

NAME OF SCHOOL:

DATE INSPECTION CONDUCTED:

INSPECTOR'S NAME & TITLE:

INSTRUCTIONS: This checklist should be used for inspecting major areas related to safety and health in and around SCPS facilities. Each question should be answered either "YES", "NO", or "NA". Are there adequate mats at entrances?

| | | \Yes>No |
|----------|--|----------------|
| | 2. Are all exterior doors tested weekly for ease of operation/locking and proper closure? | Yes No |
| | 3. Do all exit doors close securely by themselves? | Yes No |
| | 1. Are all exit signs in place and illuminated? | Yes No |
| | 5. Are door props around exterior doors removed from premises? | Yes No |
| 6 | | (Yes) No |
| 7 | The same of the sa | (100) 110 |
| | (a) in good serviceable condition and well maintained? | Yes No |
| _ | (b) properly insulated and separated from all combustible material by a safe distance? | (Yes) No |
| 8 | . Is the outside shut-off valve on the gas supply line marked and readily accessible? | Yes No N/ |
| 9 | . Has the HVAC equipment been serviced within the past year? | Yes No |
| 1 | 0. Is someone on site trained and designated to render first aid, and are supplies readily available? | Yes No |
| 1 | 1. Are bloodborne pathogens materials (red bags/gloves/sharps containers, etc.) readily available? | Yes No |
| - | (a) have hist aid personnel received bloodhorne nathogens training? | V |
| 12 | 2. Are the following areas free of accumulations of waste paper, rubbish, old furniture, stage scenery, flammab | le liquids and |
| | - onici debito : | , |
| | (a) Mechanical Rooms and Electrical Panels? | (Yes)No NA |
| | (b) Stage/Doorways/Exits? | (Yes) No. NA |
| 40 | (c) Dressing Rooms / Locker Rooms? | Yes No NA |
| 13 14 | | Yes No WA |
| 14 | A TOTAL CONTROL OF THE CONTROL OF TH | Yes No NA |
| 15 | (a) are MSDS sheets on file in accordance with the hazard communication program? | Yes No NA |
| 10 | Has an inventory been taken within the past year for all chemicals? Where is the inventory? Costod and | Yes No NA |
| 16 | (a) is the quantity of hazardous chemicals limited as much as practicable? | Yes No NA |
| 10. | Are approved metal cans with self-closing covers/lids used for storage of oily/combustible waste? | Yes No NA |
| 17. | Are approved metal safety cans used for gasoline and other similar liquids? | Yes No NA |
| 10. | Are all electrical panels and circuits properly labeled, effectively closed, secured, and arc rated? | (Yes) No NA |
| 18. | Are fire extinguishers available in that no more than 100 feet travel distance is required to reach one? | Yes No NA |
| 20. | Have fire extinguishers been inspected or recharged within the last year? | (Yes) No NA |
| 21. | Have all filters on HVAC equipment been checked? DATE: Changed Changed | Yes No NA |
| 22. | Is all floor tile and carpet intact? | Yes No NA |
| 24 | Have the grounds been inspected for glass, pot holes, poison ivy, or any other hazardous condition? | Yes No NA |
| 25. | Are areas around toilets, sinks and water fountains free of leaks? | Yes No NA |
| ۷٠. | Was a separate monthly playground inspection was conducted and documented? | Yes No NA |
| | | |

RETAIN ORIGINAL OF MONTHLY INSPECTION REPORT IN SCHOOL FILES: SUBMIT MONTHLY COPY TO:

Director of Facilities Jim Oliver, 207 W. Main Street, Taylorsville, KY 40071

Phone: 502-477-3250

Fax: 502-477-3259

Email: jim.oliver@spencer.kyschools.us



NAME OF SCHOOL:

SCM5

DATE INSPECTION CONDUCTED:

3-6-19

INSPECTOR'S NAME & TITLE:

