

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



*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

Type, Model, Serial #	
Extinguisher Location	
Inspector Name	

JAN FEB MAR APR MAY JUN JUL AUG SEP OCT NOV DEC

Location	Availability <i>In the correct, designated location, hasn't been moved</i>												
	Visibility <i>Mounted in a highly visible location or stored in an easy to locate area</i>												
	Convenience <i>Easy to reach in the event of an emergency</i>												
	Accessibility <i>Path to fire extinguisher is not blocked or obstructed</i>												
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Visual Checks	Pressure Gauge <i>Indicator is in the green operating range</i>												
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