

Facility Safety Inspection Fire & Life Safety / Environmental Health Licensed Day Care Programs Compliance Plan

Provider's Name: **St. Mary School**

City: **Sioux Falls**

Provider Number: **018042094**

Inspector: **Dwight Johnson**

Date of Inspection: **09/04/2019**

Time of Inspection: **7:30 AM**

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

B. ENVIRONMENTAL HEALTH

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

<p>Corrections To Be Made:</p> <p>No verification of the heating/cooling system inspection can be produced at this time of inspection. Please forward inspection compliance proof to Child Care Services.</p> <p>*Heating and cooling system inspection received.</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;">10/04/2019</td> <td style="text-align: center;">10/28/2019</td> </tr> </table> <p>Status: Corrected</p>	Suggested Completion Date:	Actual Completion Date:	10/04/2019	10/28/2019
Suggested Completion Date:	Actual Completion Date:				
10/04/2019	10/28/2019				

Kira Stiles

Provider Signature

09/04/2019

Date

Dwight Johnson

Inspector Signature

09/04/2019

Date