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| tfs logo_no text | **TASMANIA FIRE SERVICE – FORM 6.8**  **Notification of Defect** |

Site Name:

Site Address

TFS Alarm Number:

Name of Responsible Person (e.g. Building owner, Building manager):

Contact Number:

Description of Issue:

Severity: Critical Defect  Non-Critical Defect  Non-Conformance

Date first reported in Logbook: Click here to enter a date.

Logbook Entry Number:

Subsequently Reported: Click here to enter a date.

Logbook Entry Number:

Evidence of attempts to contact responsible person: (e.g. reports, quotes etc) – attach copies

Date submitted to TFS: Click here to enter a date.

Service Provider:

Permit Number:

Contact Name:

Company:

Phone: Email:

**Note: Once completed return to** [**fire@fire.tas.gov.au**](mailto:fire@fire.tas.gov.au) **or Tasmania Fire Service, GPO Box 308, Hobart 7001**