



Sam Houston State University

A Member of The Texas State University System

Environmental Health, Safety and Risk Management

Captain Clinton Williams
Texas State Fire Marshal's Office
333Guadalupe Street
P.O. Box 149221 – 78714-9221
Austin, Texas 78701

Sam Houston State University acknowledges the findings of the State Fire Marshal inspection of on-campus student housing areas recently conducted by your office, identified as Inspection Number RRO16586A. Attached are the University's responses, to include completion and estimated completion dates.

Attachments: Findings Response
Letters of Equivalency

Sincerely,

Steve Sheilds,
Executive Director of Environmental Health,
Safety & Risk Management
Sam Houston State University



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State Fire Marshal Findings and Corrective Actions

Facility Wide Violations

VIOLATION 1

Forty-seven buildings throughout the facility lack an exterior key access box to allow fire department access to the building.

Corrective Action: All buildings without individual room exterior doors will be equipped with a remote key access box. Coordinating with local fire department (per inspecting SFM) to ensure proper access is available.

Additionally, all SHSU building fire alarm systems are monitored (24 Hours) by a Proprietary Supervising Station Alarm System located at the University Police Department. Upon receipt of an alarm, a uniformed officer is dispatched to the building and the local fire department is notified. The officer is on-site with building keys prior to the arrival of the fire department. Should the officer verify the alarm is false and not require response by the fire department, the alarm call is canceled.

Estimated completion date: December 21, 2017

Piney Woods Hall

VIOLATION 1

Each dormitory room lacks emergency instructions.

Corrective Action: Evacuation plans installed in all rooms and common areas.

Completion date: August 19, 2017

VIOLATION 2

The fire alarm system is currently indicating trouble signals.

Corrective Action: Fire alarm system cleared of all supervisory and trouble signals.

Completion date: August 19, 2017



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VIOLATION 3

The fire rated doors at the following locations do not latch in a closed position, or the closing hardware has been disabled.

Corrective Action: Automatic door closing mechanisms adjusted to ensure fire doors close and latch
Completion date: August 19, 2017

VIOLATION 4

The fire rated doors serving the penthouse lack the approved fire resistance-rated ANSI/UL 263 glazing.

Corrective Action: Glazing installed in penthouse fire rated doors.
Completion date: August 19, 2018

VIOLATION 5

There are unsealed penetrations in the following locations:

- 6th-floor mechanical room
- Electrical room 435
- Electrical room 463
- 2nd-floor laundry mechanical room

Corrective Action: Penetrations sealed.
Completion date: August 19, 2017

VIOLATION 6

Sprinkler head adjacent to room 4464 is missing an escutcheon plate.

Corrective Action: Room number does not exist. However, all sprinkler heads were inspected to ensure escutcheon plates are installed.
Completion date: August 19, 2017



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VIOLATION 7

The 1st-floor exit door is equipped with an electrically controlled locking device that does not meet the conditions specified for electrically controlled door assemblies.

Corrective Action: Additional emergency egress door assembly to be installed in adjacent exterior wall to provide egress from the building directly to an outside egress pathway, to eliminate the entry into the stairwell.

Estimated completion date: December 21, 2017

VIOLATION 8

There is storage of combustible material present in the 1st-floor mechanical room.

Corrective action: All materials removed from mechanical room.

Completion date: August 19, 2017

VIOLATION 9

Fire department fire lanes are not provided.

Corrective Action: Fire lanes designated and painted.

Completion date: August 19, 2017

VIOLATION 10

The sprinklers head located on the 2nd floor adjacent to room 223 are painted.

Corrective Action: Sprinkler heads cleaned of paint.

Completion date: August 19, 2017

VIOLATION 11

The 2nd-floor area adjacent to room 223 has material covering the surface of the wall that cannot be verified as approved interior finish material.

Corrective Action: Approved interior finish to be applied during periods when students are not occupying the building (Holidays).

