

Skill Set: Inspect a Commercial Single-Use Occupancy Remodel or Addition Project

Reference: NFPA 1031, 2014 Edition - Chapter 4, Sections 4.2.1, 4.2.2, 4.2.3, 4.2.5, 4.3.1, 4.3.2, and 4.3.4

Candidate Equipment Required: Station uniform, writing instruments, applicable local codes & ordinances (or NFPA 101, Life Safety Code, 2015 edition)

Evaluator Equipment Required: None

Evaluator’s Instructions to the Candidate

At this station, as a take home project, you will be required to inspect a commercial single-use occupancy remodel or addition project within your jurisdiction.

The inspection must be performed so that all deficiencies are discovered, noted, and communicated in your inspection report. To complete this station, you may use a locally adopted code or the current NFPA 101, Life Safety Code, 2015 edition. If you choose to use a fire/building code other than NFPA 101, you must include copies of the pages of the code that you reference in your report. Select three items that are not in compliance and draft a written communication to the owner indicating what is wrong and what actions need to be taken to bring the elements into compliance.

You may use locally adopted inspection forms or the inspection form at the end of this study guide.

Ensure that you complete **all portions** of this station. You must complete this station in **twelve (12) calendar months** from the date of the first written exam of the Inspector I certification test. You are required to submit to the FSTB, a written correspondence, inspection form, and site information form.

To pass this station, you must successfully complete 100% of the steps.

No.	Evaluated Skill Items	First Time		Retest	
		Pass	Fail	Pass	Fail
	Section 4.2.1 – Prepare inspection reports				
1.	Conduct a field inspection.				
2.	Apply codes and standards.				
3.	Communicate orally.				
4.	Communicate in writing.				
	Section 4.2.2 – Recognize the need for a permit				
5.	Communicate orally.				
6.	Communicate in writing.				
	Section 4.2.3 – Recognize the need for a plan review				
7.	Communicate orally.				
8.	Communicate in writing.				
	Section 4.2.5 – Identify the applicable code or standard				
9.	Apply codes and standards.				

(Continued)

No.	Evaluated Skill Items	First Time		Retest	
		Pass	Fail	Pass	Fail
	Section 4.3.1 – Identify the occupancy classification of a single-use occupancy				
10.	Make observations.				
11.	Make correct decisions.				
	Section 4.3.2 – Compute the allowable occupant load of a single-use occupancy, or portion thereof				
12.	Calculate occupant loads.				
13.	Identify occupancy factors related to various occupancy classifications.				
14.	Use measuring tools.				
15.	Make field sketches.				
	Section 4.3.4 – Verify the type of construction for an addition or remodeling project				
16.	Read plans.				
17.	Make decisions.				
18.	Apply codes and standards.				

Candidate Name: _____ Date: _____

Evaluator’s Signature: _____ Date: _____

Station: PASS _____ FAIL _____

If the candidate FAILS this station after both attempts, complete a hard copy record of this skill set, sign it, and turn it in to the Exam Site Coordinator.

Fire Service Training Bureau INSPECTION WORKSHEET

Occupancy Name: _____

Address: _____

Suite: _____

Date Inspected: ____/____/____ Reinspect Due: ____/____/____ Complied Date: ____/____/____

