

# Facility Safety Fire & Life Safety / Environmental Health Compliance Plan

Provider's Name: **Ss Peter & Paul OST Program**

City: **Pierre**

Provider Number: **010610017**

Inspector: **Chad Wrightson**

Date of Inspection: **12/03/2024**

Time of Inspection: **1:06 PM**

**Provider was found to be in full compliance**

**Maira Tafoya**

Provider Signature

**12/03/2024**

Date

**Chad Wrightson**

Inspector Signature

**12/03/2024**

Date