

Part I: General Information and Fire/Life Safety History (complete annually)

Inspection Date

Note: Please insert the date the actual inspection took place.

Inspections shall be performed between July 1st and December 1st of the current school year.

1. Please indicate the primary use of this facility:

- STUDENT INSTRUCTION
- OTHER STUDENT USE

Please Specify:

2. Is there a fire sprinkler system in this facility?

YES NO

If 'yes', is the sprinkler alarm connected with the building alarm?

YES NO

3. Is there a fire hydrant system for facility protection?

YES NO

If YES, indicate ownership of system (select one):

_____ public owned
_____ school owned
other (please specify)

4. Indicate the ownership of this facility

- LEASED
- OWNED

5. What is the current gross Square footage of this facility?

(to the nearest whole ten feet)

6. Fire and Emergency Drills

- a. Per Section 807, paragraph 2 of the New York State Education Law entitled Fire and Emergency Drills, confirm that a copy of Section 807 has been printed and distributed as guidance to teaching staff as required _____ YES _____ NO
- b. Provide dates of twelve fire and emergency drills required by Section 807 of Education Law held between September 1st and June 30th of the previous school year:

FIRE & EMERGENCY DRILLS

NOTE Eight (8) are required between September 1, and December 31
Eight (8) drills are required to be evacuation drills.
Four (4) drills are required to be lockdown drills

	Date	Evacuation	Lockdown
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			

c. If the required number of fire and emergency drills were not held during this reporting cycle, please describe the reason:

d. Average time to evacuate this facility was: _____minutes _____seconds

e. Confirm that arson and fire prevention instruction was provided in accordance with Section 808 of the Education Law (revised 9/1/05) which requires every school in New York State to provide a minimum of 45 minutes of instruction in arson and fire prevention; injury prevention and life safety for each month that school is in session.

_____YES _____NO

f. Confirm that employee fire prevention, evacuation and fire safety training was provided and records maintained are being maintained in accordance with Section F406 of the NYS Fire Code

_____YES _____NO

7. Have there been any fires in this facility since the last annual fire safety inspection report?

_____YES _____NO

a. If YES, indicate: _____total number of fires

b. _____total number of injuries

c. _____ total cost of property damage

8. If the fire alarm system was activated since the last fire safety inspection, was the fire department immediately notified in accordance with Section F401.3.2 of the NYS Fire Code?

_____ YES _____ NO

Part III: NonPublic School Certifications
All sections are required to be completed: Section III-A; III-B III-C & III-D

Section III-A Fire Inspection Method

Which method(s) did the school authorities use to complete the annual fire safety inspection for this building?

Check appropriate box or boxes

- Inspection by the **fire department** of the city, town, village or **fire district** in which the building is located
- Inspection by a **fire corporation** whose territory includes the school building
- Inspection by the **county fire coordinator**, or the officer performing the powers and duties of a county fire coordinator pursuant to a local law, of the county in which the building is located
- Inspection by a **fire inspector (Building Safety Inspector or Code Enforcement Official)** who holds a valid certification

For additional information regarding these methods, please see: <https://www.nysenate.gov/legislation/laws/EDN/807-A>

Section III-B-Fire Inspection by Local Fire Department, Fire District, Fire Corporation, County Fire Coordinator and/ or Fire Inspector (Building Safety Inspector or Code Enforcement official) who holds a valid certification.

The individual noted below inspected this building on _____(date) and the information in this Report represents, to the best of their knowledge and belief, an accurate description of the building and conditions they observed. The individual that performed this inspection has maintained their certification requirements pursuant to 19 NYCRR 1208-3.1.

Inspector's Name: _____ Title: _____

Signature: _____ Date: _____

Inspector's Organization: _____

Inspector's Telephone #: _____ Inspector's Email: _____

Inspector's Code Enforcement Certification # _____
(as assigned by the NYS Department of State)

Section III-C Contact info for the Authority-Having-Jurisdiction [AHJ] Local Municipality, Town or Village

Name of Local/Municipal Code Enforcement Office : _____

Address: _____

Name of contact person : _____ Title: _____

Telephone #: _____ Email address: _____

Section III-D School or Building Administrator, Director, or Headmaster

The individual noted below certifies that this building was inspected as indicated in Section III-A above and hereby submits this fire inspection report on behalf of the Board of Trustees and certifies that:

1. Public notice of report availability has been published, and that
2. Any nonconformances noted as corrected on the *Nonpublic School Fire Safety Non-Conformance Report Sheet* portion of this report were corrected on the date indicated, and that
3. Violations which were not corrected immediately shall be corrected within an accepted period of time as approved by the Commissioner.

Name: _____ Title: _____

Signature: _____ Telephone #: _____

Email: _____