#### Sanitation Checklist

SANITATION CHECK	LIS	Т																						Mor	nth				Yea	r		
		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
Inmate Living	А																															
Areas Clean	в																															
	С																															
Sewer Sys. Maint	А																															
T.D.H. Inspection	в																															
	С																															
Cleaning Equipement	А																															
Adequate	в																															
	С																															
Trash Cans w/ lids	А																															
Emptied	В																															
	С																															
Toilets and Sinks	А																															
Inspected and	в																															
Cleaned	С																															
																								Mor	nth				Yea	r		
		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
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Emptied	в																															
	С																															
Toilets and Sinks	А																															
Inspected and	В																															
Cleaned	С																															

Supervisor's Signature:	Date:
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1/9/2013

### **Quarterly Fire Prevention Checklist**

Date:	YES	NO
Is there an approved emergency evacuation plan posted?		
Are extension cords, make shift wiring, heating or cooking devices being used?		
Does the jail have an exit lighting system in good working order?		
Are corridors and exits free of obstruction?		
Are hazardous, combustible materials stored in or near the jail?		
If yes, are the above materials stored in metal lockers or containers?		
Is there an emergency illumination system in good working order in the facility?		
Is there a sufficient number of approved fire extinguishers in the facility?		
Are fire extinguishers regularly checked and dated by authorized person(s)?		
Is there grease build-up in the kitchen and/or inmate living areas?		
Is the facility inspected semi-annually by an approved fire inspector?		
Are fire exit and evacuation drills being held quarterly as required by TCJS?		
Is the fire detection system in good working order?		
Are the smoke alarms in good working order and placed properly?		
SIGNATURE:	TITLE:	

Date:	YES	NO
Is there an approved emergency evacuation plan posted?		
Are extension cords, make shift wiring, heating or cooking devices being used?		
Does the jail have an exit lighting system in good working order?		
Are corridors and exits free of obstruction?		
Are hazardous, combustible materials stored in or near the jail?		
If yes, are the above materials stored in metal lockers or containers?		
Is there an emergency illumination system in good working order in the facility?		
Is there a sufficient number of approved fire extinguishers in the facility?		
Are fire extinguishers regularly checked and dated by authorized person(s)?		
Is there grease build-up in the kitchen and/or inmate living areas?		
Is the facility inspected semi-annually by an approved fire inspector?		
Are fire exit and evacuation drills being held quarterly as required by TCJS?		
Is the fire detection system in good working order?		
Are the smoke alarms in good working order and placed properly?		
SIGNATURE:	TITLE:	

### **Record of Quarterly Life Safety Training**

YEAR:								PAGE
		1ST QUARTER		2ND QUARTER		3RD QUARTER		4TH QUARTER
		January-March		April-June		July-September		October-December
Employee Name	Date	Signature	Date	Signature	Date	Signature	Date	Signature

By signing this log, I certify that I have participated in ar Fire Evacuation Drill and understand the procedures for use of the SCBA Air-Pack.

Instructor Name	Date	Signature	Date	Signature	Date	Signature	Date	Signature

### **Record of Quarterly Fire Drill Training Participants**

YEAR:								PAGE	
		<b>1ST QUARTER</b>		2ND QUARTER		3RD QUARTER		4TH QUARTER	
		January-March	April-June			July-September	October-December		
EMPLOYEE	DATE	SIGNATURE	DATE	SIGNATURE	DATE	SIGNATURE	DATE	SIGNATURE	
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Year: \_\_\_\_\_

# Weekly Generator Maintenance and Testing L = Ran Load Test (\*At least once per month) N = Normal Test/ No Load (\*At least once per week)

		L = Ran Load Tes	st (*At lea	ast once per month	ı)	N = Normal Test/	N = Normal Test/ No Load (*At least once per week)						
Status	Date:	Status	Date:	Status	Date:	Status	Date:	Status	Date:	Results/Maintenance:			
	Fuel Level		Fuel Level		Fuel Level		Fuel Level		Fuel Level				
	Oil Level		Oil Level		Oil Level		Oil Level		Oil Level				
	Coolant Level		Coolant Level		Coolant Level		Coolant Level		Coolant Level				
	Air Filter/Cleaner		Air Filter/Cleaner		Air Filter/Cleaner		Air Filter/Cleaner		Air Filter/Cleaner				
	Belts		Belts		Belts		Belts		Belts				
	Lamp Test		Lamp Test		Lamp Test		Lamp Test		Lamp Test				
	Type of Test		Type of Test		Type of Test		Type of Test		Type of Test				
Sign		Sign		Sign		Sign		Sign					
Status	Date:	Status	Date:	Status	Date:	Status	Date:	Status	Date:				
	Fuel Level		Fuel Level		Fuel Level		Fuel Level		Fuel Level				
	Oil Level		Oil Level		Oil Level		Oil Level		Oil Level				
	Coolant Level		Coolant Level		Coolant Level		Coolant Level		Coolant Level				
	Air Filter/Cleaner		Air Filter/Cleaner		Air Filter/Cleaner		Air Filter/Cleaner		Air Filter/Cleaner				
	Belts		Belts		Belts		Belts		Belts				
	Lamp Test		Lamp Test		Lamp Test		Lamp Test		Lamp Test				
	Type of Test		Type of Test		Type of Test		Type of Test		Type of Test				
Sign		Sign		Sign		Sign		Sign					
Status	Date:	Status	Date:	Status	Date:	Status	Date:	Status	Date:				
	Fuel Level		Fuel Level		Fuel Level		Fuel Level		Fuel Level				
	Oil Level		Oil Level		Oil Level		Oil Level		Oil Level				
	Coolant Level		Coolant Level		Coolant Level		Coolant Level		Coolant Level				
	Air Filter/Cleaner		Air Filter/Cleaner		Air Filter/Cleaner		Air Filter/Cleaner		Air Filter/Cleaner				
	Belts		Belts		Belts		Belts		Belts				
	Lamp Test		Lamp Test		Lamp Test		Lamp Test		Lamp Test				
	Type of Test		Type of Test		Type of Test		Type of Test		Type of Test				
Sign		Sign		Sign		Sign		Sign					
Status	Date:	Status	Date:	Status	Date:	Status	Date:	Status	Date:				
	Fuel Level		Fuel Level		Fuel Level		Fuel Level		Fuel Level				
	Oil Level		Oil Level		Oil Level		Oil Level		Oil Level				
	Coolant Level		Coolant Level		Coolant Level		Coolant Level		Coolant Level				
	Air Filter/Cleaner		Air Filter/Cleaner		Air Filter/Cleaner		Air Filter/Cleaner		Air Filter/Cleaner				
	Belts		Belts		Belts		Belts		Belts				
	Lamp Test		Lamp Test		Lamp Test		Lamp Test		Lamp Test				
	Type of Test		Type of Test		Type of Test		Type of Test		Type of Test				
	Type of real												
Sign	Type of Test	Sign	1990 01 1000	Sign		Sign		Sign					

### **GENERATOR TEST REPORT**

L = RAN LOAD TEST (\*At least once per month) N = RAN REGULAR TEST / NO LOAD

(\*At least once per week)

