



AXA XL Risk Consulting IMPAIRMENT NOTIFICATION

AXA XL Risk Consulting
Asia Pacific/Australia
RSVP Program
E-MAIL NOTIFICATION ONLY

E-mail: **RSVP_APAC@axaxl.com**

*Required

*CUSTOMER:	AXA XL IMPAIRMENT #:
*LOCATION: (Address, city, country)	ACCOUNT #:
*REPORTER: (Name/Title)	LOCATION ID #:
*E-MAIL:	PHONE NO:

DETAILS OF THE IMPAIRMENT *(48 hours advance notice if possible)*

*TYPE:	*IMPAIRMENT CLASS:
*REASON FOR SHUTDOWN:	
*DESCRIBE (System ID, Building Area):	
*Start Date: (DD/MM/YYYY)	Start Time: (HH:mm)
*Estimated Restoration Date: (DD/MM/YYYY)	Estimated Restoration Time: (HH:mm)

MAJOR IMPAIRMENTS *(if any of the following apply, check box)*

- | | |
|---|--|
| ☐ <u>More than one</u> sprinkler system is shutdown. | ☐ Duration expected to be more than <u>24 hours</u> . |
| ☐ <u>Entire water supply</u> is shutdown (affecting sprinklers and/or fire hydrant supply) | |
| ☐ Hot work required <u>inside impaired area</u> (not recommended). | |

PRECAUTIONS TAKEN:

- | | |
|---|---|
| ☐ Use AXA XL Shutoff Tags | ☐ Discontinue Welding, Cutting, Hot Work |
| ☐ Notify Department Head | ☐ Discontinue Smoking |
| ☐ Cease Hazardous Operations | ☐ Notify Fire Department |
| ☐ Charged Hose Lines and Extinguishers | ☐ Watchman Surveillance |
| ☐ Notify Alarm Company | ☐ Notify Site Emergency Response/Fire Team |
| ☐ Work to be Continuous | ☐ Pipe Plugs/Caps/Etc. available |
| ☐ Emergency Connection Planned | |
| ☐ Other (Explain) _____ | |

Upon receipt of this form AXA XL Risk Consulting will acknowledge via reply e-mail and advise our additional recommendations (if any), for MAJOR Impairments.

RESTORATION OF IMPAIRMENT: *(complete this section and e-mail when impairment is restored.)*

Restoration Date:	Restoration Time:
(DD/MM/YYYY)	(HH:mm)