

Family Child Care Home Fire Safety Checklist

Purpose: This checklist is designed to assist child care providers in preparing for their fire safety inspection by listing some of the items to be inspected. This checklist is not all inclusive for fire safety requirements and does not preclude the child care provider from complying with any applicable local fire or building codes. This is not a required form.

	Yes No N/A	Notes
Smoke Detectors	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Battery backup interconnected
Fire Extinguishers	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	2A:10BC- 5 lb. proper mounting
Fire Doors	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Exits	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	No interior keyed locks
Exit Signs	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Not required
Emergency Lighting	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Flashlight or battery backup emergency lights for P.M. (evening) care
Fire Drill/Date	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	One (1) fire drill must be conducted each month. Need to show the date and time of drill, number of children, evacuation time, and number of staff. Less than 3 minutes is considered prompt, greater than 3 minutes but less than 13 minutes is considered slow, and greater than 13 minutes is considered impractical.
Disaster Drill/Date	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	One time every 3 months. Need to show the date and time of drill, number of children, evacuation time, and number of staff.
Telephone	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Corded
House Numbers	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Visible from the street, contrast to bldg.
Fire Alarm System	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Hazardous Material Storage	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	No gas, flammable liquid properly stored, 1 h. fire rated room or sprinkled
Interior Finish	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Class C
Heating System Properly Installed and Maintained	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Correct combustion air & venting
Water Heater Properly Installed and Maintained	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	T & P valve, Drip leg not plastic
Electric Wiring and Equipment	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	NFPA 70
Range Hood System	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Commercial stoves or more than 4 burners
Smoke Barrier-Partitions	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Furnace Room	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	1 hr. rated or sprinkled, correct combustion air and venting
Sprinkler System	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Elevator in Facility	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Valid operating permit
Boiler Room in Facility	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	1 hr. rated or sprinkled, valid operating permit
Carbon Monoxide Detector	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	If any appliances are fueled by fossil fuel.

Note: If you have questions about fire safety, contact your Division of Fire Safety Inspector.