

## Interim Life Safety Measures Monitoring Report

DATE: \_\_\_\_\_ PROJECT NAME: \_\_\_\_\_

PROJECT NUMBER: \_\_\_\_\_ COORDINATOR: \_\_\_\_\_

NAME OF PERSON COMPLETING SURVEY: \_\_\_\_\_

TOPIC	YES	NO	N/A	COMMENTS
There have been no spills (chemical, water, etc.) since the last survey.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
The construction site is clean and orderly.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
The floor has no trip hazards.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
There are no doors propped or wedged open.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
The storage area is kept clean and orderly.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Fire extinguishers of the proper type are available, in operating condition and properly tagged.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
There are no open and unattended electrical boxes or panels with live energized wires.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
All electrical switches, boxes and panels are functioning properly.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
The fire alarm pull stations and detectors are functioning and accessible.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
The fire protection (sprinkler system) is functional. (Where Applicable).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Material Safety Data Sheets (MSDS's) are available for each hazardous substance on the jobsite.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Contractor and subs know spill and fire plan.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
The emergency phone numbers are posted in a prominent place.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Contractor is using proper protocol and equipment.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
The exit routes are obvious, identified and clear of obstructions.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
The corridors are clear of obstruction.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

The fire separations are in place, including temporary one-hour fire rated partitions with no unprotected opening. All voids in fire rated partitions have been properly sealed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
The access to the construction job site is restricted.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
The Contractor is following UNMC Dust Control procedures including the use of dust carts.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
The construction debris and supplies are moved via designated and approved routes.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
The debris carts, including wheels, are being wiped down before removal for jobsite.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Utility interruptions have been planned with the project coordinator and users notified.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
There have been no unplanned interruptions of utilities.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Welding & cutting permits have been issued prior to work being performed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
ADDITIONAL COMMENTS:				