

Fume Hood Inspection and Maintenance Report

Building: _____

Room Number: _____

Fume Hood ID/Number: _____

Inspector Name: _____

Date: _____

Inspection Checklist

Item	Status	Comments
Sash moves smoothly and stays at set point		
Glass is intact (no cracks or breaks)		
Hood air flow monitor/alarm functioning		
Lights are operational		
No visible obstructions in airflow path		
Interior & exterior surfaces clean		
Electrical outlets and switches functional		

Face Velocity Reading

Average Velocity (fpm): _____

Pass/Fail: _____

Maintenance Actions Taken / Additional Comments

Next Inspection Due: _____

Inspector Signature: _____