FCL 005
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KANSAS DEPARTMENT FOR CHILDREN AND FAMILIES
Foster Care Licensing
500 SW Van Buren Street 2nd Floor Topeka, Kansas 66603
Website: http://www.dcf.ks.gov

DCF LICENSED CHILD CARE FACILITY MECHANICAL SAFETY CHECKLIST FOR VEHICLES USED TO TRANSPORT CHILDREN

Facility Name:	**License Number:**
Address:	**City:**

Complete a form for each vehicle used to transport children. A record of the check and corrections shall be kept on file at the facility or in the vehicle.

Make of Vehicle:	**Vehicle Year:**	**Number of Restraints:**

Name of Insurance Company:	**Insurance Policy Number:**

A safety check was completed by on and were working as designed. **(select each item checked)**

☐ Brakes	☐ Exhaust System	☐ Glass
☐ Horn	☐ Lights	☐ Outside Mirror
☐ Signal Lights	☐ Steering	☐ Suspension
☐ Tail Lights	☐ Tires	☐ Windshield Wipers

A verification was completed by on and verifies the first aid items are in the vehicle. **(select each item verified)**

☐ 1 elastic bandage	☐ 1 pkg 4" x 4" gauze squares	☐ Adhesive tape
☐ Bandages (all sizes)	☐ Cleansing Agent	☐ Disposable non-porous gloves
☐ Roll of gauze	☐ Scissors	

Signature of Licensee or Authorized Agent of Licensed Facility