

DATE: October 2019  
REVISION: 1  
DOC #: Form 1  
PAGE: 1 of 2

FIRE PLAN PROCEDURE  
FORM 1  
Site Walkover Inspection



Site Name		Date / Time	
Name of Person Undertaking Inspection			

Please refer to FPP-E01 – Site Walkover Inspection

Please identify what machinery / aspects of the site have been inspected, at what time and if any remedial actions carried out (e.g cleaning, maintenance):

*Any evidence of external fire / vandalism, machinery or equipment fault or malfunction must be instantly reported.*

Please illustrate what storage areas / bays have been inspected and at what time:

*Any evidence of self heating / self ignition, external fire / vandalism, machinery or equipment fault or malfunction must be instantly reported.*

Author / Function or Department:	Process Owner / Department: Site Manager
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 PAGE: 2 of 2

FIRE PLAN PROCEDURE  
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Storage / Pile Ref.	Identified Problem
STORAGE AREA 1	
STORAGE AREA 2	
STORAGE AREA 3	
STORAGE AREA 4	
STORAGE AREA 5	
STORAGE AREA 6	
STORAGE AREA 7	
STORAGE AREA 8	
HOLDING BAY A	
HOLDING BAY B	
HOLDING BAY C	
HOLDING BAY D	
HOLDING BAY E	
BIN STORAGE AREA	

Notes / Action required (to address unsatisfactory conditions)

Form reviewed by: (PRINT Name)

Job Title

Author / Function or Department:

Process Owner / Department:  
 Site Manager

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