

**Courtesy of: Moultrie Fire Department**  
**26 2nd Ave. NE**  
**Moultrie, GA 31768**

**Home Inspection Checklist**  
 (Check appropriate space for each item,  
 NA - Does not apply)

Yes No NA

Yes No NA

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Is there at least one approved smoke detector outside each sleeping area and one on each floor level of your home.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Do smokers at home know not to smoke in bed, or while taking medication or intoxicated.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	If your smoke detector is battery powered, do you replace the battery every 6 months.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Are large non-tip ashtrays provided for smokers.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Do you test your smoke detectors on a weekly basis to assure proper operation.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Are matches & lighters properly stored out of childrens reach and sight.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Is there a properly serviced and operable portable fire extinguisher easily reached in your home.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Does your family have a fire exit plan posted that shows all of the exits from your home.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Are utility rooms, wash rooms, and storage areas, clean and clear of all unnecessary combustible materials and lint.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Are doors and windows operable without use of a key or special knowledge. Are security bars or shutters operable during a fire emergency.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Are spaces around water heaters, furnaces etc. free of combustible materials, lint, and flammable liquids.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Does your family practice your home escape plan on a monthly basis.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Has all heating equipment been serviced by a licensed technician in the last year.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Do you have a meeting place established on the outside where your family can meet.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Is the furnace filter(s) clean so that air can flow freely.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Do you know what your smoke detector alarm sounds like.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Are gas space heaters in sleeping areas properly vented to outside air.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Do you know what to do if your clothes catch on fire.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Does all curtains, clothing, furniture, and bedding maintain 36 inches clear space away from heating units.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	What number would you call to report a fire.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Is extension cord use minimized, and used only only as temporary wiring.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Is cooking supervised and small children and pets kept away from the stove while in use.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Are all extension cords in good operable condition free from cuts, nicks, splices, abrasions, and loose fittings.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Are pot handles turned in while cooking.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Are extension cords kept out from under rugs, carpet and doors, and off of all nails and pipes.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Are proper gloves, potholders, and mitts used to handle hot pans and cooking utensels.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Are extension cords properly sized for the electrical load they will carry.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Is cooking area kept clean and free of grease accumulations, paper towels, bags and other combustible materials.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Are appliance cords in good operable condition. Replace damaged, worn, or frayed cords.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Do parents know how to properly extinguish a grease or cooking fire on the stove.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Are outside areas and roofs clear of trash, leaves, high grass, and rubbish.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Is gasoline, paint, and other flammable liquids stored outside in approved containers in well vented areas away from heat sources.

Student's Name: \_\_\_\_\_ Date: \_\_\_\_\_ School: \_\_\_\_\_ Teacher: \_\_\_\_\_

Parent's Signature: \_\_\_\_\_