

Administration Building Safety Checklist

(Minimum recommended frequency Quarterly)

Municipality: _____ **Inspection Date:** _____

Name of Inspector: _____ **Title:** _____

Location Surveyed: _____

	Needs Work	OK	N/A	Write line #'s and comments for all "Needs Work" listings, and notify management to initiate required corrective action
1				Means of egress readily accessible & unobstructed? Fire doors kept closed? Y N
2				Occupancy limits posted in all conference & meeting rooms seating 30 or more?
3				Emergency evacuation plan maps & emergency phone numbers posted?
4				Emergency lights operational- spot check several Bathrooms covered by E- lights?
5				Exit lights and / or signs visible & illuminated? Any "Tritium" Powered signs? Y N
6				Extension cords: minimal use & in good condition? (used less than 90 days)
7				Overhead obstructions clearly marked in contrasting color? Padded? Y N
8				Walking surfaces free of holes, or slip-trip-fall hazards no wrinkled carpets, walk off mats?
9				Handicap access ramps provided, have railings & in good condition?
10				Stairway handrails provided & in good condition & tightly secured minimum 3 inches from wall
11				Hand rail(s) on all stairs of more than 4 steps? On right side descending required
12				Stair treads and nosing in good condition & adequately illuminated?
13				Stairways free of storage or obstruction? Doors kept closed?
14				Housekeeping adequate - no hanging plants over equipment?
15				Filing cabinets fastened together or secured to prevent tipping?
16				File room: storage of materials properly arranged? Minimum 18 inches below sprinklers?
17				Illumination adequate throughout – coverage reviewed for Emergency lights?
18				All transaction windows protected & duress alarms tested annually?
19				Temporary portable heaters clear of combustible / flammable materials?
20				First Aid Kit, BBP Kit and AED if available: Inspected & maintained?
21				Electric room & panels clear of combustible material & circuits identified?
22				Electrical outlet / switch covers secure all receptacles 3-wire ground type?
23				Coffee pots, copiers, portable electric heaters in good condition, properly located & shut off after hours?
24				Hot water heater regulated to below 120 ° Fahrenheit? TPT valve piped to floor?
25				Surge protector on all electrical accessories, GFCI's within 60 inches of water sources?
26				Electrical panels labeled for voltage levels, # of phases, and arc flash warnings?
27				Electrical panels unobstructed (36 inch clearance), have directories & covers closed?
28				All GFCI receptacles trip tested at least annually? Records maintained?
29				Fire extinguishers serviced annually & inspected monthly?
30				Air handling equipment filter(s) cleaned and / or changed periodically?
31				Doors to equipment rooms, boiler rooms and basement marked "Not an Exit"
Mechanical Equipment <input type="checkbox"/> Building does not have (skip (32-36))				
32				Fire alarm and / or detection system functional? Pull boxes accessible for wheelchairs?
33				Elevator inspection certificates current & posted? Car levels within ½ inch at landings?
34				Elevator entrance signs posted "In Case of Fire, Do Not Use"? Inside car phone operational?
35				Sprinkler controls accessible & inspected annually? Last flow check date was:
36				Sprinkler heads: at least 18 inches of clearance from stored materials?

