HAMPSHIRE COUNTY SCHOOLS MONTHLY SAFETY INSPECTION REPORT

School / Site: _____ Date: _____

Inspected By (Name & Title): _____

_____

The following checklist must be used for monthly safety inspections. Keep a copy for your records and submit the completed inspection report to the Safety, Security and Maintenance Office. **Report must be submitted by the 5th of the month following inspection.**

		YES	NO
1.	Fence Satisfactory	☐	☐
2.	Playground Equipment Satisfactory	☐	☐
3.	Sidewalks Satisfactory	☐	☐
4.	Outside Steps Satisfactory	☐	☐
5.	Flammable in Safe Storage	☐	☐
6.	Furnace Rooms and Electrical Closets Orderly	☐	☐
7.	Furnace Operational	☐	☐
8.	HVAC Operational	☐	☐
9.	Kitchen Equipment Clean	☐	☐
10.	Kitchen Equipment Operational	☐	☐
11.	Disposal Facility and Area Sanitary	☐	☐
12.	Custodial Storage Orderly	☐	☐
13.	Fire Alarm Operational	☐	☐
14.	Halls Unobstructed	☐	☐
15.	Fire Doors Closed	☐	☐
16.	Inside Side Satisfactory	☐	☐
17.	Inside Railings Satisfactory	☐	☐
18.	Electrical Equipment Operational	☐	☐
19.	Electrical Outlets Satisfactory	☐	☐
20.	Windows Safe	☐	☐
21.	Floors Safe	☐	☐
22.	Rooms free of protrusions (jutting pipe, sharp edges, etc.)	☐	☐
23.	Furniture Safe	☐	☐
24.	Room Storage Safe and not within 18” of ceiling	☐	☐
25.	All cabinets close properly	☐	☐
26.	All fire extinguishers mounted properly	☐	☐
27.	All fire extinguishers charged	☐	☐
28.	All fire extinguishers accounted for	☐	☐
29.	Exit Lights Operational	☐	☐
30.	Safety & Security Lights Operational	☐	☐

Comments:

_____

_____

_____

Has a maintenance work order been submitted to cover each deficiency? _____ If not, Why? _____

_____

Inspector: _____ Date Inspected: _____

Principal / Building Administrator _____