

The University of the State of New York  
THE STATE EDUCATION DEPARTMENT  
State Office of Religious and Independent Schools - Room 1078 Education Building Annex  
Albany, New York 12234

**NONPUBLIC FIRE AND BUILDING SAFETY REPORT**

Per NYS Education Law 807-A(1) All school buildings containing classroom, dormitory, laboratory, physical education, dining or recreational facilities for student use, which are owned, operated, or leased by nonpublic schools must be inspected at least annually for hazards which may endanger the lives of students, teachers and employees therein and for compliance with applicable sections of 8NYCRR155 Regulations of t7 ( hrg0c)2 t7 ( hrg/[Tc 0.019 (e)4 (i)69 ( b.9 (o)12 (r)1..6 (oom)0.8 ,(5 ( ooRn)12 (,)15 5 ( s.157 Td [(0)1.7 tAg

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Street Address (NO PO Box Numbers)

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**Part I: General Information and Fire/Life Safety History** (complete annually)

Inspection Date

**Note: Please insert the date the actual inspection took place.**

*Inspections shall be performed between July 1<sup>st</sup> and December 1<sup>st</sup> of the current school year.*

1. Please indicate the primary use of this facility:

STUDENT INSTRUCTION

OTHER STUDENT USE

Please Specify:

2. Is there a fire sprinkler system in this facility?

YES

NO

If 'yes', is the sprinkler alarm connected with the building alarm?

YES

NO

3. Is there a fire hydrant system for facility protection?

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	Date	Evacuation	Lockdown
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2			
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10			
11			
12			

c. If the required number of fire and emergency drills were not held during this reporting cycle, please describe the reason:

d. Average time to evacuate this facility was: \_\_\_\_\_minutes \_\_\_\_\_seconds

e. Confirm that arson and fire prevention instruction was provided in accordance with Section 808 of the Education Law (revised 9/1/05) which requires every school in New York State to provide a minimum of 45 minutes of instruction in arson and fire prevention; injury prevention and life safety for each month that school is in session.

\_\_\_\_\_YES \_\_\_\_\_NO

f. Confirm that employee fire prevention, evacuation and fire safety training was provided and records maintained are being maintained in accordance with Section F406 of the NYS Fire Code

\_\_\_\_\_YES \_\_\_\_\_NO

7. Have there been any fires in this facility since the last annual fire safety inspection report?

\_\_\_\_\_YES \_\_\_\_\_NO

a. If YES, indicate: \_\_\_\_\_total number of fires

b. \_\_\_\_\_total number of injuries

c. \_\_\_\_\_ total cost of property damage

8. If the fire alarm system was activated since the last fire safety inspection, was the fire department immediately notified in accordance with Section F401.3.2 of the NYS Fire Code?

\_\_\_\_\_ YES \_\_\_\_\_ NO

**Part II: Nonpublic School Fire & Building Safety Non-Conformance Report Sheet**

School Name \_\_\_\_\_ Building Name \_\_\_\_\_



**Part III: NonPublic School Certifications**

**All sections are required to be completed: Section III-A; III-B III-C & III-D**

**Section III-A Fire Inspection Method**

Which method(s) did the school authorities use to complete the annual fire safety inspection for this building?

**Check appropriate box or boxes**

- Inspection by the **fire department** of the city, town, village or **fire district** in which the building is located
- Inspection by a **fire corporation** whose territory includes the school building
- Inspection by the **county fire coordinator**, or the officer performing the powers and duties of a county fire coordinator pursuant to a local law, of the county in which the building is located
- Inspection by a **fire inspector (Building Safety Inspector or Code Enforcement Official)** who holds a valid certification

*For additional information regarding these methods, please see: <https://www.nysenate.gov/legislation/laws/EDN/807-A>*

**Section III-B-Fire Inspection by Local Fire Department, Fire District, Fire Corporation, County Fire Coordinator and/ or Fire Inspector (Building Safety Inspector or Code Enforcement official) who holds a valid certification.**

The individual noted below inspected this building on \_\_\_\_\_(date) and the information in this Report represents, to the best of their knowledge and belief, an accurate description of the building and conditions they observed. The individual that performed this inspection has maintained their certification requirements pursuant to 19 NYCRR 1208-3.1.

Inspector's Name: \_\_\_\_\_ Title: \_\_\_\_\_ 2