



**South Carolina Department of Labor, Licensing and Regulation
Board of Funeral Service**

110 Centerview Drive
P. O. Box 11329
Columbia, South Carolina 29211-1329
(803) 896-4497 FAX (803) 896-4554

Internet: www.llronline.com Email: contact.funeral@llr.sc.gov



No.

INSPECTION REPORT

Routine Inspection Re-Inspection New Facility Inspection

Facility Name _____ Permit No. _____ Expires _____

Address _____
City State Zip

Address _____
County Phone Fax

Type of Facility: Parent Branch Chapel Retail Sales

Manager _____ License No. _____ Expires _____

Embalmer _____ License No. _____ Expires _____

Permit conspicuously displayed	Yes	No
Manager lives within 25 miles of facility (SCDL verified)	Yes	No
All buildings comply with building and fire codes (Initial inspection only)	Yes	No
Motor Hearse - Working and Registration Current	Yes	No
Handicapped accessible restrooms	Yes	No
Water Fountains	Yes	No
Accessibility throughout the building	Yes	No
Chapel and/or Parlor Safe and Clean	Yes	No

Contract/Merchandise Price Lists and Sales Room:

Statement of goods and services	Yes	No
At least six caskets on premises	Yes	No
Casket Price List	Yes	No
Outer Burial Container price list	Yes	No
General Price List	Yes	No

Preparation/Embalming Room:

At least 100 square feet	Yes	No
Plumbing (hot and cold running water)	Yes	No
Separate Sink from Drainage Table	Yes	No
Backflow protection	Yes	No
Ventilating exhaust fan (screened, air exchange of 12 times per hour to outside)	Yes	No
Sanitary floor covering	Yes	No
Sanitary waste receptacle	Yes	No
Eye wash station and shower head (OSHA approved)	Yes	No
Approved Tables – nonporous surface with a drain	Yes	No
Hazardous Waste Receptacle	Yes	No

Minimum Instruments and Supplies:

Embalming machine (or gravity bottle or bulb or hand pump)	Yes	No
Scalpel (at least one)	Yes	No
Aneurysm Needle (at least two)	Yes	No
Assorted Canulae	Yes	No
Suture Needles	Yes	No
Trocar	Yes	No
Hydro aspirator or electric aspirator	Yes	No
If an aspirator is installed, it must be equipped with a backflow preverter on the facility's water system	Yes	No
Antiseptic Soap	Yes	No
Arterial Fluid (12 bottles)	Yes	No
Cavity Fluid (two bottles)	Yes	No

General Information (Does not factor into pass or fail)

Last Inspection Report on display	Yes	No
Manager's License conspicuously displayed	Yes	No
Embalmer's License conspicuously displayed	Yes	No
Pre-need License conspicuously displayed	Yes	No
Price in or on Casket	Yes	No

Price in or on Vault Yes No
Does firm sell Pre-need Life Insurance Yes No
If so please provide Pre-need License. # _____

Comments: _____

Passed Failed (Follow-up inspection due on _____)

Manager or Representative **Date** **Inspector**

Items in this inspection report, including but not limited to General Price Lists and Pre- Need Insurance transactions are subject to regulatory compliance by other agencies including, but not limited to, The Federal Trade Commission and the S.C. Department of Consumer Affairs. It is the licensee's responsibility to ensure that the funeral home and its operators are in compliance with all local, state and federal laws governing the practice of funeral services. Nothing herein relieves the licensee from complying with the requirements governed by other regulatory entities.