Estimated completion date: December 21, 2017



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VIOLATION 12

The exit doors serving the 2nd-floor multi-purpose assembly room having an occupant load of 400 are not equipped with required panic hardware.

Corrective Action: Panic hardware to be installed on exit doors.

Estimated completion date: December 21, 2017

VIOLATION 13

The exit doors serving the 2nd-floor multi-purpose assembly room do not swing in the direction of egress.

Corrective Action: Doors to be re-mounted to swing in the direction of travel.

Estimated completion date: December 21, 2017

VIOLATION 14

The self-closing door at the terminus of the trash chute is in the closed position. When the door is in the closed position, a buildup waste will accumulate in the chute obstructing chute sprinkler heads.

Corrective Action: Fusible link installed on trash chute door.

Completion date: August 19, 2017

NOTE

Piney Woods Hall is a new residential dormitory occupancy, which at the time of inspection was not occupied, as SHSU has just recently accepted substantial completion. All corrected identified deficiencies were completed by the General Contractor prior to occupancy, the outstanding deficiencies will be completed during upcoming student absences and not later than December 21, 2017.

Raven Village

VIOLATION 1

There are unsealed penetrations in the 3rd-floor water heater room.

Corrective Action: Room does not exist – each dorm room has an individual water heater closet. All mechanical and I.T. rooms on the 3rd – floor were inspected to ensure wall penetrations are properly sealed.

Completion date: September 15, 2017



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VIOLATION 2

Ceiling tiles or ceiling assemblies are missing in the following locations.

- 4th floor adjacent to room 401
- 4th-floor room 401

Corrective Action: Ceiling tiles re-installed in both locations.

Completion date: July 28, 2017

VIOLATION 3

Sprinkler head located in room 216 is obstructed

Corrective Action: Sprinkler escutcheon re-secured to sprinkler head – obstruction cleared.

Completion date: July 28, 2017

VIOLATION 4

There is a misleading illuminated exit sign located at the 2nd-floor exit stairwell directing occupants toward an unapproved exit.

Corrective Action: Exit sign re-located and new signs installed to indicate proper direction to emergency exit.

Corrected at time of inspection: July 26, 2017

VIOLATION 5

Sprinkler heads in the following locations are missing the escutcheon plates.

- Room 249
- Room 279
- Room 246

Corrective Action: New escutcheon plates installed in rooms.

Completion date: September 15, 2017



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VIOLATION 6

The fire department connections are not marked with the FDC signage following the Fire Marshal's Notice (May 2016).

Corrective Action: FDC signage installed per SMFO Notice.

Completion date: This finding was identified on all Residential Life buildings equipped with a fire sprinkler system. Buildings with fire pumps or where the system demand pressure is greater than 150psi had proper signage at time of the inspection.

Bearkat Village

VIOLATION 1

There is an excessive amount of combustible storage in the following locations.

- Building A Room B306
- Building A E storage room

Corrective Action: Room numbers do not exist; however, all storage rooms were inspected to ensure combustible storage is not excessive.

Completion date: September 15, 2017

VIOLATION 2

Sprinkler heads located throughout the building are loaded, damaged, corroded or covered with dust:

- Building B room 307
- Building J room 301
- Building L room 101

Corrective Action: Sprinkler heads replaced.

Completion date: September 13, 2017

VIOLATION 3

The electrical outlet located in room 201 building C is missing the protective cover.

Corrective Action: Receptacle cover plate installed.

Completion date: September 11, 2017



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VIOLATION 4

The sprinkler head located in room 105 building B has tape applied to the pendant.

Corrective Action: Tape has been removed

Completion date: September 19, 2017

VIOLATION 5

The sprinklers head located in room 105 building B are painted.

Corrective Action: Paint cleaned from sprinkler head.

Completion date: September 19, 2017

VIOLATION 6

There are decorative lights in use in room 303 building J.

