



St. Petersburg Fire & Rescue Department - Quick Reference Sheet

Business Name: \_\_\_\_\_ Grid: \_\_\_\_\_

Address: \_\_\_\_\_

Building Information: Building Height \_\_\_\_\_ Type Construction \_\_\_\_\_ Roof\_Construction \_\_\_\_\_ HiRise \_\_\_\_\_  
Story \_\_\_\_\_

Type Occupancy: \_\_\_\_\_ Square Footage: \_\_\_\_\_

Life Hazard: Day \_\_\_\_\_ Night \_\_\_\_\_ Phone \_\_\_\_\_

Hydrant Locaton: \_\_\_\_\_ Distance: \_\_\_\_\_ Private: \_\_\_\_\_  
2nd. \_\_\_\_\_ Distance: \_\_\_\_\_ Private: \_\_\_\_\_  
3rd. \_\_\_\_\_ Distance: \_\_\_\_\_ Private: \_\_\_\_\_

Lock Box: \_\_\_\_\_ Knox \_\_\_\_\_ Location: \_\_\_\_\_

Access: Primary: \_\_\_\_\_ Secondary: \_\_\_\_\_

Special Hazards:

Sprinkler System: \_\_\_\_\_ Hook Up Location & Size: \_\_\_\_\_ Shut Off Location \_\_\_\_\_

Standpipe: \_\_\_\_\_ Hook Up Location & Size: \_\_\_\_\_ Shut Off Location \_\_\_\_\_  
IntSize: \_\_\_\_\_

Stairwells: Location: \_\_\_\_\_

Elevators: Location: \_\_\_\_\_ Number of Cars: \_\_\_\_\_

Shut Off: \_\_\_\_\_ Service Phone: \_\_\_\_\_

Annunciator: Location: \_\_\_\_\_ Company: \_\_\_\_\_

Security Guard: \_\_\_\_\_ Station: \_\_\_\_\_

Electric: Shut Off: \_\_\_\_\_

Gas: \_\_\_\_\_ Gas Shut Off: \_\_\_\_\_

Water: Shut Off: \_\_\_\_\_

Contact Information: 1. \_\_\_\_\_ Phone: \_\_\_\_\_  
2. \_\_\_\_\_ Phone: \_\_\_\_\_  
Date: \_\_\_\_\_ Officer: \_\_\_\_\_ Approved By: \_\_\_\_\_

