

REPORT FOR FACILITY SAFETY, HEALTH, OR FIRE PROTECTION SURVEY (PART I)

1. REPORT CONTROL NO.		2. DATE OF REPORT		3. BUILDING NAME AND ADDRESS			4. BUILDING NO.	5. PBS FIELD OFFICE						
6. DATE OF SURVEY		<input type="checkbox"/> SCHEDULED <input type="checkbox"/> FOLLOW-UP <input type="checkbox"/> UNSCHEDULED	7. SURVEY CONDUCTED BY			8. TRAVEL COST INCURRED	9. TOTAL MAN-HOURS EXPENDED							
10. DIRECTIVE LEGEND <i>(Reference in Item 14)</i>		11. TYPE OF REPORT <i>(Check appropriate box(es))</i>			12. CATEGORY <i>(Reference in Item 16)</i>									
A - OSHA STANDARD B - NFPA CODE C - ANSI STANDARD		D - GSA DIRECTIVE E - OTHER			<input type="checkbox"/> (F) - FIRE SAFETY/PROTECTION <input type="checkbox"/> (S) - FACILITY SAFETY & HEALTH <input type="checkbox"/> (O) - OSH			<input type="checkbox"/> (I) - PRE-LEASE <input type="checkbox"/> (P) - PRE-OCCUPANCY <input type="checkbox"/> (M) - MISC./OTHER			A - SPRINKLERS B - FIRE ALARMS C - ELEVATOR D - EXISTS (INFPA 101)		E - STRUCTURAL F - ENVIRONMENTAL G - OSHA H - OTHER	
13. ITEM NO.	14. REFERENCED DIRECTIVE	15. FINDINGS AND RECOMMENDATIONS <i>(State finding first, then recommendation, and continue alternately)</i>			16. CATEGORY (12) AND OCCUPIABLE AREA EFFECTED	17. RESPONSIBLE FOR ABATEMENT	18. ABATEMENT PLAN DATE	19. CORRECTION DATE	20. COMMENTS <i>(Include cost)</i>					

(10) DIRECTIVE LEGEND <i>(Reference in Item (14))</i> A - OSHA STANDARD B - NFPA CODE C - ANSI STANDARD		(11) TYPE OF REPORT <i>(Check appropriate box(es))</i> (F) - FIRE SAFETY/PROTECTION (S) - FACILITY SAFETY & HEALTH (O) - OSH		(12) CATEGORY <i>(Reference in Item (16))</i> A - SPRINKLERS B - FIRE ALARMS C - ELEVATOR D - EXISTS (INFPA 101)		D - GSA DIRECTIVE E - OTHER E - STRUCTURAL F - ENVIRONMENTAL G - OSHA H - OTHER	
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