



Your Firm Info
 1 Address St., State, City, Zip
 Phone (222) 333-4444
 Email: email-address.com

FIRE EXTINGUISHER INSPECTION RECORD

Facility: _____

Location:

1. Located in Designated Place,
2. No Obstruction to Access,
3. Label Faces Outward, Visible & Legible,
4. Safety Pin In Place,
5. Tamper Tag in Place,
6. Gauge in Safe Zone,
7. Lift unit & confirm if it "Feels" Full,
8. Any Physical Damage;

If all OKay, Write on Tag the Date & Initial;

If not, Correct or Replace Extinguisher

Date of Last Annual Maint. _____

Who Maintained _____

INSPECT DATE INITIALS, if all OK

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