

Fire Suppression Systems	Yes	No	N/A
Is the top of storage maintained at a minimum of 18" below head deflectors in fire sprinklered areas?			
If you have a sprinkler system in your space, is it operational and has it been inspected by a qualified service company?			
If you have a hood-and-duct suppression system, is it operational and has it been inspected by a qualified service company within the last six months?			
Housekeeping & Decorations			
Is combustible rubbish and trash removed from the suite a minimum of once each working day?			
Mechanical Hazards			
Is the venting for exhaust products of combustion intact for gas appliances within the suite (i.e.: water heaters, furnaces)?			
Are safe clearances maintained between gas fired appliances (such as water heaters, furnaces, etc.) and combustible materials (minimum 36")?			
Is safe clearance provided around all heating devices?			
Smoke Detectors			
If you have smoke detection or a fire alarm in your space have they been tested in the last year by a qualified service company?			
Storage of Combustibles			
Is the storage of combustible materials within the suite orderly?			
Are any boiler rooms, mechanical rooms and electrical panel rooms within the suite clear of any combustible material storage?			
Is there a minimum of 24" of clear space provided between storage and ceiling if the building does not have fire sprinklers?			
Storage of Compressed Gas Cylinders			
If you have compressed gas containers (such as CO2, helium, etc.), are they chained and labeled?			
Storage of Combustible and Flammable Liquids			
Are any quantities in excess of 10 gallons of flammable and combustible liquids used for maintenance purposes and the operation of equipment stored in liquid storage cabinets?			

The party occupying the space is responsible for ensuring the safety of the occupants of that space and having all noted hazards corrected. A "No" response to any of these questions indicates the presence of a fire code violation. Once all hazards identified as having a "No" response are corrected, please sign, date, and return this form to us. Thank you for your cooperation.

Print Name of Person Performing the Inspection _____ Date _____

Signature of Responsible Person _____ Date _____

***** Checks should be made payable to: Fire Recovery USA *****

**Fire Recovery USA, LLC
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