A EXTERIOR	CODE #	FAIL	Description / Location / Corrective
Action			
1 Address Visible			
2 FDC Clearance			
3 Hydrant Clearance/Accessible			
4 Vegetation			
B MEANS OF EGRESS			
1 Exit Doors Unlocked, Unobstructed and Operable			
2 Proper Door Locks			
3 Aisles			
4 Exit Corridors/Stairs Unobstructed			
5 Exit Signs Visible & Battery Backup Working			
6 Emergency Light Working			
7 Emergency Light/Exit Sign			
8 Maximum Occupancy Sign Posted (Assembly Only)			
C FIRE EXTINGUISHER			
1 Current Inspection Tag (Annual), & Access			
2 Extinguisher Visible/Unobstructed/Proper Height			
D SPRINKLER SYSTEM			
1 Current Inspection Tag (Annual)			
2 Sprinkler Riser Clearance			
3 Sprinkler Heads Cleaned & Maintained			
4 Sprinkler Head Clearance			
E FIRE ALARM SYSTEM			
1 Fire Alarm Panel: Inspection Tag (Annual)			
2 Pull Stations Visible & Unobstructed			
F KITCHEN HOOD SYSTEM			
1 Current Inspection Hood			
2 Class K Ext. Current Inspection Tag (Annual)			
3 Cleaning/Maintenance			
G ELECTRICAL			
1 No Extension COrd Used as Permanent Wiring			
2 No Extension Cords through walls/Doors/Ceilings			
3 Panels Properly Labeled			
4 Proper Clearance Around Panels			
5 No Junction Box Covers or Outlet Cover Plates Missing			
H GENERAL			
1 Proper Storage Distance From Ignition Sources			
2 Proper Storage Distnace From Ceiling			
3 No Ceiling Tile Missing			
4 Compressed Cylinders Secured			
5 Proper Storage of Flammable Liquids			
I Knox Box			
1 Updated & Proper Keys			
2 Door Operational/Lubricated			
J OTHER			

This box checked indicates no violations were found during fire inspection.

ORDER TO COMPLY As the occupant you are hereby required to have the above listed violations corrected immediately. You are responsible for providing any other interested parties with a copy of this Inspection Worksheet, including any person(s) who are involved in correcting any violations. A Reinspection will be conducted approximately 30 days after original inspection date listed above to determine compliance. Failure to comply within 30 days will render you liable for reinspection fees as noted on the Reinspection Fee Schedule, unless a written work order is presented to the inspector. I understand these fees and violations as described by the inspector and agree to comply.

Received by: (Print Name) _____ Signature: _____ Inspector (Print/ID): _____

Evaluation Item 1 – Owner/Contractor Verification

I verify that the Inspector candidate listed has my permission to attach the Inspection of the Remodel or Addition of my property.

Signature: _____

Printed Name: _____

Evaluation Item 1 – Information Sheet

Inspect a Commercial Single-Use Occupancy Remodel or Addition Project

Name of Inspector Candidate

Name of Owner

Name of Commercial Occupancy

Occupancy Street Address

City, State, Zip Code

Business Telephone of Occupancy

Description of the business being inspected.

Description of the remodel or addition.

Skill Set: Inspect a School or Other Government Building

Reference: NFPA 1031, 2014 Edition - Chapter 4, Sections 4.2.1, 4.2.5, 4.3.3, 4.3.5, 4.3.6, 4.3.9, 4.3.10, and 4.3.16

Candidate Equipment Required: Station uniform, writing instruments, applicable local codes and ordinances (or NFPA 101, *Life Safety Code*, 2015 edition)

Evaluator Equipment Required: None

Evaluator’s Instructions to the Candidate

At this station, as a take home project, you will be required to inspect a school or other government building – other than a fire station. The building must be equipped with a fire detection system and a fire suppression system

To complete this station, you may use a locally adopted code or the current NFPA 101, Life Safety Code, 2015 edition. If you choose to use a fire/building code other than NFPA 101, you must include copies of the pages of the code that you reference in your report. You may use local inspection forms or the inspection form located at the back of this study guide.

Ensure that you complete **all portions** of this project. You must complete this station in **twelve (12) calendar months** from the date of the first written exam of the Inspector I certification test. You are required to submit to the FSTB, inspection form, and site information form.

To pass this station, you must successfully complete 100% of the steps.

No.	Evaluated Skill Items	First Time		Retest	
		Pass	Fail	Pass	Fail
	Section 4.2.1 – Prepare inspection reports				
1.	Conduct a field inspection.				
2.	Apply codes and standards.				
3.	Communicate orally.				
4.	Communicate in writing.				
	Section 4.2.5 – Identify th applicable code or standard				
5.	Apply codes and standards.				
	Section 4.3.3 – Inspect means of egress elements				
6.	Observe and recognize problems.				
7.	Calculate occupant loads.				
8.	Make basic decisions related to the means of egress.				
9.	Use measuring tools.				
10.	Make field sketches.				
	Section 4.3.5 – Determine the operational readiness of existing fire suppression systems				
11.	Make observations.				
12.	Make decisions.				

(Continued)

No.	Evaluated Skill Items	First Time		Retest	
		Pass	Fail	Pass	Fail
	Section 4.3.5 – Determine the operational readiness of existing fire suppression systems (continued)				
13.	Recognize problems.				
14.	Read reports.				
	Section 4.3.6 – Determine the operational readiness of existing fire detection and alarm systems				
15.	Make observations.				
16.	Make decisions.				
17.	Recognize problems.				
18.	Read reports.				
	Section 4.3.7 – Determine the operational readiness of existing portable fire extinguishers				
19.	Make observations.				
20.	Make decisions.				
21.	Recognize problems.				
22.	Read reports.				
	Section 4.3.9 – Compare an approved plan to an existing fire protection system				
23.	Read and comprehend plans for fire protection systems.				
24.	Make observations.				
25.	Communicate orally and in writing.				
26.	Apply codes and standards.				
27.	Recognize problems.				
28.	Make decisions.				
	Section 4.3.10 – Verify that emergency planning and preparedness measures are in place and have been practiced.				
29.	Identify the emergency evacuation requirements contained in the applicable codes and standards.				
30.	Interpret plans.				
31.	Interpret reports.				
	Section 4.3.16 – Verify fire flows for a site				
32.	Use a Pitot tube.				
33.	Use gauges.				
34.	Use Other data gathering devices.				
35.	Calculate and graph fire flow results.				

(Continued)

Candidate Name: _____ Date: _____

Evaluator's Signature: _____ Date: _____

Station: PASS _____ FAIL _____

If the candidate FAILS this station after both attempts, complete a hard copy record of this skill set, sign it, and turn it in to the Exam Site Coordinator.

Fire Service Training Bureau INSPECTION WORKSHEET

Occupancy Name: _____

Address: _____

Suite: _____

Date Inspected: ____/____/____ Reinspect Due: ____/____/____ Complied Date: ____/____/____

A EXTERIOR	CODE #	FAIL	Description / Location / Corrective
Action			
1 Address Visible			
2 FDC Clearance			
3 Hydrant Clearance/Accessible			
4 Vegetation			
B MEANS OF EGRESS			
1 Exit Doors Unlocked, Unobstructed and Operable			
2 Proper Door Locks			
3 Aisles			
4 Exit Corridors/Stairs Unobstructed			
5 Exit Signs Visible & Battery Backup Working			
6 Emergency Light Working			
7 Emergency Light/Exit Sign			
8 Maximum Occupancy Sign Posted (Assembly Only)			
C FIRE EXTINGUISHER			
1 Current Inspection Tag (Annual), & Access			
2 Extinguisher Visible/Unobstructed/Proper Height			
D SPRINKLER SYSTEM			
1 Current Inspection Tag (Annual)			
2 Sprinkler Riser Clearance			
3 Sprinkler Heads Cleaned & Maintained			
4 Sprinkler Head Clearance			
E FIRE ALARM SYSTEM			
1 Fire Alarm Panel: Inspection Tag (Annual)			
2 Pull Stations Visible & Unobstructed			
F KITCHEN HOOD SYSTEM			
1 Current Inspection Hood			
2 Class K Ext. Current Inspection Tag (Annual)			
3 Cleaning/Maintenance			
G ELECTRICAL			
1 No Extension COrd Used as Permanent Wiring			
2 No Extension Cords through walls/Doors/Ceilings			
3 Panels Properly Labeled			
4 Proper Clearance Around Panels			
5 No Junction Box Covers or Outlet Cover Plates Missing			
H GENERAL			
1 Proper Storage Distance From Ignition Sources			
2 Proper Storage Distnace From Ceiling			
3 No Ceiling Tile Missing			
4 Compressed Cylinders Secured			
5 Proper Storage of Flammable Liquids			
I Knox Box			
1 Updated & Proper Keys			
2 Door Operational/Lubricated			
J OTHER			

This box checked indicates no violations were found during fire inspection.

