

The monthly round the AHJ and the insurer will ask you to prove.

13 items in 4 areas. Tick one rating per item; write what you see, and number any photo you take next to the item it belongs to.

PROPERTY _____ INSPECTED BY _____ DATE _____

Scale: ☐ Good ☐ Fair ☐ Poor ☐ N/A · Fair and Poor items become work orders in the app

EXTINGUISHERS

Charged, tagged & accessible _____ ☐ Good ☐ Fair ☐ Poor ☐ N/A

Monthly inspection initialed on tag _____ ☐ Good ☐ Fair ☐ Poor ☐ N/A

EGRESS

Exit signs illuminated _____ ☐ Good ☐ Fair ☐ Poor ☐ N/A

Emergency lights — test button _____ ☐ Good ☐ Fair ☐ Poor ☐ N/A

Exit doors, hardware & no obstructions _____ ☐ Good ☐ Fair ☐ Poor ☐ N/A

Stairwells clear, railings & doors closing _____ ☐ Good ☐ Fair ☐ Poor ☐ N/A

ALARM & SUPPRESSION

Panel normal — no troubles or supervisories _____ ☐ Good ☐ Fair ☐ Poor ☐ N/A

Pull stations & horn/strobes unobstructed _____ ☐ Good ☐ Fair ☐ Poor ☐ N/A

Sprinkler control valves open & tagged _____ ☐ Good ☐ Fair ☐ Poor ☐ N/A

Riser room & FDC accessible _____ ☐ Good ☐ Fair ☐ Poor ☐ N/A

STORAGE

Flammables in cabinets _____ ☐ Good ☐ Fair ☐ Poor ☐ N/A

Electrical rooms clear (36 in.) _____ ☐ Good ☐ Fair ☐ Poor ☐ N/A

Nothing within 18 in. of sprinkler heads _____ ☐ Good ☐ Fair ☐ Poor ☐ N/A

SUMMARY AND ACTION ITEMS

SIGNATURES

Inspector

Resident / client

Date