



Office of Training
and Certification

New Jersey Division of Fire Safety

BASIC PRACTICAL SKILLS EXAMINATION REPORT

Skill sheet #

FO1-11

Certification title

Fire Officer 1
INSPECTION AND INVESTIGATION
DEVELOP PREPLAN

Applicant Information

Candidate name

DFS ID #

Course #

Evaluation

Standard:
NFPA 1021 2020 Edition
4.5.2

Task

Identify construction, alarm, detection, and suppression features that contribute to or prevent the spread of fire, heat, and smoke throughout the building or from one building to another, so that a pre-incident plan is developed.

Conditions and Outcome

Given policies and procedures, forms/reports, preplan document, and notepad or computer, and one of the following occupancies:

- (1) Public assembly
- (2) Educational
- (3) Institutional
- (4) Residential
- (5) Business
- (6) Industrial
- (7) Manufacturing
- (8) Storage
- (9) Mercantile
- 10) Special properties

The Candidate will complete all elements of the assigned task, in accordance with policies, procedures and practices. Include candidate's narrative on task completion, forms, photos/drawings etc.

The candidate will complete this task with a minimum of 5 items answered correctly

| Number | Task Steps | First Test | | Retest #1 | | Retest #2 | |
|--|--|------------|------|-----------|------|-----------|------|
| | | Pass | Fail | Pass | Fail | Pass | Fail |
| 1 | Initiate initial contract with courtesy and professionalism. | | | | | | |
| 2 | Obtain cooperation by emphasizing the reasoning behind the pre-incident plan. | | | | | | |
| 3 | Exhibit professional appearance and demeanor for the site visit. | | | | | | |
| 4 | Include all elements of the fire pre-incident plan report according to policy, to include site specific hazards, hazardous materials, forms, and drawings. | | | | | | |
| 5 | Produce a completed fire pre-incident plan document using the appropriate forms and reports. | | | | | | |
| 6 | Communicate effectively using both verbal and written methods | | | | | | |
| Final Test Result for Entire Task | | | | | | | |

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| Evaluator signature & comments, Test #1 | | Evaluator signature & comments, Retest #1 | | Evaluator signature & comments, Retest #2 | |
|--|------|--|------|--|------|
| | | | | | |
| Evaluator signature | Date | Evaluator signature | Date | Evaluator signature | Date |
| Candidate signature & acknowledgement, Test #1 | | Candidate signature & acknowledgement, Retest #1 | | Candidate signature & acknowledgement, Retest #2 | |
| By my signature below I acknowledge I have read and understood the evaluation results and evaluator comments | | By my signature below I acknowledge I have read and understood the evaluation results and evaluator comments | | By my signature below I acknowledge I have read and understood the evaluation results and evaluator comments | |
| Candidate signature | Date | Candidate signature | Date | Candidate signature | Date |

Form DFS-SS-1 04/2021

Approved by NJ SME Committee 04/23/2021.