

Home Fire Safety Checklist

YES NO

Kitchen Safety

- | | | |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | Does a grown up always stay in the kitchen when food is cooking on the stove? |
| <input type="checkbox"/> | <input type="checkbox"/> | Are stove tops and counters clean and uncluttered? |
| <input type="checkbox"/> | <input type="checkbox"/> | Are the pot handles turned inward so they can't be bumped? |
| <input type="checkbox"/> | <input type="checkbox"/> | Are towels, potholders and other things that can burn well away from the stove? |
| <input type="checkbox"/> | <input type="checkbox"/> | Is there a fire extinguisher within reach of the kitchen? |

Electrical Safety

- | | | |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | Are extension cords used safely (not under carpets or across doorways)? |
| <input type="checkbox"/> | <input type="checkbox"/> | Are electrical cords in good condition, without cracks or frayed areas? |
| <input type="checkbox"/> | <input type="checkbox"/> | Are kitchen appliances (coffee-maker, toaster oven, microwave) plugged into separate receptacle outlets? |

Smoke Alarms/Home Fire Escape

- | | | |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | Does your home have working smoke alarms on every floor and inside or near all sleeping areas? |
| <input type="checkbox"/> | <input type="checkbox"/> | Are the batteries working in all your smoke alarms? (A grown-up should help by pushing the test button to find out.) |
| <input type="checkbox"/> | <input type="checkbox"/> | Are the exits in your home clear of furniture, toys, and clutter? |
| <input type="checkbox"/> | <input type="checkbox"/> | Does your family have a home fire escape plan that includes two exits, usually a door and a window from each room? |
| <input type="checkbox"/> | <input type="checkbox"/> | Has your family picked a safe place to meet outside after you exit your home? |
| <input type="checkbox"/> | <input type="checkbox"/> | Have you and your family practiced a home fire drill within the last six months? |
| <input type="checkbox"/> | <input type="checkbox"/> | Do you know the number to call if there is an emergency? |

