Iowa Department of Health and Human Services

Certificate of Inspection

FIRE SAFETY RULES, REGULATIONS AND STANDARDS

(Promulgated and adopted pursuant to 661-201.1 (100) through 201.5 (100) and Chapter 237, Code of Iowa)

To: Iowa Department of Health and Human Services

Division of Family Well-Being and Protection- Attn: Carol G.

321 E. 12th St. Des Moines, IA 50319 Email: cgerlem@dhs.state.ia.us

RE:		
	(NAME)	
	(Address, City, State, Zip Coo	de)
I,, being t	he DIAL Fire Inspector, or dul	y appointed representative for Iowa Department of
Inspections, Appeals, & Licensing (DIAL),		(Name and Municipality)
have caused an inspection to be made of the above	ve named premises, and certif	fy that it:
(Check One)	□ DOES COMPLY	☐ DOES NOT COMPLY
With the fire hazard policies, rules, regulations and	d standards promulgated by th	ne DIAL Fire Inspector, pursuant to the authority
granted by the Code of Iowa for the center as define	ned in Section 237 of the Cod	e of Iowa, indicated below.
	☐ AMBULATORY	□ NON-AMBULATORY
COMMENTS:		
DATE OF INSPECTION:		
		*(Signature & Title)

*DIAL Fire Inspector, Iowa Department of Inspections, Appeals, & Licensing ONLY.