

Michigan Department of Agriculture and Rural Development - Migrant Labor Housing Program

License Inspection Preparation Checklist

Operators may use this worksheet to evaluate the condition of each camp and/or each living unit prior to contacting their inspector for a license inspection. Attach as many copies as needed. Filing with other camp documents is encouraged.

Camp Name		Camp Owner
Camp ID #		

Rule	Inspection Item	Yes	No
15(1)	Are the structures in good repair, sealed from the elements, and thoroughly cleaned (including freshly painted surfaces where stains cannot be removed)?	<input type="checkbox"/>	<input type="checkbox"/>
15(2)	Are floors in good condition and clean?	<input type="checkbox"/>	<input type="checkbox"/>
15(10)	Is sufficient bed space provided, and are mattresses/bedding clean?	<input type="checkbox"/>	<input type="checkbox"/>
17(6)	Is there a minimum of one 2A10BC fire extinguisher within 100 feet of each unit?	<input type="checkbox"/>	<input type="checkbox"/>
17(6)	Are all fire extinguishers confirmed to be fully charged by reading the gauge?	<input type="checkbox"/>	<input type="checkbox"/>
17(9)	Is there a functioning smoke detector in each sleeping room and/or hallway/area/corridor that provides access to sleeping rooms?	<input type="checkbox"/>	<input type="checkbox"/>
17(9)	Is there a functioning smoke detector at the top of each stairway where the second floor will be occupied?	<input type="checkbox"/>	<input type="checkbox"/>
17(9)(a)	Are egress windows openable, and are they free of obstructions?	<input type="checkbox"/>	<input type="checkbox"/>
19(2)	Are all operable windows provided with a screen in good condition?	<input type="checkbox"/>	<input type="checkbox"/>
19(4)	Do GFCI outlets test properly?	<input type="checkbox"/>	<input type="checkbox"/>
19(4)	Do all light fixtures (interior and exterior) have working light bulbs?	<input type="checkbox"/>	<input type="checkbox"/>
19(6)	Do all outlets and switches have covers, and are they free of cracks/missing pieces?	<input type="checkbox"/>	<input type="checkbox"/>
21	Has the heating equipment been tested and confirmed to be in good working condition?	<input type="checkbox"/>	<input type="checkbox"/>
23	Have the stove(s) and refrigerator(s) been tested and confirmed to be in good working condition?	<input type="checkbox"/>	<input type="checkbox"/>
23(1)(f)	Is there one table space and one chair per person provided for eating purposes?	<input type="checkbox"/>	<input type="checkbox"/>
25/27	Have bathroom facilities been tested and confirmed to be in good working order (including hot water)?	<input type="checkbox"/>	<input type="checkbox"/>
	Have any major renovations/additions occurred since the previous inspection?	<input type="checkbox"/>	<input type="checkbox"/>
	Have all items from the previous year's Inspection Report been resolved?	<input type="checkbox"/>	<input type="checkbox"/>

Comments: