Organisation name Site or unit		FORM Fire Equipment Test Log	
Document ID	EMG-FRM-001	**Version**	1.0
Status	Blank form, to adapt	**Issue date**	
Review date		**Replaces**	
Owner		**Approved by**	
Signature			

Form · EMG-FRM-001 · Version 1.0 · Approved by the ASF Expert Committee

Supports: 1.6

1. Purpose

To record each test of fire alarm, extinguishers, emergency lighting and exits.

2. How to complete

- Complete one form per patient, per area or per period, as the purpose states.
- Tick Yes, No or N/A. Any No is actioned at once and reported to the person named in the procedure.

3. Checks

Item to check	Standard reference
Fire alarm tested	Yes, date recorded [EC]
Extinguishers checked (in date, in place)	Yes [EC]
Emergency lighting tested	Yes [EC]
Exits and corridors clear	Yes [EC]
Defects found and reported	Yes / N/A [EC]

4. Evidence

Reference	Note
E-009	ASF Expert Committee consensus.

5. Change history

Version	Date	What changed	Approval
1.0	—	First approved version	Approved by the ASF Expert Committee

6. References

- Accréditation Sans Frontières (2026). ASF Expert Committee consensus on Standard 1. (E-009)

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