



PRE-PLANNING DATA COLLECTION SHEET

# ID		
Name		
Address		
City		
State		
Zip Code		
Site Telephone		
9-1-1 Map		
Fire/EMS Map		
Business Type		
Owner		
Owner Telephone		
Contact		
Contact Telephone		
Inspection Completed		
Inspection Date		
Pre-Plan Completed		
Pre-Plan Date		
Major Roads		
Cross Streets		
Emergency Plan Y/N		
Accountability System Y/N		
Evacuation Area		
Length of Structure		
Width of Structure		
Height of Structure		
Square Footage		
Stories		
Basement Y/N		
Year Built		
Hours Occupied		
# Occupants Day		
# Occupants Night		
# Handicapped Days		
# Handicapped Nights		
Wall Type		
Ceiling Type		
Roof Type		

PRE-PLANNING DATA COLLECTION SHEET		
ID#		
Name		
Municipal Water Y/N		
Private Water Y/N		
Primary Water Source		
Primary Water Distance		
Secondary Water Source		
Secondary Water Distance		
Electric Shutoff Location		
Water Shutoff Location		
Gas/Propane Shutoff Location		
HVAC Shutoff Location		
Access Side "A"		
Access Side "B"		
Access Side "C"		
Access Side "D"		
Sprinklers Y/N		
Alarm Y/N		
Alarm Company		
Alarm Company Telephone		
FDC Location		
Standpipe Location		
Exposures		
Ventilation		
Salvage		
MSDS Location		
Lock Box Location		
Sensitive Documents		
First Due Company		
Second Due Company		
Third Due Company		
Floor Plan Attached Y/N		
Pre-Plan Completed		