Environmental Health Inspection Form for Child Care Facilities Subject to Regulation by the State Department of Public Welfare

7 - 12 Children

Circle One: (Foster Group Home - Group	Day Care	Home)
Name of Facility		County
Address		City
Person in Responsible Charge		
Persons(s) Accompanying Inspector		
Name and Address SDPW Representative		
City or County Health Officer		
Age Range of Children	No. o	f Children Enrolled this Date
Licensed No. of Children	Commercia	Non-Profit
Inspection Purpose: License	New	RenewalComplaint_
Date of Last Inspection		
Inspected by		
Approved by		self has a pipe between a tradebay
X Indicates "Deficiency"		
BUILDING AND EQUIPMENT		WATER SUPPLY Public Private
Home is clean and well maintained	ai Di si	rivate well meets TDHR recommendations nd samples submitted
Hot water controlled by thermostat Hot and cold running water available in bathrooms and kitchen	P:	SEWAGE DISPOSAL Public Private rivate sewage system functions
VENTILATION, LIGHTING AND HEATING	No	roperly o evidence of effluent surfacing lush toilets available
Room temperature satisfactory		SOLID WASTE
Gas heaters vented		dequate number covered garbage ontainersarbage stored outside of play area*