



WALDORF RISK SOLUTIONS, LLC

Insurance Professionals Since 1928

Self Inspection Report

Arch/Diocese _____

Parish _____ Inspected by _____

Address _____ Date of Inspection _____

City/State/Zip _____ Telephone _____

Parish Email _____

Instructions:

1. Fill in contact information.
2. Pastor, facility administrator, or maintenance manager, should complete the inspection.
3. To conduct the inspection, print out form and walk through entire premises. Check appropriate responses and note serious problems or items not specifically covered on this form.
4. After the inspection is complete, determine the next action needed to correct the hazards discovered.
5. Send a copy of the report to Jessica Solis.
6. Repairs and corrective measures are to be completed within 30 days and the Follow-Up Report should be returned at that time.

Both the property inspection and the correction of problems discovered are required for this program to be a success. Should you have any questions, problems and/or requests for safety literature, please call Waldorf Risk Solutions at 800-275-9762.

This form was created as a convenient way for a person to conduct a safety inspection at their facility in an attempt to help detect problems and thus reduce exposure to loss. If there are any questions or problems, Waldorf & Associates should be contacted.

Please check building inspected (only one type per inspection):

- Church
 High School
 Rectory
 Grade School
 Convent
 Gym
 Garage
 Other

	YES	NO	N/A
Was the building built, purchased or sold within the past year?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

*If yes, please provide the address, square footage and occupancy on the enclosed Follow-Up Report

Please complete all questions. If not applicable, please check N/A.

<u>Interior</u>	YES	NO	N/A
Basic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1. Are floor surfaces even and free of holes or trip hazards?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Are doors adequately locked and secured?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Are windows free of cracks/breaks?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Are exits clearly marked and in clear view?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Stairs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Are stairs in good repair?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Are stairways free of storage material?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Are handrails sturdy?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fire Safety	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Are there enough fire extinguishers that are at least 5 lb.?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Are fire extinguishers inspected annually and properly charged?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Are fire extinguishers mounted and accessible?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Electrical	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Are wires in good condition and free of fraying?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Are extension cords properly used?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Is there a 3' clear path in front of electrical panels?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Is office equipment outfitted with surge protectors?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Heating, A/C Equipment/Furnace Room	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. Are yearly service checks performed on heating, A/C equipment and/or furnace room?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. Is furnace room free of combustible materials and chemicals?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alarms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17. Are there smoke alarms?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18. Are there carbon monoxide alarms?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- | | YES | NO | N/A |
|--|--------------------------|--------------------------|--------------------------|
| 19. Is there an adequate number of alarms? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 20. Are there fire alarms? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 21. Are fire alarms operational and regularly tested? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 22. Is there a security system? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 23. Are there emergency evacuation plans posted in schools and public meeting areas? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 24. Are all chemicals/flammables properly labeled and stored in safety cabinets? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Exterior

Building

- | | YES | NO | N/A |
|--|--------------------------|--------------------------|--------------------------|
| 25. Is foundation structurally sound? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 26. Is roofing in good repair? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 27. Are gutters, downspouts, and roof drains kept clean and inspected regularly? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 28. Is chimney in good condition? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Protections

- | | | | |
|---|--------------------------|--------------------------|--------------------------|
| 29. Does facility have lightning protection system (i.e. lightning rods)? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 30. Is there adequate lighting? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Walkways/Driveways

- | | | | |
|--|--------------------------|--------------------------|--------------------------|
| 31. Are walkways level and without cracks/holes? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 32. Are entrance mats securely fastened? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 33. Are driveways and parking lots clearly marked? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 34. Are stairs and handrails in good condition? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Playground

- | | | | |
|---|--------------------------|--------------------------|--------------------------|
| 35. Is playground equipment properly maintained? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 36. Is there cushioning material (i.e. gravel, sand, padding) in place and maintained under playground equipment? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 37. Does playground have a sign indicating adult supervision required? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Risk Management Policies

Contract Review/Certificates of Insurance

- | | YES | NO | N/A |
|--|--------------------------|--------------------------|--------------------------|
| 38. Do you have a copy of the Diocesan Contract Review Policy? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

39. Are Certificates of Insurance obtained from outside organizations or individuals renting/using the facilities? YES NO N/A

40. Are Certificates of Insurance obtained from outside contractors scheduled to repair or renovate the facilities? YES NO N/A

*Note: Original certificates should be kept in a file as it is important they are available if needed.

41. Do you have a standard lease agreement? YES NO N/A

Vehicle Safety Policy

42. Do you have a copy of the Diocesan Vehicle Safety Policy? YES NO N/A

43. Do you maintain an up-to-date list of authorized vehicle drivers? YES NO N/A

Please list all vehicles owned by your location.

<u>Year</u>	<u>Make</u>	<u>Model</u>

**All vehicles should be maintained in accordance with manufacturer's recommendations and periodic vehicle safety inspections should be conducted.*

Education/Resource Materials

44. Have appropriate personnel attended any diocesan training programs? YES NO N/A

Cemetery

Areas Inspected	YES	NO	N/A
46. Are the roadways in good condition?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
47. Are the fences/gates in good condition?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
48. Are the ditches and drainage functioning properly?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
49. Is grass and weed under control?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
50. Are there adequate trash receptacles?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
51. Are the trees and shrubs trimmed routinely?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
52. Are the walkways clear and safe?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
53. Is the area free of insect problems?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
54. Is there safety equipment and is it maintained?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
55. Is the fuel storage tank in good condition?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maintenance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
56. Are the markers stable and secure?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
57. Are the statues and church owned memorials maintained?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
58. Are the tombs perpetually taken care of?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mausoleums	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
59. Are the roofs and trim in good condition?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
60. Are the granite or marble structures in good condition?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
61. Do the glass and metal doors work properly?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
62. Are the floors/walkways clear and safe?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
63. Is the area clean and free of foul odors?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
64. Is drainage functioning properly?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
65. Are the painted areas maintained?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please write comments on overall condition of inspected areas and problems discovered during inspection below: