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# Work Docket

*2023-05-06 19:16:20*

--------------------------------------------

jjj

|  |  |  |  |
| --- | --- | --- | --- |
| **Client Code:** |  | **Site Address:** |  |
| **Client Name:** |  |  |  |
| **Address:** |  |  |  |
| **ServiceCode:** |  |  |  |
| **PO Number:** |  |  |  |

|  |  |
| --- | --- |
| Issue | Resolution |
|  | . |

|  |  |  |  |
| --- | --- | --- | --- |
| Name | Started Travel | Arrival Time | Departure Time |
|  |  |  |  |

|  |  |  |
| --- | --- | --- |
| Quotation Required: |  |  |

|  |  |
| --- | --- |
| Labour Hours: | h |
| Travel Hours: | h |

|  |  |
| --- | --- |
| Total Office Hours: | h |
| Total Evening Hours: | h |
| Total Night And Weekend Hours: | h |
| Total Hours: | h |

# Procedure Plan - Extinguisher Service

|  |  |  |  |
| --- | --- | --- | --- |
| **Contract:** |  | **Client:** |  |
| **Plant Item:** |  | **Location:** |  |
| **Serving:** |  | **Model No:** |  |
|  |  | **Serial No:** |  |

|  |  |
| --- | --- |
| All Extinguishers Serviced to IS291-2015 | Yes/No |
| All Extinguisher Cylinders inspected and weighted | Yes/No |
| All Extinguisher handles and pins checked | Yes/No |
| All Extinguisher gauges serviced, pressurised | Yes/No |
| All safety tags replaced | Yes/No |
| All service labels legible and updated | Yes/No |
| All Extinguisher safety signs as per standard | Yes/No |
| Issue Certificate | Yes/No |
| All Extinguisher location sheets checked | Yes/No |
| All Extinguisher quantities verified | Yes/No |
| All immediate issues reported to site contact | Yes/No |
| Quantities of Extinguishers on site |  |
| Quantity of Hose Reels on Site | Yes/No |
| Fire and General Register Updated? | Yes/No |
| Fire Alarm Service Provider? |  |
| Comment |  |

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**Certificate**

**Fire Extinguisher Service Certificate**

**Certificate Number: 2307-1 Rees FireLtd**

**19 Richards Avenue**

**Romford**

**Essex**

**RM7(ES**

Name of protected premises or owner:

Address of Protected premises:

This is to certify that the fire extinguishers at the above premises have been serviced and comply with IS291 (2015)

Comments

Signature of Authorised person responsible for servicing of the system

Name: Position:

Signed Date:

Telephone number: