Inspections Forms: **Apartment Building Occupancies**



Building Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Building Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Inspector: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Last Inspection: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Outstanding Violations: YES or NO

**General / Exterior**

 Yes  No

 Yes  No

 Yes  No

 Yes  No

 Yes  No

 Yes  No

 Yes  No

* Is the site free of debris or other fire hazards?
* Are fire lane signs and striping in place?
* Is the address visible, with contrasting numbers,

 and either 6” (commercial) or 4” (residential) in height?

* Is Knox box installed at proper locations?
* Proper items placed inside Knox box?
* Is a light-weight roof (R), floor (F), or

roof-floor (RF) sign posted, if applicable?

* Are all gas lines and valves protected from vehicles

and properly identified, if applicable?

**­­­­­­­­­­­­­­­­­­­­­­­Interior**

 Yes  No

 Yes  No

 Yes  No

 Yes  No

 Yes  No

 Yes  No

 Yes  No

 Yes  No

 Yes  No

 Yes  No

 Yes  No

 Yes  No

 Yes  No

 Yes  No

 Yes  No

 Yes  No

* Have renovations been completed since last inspection?
* Are all exit signs properly installed and operational?
* Are all emergency lights properly

 installed and operational?

* Are all egress doors unobstructed and operational?
* Are all egress paths unobstructed?
* Are all ceiling tiles in place and undamaged, if applicable?
* Are all smoke and/or fire

 barriers/partitions/walls intact and labeled properly?

* Are all smoke and/or fire doors

labeled, self-closing, undamaged, in the closed position?

* Are all doors/rooms labeled

(FACP, Storage, Electrical, Riser, Stairs, Pump, etc.)?

* Are the public safety radio signals clear and

undistorted in all parts of the building?

* Are all access control devices operational and permitted?
* Are areas of refuge provided and identified, if applicable?
* Interior wall and ceiling finish shall be Class A or Class B

in exit enclosures, Class A or Class B in lobbies and corridors,

and Class A, Class B, or Class C in all other spaces.

* Alcohol-Based Hand-Rub Dispensers stored and used according

to 8.7.3.3?

 Yes  No

 Yes  No

 Yes  No

 Yes  No

 Yes  No

 Yes  No

 Yes  No

* An approved sign is provided at each manual fire alarm pull

box reading “Local Alarm Only – In Case of Fire Call 911”, if applicable?

* Does elevator phone work and has the elevator been inspected

within the past year, if applicable?

* Smoke alarms installed inside every sleeping room and in the

immediate vicinity outside. Replaced every 10 years?

* Waste chutes, incinerators, and laundry chutes shall comply with

the provisions of section 9.5? Self-closing, self-latching, fusible links

* Emergency Instructions shall be provided annually to each dwelling

unit to indicate the location of alarms, egress paths, and actions to

be taken, both in response to a fire in the dwelling unit and in the

response to the sounding of the alarm system?

* Furnishings or decorations of an explosive or highly flammable

character shall not be used outside of dwelling units?

* Fire-retardant coatings shall be maintained to retain the effectiveness

of the treatment under the service conditions encountered in actual use?

**Fire Protection Systems**

* Have all life safety systems been inspected and have up to date tags and reports?
* Fire Alarm \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* BDA \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Fire Sprinkler \_\_\_\_\_\_\_\_\_\_\_\_\_
* Fire Pump \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Fire Backflow \_\_\_\_\_\_\_\_\_\_\_\_\_
* Standpipe \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Clean Agent \_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Cooking Hood \_\_\_\_\_\_\_\_\_\_\_\_\_
* Hood Cleaning \_\_\_\_\_\_\_\_\_\_\_\_\_
* Fire Extinguishers \_\_\_\_\_\_\_\_\_\_\_
* Fire/Smoke Dampers \_\_\_\_\_\_\_\_
* Fire Doors \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Emergency Generator \_\_\_\_\_\_\_\_
* Smoke Control \_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Yes  No

 Yes  No

* Have any stand-alone duct detectors been inspected and tested?
* Have any stand-alone carbon monoxide detectors been inspected and tested?

**NOTES**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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