Monthly fire extinguisher inspection log

01 Building and month

Building or area	Month and year	Inspected by (printed name)	Signature

02 Each extinguisher

NUMBER	LOCATION	TYPE AND SIZE	IN PLACE, REACHABLE	GAUGE GREEN OR WEIGHT FULL	PIN AND SEAL	NO DAMAGE, LABEL OUT	ANNUAL TAG CURRENT	INITIALS	NOTE OR ACTION TAKEN

Mark each check OK or Fail. Take a unit that fails out of use, put a charged spare in its place, and write what was done. Keep the month, the year and the initials for every unit.

03 Each area, once a month

4 checks

CHECK	OK	FAIL	NOTE
No one walks more than 75 ft (22.9 m) to an extinguisher for ordinary combustibles	☐	☐	
An extinguisher within 50 ft (15.2 m) of each flammable liquid area	☐	☐	
The class on each label matches the hazard nearby	☐	☐	
A charged spare on hand	☐	☐	