



FIRE & LIFE SAFETY INSPECTION

Building Name [] Date []
Building Address (if assigned) [] Suite [] Business Phone []
Building Manager [] Dept. Safety Officer []
Office Phone [] Emergency Phone [] Email []

MEASURES SHALL BE TAKEN TO CORRECT ALL DEFICIENCIES LISTED HEREIN

Table with columns: VIOLATED, CORRECTED, Item Description, 2013 California Fire Code, Work Order Initiated By Maintenance. Includes sections: ACCESS, EXITS, FIRE EXTINGUISHERS, ELECTRICAL, FIRE PROTECTION SYSTEMS, GENERAL SAFETY, FLAMMABLE LIQUIDS.

OTHER [] []

Additional comments and/or requirements: []

Print Name/Title: [] Bldg. Manager/Dept. Safety Officer Signature: []

Inspector: [] Date Compliance Gained: []

Re-inspection # 1/Corrections due by: [] Re-inspection # 2 due by: []