Monthly safety inspection

Walk through each area, tick what is in order, and note anything that needs fixing.

*Fields marked * are required.*

Location *

Pinecrest Community Center

Inspected by *

Date *

Item	OK	To fix	Notes
Exits and fire safety			
Exits and hallways are clear	☐	☐	
Exit signs are lit	☐	☐	
Fire extinguishers are in place and charged	☐	☐	
Smoke alarms were tested	☐	☐	
Work areas			
Floors are dry and free of trip hazards	☐	☐	
Electrical cords are in good shape	☐	☐	
Shelves and storage are stable	☐	☐	
The first aid kit is stocked	☐	☐	

Problems found, and who will fix them

☐ I confirm this inspection and sign below. *

Inspector's signature *

Date *

Next inspection