

Emergency Escape-Use Breathing Apparatus Maintenance Log

Manufacturer: _____

Regulator Serial Number: _____

Tank Serial Number: _____

Visual Inspection														
Month/Year: (MM/YYYY)														
Rate the following:														
Valve:	Good	Bad	Good	Bad	Good	Bad	Good	Bad	Good	Bad	Good	Bad	Good	Bad
Tubes:	Good	Bad	Good	Bad	Good	Bad	Good	Bad	Good	Bad	Good	Bad	Good	Bad
Tank:	Good	Bad	Good	Bad	Good	Bad	Good	Bad	Good	Bad	Good	Bad	Good	Bad
Regulator:	Good	Bad	Good	Bad	Good	Bad	Good	Bad	Good	Bad	Good	Bad	Good	Bad
Pressure Gauge:	Good	Bad	Good	Bad	Good	Bad	Good	Bad	Good	Bad	Good	Bad	Good	Bad
Any signs of:														
Deterioration:	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
Rust:	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
Corrosion:	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
Dents:	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
Cut or Tears:	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
Is pressurization check completed without issue?	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
Is the tank air at least 90%?	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
Are the regulator and warning devices working properly?	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
Comments:														
Date of Inspection:														
Name of Inspector:														
Signature of Inspector:														

- Posi-check testing due every 2 years
- Hydrostatic testing due every 5 years
- Cylinders need replacement every 15 year