



Office of the State Fire Marshal

800 S.W. Jackson, Suite 104

Topeka KS 66612

Phone- 785-296-3401 Fax- 785-296-0151

Facility Name	Year(s) of drills
Address	Responsible Party Name & Title
City, State, Zip	Facility/License #
Phone	Fax

FIRE DRILL RECORD

MONTH	DATE OF DRILL	TIME OF DAY	TIME FOR EVACUATION	NUMBERS OF OCCUPANTS	RESPONSIBLE PARTY NAME
January					
February					
March					
April					
May					
June					
July					
August					
September					
October					
November					
December					

POST IN CONSPICUOUS LOCATION

When ALL REQUIRED DRILLS have been conducted, maintain the original or copy of the drill record IN YOUR FILES ONLY for a period not less than 5 years for future reference and verification by the Office of the State Fire Marshal.