Kitsap County Fire Marshals Office
619 Division Street
Port Orchard, WA 98366

FIRE WATCH LOG

(Please Print)

Business name: _____

Address: _____

Fire watch name: _____ **Date**: _____

I have read the instructions about conducting this Fire Watch and understand that I am responsible to follow those instructions and patrol my designated area at least once each half hour. Maintain this log on site so that it is accessible to Fire Marshal representatives.

Signature: _____

Date	Time	Area Patrolled