

DATE 8-3-04

APPROVED
 DISAPPROVED

You are hereby notified that this is an Official Order of the County Fire Marshal, stating the defects found to exist in the referenced structure, and further re that you, as owner, agent or person in charge of structure shall have _____ days to complete specified repairs or improvements.

Bus. Phone 898-3950 Owner _____ Occupant Load _____

Name of facility/Address Coastal Middle 170 Whitmarsh Isl Rd

OCCUPANCY: Business Assembly Storage Educational Day Care
Personal Care Home Mercantile Factory Residential Hazardous

- 1. Number of Exit Doors 35 101-SEC 5
- 2. Blocked _____ Locked _____ OK 101-SEC 5
- 3. Exit Sign Good Unsatisfactory _____ NA _____ 101-SEC 5
- 4. Emergency Lights Good Unsatisfactory _____ NA _____ 101-SEC 5
- 5. Panic Hardware Good Unsatisfactory _____ NA _____ 101-SEC 5
- 6. Self-Closing Device Good Unsatisfactory _____ NA _____
- 7. Fire Alarm Yes _____ No _____ NA _____ NFPA 72
- 8. Smoke/Heat Detectors Yes No _____ NA _____ NFPA 73
- 9. Sprinkler System Yes _____ No NA _____ NFPA 13
- 10. Standpipe Yes _____ No NA _____ NFPA 13
- 11. Number of Fire Extinguishers 63
- Proper Type? Yes No _____ NA _____ NFPA 10
- Inspected/Charged Yes No _____ NA _____ NFPA 10
- 12. Fixed Hood System Yes No _____ NA _____ NFPA 96
- 13. Date of Last Service 6-2-04 (REQUIRED EVERY 6 MONTHS)
- 14. Electrical: Good Fair _____ Unsatisfactory _____ NFPA 70
- 15. Overloaded sockets/outlets Yes _____ No NFPA 70
- 16. Missing electrical covers Yes _____ No NFPA 70
- 17. Other (explain) _____
- 18. Excessive Storage of Combustibles Yes _____ No NFPA 90

List Details:

No Faults

① Will verify at office

The signature below of Owner, Occupant, Agent, signifies inspection was made.

Bernard J. [Signature]
Owner/Occupant/Agent Signature

[Signature]
Chatham County Fire Marshal