

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

Provider's Name: **WASP - Wall After School Program**

City: **Wall**

Provider Number: **016598670**

Inspector: **Brian DeShazer**

Date of Inspection: **10/22/2020**

Time of Inspection: **11:34 AM**

Provider was found to be in full compliance

Jennifer Johnson

Provider Signature

10/22/2020

Date

Brian DeShazer

Inspector Signature

10/22/2020

Date