## Carnegie Mellon

## Office of the General Counsel Environmental Health and

NAME AND ADDRESS OF

## FIRESAFETY INSPECTION FORM FOR RESIDENCE BUILDINGS

BUILDING OR ORGANIZATION:				
IN	SPECTED BY: DATE	PAGE	OF	
SE	CTION I: HOUSEKEEPING			
a)	Are premises clean and free of loose trash and debris? Are trash accumulations removed daily?	Yes	No	
b)	Are kitchen areas clean and free of greasy residue?	Yes	No	
c)	Are premises free of animals (pets) ? If not, include:	Yes	No	
	Owner's name Type of animal			
SE	CTION II: STORAGE			
a)	Is building free of stored combustible/flammable liquids?	Yes	No	
b)	If not, are quantities small, in closed containers, and kept away from all potential ignition sources?	Yes	No	
c)	Is building free of excessive solid combustible storage?	Yes	No	
d)	Are stairways or stairway closets free of stored combustibles?	Yes	No	
SE	CTION III: FIRE PROTECTION EQUIPMENT			
a)	Is adequate portable fire extinguisher protection provided, and are all extinguishers in useable condition, of the proper size and supplying the type of agent that may be needed?	Yes	No	
b)	If fire sprinklers are provided, are control valves open?  If yes, check to indicate condition: LOCKED SEALED NEITHER TAMPER SWITCHED	Yes	No	
c)	Do sprinkler heads and lines appear undamaged, unimpaired, and have a minimum clearance of 18" retained between the tops of stored materials and the bottoms of sprinkler heads?	Yes	No	
d)	If a kitchen range hood fire suppression system is provided, does it appear to be properly armed, and do nozzles, piping, and other components appear to be intact?	Yes	No	
e)	If fire hose is provided, is it properly racked and coupled, free of water, and equipped with an adjustable spray nozzle?	Yes	No	
f)	Do all fire alarm system components, i.e., control panel, annunciator, manual stations, signalling devices, detectors, etc. appear to be fully operational?	Yes	No	
SE	ECTION IV: EXIT MAINTENANCE			
a)	Are sufficient lighted exit signs provided to indicate exit locations, and are they undamaged and in working condition?	Yes	No	
b)	Are corridors, stairways, interior fire doors, and exit doors free of obstructions? Yes No			
c)	Are all fire doors, except those equipped with smoke-closing or alarm releasing hold open devices, kept completely closed?	Yes	No	
d)	Is panic hardware provided where required, and is it all in good working condition?	Yes	No	
SE	CTION V: OTHER SAFETY RELATED ITEMS			
a)	Are non-slip floor surfaces provided in kitchen areas, or are floors kept absolutely grease free?	Yes	No	
b)	Does electrical service appear safe, without evidence of exposed or improper wiring arrangements, and are panel boxes and cutoff switches accessible in case of emergency?	Yes	No	
c)	Does natural gas service appear safe, with no evidence of damaged connections, and are shutoff valves and meters accessible in case of emergency?	Yes	No	
d)	Does the building and immediate surrounding area appear to be free of any material, condition, or practice that may present a hazard to life or property? Is egress to a sidewalk or a public way unencumbered?	Yes	No	

Refer to the reverse (or following page) of this report for COMMENTS and/or DESCRIPTIONS of items checked NO above.

THE INFORMATION APPEARING BELOW RELATES TO QUESTIONS ON THE FRONT OF THIS FORM THAT RECEIVED A NO ANSWER DURING INSPECTION. COMMENTS AND RECOMMENDATIONS CAN BE MATCHED WITH ITEMS ON THE FRONT OF THE REPORT BY REFERENCING SECTION (ROMAN NUMERAL) AND SUBSECTION (LOWER CASE LETTER).

## **EXAMPLES:**

II (c) Is building free of excessive solid combustible storage?

IV (b) Are corridors, stairways, interior fire doors, and exit doors free of obstructions?

SECTION:	DESCRIPTION/COMMENTS: