Lincolnton Fire Department
Fire Inspection Report

Date of Inspection: _____ Type of Inspection: _____

Occupancy Name: _____

Address:_____ Emer. Name and Number _____

Exterior of Building: Address Posted _____ Fire Lanes Marked _____ Fire Hydrant/FDC Assessable _____ Adequate Lighting _____
Ramps & Handrails OK _____ Knox Box _____ Location _____ Fences/Gates Around Building _____
Locks on Fences/Gates _____ Excessive Vegetation/Weeds Around Building _____

Interior Of Building/Electrical: Good _____ Fair _____ Poor _____ Excessive Use of Extension Cords _____Open Breakers in Panel Boxes _____
Covers Missing on Junction Boxes, Outlets, Switches _____ Multi-Purpose Cord Plugged in to One Another _____ Proper Size Fuses/Breakers _____
Proper Use of Extension Cords _____ Breakers in Panel Boxes Labeled _____ 36" Clearance Around Electrical Panels _____
Storage in Electrical/Mechanical Rooms _____

General Information: Housekeeping: Good _____ Fair _____ Poor _____ Storage in Electrical/Mechanical Rooms _____ Candles Being Used ____
Storage Under Stairs _____ Storage of Flammable/Combustible Liquids/Gases _____ Chemical Storage _____ Wall Covering Within Limits _____
Open Flame Cooking Devices _____ MSDS Sheets on Site _____ Ceiling Clearance (Storage of Materials) _____ Portable Unvented Heaters _____
Evacuation Plan Posted _____ Occupancy Capacity Posted _____ Emergency Contact Numbers Posted _____

Fire Protection Systems: Fire Alarm (Horns, Strobes, and Pull Stations) Present _____ Date Last Serviced _____
Smoke/Heat Detectors _____ Commercial Hood fixed Suppression System Present _____ Date Last Serviced _____
Fire Extinguishers Present _____ Type & Number: ABC _____ K Type _____ Water _____ Dry Chemical _____ Proper Locations _____
Fire Extinguisher Access _____ Fire Extinguisher Yearly Inspection _____ Date of Last Service _____
Automatic Extinguishing System (Sprinklers): Present _____ Date of Last Service _____ Standpipe Systems _____
Sprinkler Heads Free of Obstruction (min. 18 inch Clearance) _____ Smoke Removal Systems _____ Fire Doors _____
Fire Pump Serviced & Tested Annually _____ Date of Last Service _____ Flame, Gas, Carbon Dioxide Detectors _____

Heating Systems: Gas _____ Electric _____ Oil _____ Wood _____ Other _____ Condition: Good _____ Fair _____ Poor _____
Chimneys & Flues: Metal _____ Masonry _____ Condition: Good _____ Fair _____ Poor _____

Exits & Escapes: Adequate Number of Exits _____ Blocked or Locked Exits _____ Exit Signs in Place & Illuminated _____
Emergency Lights in Place & Working Properly _____ Panic Hardware on Exit Doors _____ Approved Locking Devices on All Exit Doors _____

The following items have been found in violation of the North Carolina Fire Prevention Code, please make all repairs.

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These Violations must be corrected within _____ Days of notification.

_____ _____

Signature of Owner/Tenant/Manager or Agent Inspector – 704-736-8920