



*Thank you for choosing Salt Lake City
as a place to do business.*

All commercial business license applications are required to have city inspections passed prior to a license being issued. These inspections will be assigned at time of application. Please review the following inspection instructions closely.

The following inspection departments **will contact you within ten (10) working days**. If you have not been contacted **after 10** days, please call the inspection department directly to schedule your inspection.

1. **Building Department** (801)535-7224
2. **Fire Department*** (801) 799-4153

***IMPORTANT:** A Fire Pre-Inspection Worksheet will be provided at time of application. You **must** have this worksheet completed and available for your Fire Inspector at time of inspection. *The Fire Department Pre-Inspection check list, along with other business license forms, can also be downloaded at:*

<http://www.slcgov.com/business-licensing/forms>

3. **Zoning Department** (801) 535-7700
No contact required. Call for questions only.

4. **Health Department**

Non-Food Related	(385) 468-3835
Bureau of Food Protection	(385) 468-3845
Department of Agriculture	(801) 538-7144

Contact the Health Department to arrange for your health inspection anytime after making your application.

Freight Parking Permit: Vehicle inspections for Freight Parking permits are conducted at the Compliance Division. Call (801) 535-6584 to schedule an appointment.

Transportation Businesses: In addition to your business license, you must also be registered with the Department of Ground Transportation (801) 908-7204.

You can check inspection progress at: www.slcgov.com (In the lower left corner under "My Quick Links" you will see a link for the "Citizen Access Portal").

On the portal select **"Check/Renew Licenses"**. Input your entire application number and click Search.

**For questions, please call our office at (801) 535-6644.*



SALT LAKE CITY BUSINESS LICENSING – PRE-INSPECTION WORKSHEET



Date: _____ Business Lic. Name and #: _____

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 1-22 BELOW:

- Owner, manager, or other responsible party shall conduct the inspection and sign the form.
- Print the business name, address, license number and owner information at the top of the form.
- Walk through the business with this form, and answer all questions listed below.**
- 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 **only then** you can 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 <input type="checkbox"/>	NO <input type="checkbox"/>	N/A <input type="checkbox"/>	9. Are gas shut off valves clear of weeds, trash, storage, etc., and are they visible and accessible?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	N/A <input type="checkbox"/>
	If NO, date corrected _____				If NO, date corrected _____		
2. Is drive or alley around the building kept free from weeds, debris, or obstruction?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	N/A <input type="checkbox"/>	10. Is your heating/air conditioning unit cleaned and/new filters installed on a regular basis?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	N/A <input type="checkbox"/>
	If NO, date corrected _____				If NO, date corrected _____		
3. Are all exit aisles, hallways, doorways, stairways, landings, and walkways clear of any obstructions?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	N/A <input type="checkbox"/>	11. Are equipment/mechanical rooms free of combustible storage?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	N/A <input type="checkbox"/>
	If NO, date corrected _____				If NO, date corrected _____		
4. Are all electrical breaker panels accessible and labeled to show which area is affected by each circuit breaker? (36" Clean space)	YES <input type="checkbox"/>	NO <input type="checkbox"/>	N/A <input type="checkbox"/>	12. Are piles of paper, trash, etc., in and around your building, picked up and disposed of regularly?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	N/A <input type="checkbox"/>
	If NO, date corrected _____				If NO, date corrected _____		
5. Are circuit breakers clear of any tape, string or wire that would affect their operation?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	N/A <input type="checkbox"/>	13. Do you have a fire extinguisher in your business? The minimum required is a 2A10BC (refer to label on extinguisher).	YES <input type="checkbox"/>	NO <input type="checkbox"/>	N/A <input type="checkbox"/>
	If NO, date corrected _____				If NO, date corrected _____		
6. Is the cover on the electrical panel and face plates installed on all electrical outlets and switches?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	N/A <input type="checkbox"/>	14. Have all fire extinguishers been inspected, tagged and serviced within the last year by a fire extinguisher company licensed by the State Fire Marshal?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	N/A <input type="checkbox"/>
	If NO, date corrected _____				If NO, date corrected _____		
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 <input type="checkbox"/>	NO <input type="checkbox"/>	N/A <input type="checkbox"/>	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 <input type="checkbox"/>	NO <input type="checkbox"/>	N/A <input type="checkbox"/>
	If YES , date corrected _____				If NO, date corrected _____		
8. Is electrical in good condition? Inspect electrical wiring for fraying, wear and/or splices.	YES <input type="checkbox"/>	NO <input type="checkbox"/>	N/A <input type="checkbox"/>	16. Are all fire extinguishers visible and readily accessible for use (not blocked by storage, etc.)?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	N/A <input type="checkbox"/>
	If NO, date corrected _____			<u>No more than 75 feet of travel from anywhere in Business.</u>	If NO, date corrected _____		

(over)

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
	If NO, date corrected				If YES, please go to SLCFire.com to apply		
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
	If NO, obtain proper permits				If NO, date corrected		
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
	If NO, date corrected				If NO, date corrected		
<p><i>If you have any questions regarding items 1-22 above, please call SLC Fire Prevention at 801-799-4153.</i></p>							

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: _____ Business Lic # _____

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.