



## VISICAD SYSTEM PROPERTY & RESPONSE INFORMATION FORM

Fire Department \_\_\_\_\_

### Pre-Plans

Property Address \_\_\_\_\_ (not required if multiple files)

Building Name \_\_\_\_\_ (not required if multiple files)

Check off if submitting multiple files

Please use PDF files (under 300 Kb)

### Caution Notes (Critical Response Information)

Property Address \_\_\_\_\_

Building Name \_\_\_\_\_

Select one of the following:

- |   |  |
|---|--|
| Automatic Aid <input type="checkbox"/>            | Scene Safety <input type="checkbox"/>          |
| Automatic Aid & Pre-plan <input type="checkbox"/> | Universal Precautions <input type="checkbox"/> |
| Response Information <input type="checkbox"/>     | Police to Attend <input type="checkbox"/>      |
| Access / Codes / Keys <input type="checkbox"/>    | Wait for Police <input type="checkbox"/>       |
| Non-Hydranted Area <input type="checkbox"/>       |  |

Description of: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Start Date \_\_\_\_\_ dd/mm/yyyy

End Date \_\_\_\_\_ dd/mm/yyyy

Never Expire

Print Name \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_ dd/mm/yyyy

Completed forms to be faxed to 250-286-4701 or files emailed to [firedispatch@ni911.ca](mailto:firedispatch@ni911.ca)