

★ EXAMPLE ★

Las Cruces Fire Department Business Inspection Form

File ID #: #####

Prevention Services (575) 528-4150
Business License: Yes No

Date: July 25, 2022

Business Name: T-Bird Tacos & Quesadillas W/Burgers Owner/Manager: EZEKIEL

Street Address: 1827 la Puente Lane Zip Code: 88005 Phone: _____

LCFD Company: Dshift Fire Dist: Mesa EM Name/# Contact: EZEKIEL

COMPLIANCE WITH THE 2015 INTERNATIONAL FIRE CODE				
	Y	N	NA	RI P/T
1. Combustible waste and materials storage acceptable (304,315)	✓			
2. Appliances, heating devices and other ignition sources acceptable (305, 315)	✓			
3. Address posted, visible and on curb (505)			✓	
4. Fire lanes, hydrants, FDC accessible and unobstructed (502, 912)	✓			
5. Electrical systems/components safe (605)	✓			
6. Sprinkler, and alarm system serviced / tagged (903, 905, 907)			✓	
7. Fire extinguishers tagged, mounted, appropriate size and number (906)	✓			
<i>July 2022</i>				
8. Exits unobstructed and open (1003, 1010)	✓			
9. Exit and emergency lights operable (1008)	✓			
10. Storage of hazardous materials appropriate and MSDS available (5003, 5004)	✓			
11. Remainder of building and / or areas not previously addressed acceptable	✓			
12. Range hood, appliances, vents, roof clean and free of grease (609,3.3)	✓			
13. Hood suppression system serviced/tagged (904.12.6.2)			✓	
14. All grease producing appliances under hood			✓	
15. Fire extinguisher within 30 feet of cooking appliances / Class K if hood system present (904.13.2)	✓			
<i>July 2022</i>				

Remarks: Mobile food vendor under a Tent Canopy

Re-inspection required: YES NO
 Occupant (Print): Not Available to Sign
 Signature: _____

BRA#: _____
 Inspector (Print): _____
 Signature: _____

THIS IS AN OFFICIAL NOTIFICATION TO CORRECT THE ABOVE VIOLATIONS WITHIN _____ DAYS, AT WHICH TIME A RE-INSPECTION WILL BE PERFORMED. FAILURE TO COMPLY MAY RESULT IN THE ISSUANCE OF A CITATION AS PER LCMC SEC. 11-34.

Re-inspection: Passed Failed
 Occupant (Print): _____
 Signature: _____
 Date referred to Prevention Services: _____

Re-inspection Date: _____
 Inspector (Print): _____
 Signature: _____
 Reason: _____

* EXAMPLE *

APPROVED

JAN
FEB
MAR
APR
MAY
JUNE



JULY
AUG
SEPT
OCT
NOV
DEC

2023 2024 2025