NFPA 25 Fire Sprinkler System Monthly/Annual Inspection Checklist

1.0 Form Objective & Regulatory Context

This inspection checklist is designed to document the monthly and annual inspection of fire sprinkler systems in accordance with NFPA 25: Standard for the Inspection, Testing, and Maintenance of Water-Based Fire Protection Systems. Compliance with this standard is required by WorkSafeBC regulations and local fire codes. The form ensures that all critical components are verified, deficiencies are recorded, and corrective actions are tracked to maintain system reliability and life safety.

2.0 Administrative Details

Date of Inspection: ____________________

Time of Inspection: ____________________

Inspector Name: ____________________

System Location / Building Name: ____________________

System Type (Wet/Dry/Pre-action/Deluge): ____________________

Inspection Type (Monthly / Annual): ____________________

3.0 Audit / Inspection Items

☐ Pass ☐ Fail - Verify control valves are in the normal open position and sealed/locked.

☐ Pass ☐ Fail - Check water flow alarm devices for proper operation (e.g., vane-type flow switch).

☐ Pass ☐ Fail - Inspect all sprinkler heads for physical damage, corrosion, or obstructions.

☐ Pass ☐ Fail - Verify that spare sprinkler heads are available in the required cabinet (per NFPA 25).

☐ Pass ☐ Fail - Check pressure gauges on wet pipe systems for normal water pressure readings.

☐ Pass ☐ Fail - Inspect dry pipe valves and ensure the system is properly charged with air pressure.

☐ Pass ☐ Fail - Test the main drain valve and record static and residual pressure readings.

☐ Pass ☐ Fail - Verify that all fire department connections (FDC) are accessible and caps are in place.

☐ Pass ☐ Fail - Inspect pipe hangers and supports for signs of corrosion or loosening.

☐ Pass ☐ Fail - Check that the system is free of leaks and that no unauthorized modifications exist.

☐ Pass ☐ Fail - For annual inspection: test all control valves for full operation and record results.

☐ Pass ☐ Fail - For annual inspection: perform a full flow test of the system (if required by local code).

4.0 Corrective Actions & Deficiencies

Deficiency Description: ____

Location of Deficiency: ____

Immediate Action Taken: ____

Corrective Action Required: ____

Assigned To: ____

Target Completion Date: ____

Status (Open / In Progress / Closed): ____

5.0 Sign-off & Authorization

Inspector Signature: ____________________________ Date: _____________

Fire Safety Manager / Supervisor Signature: ____________________________ Date: _____________

Date of Sign-off: ____________________________ Date: _____________

Regulatory Disclaimer: This audit log is a generic safety template. The end-user assumes all liability for validating all inspection parameters against WorkSafeBC, OH&S, and specific equipment manuals before active shop floor deployment.