

Pinellas County Schools

Relocatable Classroom Inspection Certificate (Yearly Inspection Report)

Unit Number: B 7205

Unit Location: Clearwater Bus

Inspection Date: 10/20/20

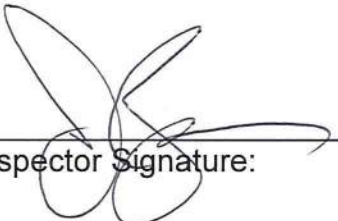
Inspected By: John H. Borycens

License Number: BN 7352


Line #	Inspection Criteria	Condition				Inspection Comments
		New	Good	Fair	Poor	
1	Pier and foundations (Show Location on Back)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2	Tie downs and Anchors (Show Location on Back)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3	Set Backs (Between Units and from property)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4	Steps and Ramps	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Aluminum
5	Means of Egress	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6	Structural Integrity	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7	Roof Trusses	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8	Roof Covering (Note type Shingles, Veral, etc.)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Modified
9	Exterior Walls/Siding	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Metal
10	Exterior Lighting (note if any)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11	Interior Walls and Covering	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Paneling
12	Doors/Windows/ Hardware	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13	Floors/Carpet/Tile Type and Condition	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Line #	Inspection Criteria	Condition				Inspection Comments
		New	Good	Fair	Poor	
14	Ceilings/Tiles/Grid/ Wire Hangers (12ga)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15	Visual Aids (Chalk/Marker Boards and Tack Boards)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16	Weatherproofing (List Deficiencies)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
17	HVAC	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Bard
18	Electrical Receptacles	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
19	Distribution Panel (labeled Correctly)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	GE panel
20	Emergency Lighting	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
21	Interior Light Fixtures (tied to structure)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
22	Fire Alarm (Strobes, Horn, Pull Stations)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
23	Heat Detector/Smoke Detector in Storage Spaces	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
24	Heat Detector/Smoke Detector in Classroom	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
25	Heat Detector/Smoke Detector in Unsupervised Spaces (For VB Only)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	in attic
26	Intercom system	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
27	Fire Extinguisher (Tagged and Current)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
28	Plumbing/Fixtures	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	N/A
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Line #	Inspection Criteria	Condition				Inspection Comments
		Yes	No			
29	Is unit in 100-year flood plain?	<input type="checkbox"/>	<input checked="" type="checkbox"/>			
30	Technology Capable	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
31	Occupancy Certificate Posted in Unit	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
32	Local Agency Reports Posted	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
33	Does unit have any known Environmental factors? If yes, Explain.	<input type="checkbox"/>	<input checked="" type="checkbox"/>			
34	What grade level or usage is unit?	Other				
Additional Comments/Observations						


 Inspector Signature:

10-20-21
 Date:


 Manager Signature:

10/20/21
 Date: