



FIRE SAFETY SCHOOL CHECKLIST

1. Emergency, Fire Safety and Evacuation Plans

Yes No N/A

- | | | | |
|---|--------------------------|--------------------------|--------------------------|
| 1. Do your fire safety and evacuation plans conform to Indiana Fire Code standards AND is it updated annually? (Sec. 404) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Is there a list of 24-hour emergency phone numbers? (404.3.1 (8)) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Are your plans available to employees and do you have updated annual training documentation? (404.5 & 406.2) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Are occupant load signs accurate, securely placed and enforced to prevent overcrowding? (1004.3, 403.4) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Are announcements prepared and given not more than 10 minutes prior to the event to notify the occupants of exit locations in theaters, auditoriums and similar assembly spaces (408.2.2) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. In cases of a special events, has the fire department been notified? (IC 22-14-3-1(c), IC 22-14-3-1 (d)) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

2. Systems Records

Yes No N/A

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|---|--------------------------|--------------------------|--------------------------|
| 1. Are your annual fire alarm, sprinkler, fire extinguisher (as well as monthly visual inspection), fire pump (if applicable) records up to date and absent of deficiencies? (901.6) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Do you have a private fire hydrant ?
If so, are annual inspection records up to date?
<i>Note: Not all hydrants are publicly owned. If you are in doubt contact your local water department.</i> (901.6) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Are your annual emergency backup generator records or 90-minute load test up to date and absent of deficiencies? (604.3) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Are your semi-annual kitchen hood and suppression system records up to date and absent of deficiencies? (901.6) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

3. Sprinkler System/Standpipes/FDCs

Yes No N/A

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|--|--------------------------|--------------------------|--------------------------|
| 1. Are sprinkler control valves operational and free of corrosion? Free from storage, debris or obstructions? (901.6) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Does the FDC have proper signage and is clear of visual obstructions and have proper caps/covers? (912.2) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

4. Alarm System	Yes	No	N/A
1. Is the fire alarm panel clear of all troubles, alarms and supervisory signals? Accessible? Free of storage/debris? (901.6, 907.8)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Is the smoke detector sensitivity test available and free of deficiencies? (907.8.3)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Exits and Egress	Yes	No	N/A
1. Are required <i>exit accesses</i> , <i>exits</i> and <i>exit discharges</i> continuously maintained free from obstructions or impediments to full instant use in the case of fire or other emergency? (1030.1)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Are all emergency and exit lights illuminated and functional? (1104.3, 1104.5)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Are exit signs visible throughout the facility? Are there decorations obstructing any of them? Does signage create confusion? (1030.4)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Fire/Smoke Doors	Yes	No	N/A
1. Free of obstruction (chairs, boxes, carts, etc.)? Workable, not wedged, closes with alarm activation completely and latches? If connected to the fire alarm system, is the magnetic system operational? (703.2)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Electrical	Yes	No	N/A
1. Are all electrical panels unobstructed? (605.3)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Are all electrical hazards abated and electrical equipment not modified or damaged? (605.1)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Multiplug cube adapters and unfused power taps not complying with NFPA 70 shall be prohibited. (605.4)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Are all power strips plugged directly into a permanent receptacle. (605.4.2)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Are extension cords used ONLY temporarily for portable appliances and plugged directly into receptacles? (605.5 & 605.5.1)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Are all junction boxes, switches and outlets covered with an approved cover and undamaged? (605.6)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

8. Interior

	Yes	No	N/A
1. Is all decorative material suspended from walls and ceilings throughout the facility fire retardant in accordance with NFPA 701? (807.1)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Is artwork in corridors limited to 10% of the ceiling and 20% of the walls? <i>Note: Artwork suspended from the ceiling shall also be NFPA 701 compliant. (807.1.2 & 807.4.3)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Is the facility free of any and all open flames? (308.1)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Are all compressed gas cylinders secured to prevent falling? (5303.5.3)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Name and Title of School Official Conducting Event

Signature and Event Date

Inspection in accordance with **IC 22-14-3-1(d)**