**<<Facility Name>>**

**Battery-operated Emergency Lights – Test 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 date of test, the type of test conducted (**M** = 30-second test; **A** = 90-minute test), whether the unit passed or failed the test (**P** = Pass; **F** = Fail \*\*) and initial each monthly entry.

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| Unit Location | Date Installed | JAN | FEB | MAR | APR | MAY | JUN | JUL | AUG | SEP | OCT | NOV | DEC | Battery Replaced |
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\*\* Attach a separate sheet explaining why the unit failed the test and what was done to correct the problem, when and by whom