



ANNUAL BUNKER GEAR INSPECTION

Standard: NFPA 1851

Purpose: Improve the protective qualities of the gear and reduce the health risk associated with the carbon, biohazard and carcinogens found on gear after fire and emergency calls. On an annual basis, the District Chiefs will inspect all PPE assigned to each firefighter. The records of this annual inspection will include the serial number of the garment, manufacturer date, and condition of the item. The records will be forwarded to the Training and Safety Division to ensure compliance and then forwarded to Support Services for entry in the Department PPE tracker program.

Please review the Quick Skill for the proper method of cleaning bunker gear.

The annual bunker gear inspection should be completed by August 31st of each year. Battalions will start inspecting the gear in April.

The District Chief is responsible for the inspection of their assigned personnel's gear using the "Advanced Inspection Form" found on the Intranet Department File Cabinet. There is a form for the jacket, a form for the pants, and a form for the Hood/Gloves/Helmet/Boots. The "Routine Inspection Form" is no longer being accepted.


The inspection should follow the form to stay consistent and thorough.

ADVANCE INSPECTION - JACKETS

Name: _____ Battalion: _____
Serial #: _____ Inspected by: _____
Date of Mfg: _____ Date of Inspection: _____

Area of Fail	Jacket Shell	Jacket Lining	Comments
Cleanliness	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	
Rips, Tears, Cuts, etc.	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	
Distorted or Missing Hardware	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	
Structural Damage	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	
Blotchy/Seam Integrity	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	
Quilt Binding Integrity	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	
Public Integrity	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	
Welder Integrity	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	
Reflective Trim Damage	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	
Reflective Trim Reflectivity	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	
Label Integrity/Legibility	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	
Hook and Loop Functionality	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	
Leak Attachment Systems	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	
Closure System Functionality	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	
Accessories Integrity	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	
Correct assembly and size of shell, liner, and insulation	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	
DRD cleanliness	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	
DRD integrity/Physical condition	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	

Comments: _____

Mark damaged areas: 

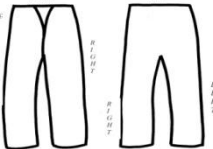
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ADVANCE INSPECTION - PANTS

Name: _____ Battalion: _____
Serial #: _____ Inspected by: _____
Date of Mfg: _____ Date of Inspection: _____

Area of Fail	Pant Shell	Pant Lining	Comments
Cleanliness	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	
Rips, Tears, Cuts, etc.	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	
Distorted or Missing Hardware	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	
Structural Damage	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	
Blotchy/Seam Integrity	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	
Quilt Binding Integrity	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	
Public Integrity	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	
Welder Integrity	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	
Reflective Trim Damage	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	
Reflective Trim Reflectivity	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	
Label Integrity/Legibility	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	
Hook and Loop Functionality	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	
Leak Attachment Systems	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	
Closure System Functionality	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	
Accessories Integrity	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	
Correct assembly and size of shell, liner	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	

Comments: _____

Mark damaged areas: 

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ADVANCE INSPECTION Hood/Gloves/Helmet/Boots

Name: _____ Battalion: _____
Serial #: _____ Inspected by: _____
Date of Mfg: _____ Date of Inspection: _____

Area of Fail	Hood	Gloves	Helmet	Boots	Comments
Cleanliness	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	
Rips, Tears, Cuts, etc.	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	
Distorted or Missing Hardware	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	
Structural Damage	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	
Blotchy/Seam Integrity	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	
Loss of Elasticity	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	
Face opening adjustment	<input type="checkbox"/> P <input type="checkbox"/> F				
Straps	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	
Liner Attachment	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	
Loss of flexibility	<input type="checkbox"/> P <input type="checkbox"/> F				
Damage to shell - "baking" or overheat spots on suspension system	<input type="checkbox"/> P <input type="checkbox"/> F				
Functionality of	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	
Face ventilation	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	
Adjustable ventilation	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	
Face ventilation	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	
Reflective Trim Damage	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	
Impact cap damage	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	
Accessories for compliance	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	
Exposure to abnormal heat	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	
Exposure to heat	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	
Heat counter failure	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	
Closure System Functionality	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	
Loss of water resistance	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	<input type="checkbox"/> P <input type="checkbox"/> F	

Additional Comments: _____

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Advanced Gear Inspection Forms



Special attention should be shown to the following problem areas:

- The Velcro Neck Flap Closure
- The Wristlets
- The removing of the shell from the vapor liner to examine for thermal damage to the liner.
- (DRD) Drag Rescue Device is properly looped through the arms of the vapor liner
- Pant (Fly) Velcro closure
- Reflective trim on coat and pants
- PBCFR issued hood.

Cleaning, repair and replacement of gear can be coordinated through the District Chief and Wayne Chambers at Support Services



These photos are examples of damaged personal protective equipment. If there appears to be damage to the shell make sure to check the vapor liner for damage and or loss of integrity of the garment.

