**OUT OF SERVICE**

**Fire Department**

**DO NOT USE**

|  |  |
| --- | --- |
| **Date** |  |
| **Company/Station** |  |
| **Equipment** |  |
| **Person CompletingForm** |  |
| **Description of Problem** |  |
| **Name of****Officer Notified** |  |

|  |  |
| --- | --- |
| **Date** |  |
| **Company/Station** |  |
| **Equipment** |  |
| **Person CompletingForm** |  |
| **Description of Problem** |  |
| **Name of****Officer Notified** |  |

OUT OF SERVICE

DO NOT USE

INSTRUCTIONS

To place equipment out of service, complete the top and bottom of the reverse side. Then attach the top of this form to the equipment, tear off this bottom section and forward to the Fire Chief

 To The Person Repairing Equipment

PLEASE INDICATE ALL REPAIRS PERFORMED, THE DATE,

AND NAME OF PERSON MAKING REPAIRS