



# CANBY FIRE DISTRICT

**Facility Name:**  
**Battery-operated Emergency Lighting Testing Log for (Year): \_\_\_\_\_**

A 30-second monthly functional test and a 90-minute annual test must be performed on each of the facility's battery-operated emergency lights. Indicate the type of test conducted and initial each monthly entry.                      M = 30-second test                      A = 90-minute test

Unit Location	Date Installed	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	Battery Replaced

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