ORDER TO COMPLY As the occupant you are hereby required to have the above listed violations corrected immediately. You are responsible for providing any other interested parties with a copy of this Inspection Worksheet, including any person(s) who are involved in correcting any violations. A Re-inspection will be conducted approximately 30 days after original inspection date listed above to determine compliance. Failure to comply within 30 days will render you liable for reinspection fees as noted on the Reinspection Fee Schedule, unless a written work order is presented to the inspector. I understand these fees and violations as described by the inspector and agree to comply.

Received by: (Print Name) _____ Signature: _____ Inspector (Print/ID): _____

Evaluation Item 4 – Owner/Contractor Verification

I verify that, I am empowered to be the Point of Contact for the School or Other Government Building being inspected. The Inspector candidate listed has my permission to attach the inspection of the School or Other Government Building.

Signature: _____

Printed Name: _____

Evaluation Item 4 – Information Sheet Inspect a School or Other Government Building

Name of Inspector Candidate

Name of Building Point of Contact

Name of Occupancy

Occupancy Street Address

City, State, Zip Code

Business Telephone of Occupancy

Description of the School or Other Government Building being inspected. .

Skill Set: Inspect a Commercial Enterprise

Reference: NFPA 1031, 2014 Edition - Chapter 4, Sections 4.2.1, 4.2.5, 4.3.8, 4.3.11, 4.3.12, 4.3.13, 4.3.14, 4.3.15, and 4.3.16

Candidate Equipment Required: Station uniform, writing instruments, applicable local codes and ordinances (or NFPA 101, *Life Safety Code*, 2015 edition)

Evaluator Equipment Required: None

Evaluator’s Instructions to the Candidate

At this station, as a take home project, you will be required to inspect a commercial enterprise within your jurisdiction. The building you choose to inspect must be equipped with a fire detection system and a fire suppression system

To complete this station, you may use a locally adopted code or the current NFPA 101, Life Safety Code, 2015 edition. If you choose to use a fire/building code other than NFPA 101, you must include copies of the pages of the code that you reference in your report. You may use local inspection forms or the inspection form located at the back of this study guide.

Ensure that you complete **all portions** of this project. You must complete this station in **twelve (12) calendar months** from the date of the first written exam of the Inspector I certification test. You are required to submit to the FSTB, inspection form, and site information form.

To pass this station, you must successfully complete 100% of the steps.

No.	Evaluated Skill Items	First Time		Retest	
		Pass	Fail	Pass	Fail
	Section 4.2.1 – Prepare inspection reports				
1.	Conduct a field inspection.				
2.	Apply codes and standards.				
3.	Communicate orally.				
4.	Communicate in writing.				
	Section 4.2.5 – Identify the applicable code or standard				
5.	Apply codes and standards.				
	Section 4.3.8 – Recognize hazardous conditions involving equipment, processes, and operations				
6.	Make observations.				
7.	Communicate orally and in writing.				
8.	Apply codes and standards.				
9.	Recognize problems.				
10.	Make decisions.				

(Continued)

No.	Evaluated Skill Items	First Time		Retest	
		Pass	Fail	Pass	Fail
	Section 4.3.11 – Inspect emergency access for an existing site				
11.	Identify the emergency access requirements contained in the applicable codes and standards.				
12.	Make observations.				
13.	Make decisions.				
14.	Use measuring tools.				
	Section 4.3.12 – Verify code compliance for incidental storage, handling, and use of flammable and combustible liquids and gases.				
15.	Make observations.				
16.	Communicate orally and in writing.				
17.	Apply codes and standards.				
18.	Recognize problems.				
19.	Make decisions.				
	Section 4.3.13 – Verify code compliance for incidental storage, handling, and use of hazardous materials.				
20.	Make observations.				
21.	Communicate orally and in writing.				
22.	Apply codes and standards.				
23.	Recognize problems.				
24.	Make decisions.				
	Section 4.3.14 – Recognize a hazardous fire growth potential in a building or space				
25.	Make observations.				
26.	Communicate orally and in writing.				
27.	Apply codes and standards.				
28.	Recognize problems.				
29.	Make decisions.				
	Section 4.3.15 – Determine code compliance				
30.	Make observations.				
31.	Communicate orally and in writing.				
32.	Apply codes and standards.				
33.	Recognize problems.				
34.	Make decisions.				

