Oliver Fire Department
Self-Inspection Checklist

Dear Owner/Occupant,

Subject: Annual Fire and Life Safety Self-Inspection Checklist

Fire safety is a shared, year-round responsibility that keeps our community vibrant and safe. As our local homes and businesses continue to adapt to new layouts, and evolving provincial guidelines, the Oliver Fire Department remains dedicated to helping you protect what matters most.

To streamline this process for your business, we have developed a digital **Fire Safety Self-Inspection Form**, now available at www.oliver.ca

How to Complete Your Self-Inspection:

- **Fill out what applies:** Review your premises and answer the questions relevant to your specific layout. If a section does not apply to you (for example, if you do not have a commercial kitchen), simply select "N/A."

- **Check your equipment tags:** For questions requesting "Service Dates," look at the inspection tags hanging from your fire extinguishers, alarms, or other life safety systems to find your next scheduled service date.

- **Submit completely:** Please fill out all required fields to the best of your ability to ensure accurate reporting.

While this online form offers a flexible option to verify your safety compliance, the fire department continues to conduct in-person inspections. If you would prefer to schedule a guided walkthrough with a fire inspector, we will gladly accommodate your request.
Thank you for your continued diligence and partnership in keeping Oliver a safe place to live, work, and do business.

Sincerely,

Ash Regner,
Fire Chief

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Dear Permit Holder,

The Town of Oliver has prepared the following checklist to help you and your staff to comply with safety regulations. Please note that this is only a general checklist and may not contain all requirements for your business. If you require more information, please contact the Oliver and District Fire Department 250-498-3332 or email aregner@oliver.ca. Please complete the form at your earliest convenience and submit via fax, mail or electronically to the above email.

Business Name: _____ Address: _____

Owner/Occupant Name: _____ Postal Code: _____

Phone: _____ Cell: _____

Inspected By: _____ Email Address: _____

Access & Premises		**Yes**	**No**	**N/A**
The address numbers are clearly visible from the street		☐	☐	☐
The building's fire access lane is unobstructed		☐	☐	☐
Fire hydrants are kept clear all the way around (including snow removal)		☐	☐	☐
If you have a Fire Safety Plan, you have reviewed it in the last 12 months		☐	☐	☐
Egress		**Yes**	**No**	**N/A**
All your exit doors work and are easily openable with no deadbolts or latches		☐	☐	☐
All exits are free from clutter and obstructions		☐	☐	☐
All fire doors open and close properly		☐	☐	☐
All exits are well lit when people are in the building		☐	☐	☐
Electrical		**Yes**	**No**	**N/A**
All switches and outlets are in good repair and have cover plates		☐	☐	☐
All circuit breakers/fuses are labeled		☐	☐	☐
Extension cords are being used		☐	☐	☐
Power bars and outlet splitters are used appropriately and not overloaded		☐	☐	☐
Portable heaters (ceramic and oil) are plugged directly into a wall outlet		☐	☐	☐

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Emergency Lighting and Exit Signs	Next Service Date	Yes	No	N/A
If emergency lighting is provided, they are maintained and work		☐	☐	☐
The annual test has been performed by a qualified technician (Enter Date)		☐	☐	☐
If exit signs are required, they are illuminated or self-luminous (Enter Date)		☐	☐	☐

Fire Alarm System	Next Service Date	Yes	No	N/A
The fire alarm has been maintained by a qualified technician (Enter Date)		☐	☐	☐
The pull stations, control and annunciator panels are accessible and unobstructed		☐	☐	☐
All items on the service tag show “PASS”		☐	☐	☐
Fire Extinguishers	**Next Service Date**	**Yes**	**No**	**N/A**
There is at least one fire extinguisher rated to a minimum of 2A-10BC		☐	☐	☐
The travel distance from all portions of a building is less than 25m to a fire extinguisher		☐	☐	☐
All fire extinguishers are visible, accessible and hung properly		☐	☐	☐
Extinguishers have been serviced by a qualified technician in the past 12 months (Enter Date)		☐	☐	☐
Fire extinguishers are mounted near exit doors where possible		☐	☐	☐
Commercial kitchens have a K-Type extinguisher (Enter Date)		☐	☐	☐
Fire Suppression Systems	**Next Service Date**	**Yes**	**No**	**N/A**
All storage is a minimum of 18” below head deflectors in fire-sprinkled areas		☐	☐	☐
The sprinkler system has been serviced by a qualified technician in the last 12 months (Enter Date)		☐	☐	☐
All service tags are marked “PASS”		☐	☐	☐
Kitchen hood suppression system has been serviced in the last 6 months (Enter Date)		☐	☐	☐
Kitchen hood is clean and has no accumulation of grease in the hoods or ducts		☐	☐	☐
Kitchen hood suppression manual pull switch is accessible and unobstructed		☐	☐	☐

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House Keeping		**Yes**	**No**	**N/A**
Wall decorations are flame retardant or cover less than 20% wall area		☐	☐	☐
Candles are only used with protective candle holders		☐	☐	☐
Combustible waste materials are removed daily		☐	☐	☐
Mechanical and Plumbing Hazards		**Yes**	**No**	**N/A**
The venting for gas appliances (water heaters, furnaces etc.) is in good repair		☐	☐	☐
Area clear around gas-fired appliances (water heaters, furnaces etc.)		☐	☐	☐
The mechanical and electrical rooms are used for storage		☐	☐	☐
The grease interceptor has been cleaned and serviced		☐	☐	☐

NOTE: All service technicians conducting work on fire protection equipment must be "ASTTBC" certified.
Only ASTTBC forms and service tags are acceptable. Division C Sentence 2.2.1.1.(1) of the BC Fire Code states: *"Unless otherwise specified, the owner or the owner's authorized agent shall be responsible for carrying out the provisions of the Fire Code."*

By signing your name and checking the box below, you confirm that this form has been filled out truthfully to the best of your knowledge. Submitting this form does not replace site inspections completed by Fire Inspectors.

Signature: _____

Accept: _____ Date: _____