

Annual Self-Evaluation Safety Audit Attestation: _____ (Year)

- Short Term Occupancy Accommodation
- Bed and Breakfast Accommodation
- Agri-tourism Accommodation

Please initial each section applicable to your accommodation and return to RDCO Business Licensing by email to: **business@rdco.com** or in person or mail to: *Regional District Central Okanagan Business Licensing 1450 KLO Rd., Kelowna, BC V1W3Z4*

Owner/Operator Name:

_____ **Phone:** _____

Emergency Contact Name:

_____ **Phone:** _____

Accommodation Address/Location:

_____	(initial)
1. Smoke Alarms tested & logged monthly (As per BC Fire Code)	_____
2. Fire Extinguisher Service – (annual service by Certified Technician)	_____
3. Fire Safety Plan posted (review and update annually)	_____
4. Means of egress operable and unobstructed (bedroom doors & windows)	_____
5. Carbon Monoxide Alarms tested annually (as per manufactures recommend)	_____
6. Electrical installations used and maintained so as not to constitute a fire hazard	_____
7. Barbeque soap leak test (propane or natural gas) annually	_____
8. Chimney cleaning – if applicable	_____
9. Interior/Exterior passage ways maintained free and clear of obstructions	_____

The RDCO Inspection Services and/or RDCO Fire Services may conduct random inspections annually for safety compliance.

I hereby attest that the above requirements are in place and maintained in compliance with the RDCO Zoning Bylaw No. 871, Business Licensing Bylaw No. 1555, and Provincial Building and Fire Codes.

Signature: _____

(Digital signatures are not accepted)

Date: _____