

FIRE PROTECTION • NFPA 10, CHAPTER 7

**Fire Extinguisher Monthly Inspection Log**

Inspect when placed in service and at intervals not exceeding 31 days. One sheet per extinguisher per calendar year.

INSPECTION COMPANY

LICENSE # / PHONE

EXTINGUISHER ID / TAG #

YEAR

SHEET #

**A Extinguisher & location**

Fill once per year. Carry forward from last year's sheet.

|                                                                                                                                                                                                                                               |                     |                              |                   |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------|------------------------------|-------------------|
| BUILDING / FACILITY                                                                                                                                                                                                                           |                     | SERVICE ADDRESS              |                   |
| FLOOR / AREA                                                                                                                                                                                                                                  | MOUNT TYPE          | EXACT LOCATION               |                   |
| MANUFACTURER                                                                                                                                                                                                                                  | MODEL               | CYLINDER SERIAL #            | MFG. DATE (SHELL) |
| AGENT TYPE<br><input type="checkbox"/> ABC dry chem <input type="checkbox"/> BC dry chem <input type="checkbox"/> CO <sub>2</sub> <input type="checkbox"/> Water / mist <input type="checkbox"/> Class K <input type="checkbox"/> Clean agent |                     |                              |                   |
| UL RATING                                                                                                                                                                                                                                     | CAPACITY (LB / GAL) | LAST ANNUAL MAINT.           | LAST 6-YR MAINT.  |
| LAST HYDRO TEST                                                                                                                                                                                                                               | NEXT HYDRO DUE      | OWNER / SITE CONTACT & PHONE |                   |

CHECK KEY: MARK EACH BOX ✓ PASS, ✗ FAIL (ENTER CODE), OR N/A

- |                                      |                                           |
|--------------------------------------|-------------------------------------------|
| <b>1</b> In designated place         | <b>2</b> Visible, path unobstructed       |
| <b>3</b> Mounted secure, sign posted | <b>4</b> Gauge in operable range          |
| <b>5</b> Full by weight or heft      | <b>6</b> Pull pin & tamper seal intact    |
| <b>7</b> Hose / horn / nozzle OK     | <b>8</b> No damage, corrosion, leaks      |
| <b>9</b> Label legible, facing out   | <b>10</b> Tag current, maint. not overdue |

**B Monthly inspection record**

✓ pass ✗ fail N/A not applicable

|       |      | INSPECTION CHECKS |            |            |            |           |          |           |            |            |           | IF ANY ✗ |       |       |
|-------|------|-------------------|------------|------------|------------|-----------|----------|-----------|------------|------------|-----------|----------|-------|-------|
| Month | Date | 1<br>Place        | 2<br>Clear | 3<br>Mount | 4<br>Gauge | 5<br>Full | 6<br>Pin | 7<br>Hose | 8<br>Cond. | 9<br>Label | 10<br>Tag | Code     | Fixed | Init. |
| JAN   |      |                   |            |            |            |           |          |           |            |            |           |          |       |       |
| FEB   |      |                   |            |            |            |           |          |           |            |            |           |          |       |       |
| MAR   |      |                   |            |            |            |           |          |           |            |            |           |          |       |       |
| APR   |      |                   |            |            |            |           |          |           |            |            |           |          |       |       |
| MAY   |      |                   |            |            |            |           |          |           |            |            |           |          |       |       |
| JUN   |      |                   |            |            |            |           |          |           |            |            |           |          |       |       |
| JUL   |      |                   |            |            |            |           |          |           |            |            |           |          |       |       |
| AUG   |      |                   |            |            |            |           |          |           |            |            |           |          |       |       |
| SEP   |      |                   |            |            |            |           |          |           |            |            |           |          |       |       |
| OCT   |      |                   |            |            |            |           |          |           |            |            |           |          |       |       |
| NOV   |      |                   |            |            |            |           |          |           |            |            |           |          |       |       |
| DEC   |      |                   |            |            |            |           |          |           |            |            |           |          |       |       |

**C Deficiencies & corrective action**

| Month | Code | What was found | Action taken | Date fixed | By |
|-------|------|----------------|--------------|------------|----|
|       |      |                |              |            |    |
|       |      |                |              |            |    |
|       |      |                |              |            |    |

## DEFICIENCY CODES

- |                               |                              |                               |                               |                             |
|-------------------------------|------------------------------|-------------------------------|-------------------------------|-----------------------------|
| <b>B</b> Blocked / obstructed | <b>P</b> Pin or seal missing | <b>L</b> Wrong location       | <b>H</b> Hose / nozzle defect | <b>G</b> Gauge out of range |
| <b>W</b> Low weight           | <b>D</b> Damage / corrosion  | <b>T</b> Tag or label missing | <b>S</b> Signage missing      | <b>O</b> Other (describe)   |

|                     |      |                                |      |
|---------------------|------|--------------------------------|------|
| INSPECTOR SIGNATURE |      | OWNER REPRESENTATIVE SIGNATURE |      |
| PRINT NAME          | DATE | PRINT NAME                     | DATE |

Keep this record at least 12 months, or longer if your AHJ requires. Annual maintenance, 6-year maintenance, and hydrostatic testing are performed by a certified person and recorded on the service tag. Requirements vary by edition and jurisdiction; verify with your AHJ. This form is a starting point and does not replace the standard.