



ANNUAL EMERGENCY LIGHTS INSPECTION / TEST REPORT

Fire Prevention Division
1701 Meridian Ave. 2nd Floor
Miami Beach, Florida | 33139

Attention: _____

Received By: _____

I certify that the emergency lights located at the following address have been inspected and/or tested for proper operation as required by the current adopted NFPA 1 and NFPA 101 code/standard for my occupancy. All emergency lighting shall be functionally tested once each month for a minimum of 30 seconds. An annual test shall be conducted for a 1 - 1/2 hour duration as per NFPA 101-7.93

Owner Name and Mailing Address	
Business Phone	

Address	
Type of Occupancy	

Person performing Inspection / Test	Certificate of Competency No.	
Name: _____		

Contractor / Company performing Inspection / Test	Telephone Number(s)	
Name: _____		
Address: _____		

NOTE: Written records of visual inspections and tests shall be kept by the owner for inspection by the authority having jurisdiction.

The emergency lights at the address above are powered by...

EMERGENCY GENERATOR

BATTERY PACKS

The annual test concluded that the emergency lights at the address above are...

OPERATIONAL

NOT OPERATIONAL

Date of Inspection / Test: _____

Signature: _____

Remarks: _____