DATE	SIGNATURE	TEST	COMMENT	DATE	SIGNATURE	TEST	COMMENT

# Monthly Life Safety Equipment Inspection Log

DATE	JANUARY	DATE	MAY	DATE	SEPTEMBER	RESULTS \ MA	INTENANCE
	SMOKE ALARMS		SMOKE ALARMS		SMOKE ALARMS		
	SMOKE FANS		SMOKE FANS		SMOKE FANS		
	FIRE EXTINGUISH.'S		FIRE EXTINGUISH.'S		FIRE EXTINGUISH.'S		
	AIR PACK		AIR PACK		AIR PACK		
	FIRE HOSE		FIRE HOSE		FIRE HOSE		
	EXIT LIGHTS		EXIT LIGHTS		EXIT LIGHTS		
	EXIT SIGNS		EXIT SIGNS		EXIT SIGNS		
SIGN.		SIGN.		SIGN.			
DATE	FEBRUARY	DATE	JUNE	DATE	OCTOBER		
	SMOKE ALARMS		SMOKE ALARMS		SMOKE ALARMS		
	SMOKE FANS		SMOKE FANS		SMOKE FANS		
	FIRE EXTINGUISH.'S		FIRE EXTINGUISH.'S		FIRE EXTINGUISH.'S		
	AIR PACK		AIR PACK		AIR PACK		
	FIRE HOSE		FIRE HOSE		FIRE HOSE		
	EXIT LIGHTS		EXIT LIGHTS		EXIT LIGHTS		
	EXIT SIGNS		EXIT SIGNS		EXIT SIGNS		
SIGN.		SIGN.		SIGN.			
DATE	MARCH	DATE	JULY	DATE	NOVEMBER		
	SMOKE ALARMS		SMOKE ALARMS		SMOKE ALARMS		
	SMOKE FANS		SMOKE FANS		SMOKE FANS		
	FIRE EXTINGUISH.'S		FIRE EXTINGUISH.'S		FIRE EXTINGUISH.'S		
	AIR PACK		AIR PACK		AIR PACK		
	FIRE HOSE		FIRE HOSE		FIRE HOSE		
	EXIT LIGHTS		EXIT LIGHTS		EXIT LIGHTS		
	EXIT SIGNS		EXIT SIGNS		EXIT SIGNS		
SIGN.		SIGN.		SIGN.			
DATE	APRIL	DATE	AUGUST	DATE	DECEMBER		
	SMOKE ALARMS		SMOKE ALARMS		SMOKE ALARMS		
	SMOKE FANS		SMOKE FANS		SMOKE FANS		
	FIRE EXTINGUISH.'S		FIRE EXTINGUISH.'S		FIRE EXTINGUISH.'S		N
	AIR PACK		AIR PACK		AIR PACK	DATE	FIRE INSPECTOR SIGNATURE
	FIRE HOSE		FIRE HOSE		FIRE HOSE		
	EXIT LIGHTS		EXIT LIGHTS		EXIT LIGHTS		
	EXIT SIGNS		EXIT SIGNS		EXIT SIGNS		
SIGN. /9/2013		SIGN.		SIGN.			

YEAR: \_\_\_\_\_

## Monthly Life Safety Equipment Inspection Log

DATE					RESULTS \ MAINTENANCE
	SMOKE ALARMS	Is there an approved emergency evacuation plan posted?	Yes	No No	
	SMOKE FANS	Are extension cords, make shift wiring, heating or cooking devices being used?	Yes	🗌 No	
	FIRE EXTINGUISH.'S	Are corridors and exits free of obstruction?	Yes	🗌 No	
	AIR PACK	Are hazardous, combustible materials stored in or near the jail?	Yes	🗌 No	
	FIRE HOSE	Is there an emergency illumination system in good working order in the facility?	Yes	🗌 No	
	EXIT LIGHTS	Is there grease build-up in the kitchen and/or inmate living areas?	Yes	🗌 No	
	EXIT SIGNS				
SIGN.					
DATE					
	SMOKE ALARMS	Is there an approved emergency evacuation plan posted?	Yes	No No	
	SMOKE FANS	Are extension cords, make shift wiring, heating or cooking devices being used?	Yes	No No	
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	EXIT SIGNS				
SIGN.					
DATE					
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	EXIT SIGNS				
SIGN.					
DATE					
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	SMOKE FANS	Are extension cords, make shift wiring, heating or cooking devices being used?	Yes	🗌 No	
	FIRE EXTINGUISH.'S	Are corridors and exits free of obstruction?	🗌 Yes	No No	
	AIR PACK	Are hazardous, combustible materials stored in or near the jail?	🗌 Yes	🗌 No	
	FIRE HOSE	Is there an emergency illumination system in good working order in the facility?	Yes	🗌 No	
	EXIT LIGHTS	Is there grease build-up in the kitchen and/or inmate living areas?	Yes	🗌 No	
	EXIT SIGNS				
SIGN.					
1/9/2013					

### **Record of Quarterly Air Pack Training Participants**

							PAGE	
							4TH QUARTER	
	January-March				July-September	October-December		
DATE	SIGNATURE	DATE	SIGNATURE	DATE	SIGNATURE	DATE	SIGNATURE	
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		IST QUARTER January-March           DATE         SIGNATURE           Image: Ima	January-March	January-March April-June	January-March April-June	January-March April-June July-September	January-March April-June July-September	