Life Safety Inspection Report

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Occupant:				Crystal Lake Fire Rescue Department			
Address:				Fire Prevention Bureau			
					0 W. Woodstock S		
City/Zip Code:				ORYSTA NA			
Telephone:				Crystal Lake Illinois 60014			
Owner:				Phone: (815) 356-3640			
Fire Alarm: Central Remote Base Single Suppresion:				FAX: (815) 477-2568			
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No Violations Noted				Page	of	Re-Inspection Date	ļ
Violations of the City of C	Crystal Lake Ord	linances or Adepted Codes at the above	e premises are h	ereby called to	your attention.	, ,	-
The conditions found a	ind corrections t	o be made are marked with an (X).					
1. Alarm System		4. Heat Producing Appliances		9. Exits Lights (Combination Lights)		14. Elec. / Phone / Mech. Rms.	
A. Annual Certified Test Required		A. Storage of Combustibles within 3'		A. Service Required		A. Combustible Storage Prohibited	_
B. Alarm Panel Inaccessible		C. Repair required		B. Obstructed		B. Requires Self Closing Door	
C. Pull Station Inaccessible		5. Housekeeping / Storage		C. Other		15. Extinguishers	_
D. System Service Required		A. Building Interior		10. Emergency Lights		A. Annual Service Required	_
E. Lock -Out Circuit Panel Re	equired	B. Yard & Exterior		A. Service Required		B. Not Mounted Properly	\dashv
2. Sprinkler/Standpipe System	<u> </u>	C. Excessive Combustibles		B. Obstructed		C. More Units / Coverage Needed	_
A. Annual Certified Test Requ	uired	D. Storage 24" below Ceiling Required		C. Other		D. Blocked	_
B. 18" Clearance Below Head	d Deflector	6. Flammables/Chemicals		11. Exits / Aisles / Doors		16. Elevators	\dashv
C. Riser Controls Blocked		A. Improper Storage		A. Blocked		A. Emergency Key/Phone	_
D, FDC Blocked/Service		B. Need Cabinet/Container		B. Need I	Repair	B. Combustible Storage in Service Room	\perp
E. O.S.&Y. Valves Closed		C. Improper Dispensing		C. Self Closing Door (Operational)		C. Instructions/Certificate	_
F. Annual Pump Test Require	ed	D. Too Close To Open Flame source		D. Self Closing Door (Latches)		D. Fire Service Test	_
G. RPZ/DDC Certification		E. Exceeds Limits		12. Stairs		17. FD Rapid Entry Knox Box	\Box
H. Signs/Gauges Required		F. MSDS Sheets Posted		A. Blocked		A. Building/Occupant Keys	
 Spare Heads/Wrench Req 	uired	7. Compressed Gas Cylinders		B. Improper Storage		B. Knox Box	
J. Standpipe Handles Missing	9	A. Tanks Not Secured		C. Doors (see 11C and 11D)		18. Additional Items	- 17
K. Zone Map Required near s	system	B. Improper Storage		13. Electricity		A. Building Address/Front/Rear	
L. Storage over 12 feet		8. Outside		A. Electrical Panel Blocked		B. Occupancy Load Posted	
3. Hood & Duct Systems		A. Fire Lane Blocked/Posted		B. Open Electrical Circuits or Blanks		C. Ceiting Tiles Required	
A. Semi-Annual Inspection R	lequired	B. Hydrants		C. Remove Improper Electric Service		D. Separation Fire Stopping Required	
B. Cleaning Required		C. Utility Meter (marked & protected)		D. Panet Not Marked		E. No Smoking Signs	
C. Service Needed		D. Dumpster / 5 Feet From Structure		E. G.F.I. Outlet Required		F. Fire Doors (Annual Test)	
Item Description/Loc	ration	Corrected)		Item DescriptionAlocation		Corrected	X
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				Code appoi	T - 45 - 445 - matica shall be spared	the constant because comedy may be done by	
						l upon the occupant because remedy may be done b I below. Reinspections will not be made in less than	
		ards will put you in compliance with fire					
Inspected By: Date:				Received By:		Signature:	
Reinspected By: Date:			NOTE:	Appeal for the above r	notice may be made in writing to:		
Negleting Committed				• •	ion Bureau Chief		
			100 W. Woodstock St.				
Bureau Follow-Up Requested Date:				Crystal Lake, Illinois 60014			