**Quarterly Tank Evaluation Log for Breathing Air Cylinders**

**Location:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

| **Date** | **Cylinders On-hand** | | | **Removed from Service During This Inspection Date** | | **Inspector’s Name/Signature** |
| --- | --- | --- | --- | --- | --- | --- |
| # full | # empty | # previously tagged as out of service | # removed due to expiration date (hydrostatic test, manufacturer) | # removed for other reasons (include reason and action in note on an attached page) |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |