FIRE WATCH LOG

Fire Watch date

Case number if applicable

Business name

Contact/person conducting Fire Watch

Address

Phone

City

Zip code

Alternate phone

Fire Watch patrol interval: ☐ 30 minutes ☐ 60 minutes ☐ Continuous

Document each fire watch patrol on the log sheet below. In addition, document any significant related events in more detail in the Additional Comments section. Make additional form copies as needed.

Date	Time	AM	PM	Findings
___ ___ / ___ ___	___ ___ / ___ ___			
___ ___ / ___ ___	___ ___ / ___ ___			
___ ___ / ___ ___	___ ___ / ___ ___			
___ ___ / ___ ___	___ ___ / ___ ___			
___ ___ / ___ ___	___ ___ / ___ ___			
___ ___ / ___ ___	___ ___ / ___ ___			
___ ___ / ___ ___	___ ___ / ___ ___			
___ ___ / ___ ___	___ ___ / ___ ___			
___ ___ / ___ ___	___ ___ / ___ ___			
___ ___ / ___ ___	___ ___ / ___ ___			
___ ___ / ___ ___	___ ___ / ___ ___			

Date	Time	AM	PM	Findings
___ ___ / ___ ___	___ ___ / ___ ___			
___ ___ / ___ ___	___ ___ / ___ ___			
___ ___ / ___ ___	___ ___ / ___ ___			
___ ___ / ___ ___	___ ___ / ___ ___			
___ ___ / ___ ___	___ ___ / ___ ___			
___ ___ / ___ ___	___ ___ / ___ ___			
___ ___ / ___ ___	___ ___ / ___ ___			
___ ___ / ___ ___	___ ___ / ___ ___			
___ ___ / ___ ___	___ ___ / ___ ___			
___ ___ / ___ ___	___ ___ / ___ ___			
___ ___ / ___ ___	___ ___ / ___ ___			
___ ___ / ___ ___	___ ___ / ___ ___			

Additional Comments: _____

_____

_____

_____

_____

_____

_____

Signature: _____ Date: _____