Steven Lewis

INSTRUCTIONS: This checklist should be used for inspecting major areas related to safety and health in and around SCPS facilities. Each question should be answered either "YES", "NO", or "NA".

| 1. | Are there adequate mats at entrances? | (es) No |
|-------|--|-------------------|
| 2. | Are all exterior doors tested weekly for ease of operation/locking and proper closure? | ੴNo |
| 3. | Do all exit doors close securely by themselves? | (e) No |
| 4. | Are all exit signs in place and illuminated? | (e) No |
| 5. | Are door props around exterior doors removed from premises? | (es) No |
| 6. | Are all windows free of cracks and broken glass? | ⊘ No |
| 7. | Are all HVAC equipment such as pipes, ducts, air intakes, diffusers, steam lines and other heat sources: | |
| • | (a) in good serviceable condition and well maintained? | (es) No |
| | (b) properly insulated and separated from all combustible material by a safe distance? | (Yes No |
| 8. | Is the outside shut-off valve on the gas supply line marked and readily accessible? | Yes No (NA) |
| 9. | Has the HVAC equipment been serviced within the past year? | (e) No |
| | Is someone on site trained and designated to render first aid, and are supplies readily available? | © No |
| 11 | Are bloodborne pathogens materials (red bags/gloves/sharps containers, etc.) readily available? | (Yes No |
| • • • | (a) have first aid personnel received bloodborne pathogens training? | No No |
| 12 | Are the following areas free of accumulations of waste paper, rubbish, old furniture, stage scenery, flammable I | |
| | other debris? | |
| | (a) Mechanical Rooms and Electrical Panels? | Y@No NA |
| | (b) Stage/Doorways/Exits? | Yes No NA |
| | (c) Dressing Rooms / Locker Rooms? | No NA |
| 13. | | No NA |
| 14. | | res No NA |
| | (a) are MSDS sheets on file in accordance with the hazard communication program? | No NA |
| 15. | Has an inventory been taken within the past year for all chemicals? Where is the inventory? Custodia | (ES) No NA |
| | (a) is the quantity of hazardous chemicals limited as much as practicable? | No NA |
| 16. | Are approved metal cans with self-closing covers/lids used for storage of oily/combustible waste? | Yes No 🐠 |
| 17. | Are approved metal safety cans used for gasoline and other similar liquids? | Yes No (NA |
| 18. | Are all electrical panels and circuits properly labeled, effectively closed, secured, and arc rated? | (e) No NA |
| 19. | Are fire extinguishers available in that no more than 100 feet travel distance is required to reach one? | No NA |
| 20. | Have fire extinguishers been inspected or recharged within the last year? | (@ s No NA |
| 21. | Have all filters on HVAC equipment been checked? DATE:) - 1 9 | Yes No NA |
| 22. | Is all floor tile and carpet intact? | No NA |
| 23. | Have the grounds been inspected for glass, pot holes, poison ivy, or any other hazardous condition? | (P) No NA |
| | Are areas around toilets, sinks and water fountains free of leaks? | No NA |
| 25. | Was a separate monthly playground inspection was conducted and documented? | Yes No 🐠 |

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Phone: 502-477-3250 Fax: 502-477-3259 Email: jim.oliver@spencer.kyschools.us



NAME OF SCHOOL:

S.C.E.S

DATE INSPECTION CONDUCTED:

3-5-19

INSPECTOR'S NAME & TITLE:

Joyce LaBraney Custadian

INSTRUCTIONS: This checklist should be used for inspecting major areas related to safety and health in and around SCPS facilities. Each question should be answered either "YES", "NO", or "NA".