(Continued)

Candidate Name: _____ Date: _____

Evaluator's Signature: _____ Date: _____

Station: PASS _____ FAIL _____

If the candidate FAILS this station after both attempts, complete a hard copy record of this skill set, sign it, and turn it in to the Exam Site Coordinator.

Fire Service Training Bureau INSPECTION WORKSHEET

Occupancy Name: _____

Address: _____

Suite: _____

Date Inspected: ____/____/____ Reinspect Due: ____/____/____ Complied Date: ____/____/____

A EXTERIOR	CODE #	FAIL	Description / Location / Corrective
Action			
1 Address Visible			
2 FDC Clearance			
3 Hydrant Clearance/Accessible			
4 Vegetation			
B MEANS OF EGRESS			
1 Exit Doors Unlocked, Unobstructed and Operable			
2 Proper Door Locks			
3 Aisles			
4 Exit Corridors/Stairs Unobstructed			
5 Exit Signs Visible & Battery Backup Working			
6 Emergency Light Working			
7 Emergency Light/Exit Sign			
8 Maximum Occupancy Sign Posted (Assembly Only)			
C FIRE EXTINGUISHER			
1 Current Inspection Tag (Annual), & Access			
2 Extinguisher Visible/Unobstructed/Proper Height			
D SPRINKLER SYSTEM			
1 Current Inspection Tag (Annual)			
2 Sprinkler Riser Clearance			
3 Sprinkler Heads Cleaned & Maintained			
4 Sprinkler Head Clearance			
E FIRE ALARM SYSTEM			
1 Fire Alarm Panel: Inspection Tag (Annual)			
2 Pull Stations Visible & Unobstructed			
F KITCHEN HOOD SYSTEM			
1 Current Inspection Hood			
2 Class K Ext. Current Inspection Tag (Annual)			
3 Cleaning/Maintenance			
G ELECTRICAL			
1 No Extension COrd Used as Permanent Wiring			
2 No Extension Cords through walls/Doors/Ceilings			
3 Panels Properly Labeled			
4 Proper Clearance Around Panels			
5 No Junction Box Covers or Outlet Cover Plates Missing			
H GENERAL			
1 Proper Storage Distance From Ignition Sources			
2 Proper Storage Distnace From Ceiling			
3 No Ceiling Tile Missing			
4 Compressed Cylinders Secured			
5 Proper Storage of Flammable Liquids			
I Knox Box			
1 Updated & Proper Keys			
2 Door Operational/Lubricated			
J OTHER			

This box checked indicates no violations were found during fire inspection.

ORDER TO COMPLY As the occupant you are hereby required to have the above listed violations corrected immediately. You are responsible for providing any other interested parties with a copy of this Inspection Worksheet, including any person(s) who are involved in correcting any violations. A Re-inspection will be conducted approximately 30 days after original inspection date listed above to determine compliance. Failure to comply within 30 days will render you liable for reinspection fees as noted on the Reinspection Fee Schedule, unless a written work order is presented to the inspector. I undersatnd thses fees and violations as described by the inspector and agree to comply.

Received by: (Print Name) _____ Signature: _____ Inspector (Print/ID): _____

Evaluation Item 5 – Owner/Contractor Verification

I verify that, I am empowered to be the Point of Contact for the commercial enterprise being inspected. The Inspector candidate listed has my permission to attach the inspection of the commercial enterprise.

