

Fire Protection Monthly Inspection & Test Report

Inspected by: _____

Date: _____

Test Performed	Comments / Deficiencies
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- | | | |
|---|--------------------------|--|
| Means of Egress are unobstructed | <input type="checkbox"/> | |
|---|--------------------------|--|
- | | | |
|-----------------------------------|--------------------------|--|
| Fire doors close and latch | <input type="checkbox"/> | |
|-----------------------------------|--------------------------|--|
- | | | |
|--|--------------------------|--|
| Building checked for fire hazards | <input type="checkbox"/> | |
|--|--------------------------|--|
- | | | |
|--|--------------------------|--|
| Building fire extinguishers checked | <input type="checkbox"/> | |
|--|--------------------------|--|
- | | | |
|--------------------------------|--------------------------|--|
| Emergency lights tested | <input type="checkbox"/> | |
|--------------------------------|--------------------------|--|
- | | | |
|--------------------------------|--------------------------|--|
| Exit lights illuminated | <input type="checkbox"/> | |
|--------------------------------|--------------------------|--|
- | | | |
|---------------------------------------|--------------------------|--|
| Fire Sprinkler valves are open | <input type="checkbox"/> | |
|---------------------------------------|--------------------------|--|
- | | | |
|--|--------------------------|--|
| Fire Sprinkler Pressure checked | <input type="checkbox"/> | |
|--|--------------------------|--|
- | | | |
|-----------------------------------|--------------------------|--|
| Fire alarm panel on/normal | <input type="checkbox"/> | |
|-----------------------------------|--------------------------|--|
- | | | |
|--------------------------------------|--------------------------|--|
| Kitchen exhaust filters clean | <input type="checkbox"/> | |
|--------------------------------------|--------------------------|--|

Review of records to ensure inspections by qualified contractors have been performed.

- | | | |
|--|--------------------------|--|
| Emergency Generator inspected within past 12 months | <input type="checkbox"/> | |
|--|--------------------------|--|
- | | | |
|--|--------------------------|--|
| Fire Alarm System inspected within past 12 months | <input type="checkbox"/> | |
|--|--------------------------|--|
- | | | |
|--|--------------------------|--|
| Fire Sprinkler System inspected within past 12 months | <input type="checkbox"/> | |
|--|--------------------------|--|
- | | | |
|---|--------------------------|--|
| Kitchen suppression inspected within past 6 months | <input type="checkbox"/> | |
|---|--------------------------|--|
- | | | |
|---|--------------------------|--|
| Kitchen exhaust inspected within date shown on tag | <input type="checkbox"/> | |
|---|--------------------------|--|

Complete a new form each month. This record must be kept on site for 2 years.