

Facility Safety Inspection Fire & Life Safety / Environmental Health Before & After School Center - Non-School Location Compliance Plan

Provider's Name: **Faulkton Area OST Program**

City: **Faulkton**

Provider Number: **011102455**

Inspector: **Kelly Gnat**

Date of Inspection: **09/01/2020**

Time of Inspection: **12:21 PM**

The items listed below are those that the provider was not in compliance with at the time of the inspection.

B. ENVIRONMENTAL HEALTH

34. Is the heating and cooling system maintained and inspected annually? 67:42:11:12

<p>Corrections To Be Made:</p> <p>The last inspection was over a year ago on June 13, 2019.</p> <p>The heating and cooling system has been inspected by a service agent.</p>	<p>Agency Action:</p> <p>Compliance Plan</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%;">Suggested Completion Date:</td> <td style="width: 50%;">Actual Completion Date:</td> </tr> <tr> <td style="text-align: center;">10/01/2020</td> <td style="text-align: center;">09/03/2020</td> </tr> </table> <p>Status: Corrected</p>	Suggested Completion Date:	Actual Completion Date:	10/01/2020	09/03/2020
Suggested Completion Date:	Actual Completion Date:				
10/01/2020	09/03/2020				

April Sorenson

Provider Signature

09/01/2020

Date

Kelly Gnat

Inspector Signature

09/01/2020

Date