| 1. | Are there adequate mats at entrances? | (Yes) No |
|-----|--|-------------|
| 2. | Are all exterior doors tested weekly for ease of operation/locking and proper closure? | Yes) No |
| 3. | Do all exit doors close securely by themselves? | Yes No |
| 4. | Are all exit signs in place and illuminated? | (Yes)No |
| 5, | Are door props around exterior doors removed from premises? | Yes No |
| | Are all windows free of cracks and broken glass? | |
| 7. | | Yes No |
| 1. | Are all HVAC equipment such as pipes, ducts, air intakes, diffusers, steam lines and other heat sources: | (C) |
| | (a) in good serviceable condition and well maintained? | Yes No |
| _ | (b) properly insulated and separated from all combustible material by a safe distance? | (Yes) No |
| 8. | Is the outside shut-off valve on the gas supply line marked and readily accessible? | Yes No (NA) |
| 9. | | Yes No |
| | Is someone on site trained and designated to render first aid, and are supplies readily available? | (Yes No |
| 11. | Are bloodborne pathogens materials (red bags/gloves/sharps containers, etc.) readily available? | (Yes) No |
| | (a) have first aid personnel received bloodborne pathogens training? | Yes, No |
| 12. | Are the following areas free of accumulations of waste paper, rubbish, old furniture, stage scenery, flammable | liquids and |
| | other debris? | • 000 |
| | (a) Mechanical Rooms and Electrical Panels? | (Yes) No NA |
| | (b) Stage/Doorways/Exits? | Yes No NA |
| | (c) Dressing Rooms / Locker Rooms? | Yes No WA |
| 13. | | Yes No (NA) |
| 14. | Are all chemicals (cleaning materials, gasoline, etc) labeled and properly stored? | (Yes No NA |
| | | Yes No NA |
| 15. | (a) are MSDS sheets on file in accordance with the hazard communication program? Has an inventory been taken within the past year for all chemicals? Where is the inventory? Above Time Color | Yes No NA |
| | (a) is the quantity of hazardous chemicals limited as much as practicable? | (Yes No NA |
| 16. | Are approved metal cans with self-closing covers/lids used for storage of oily/combustible waste? | Yes No (NA) |
| 17. | Are approved metal safety cans used for gasoline and other similar liquids? | Yes No NA |
| | Are all electrical panels and circuits properly labeled, effectively closed, secured, and arc rated? | (Yes) No NA |
| | Are fire extinguishers available in that no more than 100 feet travel distance is required to reach one? | VES No NA |
| 20. | Have fire extinguishers been inspected or recharged within the last year? | (Yes) No NA |
| 21. | Have all filters on HVAC equipment been checked? DATE: nec 2018 | No NA |
| | Is all floor tile and carpet intact? | Yes No NA |
| | Have the grounds been inspected for glass, pot holes, poison ivy, or any other hazardous condition? | es No NA |
| 24. | Are areas around toilets, sinks and water fountains free of leaks? | Yes No NA |
| 25. | Was a separate monthly playground inspection was conducted and documented? | Yes No NA |
| | 1 - 13 | TEST NO IVA |

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Fax: 502-477-3259

Email: jim.oliver@spencer.kyschools.us



| NAME OF SCHOOL: | TES |
|----------------------------|---------------------------|
| DATE INSPECTION CONDUCTED: | 3-4-19 |
| INSPECTOR'S NAME & TITLE: | Mille Shonnon / Custodian |

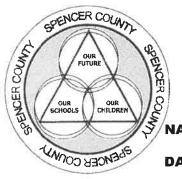
<u>INSTRUCTIONS</u>: This checklist should be used for inspecting major areas related to safety and health in and around SCPS facilities. Each question should be answered either "YES", "NO", or "NA".