Corrective Action: Temporary decorative lights removed.

Completion date: July 27, 2017

VIOLATION 7

The fire department connections are not marked with the FDC signage following the Fire Marshal's Notice (May 2016).

Corrective Action: System supply pressure requirements are below the specified pressures in Fire Marshal's notice and NFPA 25, Standard for the Inspection, Testing and Maintenance of Water Based Fire Protection Systems.

Completion date: No action taken.

Bearkat Village Clubhouse

VIOLATION 1

Sprinkler head adjacent to the data room is missing an escutcheon plate.

Corrective Action: Escutcheon plate installed.

Completion date: September 7, 2017



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VIOLATION 2

There is an excessive amount of combustible storage in room 101.

Corrective Action: Room cleaned and material re-arranged to reduce fire load.

Completion date: September 8, 2017

VIOLATION 3

The fire sprinkler system lacks sprinkler head wrench.

Corrective Action: Sprinkler head wrench provided.

Completion date: September 7, 2017

Randall House

VIOLATION 1

The primary means of egress from the second floors is served by an open stairwell that discharges into the first floor and is not provided with separation and enclosure from the remainder of the building.

Consult with a fire protection engineering firm to determine methods and means to provide the required separation for the stairway in compliance with applicable provisions of NFPA 1, Fire Code.

Corrective Action: See attached Letter of Equivalency – SFMO dated: April 10, 2010 / Additionally this building is scheduled for use through May 2019 and then will be demolished.

Completion date: No action taken at this time.

Vick House

VIOLATION 1

The primary means of egress from the second floors is served by an open stairwell that discharges into the first floor and is not provided with separation and enclosure from the remainder of the building.

Consult with a fire protection engineering firm to determine methods and means to provide the required separation for the stairway in compliance with applicable provisions of NFPA 1, Fire Code.

Corrective Action: See attached Letter of Equivalency – SFMO dated: April 10, 2010 / Additionally this building is scheduled for use through May 2019 and then will be demolished.

Completion date: No action taken at this time.



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VIOLATION 2

The emergency lighting unit adjacent to room 112 failed to operate in test mode:

Corrective Action: Ballast replaced in emergency light.

Completion date: September 7, 2017

VIOLATION 3

The electrical outlet located in room 102 is missing the protective cover.

Corrective Action: Outlet cover installed.

Completion date: Corrected at time of inspection: July 26, 2017

Spivey House

The primary means of egress from the second floors is served by an open stairwell that discharges into the first floor and is not provided with separation and enclosure from the remainder of the building. Consult with a fire protection engineering firm to determine methods and means to provide the required separation for the stairway in compliance with applicable provisions of NFPA 1, Fire Code.

Corrective Action: See attached Letter of Equivalency – SFMO dated: April 10, 2010 / Additionally this building is scheduled for use through May 2019 and then will be demolished.

Completion date: No action taken at this time.

White Hall

VIOLATION 1 (all corrected by maintenance staff)

The smoke alarms at the following locations failed to operate or are missing:

- Room 109
- Room 204
- Room 211
- Room 311
- Room 307
- Room 328

Corrective Action: Smoke alarms replaced.

Completion date: Corrected at time of inspection – July 28, 2017



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VIOLATION 2

The emergency lighting units at the following locations failed to operate in test mode:

- 4th-floor exterior stairs
- 3rd-floor center, north and south exterior stairs
- 3rd floor adjacent to room 319
- 2nd floor adjacent to room 203

Corrective Action: Rechargeable batteries replaced in lights.

Completion date: September 8, 2017

VIOLATION 3

The electrical panel box located in the 2nd-floor electrical room has unused openings.

Corrective Action: Un-used openings in electrical panel boxed effectively closed.

Completion date: September 7, 2017

VIOLATION 4

The electrical panel adjacent to the office area is obstructed.

Corrective Action: No electrical panel in office area of White Hall. Electrical panel in mechanical rooms verified to have 3 foot clearance on all sides.

