

# SANDY BOTTOM VOL. FIRE & RESCUE

## WEEKLY S.C.B.A. INSPECTION REPORT

Type: MSA Pack Number: 9 Location: Engine 2  
 Model 10026233 MAN Serial EX045007

| Month/Year:                | Day | Day | Day | Day | Day |
|----------------------------|-----|-----|-----|-----|-----|
| Inspected By: (Initials)   |     |     |     |     |     |
| <b>Hoses</b>               |     |     |     |     |     |
| Low Pressure Hose          |     |     |     |     |     |
| High Pressure Hose         |     |     |     |     |     |
| <b>Valves</b>              |     |     |     |     |     |
| Cylinder                   |     |     |     |     |     |
| By-Pass                    |     |     |     |     |     |
| Mainline                   |     |     |     |     |     |
| <b>Cylinder</b>            |     |     |     |     |     |
| Cylinder Number            |     |     |     |     |     |
| <b>Gauge Readings</b>      |     |     |     |     |     |
| Cylinder Gauge             | psi | psi | psi | psi | psi |
| Regulator Gauge            | psi | psi | psi | psi | psi |
| <b>Warning Devices</b>     |     |     |     |     |     |
| Low Air                    |     |     |     |     |     |
| Personal Alert             |     |     |     |     |     |
| <b>Regulator</b>           |     |     |     |     |     |
| Diaphragm                  |     |     |     |     |     |
| Cover                      |     |     |     |     |     |
| Gauge                      |     |     |     |     |     |
| Connections                |     |     |     |     |     |
| <b>Face Mask</b>           |     |     |     |     |     |
| Exhalation Valve           |     |     |     |     |     |
| Head Straps                |     |     |     |     |     |
| Heads Up Display           |     |     |     |     |     |
| Shield Condition           |     |     |     |     |     |
| <b>Harness &amp; Frame</b> |     |     |     |     |     |
| Straps                     |     |     |     |     |     |
| Buckles                    |     |     |     |     |     |
| Hydrostatic Test Date:     |     |     |     |     |     |

\* For all needed repairs fill out Maintenance Request Form \*

✓ = Working Properly  
 NR = Needed Repair