## **Fire Suppression System Inspection Log**

## **General Information**

Location / Area	System Type
Building / Floor	Inspection Date
Inspector Name	Company

## **Inspection Checklist**

Item	Yes / No	Comments
Control Panel operational		
Manual pull station accessible and undamaged		
Nozzle(s) clear and unobstructed		
Piping intact, no leaks		
Compressed gas container(s) pressure normal		
System signage present and readable		
Alarm/bell functions properly		
Recent discharge recorded		
Last inspection date recorded		

## **Corrective Actions / Notes**

Description	Action Taken	Date
Inspector Signature	Supervisor Signature	