Completion date: September 7, 2017

VIOLATION 5

The apartment bedrooms are not equipped with the required smoke alarms.

Corrective Action: Smoke alarms installed in apartment bedrooms.

Completion date: September 7, 2017



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Ann Shaver House

VIOLATION 1

The primary means of egress from the second floors is served by an open stairwell that discharges into the first floor and is not provided with separation and enclosure from the remainder of the building. Consult with a fire protection engineering firm to determine methods and means to provide the required separation for the stairway in compliance with applicable provisions of NFPA 1, Fire Code.

Corrective Action: See attached Letter of Equivalency – SFMO dated: April 10, 2010 / Additionally this building is scheduled for use through May 2021 and then will be demolished.

Completion date: No action taken at this time.

Alpha Chi Omega House

VIOLATION 1

The primary means of egress from the second floors is served by an open stairwell that discharges into the first floor and is not provided with separation and enclosure from the remainder of the building. Consult with a fire protection engineering firm to determine methods and means to provide the required separation for the stairway in compliance with applicable provisions of NFPA 1, Fire Code.

Corrective Action: See attached Letter of Equivalency – SFMO dated: April 10, 2010 / Additionally this building is scheduled for use through May 2021 and then will be demolished.

Completion date: No action taken at this time.

VIOLATION 2

The emergency lighting unit adjacent to room 267 failed to operate in test mode.

Corrective Action: Rechargeable batteries replaced in light.

Completion date: September 8, 2017



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Rachel Jackson

VIOLATION 1

The primary means of egress from the second floors is served by an open stairwell that discharges into the first floor and is not provided with separation and enclosure from the remainder of the building. Consult with a fire protection engineering firm to determine methods and means to provide the required separation for the stairway in compliance with applicable provisions of NFPA 1, Fire Code.

Corrective Action: See attached Letter of Equivalency – SFMO dated: April 10, 2010 / Additionally this building is scheduled for use through May 2021 and then will be demolished.

Completion date: No action taken at this time.

Zeta House

VIOLATION 1

The primary means of egress from the second floors is served by an open stairwell that discharges into the first floor and is not provided with separation and enclosure from the remainder of the building. Consult with a fire protection engineering firm to determine methods and means to provide the required separation for the stairway in compliance with applicable provisions of NFPA 1, Fire Code.

Corrective Action: See attached Letter of Equivalency – SFMO dated: April 10, 2010 / Additionally this building is scheduled for use through May 2021 and then will be demolished.

Completion date: No action taken at this time.

VIOLATION 2

Various items are stored within 24 inches of the ceiling in the storage rooms.

Corrective Action: Re-organized material in room – all material is less than 24 inches from ceiling.

Completion date: September 14, 2017



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VIOLATION 3

Manual pull box located in the laundry room is mounted greater than 60 inches from the nearest exit door.

Corrective Action: Removed fire alarm pull station.

Corrective action: September 7, 2017

VIOLATION 4

The emergency lighting unit located in the center stairwell failed to operate in test mode.

Corrective Action: Rechargeable batteries replaced in light.

Corrective action: September 7, 2017

Gibbs House

VIOLATION 1

The primary means of egress from the second floors is served by an open stairwell that discharges into the first floor and is not provided with separation and enclosure from the remainder of the building.

Consult with a fire protection engineering firm to determine methods and means to provide the required separation for the stairway in compliance with applicable provisions of NFPA 1, Fire Code.

Corrective Action: See attached Letter of Equivalency – SFMO dated: April 10, 2010 / SHSU is considering installing sprinkler system in building.

Completion date: No action taken at this time.



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Houston House

VIOLATION 1

The primary means of egress from the second floors is served by an open stairwell that discharges into the first floor and is not provided with separation and enclosure from the remainder of the building. Consult with a fire protection engineering firm to determine methods and means to provide the required separation for the stairway in compliance with applicable provisions of NFPA 1, Fire Code.

