

SALT LAKE CITY BUSINESS LICENSING – PRE-INSPECTION WORKSHEET



•							
Date:	В	usiness L	.ic. Name	and #:			_
Address:				Unit: Zip:			_
Owner Name:				Email:			_
24 Hour Emergency Contact Name:				Tel:			
IN ORDER TO COMPLY WITH SALT LAI	KE CITY A	DOPTE	D ORDIN	ANCES AND CODES, PLEASE FOLLOW DIRECT	IONS 1-2	2 BELOV	/ :
 Owner, manager, or other responsible party sh Print the business name, address, license numb Walk through the business with this form, and a When the inspection is complete and all question make a copy for your files, and only then 	all conduction all conduction and own answer all ons answer the contact the	ct the ins vner infor question ered "NO e Fire Pre	pection a rmation a ns listed b " have be evention	nd sign the form. It the top of the form. Below. Ben corrected, read, sign. and date the declaration is			
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,	YES	NO	N/A
				storage, etc., and are they visible and accessible?			
	If NO, da	te correc	ted		If NO, date corrected		
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
	If NO, date corrected				If NO, date corrected		
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	YES	NO	N/A
				combustible storage?			
	If NO, da	te correc	ted		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	NO	N/A	12. Are piles of paper, trash, etc., in and around	YES	NO	N/A
				your building, picked up and disposed of regularly?			
	If NO, date corrected				If NO, da	ate correc	ted
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	YES	NO	N/A
				(refer to label on extinguisher).			
	If NO, da	te correc	ted		If NO, date corrected		
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	YES	NO	N/A
	If NO, date corrected		rted	extinguisher company licensed by the State Fire	If NO. do	ate correc	ted
	ij ivo, date corrected			Marshal?	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	NO	N/A	15. Is a fire extinguisher mounted or secured on a wall (preferably near an exit) so that the top of	YES	NO	N/A
	If YES, date corrected		ected	the extinguisher is not more than 5 ft. above the	If NO. do	ate correct	ted
	ij <u>res,</u> date corrected			floor?	ij 140, da	TE COTTECT	icu
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
	If NO, date corrected			No more than 75 feet of travel from anywhere in Business.	If NO, date corrected		

17. Has your kitchen hood system been service in the last 6 months?	If NO, da	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	YES	NO	N/A	
	If NO, da	ite correc						
40. Is all another street and the street	If NO, do	ite correc	. ,					
40 to the support of the state			tea	materials?		ES, please		
40. In all construction as I. I. I. I. I. I. I.				<u>l</u>	<u>SLCFire.com</u> to apply			
	\/F0			To a decide to the second				
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	YES	NO	N/A	
				door with signage attached that reads: "This				
	If NO, ob	tain prop	er	door to remain amounce during business	If NO, date corrected			
20. Are exit(s) clearly marked with lighted exit signs?	ľ			hours"? 22. Are handrails installed on all stairways? Are the handrails all in good repair?	V/50 NO N/A			
	YES	NO	N/A		YES	NO	N/A	
	If NO. do	ite correc	ted		If NO, date corrected			
	ij 140, uu	ne correc	icu		ij NO, date corrected			

Signature of Responsible Party:	Business Lic #
Printed Name:	Date Completed: