

# Monthly Safety Device Checks Log

Facility Name/ID: \_\_\_\_\_

| <b>Fire Extinguishers</b> | <b>Annual Service Due:</b> |     |     |     |     |     |     |     |     |     |     |     |
|---------------------------|----------------------------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|
| Location                  | Jan                        | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov | Dec |
| 1.                        |                            |     |     |     |     |     |     |     |     |     |     |     |
| 2.                        |                            |     |     |     |     |     |     |     |     |     |     |     |
| 3.                        |                            |     |     |     |     |     |     |     |     |     |     |     |
| 4.                        |                            |     |     |     |     |     |     |     |     |     |     |     |
| 5.                        |                            |     |     |     |     |     |     |     |     |     |     |     |

| <b>Emergency Lights</b> |     |     |     |     |     |     |     |     |     |     |     |     |
|-------------------------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|
| Location                | Jan | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov | Dec |
| 1.                      |     |     |     |     |     |     |     |     |     |     |     |     |
| 2.                      |     |     |     |     |     |     |     |     |     |     |     |     |
| 3.                      |     |     |     |     |     |     |     |     |     |     |     |     |
| 4.                      |     |     |     |     |     |     |     |     |     |     |     |     |
| 5.                      |     |     |     |     |     |     |     |     |     |     |     |     |

| <b>Smoke / Fire Detectors</b> | <b>Annual System Service Due:</b> |     |     |     |     |     |     |     |     |     |     |     |
|-------------------------------|-----------------------------------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|
| Location                      | Jan                               | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov | Dec |
| 1.                            |                                   |     |     |     |     |     |     |     |     |     |     |     |
| 2.                            |                                   |     |     |     |     |     |     |     |     |     |     |     |
| 3.                            |                                   |     |     |     |     |     |     |     |     |     |     |     |
| 4.                            |                                   |     |     |     |     |     |     |     |     |     |     |     |
| 5.                            |                                   |     |     |     |     |     |     |     |     |     |     |     |

| <b>Eye Wash Stations</b> |     |     |     |     |     |     |     |     |     |     |     |     |
|--------------------------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|
| Location                 | Jan | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov | Dec |
| 1.                       |     |     |     |     |     |     |     |     |     |     |     |     |
| 2.                       |     |     |     |     |     |     |     |     |     |     |     |     |
| 3.                       |     |     |     |     |     |     |     |     |     |     |     |     |

# Monthly Safety Device Checks Log

## Instructions

### **Fire Extinguishers should be visually checked to ensure:**

- they are still in place and properly mounted;
- the pressure indicator dial (if equipped) is in the green or charged area;
- the pull pin is in place and fastened with the security seal
- the body of the extinguisher is free from dents, cracks, corrosion or leaks;
- the hose (if equipped) is intact and free from obstructions; and
- the test button (if equipped) operates properly.

### **Emergency Lights should:**

- be tested by depressing the test button or disrupting the electrical current to the device. Units without a test button can be unplugged or the circuit breaker servicing that circuit can be turned off;
- immediately come on and light all bulbs in the device; and
- be focused or directed so that they illuminate the way to the exit.

### **Smoke / Fire Detectors should be:**

- checked to ensure they are still in place, properly mounted and free from obvious damage;
- tested by depressing the test button until the alarm sounds (see note below for centrally-monitored systems).

NOTE: for centrally-monitored alarm systems, follow the procedures outlined in the system manufacturer's literature. Always notify the monitoring system and/or fire department that you are about to conduct an alarm test of the system.

### **Eyewash Stations should be examined to ensure:**

- the unit is in place and free from obvious damage;
- the device is positioned so that a person's head can be positioned in the water flow without restrictions from other objects;
- the outlet ports are free from obstructions and the protective caps are in place;
- the outlet ports are positioned so that both eyes are flushed simultaneously;
- the protective caps are released when the unit activates and does not require additional steps; and
- the unit operates properly for at least 15 minutes.