

NIFSAB

Successful Fire Sprinkler Activation Fact Sheet

Please print clearly.			
Date:	Time:		
Name of occupancy/building:			_
Address:			_
	State:		
Brief Description of incident:			_
Quote: (example: "The sprinkler sy	d: Estimated amount of money savestem did a great job. Two heads activated, exp was open for business the same day"-Lt. Sm	ctinguishing and contro	•
	Title:		
Address:			
City:	State:	Zip:	
Telephone:	Fax:		
E-Mail:			

All "Saves" will be posted in the next edition of Fire Sprinkler Times and added to our "Saves" document available on the website and to all municipal and interested officials.