Corrective Action: See attached Letter of Equivalency – SFMO dated: April 10, 2010 / SHSU is considering installing sprinkler system in building.

Completion date: No action taken at this time.

Joseph Baldwin House

VIOLATION 1

The primary means of egress from the second floors is served by an open stairwell that discharges into the first floor and is not provided with separation and enclosure from the remainder of the building. Consult with a fire protection engineering firm to determine methods and means to provide the required separation for the stairway in compliance with applicable provisions of NFPA 1, Fire Code.

Corrective Action: See attached Letter of Equivalency – SFMO dated: April 10, 2010 / SHSU is considering installing sprinkler system in building.

Completion date: No action taken at this time.

Bernard Mallon House

VIOLATION 1

The primary means of egress from the second floors is served by an open stairwell that discharges into the first floor and is not provided with separation and enclosure from the remainder of the building.



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Consult with a fire protection engineering firm to determine methods and means to provide the required separation for the stairway in compliance with applicable provisions of NFPA 1, Fire Code.

Corrective Action: See attached Letter of Equivalency – SFMO dated: April 10, 2010 / SHSU is considering installing sprinkler system in building.

Completion date: No action taken at this time.

VIOLATION 2

The ceiling tile assembly located on the 1st floor closest have been removed. Ceiling assembly not maintained may interfere the proper actuation of the fire protection device.

Corrective Action: Ceiling tile replaced.

Completion date: September 13, 2017

Crawford House

VIOLATION 1

The primary means of egress from the second floors is served by an open stairwell that discharges into the first floor and is not provided with separation and enclosure from the remainder of the building. Consult with a fire protection engineering firm to determine methods and means to provide the required separation for the stairway in compliance with applicable provisions of NFPA 1, Fire Code.

Corrective Action: See attached Letter of Equivalency – SFMO dated: April 10, 2010 / SHSU is considering installing sprinkler system in building.

Completion date: No action taken at this time.

VIOLATION 2

The ceiling tile assembly located on the 1st floor closest have been removed. Ceiling assembly not maintained may interfere the proper actuation of the fire protection device.



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Corrective Action: Ceiling tile replaced.

Completion date: September 14, 2017

Creagor House

VIOLATION 1

The primary means of egress from the second floors is served by an open stairwell that discharges into the first floor and is not provided with separation and enclosure from the remainder of the building. Consult with a fire protection engineering firm to determine methods and means to provide the required separation for the stairway in compliance with applicable provisions of NFPA 1, Fire Code.

Corrective Action: See attached Letter of Equivalency – SFMO dated: April 10, 2010 / SHSU is considering installing sprinkler system in building.

Completion date: No action taken at this time.

Jackson Shaver

VIOLATION 1

The fire rated doors in the following exit enclosures doors labels are painted over; obscuring the UL approval label indicating each door leaf meets a minimum one-hour fire protection rating:

- 1st Floor interior stairs
- 2nd Floor interior stairs

Corrective Action: Paint removed from doors.

Completion date: September 11, 2017



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VIOLATION 2

The fire department connections are not marked with the FDC signage following the Fire Marshal's Notice (May 2016).

Corrective Action: System supply pressure requirements are below the specified pressures in Fire Marshal's notice and NFPA 25, Standard for the Inspection, Testing and Maintenance of Water Based Fire Protection Systems.

Completion date: No action taken.

Sam Houston Village

VIOLATION 1

The emergency lighting units at the following locations failed to operate in test mode

- 3rd floor adjacent to room 3002
- 1st floor adjacent to room 1

Corrective Action: Rechargeable batteries replaced in light.

Completion date: September 8, 2017

VIOLATION 2

The exit lighting units at the following locations are inoperable.

- 3rd floor adjacent to room 317
- 3rd floor adjacent to room 300
- 2nd floor adjacent to room 200

Corrective Action: Rechargeable batteries replaced in lights.

