



1333 NW Eastman Parkway, Gresham, Oregon 97030-3813
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 www.greshamoregon.gov/fire

“Service...Excellence”

CHECK SHEET FOR TEST OF EMERGENCY LIGHTING SYSTEMS

Date of Service: _____

Name of Building _____

Address/City/Zip of Building _____

Phone # _____

ANNUAL INSPECTION AND TEST

EXIT SIGNS	PER STANDARDS	N/A	MAINTENANCE REQUIRED
EXIT SIGN (Housing) Undamaged (housing, glazing), secure mounting bracket, guards in place (optional), AC – power pilot lamp (on)	_____	_____	_____
EXIT SIGN (Lamps) Undamaged, unobstructed, illuminated, correct arrow illuminated (left, right), broken lamp, no continuity	_____	_____	_____
EXIT SIGN (Battery /IES) Corrosion, dirty	_____	_____	_____
EXIT SIGN (Wires, Terminals, Connectors) Wire insulation cracked, bare wires, loose terminal or connector	_____	_____	_____
EXIT SIGN - 90 Minute Test Failure, test battery, test transformer, test printed circuit board	_____	_____	_____

EMERGENCY LIGHTING

**PER
STANDARDS**

N/A

**MAINTENANCE
REQUIRED**

EMERGENCY LIGHT (Housing)

Undamaged, secure mounting bracket, AC – power pilot lamp (on), corrosion, dirty

EMERGENCY LIGHT (Lamps)

Undamaged, unobstructed, lamps aimed properly, broken lamp, no continuity

EMERGENCY LIGHT (Battery / IES)

Corrosion, dirty

**EMERGENCY LIGHT (Wires
Terminals, Connectors)**

Wire insulation cracked, bare wires, loose terminal, loose connector

EMERGENCY Light – 90 Minute Test

Failure, test battery, test transformer, test printed circuit board

NUMBER OF UNITS TESTED

Exit Lights _____ Emergency Lights _____ Combo's _____

RECOMMENDATIONS AND COMMENTS (including all recommended repairs):

SERVICING COMPANY

Company Name: _____

Address/City/State/Zip: _____

Phone Number: _____

Name of trained personnel performing service (please print): _____

Signature of trained personnel performing service: _____