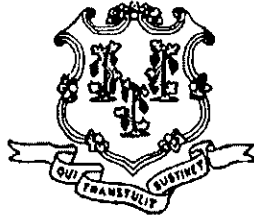


Department of Public Safety
Division of Fire, Emergency & Building Services
Office of State Fire Marshal



STATE OF CONNECTICUT

On **6/4/2020** the *City of Stamford*, Office of the Fire Marshal conducted an inspection of **Camp Playland** located at **802 Ponus Ridge Rd** in the City of **Stamford** to determine the degree of compliance with the fire safety requirements of Connecticut General Statutes Chapter 541 as authorized by Section 29-305 of the statutes. This facility was evaluated as a (n) *New* **Existing Camp/Daycare** classified by the *Connecticut Fire Safety Code*. As a result of this inspection, the following conditions were found.

- I. At the time of inspection, no code violations were identified. **Certificate of approval recommended.**
- II. At the time of inspection, conditions were discovered to be contrary to the minimum requirements of these codes. An acceptable plan of correction was submitted. *{See attached information}* **Certificate of approval recommended.**
- III. At the time of inspection, conditions were discovered to be contrary to the minimum requirements of these codes. No approved plan of correction was submitted. *{See attached information}* **Certificate of approval NOT recommended.**
- IV. Based on the extreme hazard to public safety discovered at the time of this inspection, this office is currently seeking an injunction from the court through our Town/City Attorney for the purpose of closing or restricting usage of this facility by the public. *{See attached information}* **Certificate of approval NOT recommended.**

This Certificate of Inspection Expires June 4, 2021

Robert V. Martino Deputy Fire Marshal

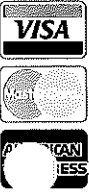
6/4/2020

Date

Distribution:

Original: Owner/Permittee/Operator

Copy: Fire Marshal File



ORIGINAL INVOICE FIRE PREVENTION SERVICE, INC.

Nº 70125

Remit to: 13 Winfield Street • Norwalk, CT 06855
Tel: (203) 866-6357 / (203) 322-1358 • Fax: (203) 866-1982
Emergency Phone Contact: (203) 322-1358
Email: fireprevention@msn.com
DOT & Haz-Mat Information Contact: Chem-tel 1-800-255-3924
Contract #: MIS0006369

Date: 4/20/10

Service Location

Billing Location

<u>Camp Prayton</u>	<u>Sycowal Corp.</u>
<u>202 Bonus to our work</u>	<u>Camp Prayton</u>
<u>New Conn 7-2040</u>	<u>1000 35 36 37 38</u>
<u>Unit: 203-166-2937</u>	<u>Pro. Box 177</u>
	<u>Stamford, CT 06407</u>

TERMS: NET 30 FROM DATE OF INVOICE 1.5% Added to Invoice over 30 days

P.O. NO

Quantity	Description	Unit Price	Amount	DOT/Haz-Mat Information Chart						
				NO & TYPE OF PKG	DOT LD. NUMBER	DOT SHIPPING NAME	DOT HAZARD CLASS	DESCRIPTIONS/ QUANTITY	ERG GUIDE NO	
	WET CHEMICAL EXTINGUISHERS									
	WATER MIST EXTINGUISHERS			CYLS.	UN1044	Fire Extinguisher	2.2		126	
	HALON FIRE EXTINGUISHERS			CYLS.	UN1066	Nitrogen, Comp.	2.2		121	
	HALOTRON FIRE EXTINGUISHERS			CYLS.	UN1013	Carbon Dioxide	2.2		120	
	CO2 FIRE EXTINGUISHERS			CYLS.	UN1956	Compressed Gas, N.O.S (chlorodifluorobromothane, Nitrogen)	2.2		126	
	CO2 FIRE EXTINGUISHERS			CYLS.	UN1002	Air, Compressed	2.2		122	
<u>2-105</u>	DRY CHEMICAL EXTINGUISHERS RECHARGED <u>(Cyl)</u>			CYLS.	UN1072	Oxygen, Compressed	2.2		122	
<u>1-35</u>	DRY CHEMICAL FIRE EXTINGUISHERS <u>(Cyl)</u>			CRTS.	UN1066	Nitrogen, Compressed	2.2		121	
<u>2</u>	DRY CHEMICAL FIRE EXTINGUISHERS <u>Services</u>			CRTS.	UN1013	Carbon Dioxide	2.2		120	
<u>3</u>	USDOT LABELING			CYLS.	UN1044	Potassium Acetate, Citrate Solution	2.2		126	
<u>3</u>	VALVE STEM <u>Dry Chemical</u>			CYLS.	UN1009	Bromotrifluoromethane	2.2		126	
<u>3</u>	O'RING <u>Dry Chemical</u>									
	PRESSURE GAUGES									
	EXIT LIGHT - ANNUAL TEST			Driver:						
	EMERGENCY LIGHT - ANNUAL TEST			Vehicle						
	E-LIGHT NEW			Payment Date:						
	BULBS			Check #:						
<u>2</u>	TRIP CHARGE			Amount:						
<u>3</u>	<u>Dry Chemical</u> HYDROSTATIC TESTED			Check ID:						
				American Express <input type="checkbox"/>						
<u>1</u>	<u>Dry Chemical</u>			MasterCard <input type="checkbox"/> Visa <input type="checkbox"/>						
				Acct. No.						
				Exp. Date						
				Signature:						
	Signature <u>[Signature]</u>	SUBTOTAL		POSTED						
		TAX								
	Print Name	TOTAL								

SHOP LOCATION:
13 Winfield Street, Norwalk, CT 06855