

Pre-Plan

Occupancy ID#: _____ MABAS # _____

Occupancy Name: _____

Address: _____ **Apt/Suite #:** _____

_____ **Phone #:** _____

Emerg. Contact #1: Name: _____ Phone #: _____ Pager/Cell#: _____
Emerg. Contact #2: Name: _____ Phone #: _____ Pager/Cell#: _____

OWNERSHIP

Private Township County State Federal

Name: _____ Phone #: _____

WATER SOURCE

Closest Hydrant Location #1: _____ **Size:** _____
Closest Hydrant Location #2: _____ **Size:** _____

SIZE

Length: _____
Width: _____
Area: _____

STORIES

Above Ground: _____
Below Ground: _____

BUILDING STATUS

Under Construction Vacant & Secured
 Occupied Vacant & Unsecured
 Idle; Not Routinely Used

CONSTRUCTION TYPE

Fire Resistive Unprotected Non-Combustible Protected Ordinary Protected Wood Frame
 Heavy Timber Protected Non-Combustible Unprotected Ordinary Unprotected Wood Frame

Walls: _____ **Floors:** _____ **Roof:** _____

ROOF COVERING

Tile (clay, cement, slate, etc.) Wood Shingles (treated / untreated) Built Up
 Composite Shingle (asphalt) Metal No Roof

UTILITIES

Natural Gas
 Electric
 Oil
 Propane

Shut Off Locations