Completion date: September 8, 2017



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VIOLATION 3

There are unsealed penetrations in the following locations.

- Room 300S6
- Room 10055A

Corrective Action: Penetrations sealed with fire rated caulk.

Completion date: September 7, 2017

VIOLATION 4

There is an excessive amount of combustible storage in the following locations.

- Room 278
- Room 238

Corrective Action: Combustible material re-organized to ensure material is less than 24 inches from ceiling and excessive fire load removed.

Completion date: September 13, 2017

VIOLATION 5

The electrical outlet located in the laundry room is missing the protective cover.

Corrective Action: Cover plate installed over outlet.

Completion date: September 7, 2017

VIOLATION 6

There are decorative lights in use in room 190.

Corrective Action: Decorative lights removed

Completion date: September 7, 2017



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VIOLATION 7

The fire department connections are not marked with the FDC signage following the Fire Marshal's Notice (May 2016).

Corrective Action: System supply pressure requirements are below the specified pressures in Fire Marshal's notice and NFPA 25, Standard for the Inspection, Testing and Maintenance of Water Based Fire Protection Systems.

Completion date: No action taken.

Belvin-Buchanan

VIOLATION 1

The fire rated doors in the following exit enclosures doors labels are painted over; obscuring the UL approval label indicating each door leaf meets a minimum one-hour fire protection rating:

- 1st Floor stairs 100 S1, S2
- 2nd Floor stair 200 S1, S2
- 3rd Floor stair 300 S3, S2

Corrective Action: Paint removed from doors.

Completion date: September 11, 2017

VIOLATION 2

There is storage of combustible material present in the 1st-floor mechanical room.

Corrective Action: Combustible item removed from mechanical room.

Completion date: September 12, 2017



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Elliot Hall

VIOLATION 1

The emergency lighting unit located in the 1st-floor lobby failed to operate in test mode

Corrective Action: Ballast replaced in emergency light.

Completion date: September 7, 2017

VIOLATION 2

There are unsealed penetrations located in room 167JI.

Corrective Action: Penetrations sealed with fire caulk.

Completion date: September 7, 2017

VIOLATION 3

The interior exit discharges serving the following locations are obstructed with furnishings and other objects that impede egress.

- 1st floor exit discharge
- 2nd floor exit discharge
- 3rd floor exit discharge

Corrective Action: Obstructions removed.

Completion date: September 11, 2017

VIOLATION 4

The stairwell adjacent to mechanical room 300 has storage underneath.

Corrective Action: All items removed from stairwell

Completion date: September 8, 2017



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VIOLATION 5

There are bulletin boards, posters, and paper attached directly to the south wall that exceeds 20 percent of the aggregate walls in the building.

Corrective Action: Items removed from South wall to reduce coverage below 20 percent.

Completion date: September 7, 2017

VIOLATION 6

Sprinkler head located in room 281 is covered with dust.

Corrective Action: Sprinkler head cleaned.

Completion date: September 7, 2017

Estill Hall

VIOLATION 1

There are bulletin boards, posters, and paper attached directly to the dormitory walls that exceeds 20 percent of the aggregate walls in the building.

Corrective Action: Items removed from walls to reduce coverage below 20 percent.

Completion date: September 7, 2017

VIOLATION 2

The electrical panel box located in the mechanical room has an unused opening.

Corrective Action: Unused openings effectively sealed.

Completion date: September 7, 2017



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VIOLATION 3

The fire rated doors in the following exit enclosures doors labels are painted over; obscuring the UL approval label indicating each door leaf meets a minimum one-hour fire protection rating:

- 2nd Floor stair
- 3rd Floor stair
- 4th Floor stair
- 5th Floor stair

Corrective Action: Paint removed from doors.

Completion date: September 11, 2017

VIOLATION 4

Exit door 100 A requires excessive force to release and swing to its full required width.

