

Emergency Exit Route Inspection Checklist

General Information

Details about the inspection and location being assessed.

Inspection Date		
Enter date		
		
nspection Time		
Building/Facility	Name	
	Set My Current Location	

Exit Route/Area Inspected Main Entrance - North West Wing - 2nd Floor Loading Dock - East Other (Specify)
Area Inspected (if Other) Write something
Weather Conditions Clear Rain Snow Fog Other
Other Weather Condition (If Applicable) Write something
Ambient Temperature (°C) Enter a number

Exit Route Identification & Signage

Verification of clear and visible exit route signage.

	Set My Current Location	
Signage Condition Excellent Good Fair Poor Needs Repair/Re		
Signage Visibility Excellent - Easily Good - Mostly V Fair - Partially O Poor - Difficult to	v Visible sible ostructed	

Signage Visibility (Low Light/Emergency Lighting) Excellent Good Fair Poor	
Sign Type Presence Exit Signs Directional Signs Emergency Route Maps Other (Specify in Long Text)	
Describe any missing or damaged signage. Write something	
Number of Exit Signs present Enter a number	
Clearance & Obstructions Assessment of pathways and removal of obstructions. Are exit routes clear of obstructions? Yes, Completely Clear Minor Obstructions Present (e.g., boxes, minor furniture) Significant Obstructions Present (Blocking Exit)	

Write something			
Width of the exit route (f	eet/meters - specit	fy unit in notes)	
Enter a number			
Specify the type of obstrequipment)	uctions found (e.g	J., furniture, stored materi	als,
Write something			
Are fire extinguishers re	adily accessible al	ong the exit route?	
No			
Not Applicable			
Details regarding any dis	crepancies found	in extinguisher placemer	nt.
Write something			

Lighting

Examination of emergency lighting functionality and adequacy.

Lux Level Reading (Foot-Candles)	
Enter a number	
Emergency Lighting Status	
Functional	
Malfunctioning Not Break to	
Not Present	
Battery Backup Functionality (If Applicable)	
Tested & Working	
☐ Not Tested	
Malfunctioning	
Notes on Lighting Condition (e.g., dimness, flickering)	
Write something	
Reflector Condition	
Good	
Dirty/Dusty	
Damaged	

Exit Doors & Hardware

Inspection of exit door functionality, operation, and hardware.

Door Opens Freely? Yes No N/A
Door Swing Direction Correct? Yes No NO N/A
Door Opening Time (seconds) Enter a number
Hardware Condition Good Fair Poor
Detailed Hardware Observations Write something
Door Frame Integrity Intact Minor Damage Significant Damage N/A

Door Hardware Photos (if applicable)



Emergency Exit Devices (Panic Bars)

Checks functionality and proper operation of panic bars and similar devices.

Panic Bar Functionality Fully Functional Partially Functional (requires repair) Non-Functional (requires immediate repair)
Panic Bar Alignment Properly Aligned Misaligned (requires adjustment)
Panic Bar Plate Secureness Securely Mounted Loose/Moving (requires tightening)
Number of Panic Bars Inspected Enter a number
Additional Notes (Panic Bars) Write something

Photo Documentation (if issues)



Fire Alarm System Integration

Confirmation of exit route integration with the fire alarm system.

Is the Exit Route illuminated when the Fire Alarm is triggered? Yes No Not Applicable
Does the Fire Alarm System provide audible and visual alerts along the exit route? Yes No No Not Applicable
Number of Fire Alarm Annunciation Points along the Exit Route Enter a number
Describe any observed issues or discrepancies with Fire Alarm System Integration Write something

Is the Emergency Voice Communication System (EVCS) functional along the exit route (if applicable)?
Yes
□ No
☐ Not Applicable
Date of Last Fire Alarm System Test Relevant to Exit Route
Enter date
Accessibility Considerations
Evaluation of accessibility for individuals with disabilities.
Are accessible exit routes clearly marked with tactile signage?
Yes
□ No
Not Applicable
Distance (in feet) between accessible exits?
Enter a number
Are ramps slopes compliant with accessibility standards (e.g., ADA)?
Yes
□ No
■ Not Applicable

Write something	
re accessible exits free of obstructions that would impede polynomial of the second se	assage?
Not Applicable	
Width of accessible pathway (in inches).	
Enter a number	
view of relevant documentation and training records.	
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ocumentation & Training view of relevant documentation and training records. Last Emergency Exit Route Training Date Enter date Number of Employees Trained (Last Training)	
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Training Records Location Online Database Physical File Cabinet	
If 'Other' selected above, please specify: Write something	
Are Exit Route Maps Posted? Yes No Not Applicable	
Comments/Notes on Documentation & Training Adequacy Write something	

Corrective Actions & Follow-up

Recording of necessary repairs and tracking of completion.

Write something
Priority Level (1-High, 5-Low)
Enter a number
Target Completion Date
Enter date
Assigned to (Department/Individual)
☐ Facility Management ☐ Maintenance Team
Electrical Team
☐ Contractor
Date Corrective Action Completed
Enter date
Status of Corrective Action
Open
☐ In Progress ☐ Completed
On Hold

Write something			
ocumentation o	f Corrective Action	(e.g., Photos, Invoices)	
♣ Upload File			
♣ Upload File			
♣ Upload File			
	son Completing Cor	rective Action	