**FIRE EXTINGUISHER INSPECTION CHECKLIST**

|  |  |
| --- | --- |
| Date |  |
| Type, Model, Serial # |  |
| Extinguisher Location |  |
| Inspector Name |  |

**OK** = Good Condition

**NR** = Needs Repair or Item Needs Review by a Supervisor

**NA** = Not Applicable to This Particular Fire Extinguisher

**OK** **NR** **NA**

|  |  |
| --- | --- |
| **Location** | **Availability** |
| *In the correct, designated location, hasn’t been moved* |
|  |
|  |
| **Visibility** |
| *Mounted in a highly visible location or stored in an easy to locate area* |
|  |
|  |
| **Convenience** |
| *Easy to reach in the event of an emergency* |
|  |
|  |
| **Accessibility** |
| *Path to fire extinguisher is not blocked or obstructed* |
|  |
|  |
| **Storage** |
| *Unit, cabinet, or location is intact and not damaged* |
|  |  |
|  |  |
| **Visual Checks** | **Pressure Gauge** |
| *Indicator is in the green operating range* |
|  |
|  |
| **Pull Pin and Tamper Seal** |
| *Intact and not broken or missing* |
|  |
|  |
| **Label** |
| *Attached, readable, facing outwards* |
|  |
|  |
| **Inspection Tag** |
| *Attached, indicates last annual inspection within previous 12 months* |
|  |
|  |
| **Tank** |
| *No signs of corrosion, dents or leakage and dust/clean off if dirty* |
|  |
|  |
| **Hose and Nozzle** |
| *No cracks or other damage, not clogged by insects or debris* |
|  |  |



*This checklist is intended for a monthly visual check only.*

*Required annual inspections to be completed by a licensed fire extinguisher maintenance professional.*

**12-MONTH FIRE EXTINGUISHER INSPECTION CHECKLIST**

DEC

NOV

OCT

SEP

AUG

JUL

JUN

MAY

APR

JAN

MAR

FEB

|  |  |
| --- | --- |
| Type, Model, Serial # |  |
| Extinguisher Location |  |
| Inspector Name |  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Location** | **Availability**  *In the correct, designated location, hasn’t been moved* |  |  |  |  |  |  |  |  |  |  |  |  |
| **Visibility**  *Mounted in a highly visible location or stored in an easy to locate area* |  |  |  |  |  |  |  |  |  |  |  |  |
| **Convenience**  *Easy to reach in the event of an emergency* |  |  |  |  |  |  |  |  |  |  |  |  |
| **Accessibility**  *Path to fire extinguisher is not blocked or obstructed* |  |  |  |  |  |  |  |  |  |  |  |  |
| **Storage**  *Unit, cabinet, or location is intact and not damaged* |  |  |  |  |  |  |  |  |  |  |  |  |
| **Visual Checks** | **Pressure Gauge**  *Indicator is in the green operating range* |  |  |  |  |  |  |  |  |  |  |  |  |
| **Pull Pin and Tamper Seal**  *Intact and not broken or missing* |  |  |  |  |  |  |  |  |  |  |  |  |
| **Label**  *Attached, readable, facing outwards* |  |  |  |  |  |  |  |  |  |  |  |  |
| **Inspection Tag**  *Attached, indicates last annual inspection within previous 12 months* |  |  |  |  |  |  |  |  |  |  |  |  |
| **Tank**  *No signs of corrosion, dents or leakage and dust/clean off if dirty* |  |  |  |  |  |  |  |  |  |  |  |  |
| **Hose and Nozzle**  *No cracks or other damage, not clogged by insects or debris* |  |  |  |  |  |  |  |  |  |  |  |  |



*This checklist is intended for a monthly visual check only. Required annual inspections to be completed by a licensed fire extinguisher maintenance professional.*