



# TOWN OF CONWAY

23 MAIN STREET+ P.O. Box 2680 + CONWAY, NEW HAMPSHIRE 03818

(603) 447-3811  
WWW.CONWAYNH.ORG

## Life Safety Self Inspection Checklist for One- and Two-Family Rentals *Beginning January 26, 2024, an application for a rental license will be required.*

Address \_\_\_\_\_ Map and Lot \_\_\_\_\_

Owners Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Owners Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Owners Email \_\_\_\_\_

1. **Address Visible from the Street?** Yes  No   
(The address identification shall be legible and in a position that is visible from the street or road frontage of the property. Address identification shall contrast with background. Numbers shall not be spelled out. Each character shall be not less than 4 inches in height with a stroke width of not less than .5 inches)
2. **Smoke Alarms:** The state of New Hampshire requires interconnected, Smoke alarms on every habitable level, in each sleeping units, and outside of each bedroom. Yes  No
3. **Carbon Monoxide Alarms:** Are CO Alarms present on each level? Yes  No   
(These may be stand alone or combination alarms with smokes)
4. **Means of Egress:** Does every occupiable area of the building have not less than one means of egress (typically a door) and one means of escape (typically, a window that opens to 5.7 sq ft)? A second door meets the requirement. Yes  No   
(The State of NH has ordered that NO ONE may be permitted to sleep in a building without proper means of egress and escape) (State bulletin# 2020-03)
5. **Heating Appliance Maintenance:** Have gas and oil heating appliances been serviced within the last 24 months? Yes  No
6. **Wood Stoves and Chimneys:** Are wood stoves and chimneys compliant with our adopted check list. Yes  No



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- 7. **Electrical System:** Is the electrical system compliant with the adopted checklist  
Yes  No
- 8. **Is there not less than one 1A:5BC fire extinguisher available for use?** Yes  No 
  - a. Conditions of compliance
    - i. Pressure gage is in the Green Yes  No
    - ii. Tank is hydro compliant Yes  No
    - iii. No damage to the tank Yes  No
- 9. **Fire Pit:** In Accordance with RSA 227-L. 17 Yes  No
- 10. **Grills:** If present, charcoal grills, gas grills, and wood pellet cookers are located on the ground and NOT on a deck, porch, or under any overhanging part of the building. Yes  No

Per the State of New Hampshire, NO ONE may sleep in a building without operating smoke alarms or in an area without proper means of egress and escape. Therefore, any building that has checked “no” on items 2 or 4 is not occupiable until those issues are corrected.

By signing this agreement, Signature: \_\_\_\_\_ grants The Town Of Conway permission to enter the property located at Address \_\_\_\_\_ for the purpose of conducting a life safety inspection.

\_\_\_\_\_  
Signature of Inspector

\_\_\_\_\_  
Printed Name of Inspector



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\_\_\_\_\_  
Signature of Owner or Agent

\_\_\_\_\_  
Printed Name of Owner or Agent

**Read, understood, accepted, and agreed:**

\_\_\_\_\_

STATE OF \_\_\_\_\_

COUNTY OF \_\_\_\_\_

On this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, before me personally  
appeared \_\_\_\_\_ and acknowledged that he executed the same  
for the \_\_\_\_\_ purposes therein contained.

\_\_\_\_\_  
Notary Public/Justice of the Peace  
My Comm. Expires: \_\_\_\_\_  
Print or Type Name: \_\_\_\_\_