| 1. | Are there adequate mats at entrances? | Yes | No |
|-----|--|--------|---------|
| 2. | Are all exterior doors tested weekly for ease of operation/locking and proper closure? | (Tes | No |
| 3. | Do all exit doors close securely by themselves? | Yes | No |
| 4. | Are all exit signs in place and illuminated? | (Yes) | No |
| 5. | Are door props around exterior doors removed from premises? | (Yes) | No |
| | Are all windows free of cracks and broken glass? | (Yes | No |
| 7. | Are all HVAC equipment such as pipes, ducts, air intakes, diffusers, steam lines and other heat sources: | \sim | |
| | (a) in good serviceable condition and well maintained? | Yes | No |
| | (b) properly insulated and separated from all combustible material by a safe distance? | (Ye3 | No _ |
| 8. | Is the outside shut-off valve on the gas supply line marked and readily accessible? | Yes | No (NA |
| 9. | Has the HVAC equipment been serviced within the past year? | (es | |
| | Is someone on site trained and designated to render first aid, and are supplies readily available? | (Yes) | No |
| | Are bloodborne pathogens materials (red bags/gloves/sharps containers, etc.) readily available? | (Yes) | No |
| | (a) have first aid personnel received bloodborne pathogens training? | (Yes | |
| 12. | Are the following areas free of accumulations of waste paper, rubbish, old furniture, stage scenery, flammable | iquids | and |
| | other debris? | | |
| | (a) Mechanical Rooms and Electrical Panels? | (es | No NA |
| | (b) Stage/Doorways/Exits? | | No NA |
| | (c) Dressing Rooms / Locker Rooms? | Yes | No (NA) |
| 13. | Àre areas beneath stairs free of storage materials and are stairs sufficiently slip resistant? | (es | No NA |
| 14. | Are all chemicals (cleaning materials, gasoline, etc) labeled and properly stored? | | No NA |
| | (a) are MSDS sheets on file in accordance with the hazard communication program? | (Yes | No NA |
| 15. | Has an inventory been taken within the past year for all chemicals? Where is the inventory? receiving | | No NA |
| | (a) is the quantity of hazardous chemicals limited as much as practicable? | | No NA |
| 16. | Are approved metal cans with self-closing covers/lids used for storage of oily/combustible waste? | | No NA |
| 17. | Are approved metal safety cans used for gasoline and other similar liquids? | | No WA |
| 18. | Are all electrical panels and circuits properly labeled, effectively closed, secured, and arc rated? | | No NA |
| | Are fire extinguishers available in that no more than 100 feet travel distance is required to reach one? | | No NA |
| 20. | Have fire extinguishers been inspected or recharged within the last year? | | No NA |
| 21. | Have all filters on HVAC equipment been checked? DATE: /2/18 | | No NA |
| | Is all floor tile and carpet intact? | | No NA |
| | Have the grounds been inspected for glass, pot holes, poison ivy, or any other hazardous condition? | | No NA |
| | Are areas around toilets, sinks and water fountains free of leaks? | | No NA |
| 25. | Was a separate monthly playground inspection was conducted and documented? | (Yes) | No NA |
| | | | |

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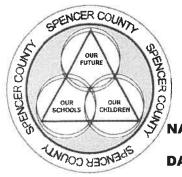


| /50 | OUR OUR CHILDREN | | | |
|-------------|--|---|--------------|------|
| | NAME OF SCHOOL: | old TES | | |
| TUN | DATE INSPECTION CONDUCTED: | 01d TES 3/6/19 | | |
| | INSPECTOR'S NAME & TITLE: | Jim Dliver | | |
| | INSTRUCTIONS: This checklist should be used for inspecting major areas related to safety and health in and around SCPS facilities. Each question should be answered either "YES", "NO", or "NA". | | | |
| 1. | Are there adequate mats at entrances? | | Yes No | |
| 2. | Are all exterior doors tested weekly for ease of operation/locking a | and proper closure? | Pres No | |
| 3. | Do all exit doors close securely by themselves? | and proper closure. | Yes No | |
| 4. | Are all exit signs in place and illuminated? | | No No | |
| 5. | Are door props around exterior doors removed from premises? | | (res)No | |
| 6. | Are all windows free of cracks and broken glass? | | Yes No | |
| 7. | | e steam lines and other heat sources. | 100110 | |
| ١. | 7. Are all HVAC equipment such as pipes, ducts, air intakes, diffusers, steam lines and other heat sources: (a) in good serviceable condition and well maintained? No | | | |
| | (b) properly insulated and separated from all combustible ma | sterial by a safe distance? | No No | |
| 8. | Is the outside shut-off valve on the gas supply line marked and re- | | Yes No. | |
| 9. | Has the HVAC equipment been serviced within the past year? | dully accessible: | No No | |
| | Is someone on site trained and designated to render first aid, and | are supplies readily available? | No No | |
| | Are bloodborne pathogens materials (red bags/gloves/sharps con | | Yes No | |
| 11. | (a) have first aid personnel received bloodborne pathogens t | | No No | |
| 10 | Are the following areas free of accumulations of waste paper, rubl | | | |
| 12. | other debris? | Jish, old fulfillule, stage scenery, hannilable | ilquius alic | 4 |
| | (a) Mechanical Rooms and Electrical Panels? | | YES No | NΙΛ |
| | ` ' | | Aes No | |
| | (b) Stage/Doorways/Exits? | | A S No | |
| 12 | (c) Dressing Rooms / Locker Rooms? | nire cufficiently clin resistant? | Yes No | |
| 13. 14. | Are areas beneath stairs free of storage materials and are sta | | No No | |
| 14. | Are all chemicals (cleaning materials, gasoline, etc) labeled | | AGS No | |
| 15 | (a) are MSDS sheets on file in accordance with the hazard or | 2 Mboro in the inventory? | Yes No | |
| 10. | Has an inventory been taken within the past year for all chemicals | procticable? | | |
| 16 | (a) is the quantity of hazardous chemicals limited as much as | | Tes No | NA |
| | Are approved metal cans with self-closing covers/lids used for sto | | Yes No | |
| | Are approved metal safety cans used for gasoline and other similar | | Yes No | |
| | Are all electrical panels and circuits properly labeled, effectively cl | | de No | |
| | Are fire extinguishers available in that no more than 100 feet trave | | Mes No | |
| | Have fire extinguishers been inspected or recharged within the last | • | Mo No | |
| | Have all filters on HVAC equipment been checked? DATE: | Dec | 1 2 | NA |
| | Is all floor tile and carpet intact? | 200 A | | NA |
| | Have the grounds been inspected for glass, pot holes, poison ivy, | or any other nazardous condition? | Mo No | |
| | Are areas around toilets, sinks and water fountains free of leaks? | | Mos No | |
| 2 5. | Was a separate monthly playground inspection was conducted an | d documented? | Yes No | (NA) |

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Phone: 502-477-3250 Fax: 502-477-3259 Email: jim.oliver@spencer.kyschools.us

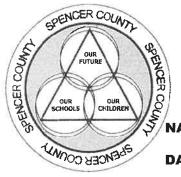


| (/ | OUR CHOOLS CHILDREN | | |
|---|---|---|---|
| K | NAME OF SCHOOL: | Old Preschoul | |
| W | DATE INSPECTION CONDUCTED: | old Preschool | |
| | INSPECTOR'S NAME & TITLE: | Jim Dliver | |
| | TRUCTIONS: This checklist should be used for inspecting major areas stion should be answered either "YES", "NO", or "NA". | s related to safety and health in and around SCP | S facilities. Each |
| 11. | Are there adequate mats at entrances? Are all exterior doors tested weekly for ease of operation/locking Do all exit doors close securely by themselves? Are all exit signs in place and illuminated? Are door props around exterior doors removed from premises? Are all windows free of cracks and broken glass? Are all HVAC equipment such as pipes, ducts, air intakes, diffuse (a) in good serviceable condition and well maintained? (b) properly insulated and separated from all combustible m Is the outside shut-off valve on the gas supply line marked and m Has the HVAC equipment been serviced within the past year? Is someone on site trained and designated to render first aid, and Are bloodborne pathogens materials (red bags/gloves/sharps co (a) have first aid personnel received bloodborne pathogens Are the following areas free of accumulations of waste paper, rule other debris? | ers, steam lines and other heat sources: naterial by a safe distance? eadily accessible? d are supplies readily available? ntainers, etc.) readily available? training? | Ves No No Ves No N |
| 16. 17. 18. 19. 20. 21. 22. 23. 24. | (a) Mechanical Rooms and Electrical Panels?(b) Stage/Doorways/Exits?(c) Dressing Rooms / Locker Rooms?Are areas beneath stairs free of storage materials and are s | d and properly stored? communication program? ls? Where is the inventory? | Yes No NA Yes |

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22. Is all floor tile and carpet intact?

