

STATE OF MICHIGAN
Department of Licensing and Regulatory Affairs
Bureau of Survey and Certification

Life Safety Code Attestation for ESRD Facilities

Facility Name:

CCN#: 23-

Facility Address:

(Street)

(City)

, Michigan

(Zip Code)

Please review criteria for exemption status and complete either section 1 or section 2.

SECTION 1 – For LSC Exempt Facilities: By checking both boxes below, I attest that the above facility is exempt from Life Safety Code Inspections. Please note that both boxes must be checked to claim exemption.

The above-named facility provides one or more exits to the outside at grade level from the patient treatment area level. *(Note that the patient exit path from the treatment area may include an accessibility ramp that complies with the Americans with Disabilities Act (ADA);*

AND

The above-named facility is not adjacent to a high hazardous occupancy. *(Note: This type of occupancy is defined in NFPA 101, 2000 Edition at § A.3.3.134.8.2 as “occupancies where gasoline and other flammable liquids are handled, used or stored under such conditions that involve possible release of flammable vapors; where grain dust, wood, or plastic dusts, aluminum or explosives are manufactured, stored or handled; where cotton or other combustible fibers are processed or handled under conditions that might produce flammable flyings; and where other situations of similar hazard exist.”)*

Section 2 – For Non-Exempt Facilities: Please check appropriate boxes.

The above-named facility is not Life Safety Code Exempt, because of the following:

The facility does not provide exit to the outside at grade level from the patient treatment area level.

The above-named facility is adjacent to a high hazardous occupancy.

The facility agrees to notify the MDLARA/Bureau of Survey and Certification/DASH Section if there are any structural changes that would cause the facility to no longer meet the exemption requirements.

(Facility Administrator Name *Please Print*)

(Signature of Facility Administrator)

(Date)

Return form to: LARA-BSCSupport@Michigan.gov