

LOGO	Fire Hydrant Monthly Inspection Checklist	Doc Ref #: XYZ/IMS/QHSE/F/00 Issue Date: DD-MM-YYYY Rev #: 00
	QHSE Forms	
	Organization Name	

Inspection Checklist Sr. #: _____

Hydrant ID #		Inspected By	
Location		Approved By	
Inspection Date		Next Inspection	

S/#	Criteria	Yes	No	Remarks
1	Fire hydrant system is identifiable with signs?			
2	Hydrant outlet is slightly more than hand tight?			
3	Hydrant doesn't have any leakage sign?			
4	The gasket is not leaked when valve is in open position?			
5	The hydrant is without cracks, rust, damage or dent etc?			
6	Operating nut is not worn, cracked & corners are not round?			
7	Threads of the nozzle are in good condition?			
8	Hydrant is accessible and there is no blockage?			
9	The hydrant is enclosed in a cabinet (if provided) and is ok?			
10	Operating nut is lubricated?			
11	Packing and Thrust Collar is lubricated?			
12	Open and close nozzle to ensure it is working properly?			
13	The maintenance is done by a certified Fire Hydrant Technician?			
14	Hydrant is used by certified and trained firefighters only?			
15	Safety signs are available and in place to identify the location?			
16	Others			

Prepared By	Approved By
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