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COPPERAS COVE FIRE DEPARTMENT
DAY CARE/LICENSED GROUP HOMES
FIRE INSPECTION REPORT

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Name of Facility: _____

Address: _____

Licensed for _____ children. Inspection Date: _____ Time: _____

Yes No N/A

			This facility has a telephone with the fire department number easily available.
			Fire drills are held monthly at different times of the day and documented.
			A working smoke detector is installed properly in each room used by the children and monthly testing is documented. (or approved Fire Alarm System)
			Gas pipes in facility have been inspected for leaks.
			All gas appliances have metal tubing and connections, or otherwise approved.
			There is a flashlight or battery operated light in each room.
			There are fire extinguishers as required. (minimum one 2A10BC)
			This facility's buildings can be evacuated in three minutes.
			A fire evacuation and relocation plan is posted in each room used by the children.
			There are exits to the outside on at least two different sides of each building.
			The doors opening into the fenced yard can be opened by children and the doors between rooms used by children are kept unlocked.
			Doors and pathways are kept clear of obstruction.
			The outdoor play area is free of rubbish and flammable materials.
			Light bulbs used in storage areas or closets are safeguarded from combustible materials.
			Above or below ground floor approved for child care. Limited to children 10 years of age or older.
			Buildings with more than one story, there is one inside and one outside staircase, or approved exception.
			Liquid or gas fueled space heaters must be vented to the outside. unvented space heaters must be approved by the fire marshal.
			Space heaters are enclosed and approved by the fire marshal, children do not have access to floor or wall grates.
			All fireplaces or wood burning stoves are properly vented to the outside and have guards to keep children from falling into them.

This facility is Approved ____ Disapproved ____ for child care.

Comments:

Received by: _____

Title: _____

Inspected by: _____

Title: _____

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