☐ Fire Alarm ☐ Fire Sprinkler System
☐ Fire Suppression System ☐ Other: _____

Service Start: ____ / ____ / ____ Service End: ____ / ____ / ____
_____ am / pm _____ am / pm

Is the system being taken offline during service?

→ ☐ Yes ☐ No ←

If system is being taken offline, a Fire Watch MUST be posted, as the Fire Department will not respond to automatic fire alarm activations during this time (unless notified by Fire Watch personnel).

Company Performing Service: _____

Technician's Name: _____ Telephone: _____

(This name and telephone number must be for the on-site technician and may be used by the Fire Department for contact)

Reason for service: _____

The following steps must be taken for out-of-service and in-service notifications:

- 1) Notify Central Station of Service
Central Station Company: _____
Phone Number and Contact Person: _____
- 2) Notify Local Fire Department (****Fax This Sheet and Notify Via Phone****)
Fire District: _____ Dispatcher ID #: _____
Fax #: _____ Phone #: _____
- 3) Notify Islip Town Fire Marshals Office (By faxing this sheet to 631-224-5458).

Responsible party (Person completing form):

Name & Title Signature Telephone

Failure to comply with this form and instructions will result in legal action.