CAL FIRE SINGE 100

Fire Marshal's Office

Coastside Fire Protection District

Date: Dec. 21, 2011

Revised: May 7, 2019

Number: *FPE-007 A*

1191 Main Street, Half Moon Bay, CA 94019 (650) 726-5213

Title: False Alarm Response Report	Approved: Gary Silva
Business Name:	Date/Time: / / am/pm
Address:	Issuing Fire Officer:
City/Zip:	Notes:
Responding Apparatus:	
	aforementioned property owner/representative that the een determined by the Fire District as inoperative or shall be repaired or replaced immediately. Fire Sprinkler System is Inoperative/Defective
Water Flow Alarm Will Not Reset	Manual Pull Station is Inoperative/Defective
Trouble Notification	Auto.Suppression System is Inoperative/Defective
	II
Smoke Detectors Are Inoperative/Defective	
Smoke Detectors Are Inoperative/Defective Other: Immediately notify your fire alarm company of the atwo hours (i.e.: "runner service"). ORDER TO COMPLY: You are hereby advised comply with this order places the owfrom property loss, injury, or death address listed above. Further, monetate 2016-01 can and will be instituted by	
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- (1) No Fee shall be assessed for the first two (2) False Fire Alarms at the same Premises responded to by the fire department during each calendar year. Thereafter, the Owner shall pay the cost recovery Fees for False Fire Alarms.
- (2) The activation of a Fire Alarm System will not be considered a False Fire Alarm if the alarm is activated due to malicious causes beyond the control of the Owner.