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 |
| Tubes: | Good | Bad |
| Tank: | Good | Bad |
| Regulator: | Good | Bad |
| Pressure Gauge: | Good | Bad |
| Any signs of: | | | | | | | | | | | | |
| Deterioration: | Yes | No |
| Rust: | Yes | No |
| Corrosion: | Yes | No |
| Dents: | Yes | No |
| Cut or Tears: | Yes | No |
| Is pressurization check completed without issue? | Yes | No |
| Is the tank air at least 90%? | Yes | No |
| Are the regulator and warning devices working properly? | 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

