



Sprinkler System Impairment

AXA Insurance should be notified at least 48 hours prior to a planned impairment that will render any part of your sprinkler system inoperative for more than eight consecutive hours. In the event of an emergency impairment or discovery of an improperly impaired system, AXA Insurance must be notified as soon as possible.

Please email this completed form to: sprinklersupport.ins@axa-insurance.co.uk

AXA Insurance should be notified immediately on restoration of the system.

URN (see weekly test card)	<input type="text"/>	Postcode	<input type="text"/>
Company name	<input type="text"/>		
Site address	<input type="text"/>		
Impairment location (where possible attach block plan indicating area affected or valve No.):	<input type="text"/>		
Contact name	<input type="text"/>	Job title	<input type="text"/>
Email address	<input type="text"/>	Telephone number	<input type="text"/>

System impaired (check box)	Description of impairment:								
Valve set <input type="checkbox"/>	<input type="text"/>								
Water supply <input type="checkbox"/>									
Sprinkler head <input type="checkbox"/>									
Pipework <input type="checkbox"/>									
Reason for impairment	<input type="text"/>								
Sprinkler contractor	<input type="text"/>								
Impairment start date	<table border="1"> <tr> <td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> </table> Impairment start time <input type="text"/>	D	D	M	M	Y	Y	Y	Y
D	D	M	M	Y	Y	Y	Y		
Impairment end date	<table border="1"> <tr> <td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> </table> Impairment end time <input type="text"/>	D	D	M	M	Y	Y	Y	Y
D	D	M	M	Y	Y	Y	Y		

Precautions taken	Yes	No
Has the local Fire and Rescue Service been notified?	<input type="checkbox"/>	<input type="checkbox"/>
Additional security / fire watch?	<input type="checkbox"/>	<input type="checkbox"/>
Additional firefighting equipment provided?	<input type="checkbox"/>	<input type="checkbox"/>
Managers and supervisors informed?	<input type="checkbox"/>	<input type="checkbox"/>
Hazardous operations and hot work activities suspended?	<input type="checkbox"/>	<input type="checkbox"/>
Will repairs be carried out during normal working hours?	<input type="checkbox"/>	<input type="checkbox"/>
Further details attached?	<input type="checkbox"/>	<input type="checkbox"/>

Restoration notification											
Date:	<table border="1"><tr><td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr></table>	D	D	M	M	Y	Y	Y	Y	Time: <input type="text"/>	Signed: <input type="text"/>
D	D	M	M	Y	Y	Y	Y				
Additional comments	<input type="text"/>										