



## Fire Extinguisher Checklist

Label













### GENERAL INFORMATION

This logbook is designed to assist you in organizing a program of routine checks and maintenance of the fire protection equipment and systems in your building.

This log has been carried out starting:

### Class of Fire Extinguishers



Fire Class & Symbol	Pictogram	Types of Fires
		Ordinary solid combustibles (paper, wood, cardboard and most plastics)
		Flammable liquids and gases (gasoline, kerosene, grease or oil)
		Energized electrical equipment (appliances, wiring, circuit breakers or outlets)
	Not Commonly Used 	Combustible metals found in labs (magnesium, titanium, potassium or sodium)
		Oils and fats (cooking oils, trans-fats, or fats in cooking appliances)



**FIRE EXTINGUISHER / FIRE HOSE TESTING**

Date of Service:

Next Service Date:

**Inspection Type:** (circle one)    Monthly    Annual    Special Inspection    Other:**Building Name:****Address:****City:****Zip Code:****Contact Person:**

Phone:

**Owner/Strata Number:**

Phone:

**EXTINGUISHERS/HOSES**

Location

**SIZE / TYPE**

SERIAL #

Date of Manufacture (year only)

Next Major Service Date (year only)

**Major Service Performed**  
(circle one)    Recharge    Internal Maintenance    Hydrostatic Test    Other:

N/A

**Acceptable?****BRAND / REMARKS**

## FINAL REMARKS

Comments:

The information on this form (and in the documents attached here-to) attest to the fact that the equipment listed here-in was tested/inspected in conformance with applicable codes, bylaws, standards, and the manufacturer's requirements by a qualified technician. The equipment was left in an operational condition except as noted in the spaces marked "comments". This document has been provided to the building owner's representative who has acknowledged receipt of same below. A copy should be maintained on the premises for examination by the Fire Marshal or Inspector at their request.

Name:

YES NO N/A

Technician?

Certificate Number

Authorized By:

Authorized By (Customer Name):

Customer P.O.#: