FACILITY INSPECTION CHECKLIST
SMALL FAMILY HOME

Review facility file prior to visit. Check to see that the following information has been updated, if required, and contained in the file. Indicate the date the information was submitted to the licensing agency in the space provided for each item requested.

License Anniversary Date: _____	Date Submitted
License Fee Received	
Outstanding Civil Penalties	
Deficiencies Cited in Last Three Years	
Personnel Report (LIC 500) Updated*	
Affidavit Regarding Client/Resident Cash Resources (LIC 400)*	
Surety Bond (LIC 402) - (if applicable)	
Plan of Operation	
Facility Floor/Plot Plan (LIC 999)	
Transportation Procedures	
Emergency Disaster Plan (LIC 610C)	
Fire Clearance (consistent with terms and limitations of license)	
Bacteriological Analysis of Private Water Supply (if applicable)	
Exceptions and Waivers	
Individualized Health Care Plans for Special Health Care Needs Children (if applicable)	
Meet Pool Fence Requirements (if applicable)	

NOTES AND COMMENTS

**Other verifying documents may be substituted for these LIC forms*