

STATE OF NEW HAMPSHIRE  
DEPARTMENT OF HEALTH AND HUMAN SERVICES  
OFFICE OF LEGAL AND REGULATORY SERVICES  
129 Pleasant Street, Brown Building, Concord, NH 03301-3857  
Phone 603-271-9499 FAX 603-271-4968 TDD Access: 1-800-735-2964

**LIFE SAFETY REPORT  
CPS PROGRAM**

<b>IDENTIFYING INFORMATION (NAME OF PROGRAM):</b>		
Name: _____	Phone Number: _____	
Street: _____		
City: _____	State: _____	Zip Code: _____

The Department of Health and Human Services, Office of Legal and Regulatory Services, Health Facilities has the responsibility for certifying residences for individuals with a developmental disability, acquired brain disorder, or mental illness. Prior to the initial certification of a home or before an increase in the number of clients is approved the Office of Legal and Regulatory Services requires inspection of the residence by the local fire authority to determine compliance with New Hampshire RSA 126-A:21.

**THIS FORM IS NOT INTENDED TO BE AN ALL-INCLUSIVE LIFE SAFETY/FIRE INSPECTON**

		YES	NO
1	The CPS program shall have working smoke detectors/alarms installed and maintained as per manufacturer's recommendations.		
2	The CPS program shall have working carbon monoxide detectors/alarms on each floor installed and maintained as per manufacturer's recommendations.		
3	The CPS program has at least two remote ways out from each floor level. (Windows, staircases, etc.)		
4	No spaces shall be accessible only by ladder or folding stairs.		
5	All the doors in the travel path to an exit shall be a minimum of 28 inches in width.		
6	All electrical outlets, switches and junction boxes shall have covers.		
7	GFCI outlets (or circuits) shall be installed by all sinks, showers, and bathtubs.		
<b>NUMBER OF INDIVIDUALS WITH DD, ABD, and BH DIAGNOSIS RECEIVING SERVICES AT THIS LOCATION</b>			

This City/Town used the following fire code(s) for this inspection as specified in RSA 126-A:21; please check any or all options:

- NFPA 101, Chapter 16 New Day Care Occupancies: \_\_\_\_\_
- NFPA 101, Chapter 17 Existing Day Care Occupancies \_\_\_\_\_
- International Building Code (IBC): \_\_\_\_\_
- NFPA 1 \_\_\_\_\_

If any of the responses above are "NO", explain the plan to correct the problem

\_\_\_\_\_

Provisional Approval Granted on: \_\_\_\_\_ Re-Inspection of the Home will be on: \_\_\_\_\_

This Home Meets the Requirements for a Community Residence on: \_\_\_\_\_

Signed: \_\_\_\_\_  
 Fire Inspector  Fire Department

**RE-INSPECTION**

Problems were corrected and the Home Meets the Community Residence Requirements on: \_\_\_\_\_

Signed: \_\_\_\_\_  
 Fire Inspector  Fire Department