Department of Developmental Services

Community-Based Housing Subsidy Program Inspection Form

INDIVIDUAL(S): _____

PROVIDER IF APPLICABLE: _____

ADDRESS: _____

Consent to Inspection *(To be completed if DDS or a Provider Agency is completing the Inspection).*

I _____, hereby authorize the Department of Developmental Services (DDS) or Provider Agency **(circle one)** to enter my residence to review the presence of basic fire and life safety features.

_____

Signature

Building Information

Type of Building											
Year built (If Known)		Single Family	○	Two-Family	○	Three-Family	○	Apartment	○	Condo	○
Room Configuration											
# of Rooms:		# of Floors:		# of Bedrooms:		# of Bathrooms:					

* Apartments and homes with three or more families and/or apartment buildings are required by CGS § 29-305 to be inspected annually by the local fire marshal. Contact the local fire marshal to obtain an Inspection Report to State Agencies form in accordance with the Office of the State Fire Marshal's Directive # 7. This certification, though not required, shall satisfy all requirements of the Community-Based Housing Subsidy Program.

Building Review

Refer to reference document DDS Fire and Life Safety Guidelines for assistance with answering the following questions.

Questions	Yes	No	N/A
Does the building have smoke detectors?	○	○ 1	○
Are the smoke detectors operable?	○	○ 1	○
Are smoke detectors 10 years old or older? If yes, must be replaced.	○ 1	○	○
Does the building have fuel fired equipment (Furnaces/HVAC, Stoves, etc.) ,fire place, or attached garage?	○ 2	○	○
If yes, does the building have carbon monoxide detectors?	○	○ 1	○
Are carbon monoxide detectors operable?	○	○ 1	○
Are carbon monoxide detectors 10 years old or older?	○ 1	○	○
Are there two clear ways out of the apartment/building?	○	○ 3	○
Do doors to the exterior have locks that require special knowledge or a key to exit?	○ 1	○	○
Do the building electrical components appear to be in good working order? (Electrical Covers on, components appear free from damage)	○	○ 1	○

1 If checked please contact local building official to remediate

2 If fuel fired equipment, fire places, or attached garages are present CO detection is required

3 Single exits from buildings are acceptable (windows may be a secondary means of escape; single rooms can exit directly to exterior

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Appearance (Hazards noted/Environmental Concerns)

Comments

Name	Signature	Date