Corrective Action: Door closer adjusted.

Completion date: September 7, 2017

VIOLATION 5

The fire department connections are not marked with the FDC signage following the Fire Marshal's Notice (May 2016).

Corrective Action: System supply pressure requirements are below the specified pressures in Fire Marshal's notice and NFPA 25, Standard for the Inspection, Testing and Maintenance of Water Based Fire Protection Systems.

Completion date: No action taken.



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Lone Star Hall

VIOLATION 1

The stairwell exit door serving the fifth floor has an unapproved locking device. The door must be secured in the open position, or the locking device removed or so it cannot be inadvertently closed and locked.

Corrective Action: Residence Life will incorporate a lockout/tagout procedure for penthouse door. Once an employee opens the gate to access the penthouse area, a lockout tag will be installed on latch preventing the ability to lock gate.

Completion date: September 7, 2017

VIOLATION 2

A relocatable power tap is being plugged into another relocatable power tap located in the 1st- floor office room.

Corrective Action: Power strip removed.

Completion date: Corrected at time of inspection – July 12, 2017

VIOLATION 3

The 1st-floor material covering the surface of the wall cannot be verified as approved interior finish material.

Corrective Action: Flame retardant to be applied to wall while building is not occupied.

Estimated completion date: December 21, 2017 – W.O.# 33447

VIOLATION 4

The 1st-floor bathroom doors are equipped with double cylinder key operated locks in the path of exit travel.

Corrective Action: Deadbolts removed from doors.

Completion date: September 7, 2017



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VIOLATION 5

The fire department connections are not marked with the FDC signage following the Fire Marshal's Notice (May 2016).

Corrective Action: FDC signage installed per SMFO Notice.

Completion date: This finding was identified on all Residential Life buildings equipped with a fire sprinkler system. Buildings with fire pumps or where the system demand pressure is greater than 150psi had proper signage at time of the inspection.

University Hotel

VIOLATION 1

Relocatable power taps are plugged into other relocatable power taps at the following locations:

- Room 409
- Room 324

Corrective Action: Power taps removed.

Completion date: September 26, 2017

VIOLATION 2

Violation 2 was a duplicate in the SFMO report.

VIOLATION 3

The electrical panel boxes in the following locations have unused openings:

- 3rd-floor mechanical room
- 2nd-floor kitchen

Corrective Action: Unused openings effectively sealed.

Completion date: September 21, 2017



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VIOLATION 4

The portable fire extinguisher located in the storage room lacks a current inspection tag. The most recent inspection was conducted January 2016.

Corrective Action: Fire extinguisher replaced.

Completion date: September 21, 2017

VIOLATION 5

Various items are stored within 24 inches of the ceiling in the storage rooms.

Corrective Action: Items removed to ensure material is less than 24 inches from ceiling.

Completion date: September 26, 2017

VIOLATION 6

The electrical outlet located in room 100 SE is missing the protective cover.

Corrective Action: Outlet cover installed.

Completion date: September 29, 2017

VIOLATION 7

A relocatable power tap is being plugged into another relocatable power tap located in the 1st-floor reception area.

Corrective Action: Power taps removed from reception area.

Completion date: September 26, 2017

VIOLATION 8

The fire department connections are not marked with the FDC signage following the Fire Marshal's Notice (May 2016).

Corrective Action: Signage to be installed.

Estimated completion date: December 21, 2017 W.O.# 203119



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Gibbs Ranch House

VIOLATION 1

There are electrical outlets within six feet of the sinks that are not protected by a GFCI in Rooms 212 and 205 bathrooms.

Corrective Action: GFCI outlets installed.

Completion date: September 27, 2017

VIOLATION 2 (House is not occupied until fall semester)

The smoke alarms at the following locations failed to operate or are missing:

- Hallway
- East bedroom

Corrective Action: Smoke alarms installed prior to student occupancy.

Completion date: August 11, 2017