



**Gwinnett County Department
Of Fire And Emergency Services
Fire Marshal's Office**

446 West Crogan Street, Ste. 100, Lawrenceville, GA 30045-2475
 Inspection Request: (678) 518-6277, Office: (678) 518-6100, Fax: (678)518-6101
www.gwinnettfiremarshal.com

*****Education/Day Care Inspection Report*****

Name of Facility: _____

File #: _____

Address: _____

City/Zip: _____

Owner/Manager: _____

Type of Occupancy: _____

A. Exterior

1. Hydrant Accessible/Visible.....
2. Hydrant Operates Properly
3. FDC Accessible/Visible.....
4. Fire Vehicle Access to Bldg(s)...
5. Accessible Parking Provided....
6. Ramps/Landings.....
7. Fire Lanes Maintained.....
8. Exit Discharge leads to Public Way...
9. Address is Visible.....

Yes	No	NA

B. Mechanical/Storage Rooms

1. Electrical Rooms Free of Excess Combustibles.....
2. Washer/Dryer Area Free of Excess Combustibles.....
3. Furnance Rooms Free of Excess Combustibles.....
4. All Penetrations Sealed.....
5. Add'l Sprinkler Heads Provided.....
6. Rooms are Secured.....
7. Electrical Panels Clearly Marked.....

Yes	No	NA

C. Interior

1. Exit Ways Clear & Maintained.....
2. Doors Operate Properly.....
3. Displays Cover Less Than 20% of Wall Area.....
4. Exit Doors Operate Properly.....
5. Door Hardware Works Properly...
6. Stairways Clear.....
7. Escape Routes Posted.....
8. Elect. Outlets Protected.....
9. Temp. Ext. Cords of Proper Type..
10. Outlets are not Overloaded.....
11. Fire Drill Records Maintained.....
12. Accessible Restroom Provided...

Yes	No	NA

D. Fire Protection Systems

1. Exit Signs.....
2. Emergency Lights.....
3. Extinguisher Serviced & Tagged.....
4. Extinguisher Proper Type & Size.....
5. Extinguisher Accessible.....
6. Smoke Detectors Operate Properly.....
7. Manual Pull Stations Accessible.....
8. Alarm System Operates Properly.....
9. Kitchen Hood System Service.....
10. Sprinkler System Service.....

Yes	No	NA

Notes: _____

Time & Date of Last Drill: _____

Evacuation Time: _____

Inspected By: _____

Date: _____

Report Received By: _____

Date: _____