
DEPUTY FIRE MARSHAL'S CERTIFICATE OF INSPECTION

Approval Period: _____
Specify year

(Name of Institution)

Located at _____

In the town (city) of _____

1. Maximum number of students regularly in the building at one time _____.

2. My signature below certifies that the above named institution's plant has been inspected in accordance with *Title 23, Chapter 28 (Fire Safety Code)* of the *General Laws of Rhode Island, 1956, as amended*, and I find the plant:
 - a. Complies with Fire Safety Code _____
 - b. Has filed a variance _____
 - c. Does not comply with Fire Safety Code _____

The following corrections over and above any variance must be made:

(Attach additional pages if needed.)

Signature of Person Making Inspection

Telephone Number

Name of Inspector

Date of Inspection