

Cairns® Fire Helmet Tracking Form



Helmet issued to: _____

Date issued: _____

Condition when issued: _____

Helmet Model

- | | | |
|---|--|--|
| <input type="checkbox"/> Houston N6A® Helmet | <input type="checkbox"/> 660C Metro® Helmet | <input type="checkbox"/> Structural 360S® Helmet |
| <input type="checkbox"/> New Yorker N5A® Helmet | <input type="checkbox"/> Invader 664® Helmet | <input type="checkbox"/> Rescue 360R-13 Helmet |
| <input type="checkbox"/> Cairns 1010 Helmet | <input type="checkbox"/> Commando HP3® Helmet | <input type="checkbox"/> Rescue 360R Helmet |
| <input type="checkbox"/> Cairns 1044 Helmet | <input type="checkbox"/> 880 Tradition® Helmet | Other _____ |

Helmet serial number: _____

Manufactured on: _____

Month: _____

Year: _____

Date retired: _____

Date disposed of: _____

Disposal method: _____

Cairns® Fire Helmet Tracking Form

Advanced Inspection



Date	Performed by	Reason
Findings		
Date	Performed by	Reason
Findings		
Date	Performed by	Reason
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Findings		

Cairns® Fire Helmet Tracking Form

Advanced Cleaning



Date	Performed by	Reason
Findings		
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Findings		
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Findings		
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Cairns® Fire Helmet Tracking Form

Repairs



Date	Performed by	Reason
Findings		
Date	Performed by	Reason
Findings		
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Findings		
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