

Facility Safety Fire & Life Safety / Environmental Health Compliance Plan

Provider's Name: **T.A.S.K. Venture**

City: **Tea**

Provider Number: **018042972**

Inspector: **Todd Lowe**

Date of Inspection: **01/31/2024**

Time of Inspection: **3:27 PM**

The items listed below are those that the provider was not in compliance with at the time of the inspection.

A. Fire and Life Safety

23. Is there a carbon monoxide detector installed according to the manufacturer's directions if there is a furnace or appliances utilizing fossil fuels such as propane, natural, gas, etc.? 61:15:01:01

<p>Corrections To Be Made:</p> <p>The provider did not have a carbon monoxide detector installed.</p> <p>A carbon monoxide detector needs to be installed according to the manufacturer's directions if a furnace or appliances utilize fossil fuels such as propane, natural gas, etc.</p> <p>The provider installed a carbon monoxide detector.</p>	<p>Agency Action:</p> <p>Compliance Plan</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%;">Suggested Completion Date:</td> <td style="width: 50%;">Actual Completion Date:</td> </tr> <tr> <td style="text-align: center;">02/15/2024</td> <td style="text-align: center;">02/08/2024</td> </tr> </table> <p>Status: Corrected</p>	Suggested Completion Date:	Actual Completion Date:	02/15/2024	02/08/2024
Suggested Completion Date:	Actual Completion Date:				
02/15/2024	02/08/2024				

Dawn Frankenhoff

Provider Signature

01/31/2024

Date

Todd Lowe

Inspector Signature

01/31/2024

Date