

Eastern Michigan University Fire Watch Log

Whenever a Fire Watch is implemented, this form must be completed by each member of the fire watch. The completed forms are to be maintained by the department initiating the fire watch for a minimum of 3 years. Departments should email a PDF copy of the completed forms to EHS at environmental_health_safety@emich.edu.

Event Title: _____ Date: _____

Building Name: _____

Fire Watch Location Area:

Floor: _____ Room No(s): _____ Area Description: _____

Fire Watch Start Time: _____ Fire Watch End Time: _____

Reason for the fire watch:

- Fire alarm impairment
- Fire suppression impairment
- Hot work
- Smoke detectors deactivated for concert or event
- Other, please describe: _____

Time Frame	Safe Conditions Maintained	Unsafe Condition	Action Taken

Signature of Person Performing Fire Watch: _____

Name of Person Performing Fire Watch: _____

Please Print