24. Are areas around toilets, sinks and water fountains free of leaks?

25. Was a separate monthly playground inspection was conducted and documented?

Spencer County Public Schools Building Safety Inspection Checklist

No NA

🚱 No NA

P No NA

Yes No (NA

| 1 | 1 M | | | |
|-----|---|---|--|------|
| (/ | OUR CHILDREN S NAME OF SCHOOL: | | | |
| 1 | | Hillview | | |
| Q | DATE INSPECTION CONDUCTED: | Hill view 3/6/19 | | |
| | INSPECTOR'S NAME & TITLE: | Jim Oliver | - | |
| | STRUCTIONS: This checklist should be used for inspecting major areas restion should be answered either "YES", "NO", or "NA". | related to safety and health in and around SCPS | facilities. | Each |
| 1. | Are there adequate mats at entrances? | | (PES) No | |
| 2. | Are all exterior doors tested weekly for ease of operation/locking a | nd proper closure? | (Per No | |
| 3. | Do all exit doors close securely by themselves? | | (Peg No | |
| 4. | Are all exit signs in place and illuminated? | | (Pes) No | |
| 5. | Are door props around exterior doors removed from premises? | | (Ps) No | |
| 6. | Are all Windows free of cracks and broken glass? | a steem lines and other heat sources. | Pes No | |
| 7. | Are all HVAC equipment such as pipes, ducts, air intakes, diffuser | s, steam lines and other heat sources: | Me No | |
| | (a) in good serviceable condition and well maintained?(b) properly insulated and separated from all combustible ma | torial by a cafe distance? | Yes No | |
| 8. | | | Yes No | |
| 9. | | | | |
| | Is someone on site trained and designated to render first aid, and are supplies readily available? | | | |
| | 11. Are bloodborne pathogens materials (red bags/gloves/sharps containers, etc.) readily available? | | | |
| | (a) have first aid personnel received bloodborne pathogens tr | | No No | |
| 12. | Are the following areas free of accumulations of waste paper, rubb | | - | |
| | other debris? | , | | |
| | (a) Mechanical Rooms and Electrical Panels? | | Yes No | NA |
| | (b) Stage/Doorways/Exits? | • | Yes No | NA |
| | (c) Dressing Rooms / Locker Rooms? | | Yes No | (NA) |
| 13. | | | Yes No | |
| 14. | \ | | No No | |
| | (a) are MSDS sheets on file in accordance with the hazard co | | res No | |
| 15. | Has an inventory been taken within the past year for all chemicals | | Mes No | |
| 40 | (a) is the quantity of hazardous chemicals limited as much as | | No No | |
| | Are approved metal cans with self-closing covers/lids used for stor | | Yes No | |
| | Are approved metal safety cans used for gasoline and other simila | | Yes No | NIA |
| | Are all electrical panels and circuits properly labeled, effectively clear fire extinguishers available in that no more than 100 feet trave | | YES No | |
| | Have fire extinguishers been inspected or recharged within the las | | OF No | |
| | | | Mes No | |
| 41. | Have all little of the Ao equipment been checked? DATE. | e <u>c</u> | ١٧٥ جعت | INA |

RETAIN ORIGINAL OF MONTHLY INSPECTION REPORT IN SCHOOL FILES; SUBMIT MONTHLY COPY TO:

23. Have the grounds been inspected for glass, pot holes, poison ivy, or any other hazardous condition?

Director of Facilities Jim Oliver, 207 W. Main Street, Taylorsville, KY 40071

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