Signature: _____

Printed Name: _____

Evaluation Item 5 – Information Sheet Inspect a Commercial Enterprise

Name of Inspector Candidate

Name of Building Point of Contact

Name of Commercial Occupancy

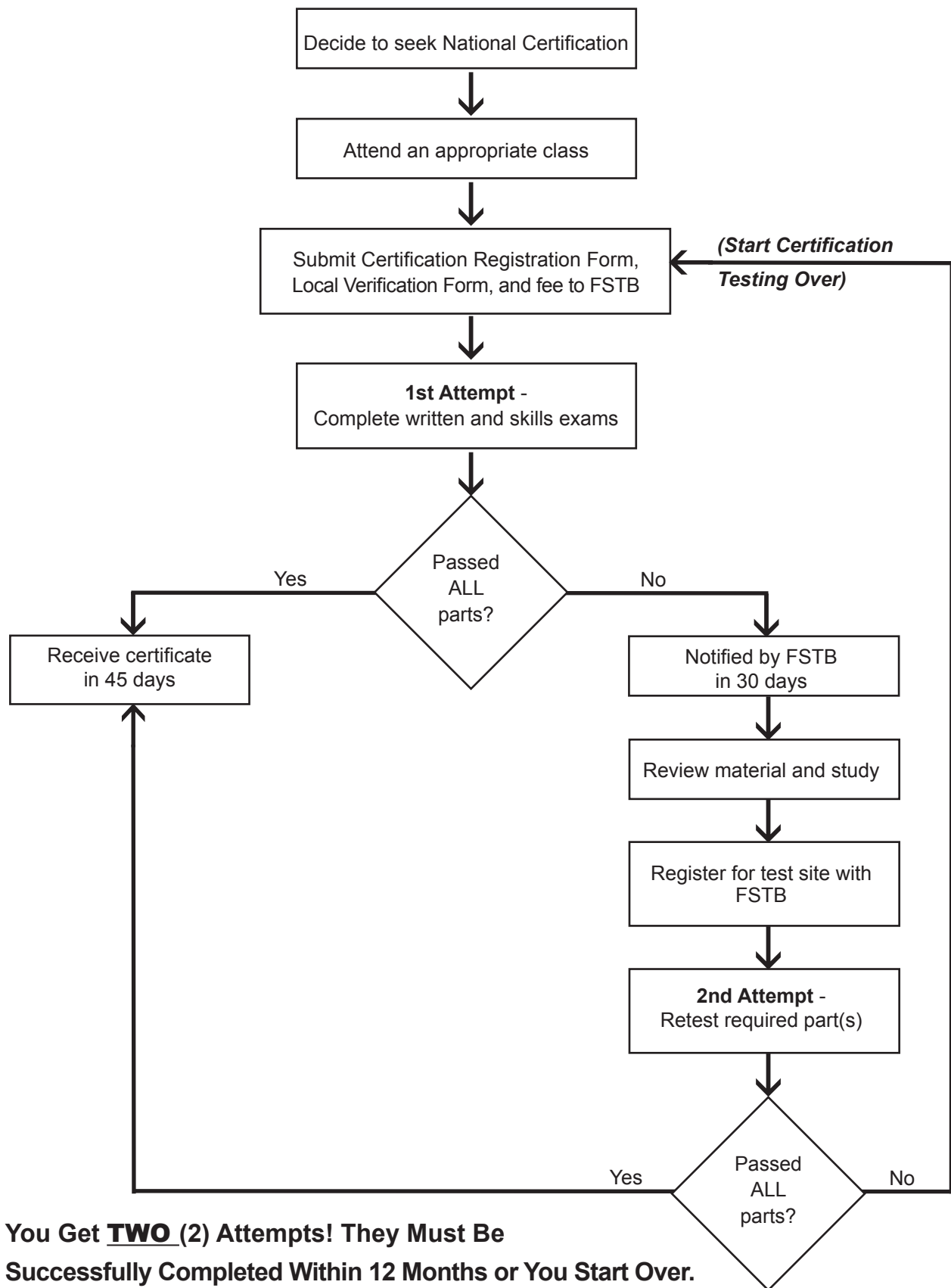
Occupancy Street Address

City, State, Zip Code

Business Telephone of Occupancy

Description of Commercial Enterprise being inspected. .

Certification Flow Chart for Fire Service Inspector



You Get **TWO (2)** Attempts! They Must Be Successfully Completed Within 12 Months or You Start Over.