

ADULT DAY CARE & CHILD CARE FIRE INSPECTION REPORT

COUNTY Mecklenburg DATE OF INSPECTION 4-12-23 Facility ID # 60003891

Please complete all items below. If not applicable, check N/A in the box with a written explanation attached.

Name of Facility Harris Learning Academy Adult _____ Child X
Address 6141 Statesville Rd Phone 701-921-1153
City Charlotte Zip 28269 Responsible Party _____

GENERAL PRECAUTIONS:

	YES	NO	N/A
1. Attic/basement/closets/garage/furnace room & heaters clear of trash & combustible materials.	<input checked="" type="checkbox"/>		
2. Clearance from ignition sources & combustible materials maintained.	<input checked="" type="checkbox"/>		

EMERGENCY PLANNING:

	YES	NO	N/A
3. Approved evacuation plan posted.	<input checked="" type="checkbox"/>		
4. Evidence of monthly fire drills posted.	<input checked="" type="checkbox"/>		
5. Record of employee training in fire prevention/evacuation & annual fire safety training on site.	<input checked="" type="checkbox"/>		

FIRE SERVICE FEATURES:

	YES	NO	N/A
6. Street Number posted. (Contrasting color to building & height 4" or more.)	<input checked="" type="checkbox"/>		
7. Unobstructed fire apparatus road. (Width of 20' & vertical clearance of not less than 13'6").	<input checked="" type="checkbox"/>		
8. Hydrants/Fire Department connections/control valves clear of obstructions by 3'.	<input checked="" type="checkbox"/>		

BUILDING SERVICES AND SYSTEMS:

	YES	NO	N/A
9. Approved heating system, listed. (No fuel burning or portable electric space heaters.)	<input checked="" type="checkbox"/>		
10. Emergency lighting/exit lights in good operating order.	<input checked="" type="checkbox"/>		
11. Electrical panels clear of storage. (Minimum 30")	<input checked="" type="checkbox"/>		
12. Wiring/fixtures in good condition. (Extension cords not suitable for permanent wiring.)	<input checked="" type="checkbox"/>		
13. Type I hood system over all domestic cooking appliances that produce grease laden vapors.	<input checked="" type="checkbox"/>		

FIRE RESISTANCE RATED CONSTRUCTION:

	YES	NO	N/A
14. Required fire resistant rating maintained. (Walls, partitions, floors)	<input checked="" type="checkbox"/>		
15. Door-hold open devices/automatic door closures operating properly.	<input checked="" type="checkbox"/>		

INTERIOR DECORATIONS & FURNISHINGS:

	YES	NO	N/A
16. No storage of clothing/personal effects in corridors & lobbies.	<input checked="" type="checkbox"/>		
17. Maximum 50% of decorative materials covering walls. Nothing suspended from ceiling	<input checked="" type="checkbox"/>		
18. 20% maximum coverage for artwork & teaching material located on corridor walls.	<input checked="" type="checkbox"/>		
19. Exits free of obstructions.	<input checked="" type="checkbox"/>		

FIRE PROTECTION:

	YES	NO	N/A
20. Sprinkler system maintained with annual test reports provided.			<input checked="" type="checkbox"/>
21. Smoke detector/fire alarm system maintained with annual test reports provided.	<input checked="" type="checkbox"/>		
22. Approved extinguishers mounted properly & in good working order.	<input checked="" type="checkbox"/>		
23. Cooking suppression systems & hood exhaust properly maintained.	<input checked="" type="checkbox"/>		
24. Protective guards (such as screens) on fuel burning furnaces or fireplaces provided.	<input checked="" type="checkbox"/>		

MEANS OF EGRESS:

	YES	NO	N/A
25. All exits & their access (i.e. Aisles & Corridors) free of obstructions.	<input checked="" type="checkbox"/>		
26. All locking devices on exit doors are of an approved type.	<input checked="" type="checkbox"/>		
27. Yards & fencing to allow unobstructed exit to exterior of site.	<input checked="" type="checkbox"/>		

 Approved for day time care only Approved for day time and night careAt the time of this inspection, the fire safety conditions in this facility were: Satisfactory UnsatisfactoryInspector [Signature] #317 Phone 704-589-4954