



Maynard Fire Department Commercial Facility Self-Inspection Form

This self-inspection form is a tool to assist you with providing a fire safe environment to your employees and customers. To schedule a formal inspection please contact the Maynard Fire Department at 978-897-1015. If you have any questions in regards to this form or any other fire safety concern please contact us.

Business Name:

Address:

Phone:

Please contact the Maynard Fire Department when the form is complete and ready for pick-up

YES	NO	N/A	General information and housekeeping
			Is the address or unit number visible from the street?
			Is the address or unit number visible from the back of your building?
			Is the area around your business free of weeds and debris?
			Are the gas shut off and electrical meters visible and clear of storage and other materials?
			Have you changed or cleaned your heating and/or A/C filters this year?
			Is all rubbish removed on a regular basis?
			Are combustibles at least 36" from furnaces, electrical, and gas appliances?
			Are oily rags kept in a metal container with a secure lid?
			Are portable heating and cooling units properly installed and UL approved?
			Are designated smoking areas free of any combustibles?
			Are there appropriate disposal containers provided in the smoking area?
			Are the containers emptied on a regular basis and the contents checked for hot embers?
			Do you have a fire department knock box mounted on the building with the correct keys in it?

YES	NO	N/A	Electrical
			Are electrical panel locations clearly marked and free from obstructions?
			Are all openings in the electrical panel covered with metal plates?
			Are all circuits in the panel clearly labeled?
			Are electrical outlets, switches, and electrical wiring covered with a switch plate or cover?
			Are all face plates in good condition?
			Is any electrical wiring frayed, worn, or spliced?
			Are surge suppressors in place to protect expensive equipment?
			Are all lights clear of any combustible materials?
			Are ground fault indicator (GFI) outlets installed where water is or maybe present?
			Are any electrical circuits overloaded?
			Are any extension cords being used in place of permanent wiring?

YES	NO	N/A	Exits
			Are exits and fire doors unlocked, accessible, and operational when the building is occupied?
			Are illuminated exit signs in place and operating?
			Is emergency lighting in place, operating, and tested regularly?
			Are hallways, exit corridors, and stairways clear of obstructions?
			Is there an evacuation plan?
			Is the plan posted?
			Are evacuation drills conducted?
			Does all panic hardware on exit doors operate smoothly?

YES	NO	N/A	Fire Protection
			Are fire extinguishers present, properly mounted, and free from obstructions?
			Are fire extinguisher locations properly identified with signs?
			Are fire extinguishers serviced yearly?
			Are fire extinguishers the proper type for the hazard being protected?
			Have all employees been trained in the proper use of fire extinguishers?
			Is the building fire alarm system inspected annually as required by fire code?
			Are all fire suppression system valves secured in the open position and free from obstructions?
			Is there at least 18" of clearance between sprinkler heads and storage?
			Is the fire department sprinkler connection clearly marked and free from obstructions?
			Are all fire suppression system inspected annually as required by fire code?

YES	NO	N/A	Hazardous Materials
			Are all hazardous materials kept in properly labeled containers?
			Are all containers sealed with the proper lids to prevent spills and leaks?
			Are all compressed gas cylinders chained securely to prevent them from falling over?
			Are all flammable materials stored in an approved container and away from ignition sources?
			Are Material Safety Data Sheets for all hazardous materials available and easily accessible?
			Have you reported all on site hazardous materials to the fire department as required by SARA Title 3?

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Contact Information

All contact information is maintained in the fire department software program and is for the purpose of contacting personnel in the event of an emergency or other fire safety activities

Contact 1 Name

Home Address

Home Phone

Cell Phone

Type of Contact: Primary Secondary Emergency

Key Holder? Yes No

Contact 2 Name

Home Address

Home Phone

Cell Phone

Type of Contact: Primary Secondary Emergency

Key Holder? Yes No

Contact 3 Name

Home Address

Home Phone

Cell Phone

Type of Contact: Primary Secondary Emergency

Key Holder? Yes No