

# OSCEOLA COUNTY DISTRICT SCHOOLS

## ANNUAL COMPREHENSIVE SAFETY INSPECTION

For School Year 7/01/2010 to 6/30/2011

Date of Inspection: 3/29/2011

F.I.S.H. 0853

SchoolName New Dimensions High School

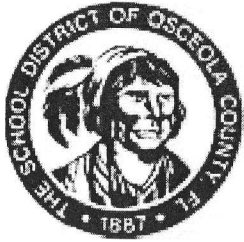
Address 1900 Old Pleasant Hill Road

City Kissimmee

State Florida

Zip 34759

Fire Code	RuleID	Priority	Bldg	Room	Ext	Est. Cost	Type	Deficiency	Times Cited	Cor. Period
-	1(e)8i	B	01	006		\$100.00	M	Ceiling shows water damage-repair leak & replace damaged material	0	60
211	101-7.1.10.2	C	01	006a		\$0.00	O	Exit is obstructed - keep clear	0	30
On ramp to stage and at the ramp entrance										
-	1(e)8i	B	01	100		\$100.00	M	Ceiling shows water damage-repair leak & replace damaged material	0	60
-	1(e)8i	B	01	100		\$0.00	O	Clean cobwebs from walls and/or ceiling	1	60
Wall corners										
-	5(b)	B	01	100		\$50.00	M	Rust needs to be removed - repaint/refinish surface	0	60
On a/c vent										
106	101-15.7.4.3(1)	F	01	103		\$0.00	O	Combustibles cover more than 20% of walls-reduce amount	2	30
804	17(b)	B	01	204		\$0.00	O	Extension cords are not approved for long term use - remove	0	60
106	101-7.1.10.2.1	F	02	100		\$0.00	O	Combustibles are excessive in corridor	1	30
-	1(e)8i	B	03	305		\$0.00	O	Clean dirty floor/carpet	0	60
In custodial room										
-	1(e)8i	B	03	306		\$0.00	O	Clean dirty floor/carpet	0	60
Around equipment in kitchen										
-	N/A	N	04	0000		\$0.00	N	No deficiencies noted	0	0
-	N/A	N	05	0000		\$0.00	N	No deficiencies noted	0	0
-	1(e)8i	B	06	101		\$0.00	O	Clean exterior walls.	0	60
-	13(p)5	E	07	101		\$50.00	M	Safety lines need to be painted/repainted	0	30



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Inspector Signature: Jo Beckman Date of Inspection: 3/29/11 Telephone Number: 407-870-4898

Inspector Signature: N/A Reinspection Date: N/A

Print Name: Jo Beckman Address: 817 Bill Beck Blvd., Kissimmee, Florida 34744

For N, PK, KG-12 and Florida School for the Deaf and Blind ONLY: Emergency Evacuation Drills Held Once Every Month **Yes / No**

Approval of Reports by Board (including letter) **Yes / No** The District has compiled with Section 1013.12(1)(c) F.S. **Yes / No**

The Local Fire Authority has complied with Section 1013.12(2)(c) F.S. **Yes / No**

Signature of Facility Administrator attesting to Emergency Evacuation Drills and Review of Report Acknowledging awareness of discovered deficiencies:

Administrator Signature: \_\_\_\_\_ Date: \_\_\_\_\_