



# CLINTON FIRE DEPARTMENT

Fire Marshal's Office

NAME OF BUSINESS: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

DATE: \_\_\_/\_\_\_/\_\_\_ START TIME: \_\_\_\_\_ END TIME: \_\_\_\_\_

NAME OF FIRE WATCH PERSON (print): \_\_\_\_\_

REASON FOR FIRE WATCH: \_\_\_\_\_

AREA(S) AFFECTED: \_\_\_\_\_

TIME	INITIALS	COMMENTS

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