

Fire Prevention Bureau
 2149 Central Avenue
 McKinleyville, CA 95519-3644
 Telephone (707) 825-2000
 Fax (707) 840-0471
 Email: prevention@arcatafire.org

ARCATA FIRE DISTRICT INSPECTION REPORT

Inspection Year 20__

White Copy - Business
 Yellow Copy - Occupancy File

Block No. _____

Address:	Business Name:
Business Phone:	E-mail:
Contact 1:	Phone(s):
Contact 2:	Phones(s):
Building Owner:	Phones(s):
Address:	
Occupancy Class:	

AN INSPECTION OF YOUR FACILITY REVEALED THE FOLLOWING:

FIRE PROTECTION SYSTEMS - CFC SECTION 901.6

EGRESS - CFC CHAPTER 10, SECTIONS 1030, 1031

Fire Extinguishers: Service due, Required, Mounted	Exit Pathways: Obstructed
Smoke Alarms/Detectors: Required, Defective	Exit Doors: Obstructed, Locked, Not opening
Sprinkler System: Service due, Repair	Exit Signs: Required, Illuminate, Repair
Fire Alarm System: Service due, Repair	Emergency Lighting: Required, Repair
Kitchen Hood System: Service due, Repair, Class K ext.	Extension cords - Section 605.5: Remove
Knox Box - Section 506.2: Update Keys	Construction - Section 703.1: Walls, Doors, Ceiling, Stops
Combustible Storage - Secs. 304, 315: Remove, Reduce	Heating Systems: Defective, Flue, Combustibles
Weeds/Rubbish Abatement - Secs. 301, 315, 334	Carbon Monoxide (CO) Detector: Required, Defective
Other:	

DETAILED EXPLANATION AND CORRECTIONS:

CORRECTED:

Date:	Discussed with: (Print)	Signed:
Shift A ___ B ___ C ___	Station:	Inspecting Officer: (Print) #

FIRE PREVENTION SAVES LIVES, PROPERTY, AND BUSINESS. YOUR COOPERATION WITH CORRECTING THE ABOVE LISTED ITEMS IS APPRECIATED. REINSPECTION DATE: _____