



VENTURA COUNTY FIRE PROTECTION DISTRICT
FIRE PREVENTION BUREAU
165 DURLEY AVENUE
CAMARILLO, CA 93010
www.fire.countyofventura.org
(805) 389-9738 (805) 388-4356 fax

FIRE WATCH APPLICATION

Please fill in the requested information below and fax the to the Fire Prevention Bureau 805-388-4356.
A fire code official will contact you upon receipt and an inspection may be scheduled.

Business name: _____	
Address: _____	Phone: _____
Impairment: (check one) <input type="checkbox"/> Pre-Planned <input type="checkbox"/> Emergency	
Type of system impaired: _____	
Reason for Fire Watch: _____ _____	
Date out of service: _____	Expected date returned to service: _____
Fire watch #1: _____	Fire watch #2: _____
Fire watch #3: _____	Fire watch #4: _____

I certify that I am an authorized representative for the building owner and that I have read and understand all of the requirements for a fire watch as set forth in VCFPD Standard 14.4.5. I understand that failure to comply may result in additional fees and /or fines, which may require a court appearance.

Printed name of applicant

Signature of applicant

Date

Request for release of fire watch upon impaired equipment being restored to normal working condition, fill in the requested information below and fax to the Fire Prevention Bureau 805-388-4356.

Repair contractor: _____	Phone: _____
Date Returned to Service: _____	

OFFICE USE

Station(s) #: _____	Notified out of service: <input type="checkbox"/> Yes	Battalion notified: <input type="checkbox"/> Yes
Approved by: _____	Date approved: _____	
Cleared by: _____	Date cleared: _____	
Station notified returned to service date: <input type="checkbox"/> Yes	Battalion notified return to service: <input type="checkbox"/> Yes	
Case #: _____	-	