



School: \_\_\_\_\_ Date: \_\_\_\_\_

## **Annual Health/Life Safety Certificate & Plan Checklist**

*(Please write in the date of when the inspection was performed in the blank provided)*

- \_\_\_\_\_ Pest management Program *(form sent to IDPH every 5 years)*
- \_\_\_\_\_ Inspection of sprinkler system *(done by entity licensed by State Fire Marshall, annually)*
- \_\_\_\_\_ Elevator inspection *(Fire Marshall, annually)*
- \_\_\_\_\_ Boiler inspection *(Fire Marshall, every 2 years)*
- \_\_\_\_\_ Bleacher Inspection *(inside and outside, annually)*
- \_\_\_\_\_ Kitchen Ansul System Inspection *(every 6 months)*
- \_\_\_\_\_ Fire Alarm System *(trained inspector, annually)*
- (Have available) Safety Reference Plans *(site plans, schematic floor plans, utility information, attic plan, etc.)*
- (Have available) Log of emergency lighting tests conducted throughout the year
- (Have available) Documentation on Stage Curtains Flame Proofing
- (Have available) Stage curtain flame-proof certificate

\_\_\_\_\_  
Date/Signature

\_\_\_\_\_  
Title of Position