SCHILLER PARK FIRE PREVENTION INSPECTION FORM

9526 W. Irving Park Road, Schiller Park, IL 60176
(847)-678-5136 Fax: (847)-671-8547

Business Name: _____ Date: _____

Address: _____ Inspectors: _____

Violations

1. GENERAL			3.10	Locks, 1001		**EXTENSION CORDS**			**9. COMMERCIAL HOOD/DUCT SYSTEMS**		
1.1	Emergency Numbers Form		3.11	Panic Hardware, 1001		5.9	Condition/Use, 605.5		9.1	Operation/Maintenance, 904.11.6	
1.2	Pre-Plan Form		**INTERIOR PARTITION**			**EMERGENCY LIGHTS**			9.2	Remote Pull, 904.11.1	
1.3	Hazardous Materials List		3.12	Condition, 703		5.10	Adequate, 1006.3		9.3	Portable Fire Extinguisher, 904.11.5	
1.4	Building Diagram		3.13	Drywall (Two Sides), 703		**BATTERY UNITS**			9.4	Fusible Links/Sprinkler Head Replacement, 904.11.6.5	
EXTERIOR			**FIRE WALLS**			5.11	Tested, 1006.3		9.5	System Shut-Off, 904.11.2	
1.5	Rubbish/Waste		3.14	Condition, 703		**EXIT LIGHTS**			9.6	Inspection/Testing, 904.4	
F.D. CONNECTION			3.15	Fire Door, 703		5.12	Working, 1028		**10. SPRINKLER & STANDPIPES**		
1.6	Accessible, 912.2.1		3.16	Operation, 703		5.13	Properly Located, 1028			RISERS & VALVES	
1.7	Swivels Working, 912		3.17	Hold Open Device, 703		**ELEVATORS**			10.1	Condition, 901.6	
1.8	Caps & Plugs, 912.3.1		**STORAGE ARRANGEMENT**			5.14	Inspection Certificate, 225 ICLS 312		10.2	Accessible, 901.6	
FIRE LANE			3.18	Condition, 315		5.15	Emergency Bell, 225 ICLS 312		10.3	Controls Open, 901.6	
1.9	Provide, 502.1		3.19	Height, 315		5.16	Stop, 225 ICLS 312		**DRAINS**		
1.10	Accessible, 502.1		3.20	House Keeping, 315		5.17	Access, 225 ICLS 312		10.4	Marked, 901.6	
GAS METER			**CEILING**			5.18	Emergency Key, 225 ICLS 312		10.5	Accessible, 901.6	
1.11	Condition/Protection, 603.9		3.21	Condition, 703		**6. FLAMMABLE LIQUIDS**				SPARE HEADS	
ADDRESS			**4. HVAC EQUIPMENT UNITS**			6.1	Storage, 3404		10.6	Available, 901.6	
1.12	Adequate, 505.1		4.1	Access to Unit, IMC 306		6.2	Dispensing, 3405		10.7	Wrench, 901.6	
KNOX BOX			4.2	Proper Mounting, IMC 303-304		6.3	Sources of Ignition, 3404.2.4		10.8	Backflow Prevention, 912.5/Title 77 IAC Part 890	
1.13	Adequate, 502.1/506		4.3	Combustion Air, IMC 701-710		6.4	No Smoking Signs, 3404.2.3		**10.9**	Inspection Report, 901.6	
2. ROOF			4.4	Fuel Shut-Offs, IFGC 409		6.5	Class B Fire Extinguisher, 3403.2.1		**11. FIRE ALARM SYSTEM**		
2.1	Condition, 504		4.5	Clear Combustible, IMC 304.8		6.6	Ground/Bond, 3405.3.2		**CONTROL PANEL**		
2.2	Vent Stacks, 910		4.6	Condition of Unit/Flue, IMC 601-607		6.7	Flammable Liquids Cabinet, 3404.3.2		11.1	Accessible, 907.20	
3. INTERIOR			4.7	Boiler Inspection Certificate, 430 ILCS 75		6.8	Self-Closing Can, 3404		11.2	Identified, 907.20	
AISLES			**5. ELECTRICAL**			**7. COMPRESSED GASES**				PULL STATIONS	
3.1	Proper Width, 1001		**CONTROL PANEL**			7.1	Chained, 3003.5		11.3	Accessible, 907.20	
3.2	Arrangement, 1001		5.1	Access, 605.3		7.2	Storage, 3003.5		11.4	Working, 907.20	
EXITWAYS			5.2	Properly Marked, 605.3.1		**8. PORT. FIRE EXTINGUISHER**			**DETECTORS**		
3.3	Proper Number, 1001		**CIRCUITS**			8.1	Condition, 906		11.5	Location, 907.20	
3.4	Obstructed, 1001		5.3	Proper Size, NEC 210		8.2	Location/Mount, 906		11.6	Working, 907.20	
3.5	Locks, 1001		5.4	Identified, NEC 210		8.3	Type, 906		11.7	Inspection Report, 907.20	
3.6	Panic Hardware, 1001		5.5	Unused Openings, NEC 210		8.4	Access, 906		**12. SUPERVISION**		
STAIRWAYS			**OUTLETS**						12.1	Sprinkler System, New Millennium Code VOSP 97.03	
3.7	Proper Number, 1001		5.6	G.F.I. Outlet, NEC 210					12.2	Fire Alarm System, New Millennium Code VOSP 97.03	
3.8	Door Swing, 1001		5.7	Proper Number, NEC 210							
3.9	Hold Open Device, 1001		5.8	Cover, NEC 210							

Unless otherwise specified, all referenced codes refer to those contained in the 2006 International Fire Code (IFC).

Note: None of the noted violations constitute an express or implied contract and/or warranty that any or all defects have been discovered. Furthermore, we assume no liability relevant to the oversight of any defects. We reserve the right if violations are discovered in the future to hold you responsible for their correction.

Fire Alarm System: Yes ☐ No ☐

Sprinkler System: Yes ☐ No ☐

Re-Inspection Date _____ Notice Accepted by _____

#	Violation	DESCRIPTION OF VIOLATIONS	Complete

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Business Name: _____ Date: _____

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Chronological Report