



SALT LAKE CITY BUSINESS LICENSING – PRE-INSPECTION WORKSHEET



Date: _____ Business Name: _____

Address: _____ Unit: _____ Zip: _____

Owner Name: _____ Owner Tel: _____ Email: _____

24 Hour Emergency Contact Name: _____ Tel: _____

IN ORDER TO COMPLY WITH SALT LAKE CITY ADOPTED ORDINANCES AND CODES, PLEASE FOLLOW DIRECTIONS 1-4 BELOW:

1. Owner, manager, or other responsible party shall conduct the inspection and sign the form.
2. Print the business name, address, and owner information at the top of the form.
3. Walk through the business with this form, and answer all questions listed below.
4. When the inspection is complete and all questions answered "NO" have been corrected, read, sign, and date the declaration at the bottom of this form, make a copy for your files, and contact the Fire Prevention Bureau to schedule your inspection.

This form must be completed, signed and available at the time of inspection.

1. Is your address visible on the outside of the building with contrasting background and numbers at least 5 inches in height?	YES	NO	N/A	9. Are gas shut off valves clear of weeds, trash, storage, etc., and are they visible and accessible?	YES	NO	N/A
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>If NO, date corrected</i>				<i>If NO, date corrected</i>			
2. Is drive or alley around the building kept free from weeds, debris, or obstruction?	YES	NO	N/A	10. Is your heating/air conditioning unit cleaned and/new filters installed on a regular basis?	YES	NO	N/A
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>If NO, date corrected</i>				<i>If NO, date corrected</i>			
3. Are all exit aisles, hallways, doorways, stairways, landings, and walkways clear of any obstructions?	YES	NO	N/A	11. Are equipment/mechanical rooms free of combustible storage?	YES	NO	N/A
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>If NO, date corrected</i>				<i>If NO, date corrected</i>			
4. Are all electrical breaker panels accessible and labeled to show which area is affected by each circuit breaker? (36" Clean space)	YES	NO	N/A	12. Are piles of paper, trash, etc., in and around your building, picked up and disposed of regularly?	YES	NO	N/A
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>If NO, date corrected</i>				<i>If NO, date corrected</i>			
5. Are circuit breakers clear of any tape, string or wire that would affect their operation?	YES	NO	N/A	13. Do you have a fire extinguisher in your business? The minimum required is a 2A10BC (refer to label on extinguisher).	YES	NO	N/A
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>If NO, date corrected</i>				<i>If NO, date corrected</i>			
6. Is the cover on the electrical panel and face plates installed on all electrical outlets and switches?	YES	NO	N/A	14. Have all fire extinguishers been inspected, tagged and serviced within the last year by a fire extinguisher company licenses by the State Fire Marshal?	YES	NO	N/A
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>If NO, date corrected</i>				<i>If NO, date corrected</i>			
7. Are extension cords being used for more than portable appliances? Do they run through walls, ceilings, floors, under doors or floor coverings? Are they affixed to the building?	YES	NO	N/A	15. Is a fire extinguisher mounted or secured on a wall (preferably near an exit) so that the top of the extinguisher is not more than 5 ft. above the floor?	YES	NO	N/A
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>If YES, date corrected</i>				<i>If NO, date corrected</i>			
8. Is electrical in good condition? Inspect electrical wiring for fraying, wear and/or splices.	YES	NO	N/A	16. Are all fire extinguishers visible and readily accessible for use (not blocked by storage, etc.)?	YES	NO	N/A
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>If NO, date corrected</i>				<i>If NO, date corrected</i>			

17. Has your kitchen hood system been serviced in the last 6 months?	YES	NO	N/A	18. Do you store or use compressed oxygen or acetylene, or greater than 5 gallons of flammable liquids, or greater than 25 gallons of combustible materials?	YES	NO	N/A
	<i>If NO, date corrected</i>				<i>If YES, Permit #</i>		
<i>If you have any questions regarding items 1-18 above, please call SLC Fire Prevention at 801-799-4150.</i>							
19. Is all construction and remodeling at the business complete and approved by the SLC Building Division?	YES	NO	N/A	21. Does the main entry door to the business have a keyed deadbolt on the interior side of the door with signage attached that reads: " This door to remain unlocked during business hours "?	YES	NO	N/A
	<i>If NO, obtain proper permits</i>				<i>If NO, date corrected</i>		
20. Are exit(s) clearly marked with lighted exit signs?	YES	NO	N/A	22. Are handrails installed on all stairways? Are the handrails all in good repair?	YES	NO	N/A
	<i>If NO, date corrected</i>				<i>If NO, date corrected</i>		

ANY PERSON WHO WILLFULLY STATES AS TRUE ANY MATERIAL HEREIN WHICH HE/SHE KNOWS TO BE FALSE MAY BE GUILTY OF PERJURY. I DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

Signature of Responsible Party: _____

Printed Name: _____ Date Completed: _____

Failure to comply to all the codes applicable to your business prior to the Salt Lake City Fire Department's initial inspection may result in additional reinspections fees assessed at a rate of \$107.00 per hour.