

EAST HARTFORD POLICE DEPARTMENT CHILD SAFETY SEAT CHECKLIST

File #:

Caregiver's Last Name, First Name		Operator's License #	
<input style="width: 95%;" type="text"/>		<input style="width: 95%;" type="text"/>	
Address		(Area Code) Telephone Number	
<input style="width: 95%;" type="text"/>		<input style="width: 95%;" type="text"/>	
Town/City	State	Zip code	
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	
Year/ Make / Model of Vehicle		Registration Plate	
<input style="width: 95%;" type="text"/>		<input style="width: 95%;" type="text"/>	
Relationship to Child	Child's Age	Days	Weight (lbs)
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input type="radio"/>	<input type="radio"/>
		<input type="radio"/> Month(s)	<input style="width: 95%;" type="text"/>
		<input type="radio"/> Year(s)	<input style="width: 95%;" type="text"/>
Child's First Name	Seat Previously Checked		
<input style="width: 95%;" type="text"/>	<input type="radio"/> Yes* <input type="radio"/> No		
Child Present	Email:		
<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unborn	<input style="width: 95%;" type="text"/>		

I understand and agree that the service provided by the East Hartford Police Department, its police officers or CPS technicians assisting said department, is for the sole purpose of aiding in the reduction of injuries suffered by children resulting from the improper installation or use of child safety seats; that this service does not completely evaluate the quality, safety and condition of the child safety seat, its components or the vehicle which it is installed; that the responsibility of ensuring the correct installation of a child safety seat is the sole responsibility of the parent/caregiver; and that this is a service being provided free of charge to me. Every effort will be made to correctly install the seat(s) per the manufacturers' specification and/or the latest best practices. I understand that a properly used child restraint can reduce fatal injuries. Therefore, I release the East Hartford Police Department and its officers or technicians associated with the Town of East Hartford from any liability, present or future, in connection with the installation or use of this child safety seat.

Signature: _____ **Date:** _____



Above portion to be completed by parent/caregiver



LOWER PORTION TO BE COMPLETED BY POLICE OFFICER OR CPS TECHNICIAN ONLY

Tech Last Name	Tech #	
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	
Scribe Last Name (if applicable)	Tech #	Location
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Senior/ Instructor Last Name (if applicable)	Tech #	Tech Verified Height & Weight
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No Child Present

POLICE USE ONLY:

- New Seat
- Used Seat
- Unknown

File #

Police Officer Signature

ATTENTION TECHNICIANS: Observe child in seat first, then fill out all information below at time of install.

DATE: / /

ON ARRIVAL UNINSTALLED NEW SEAT GIVEN

1. Child / CSS Vehicle Location

- Front Row
- Back Row
- 3RD Row

2. CSS INSTALLED USING (select all apply)

- Seatbelt Tether
- Lower Anchors Integrated Seat
- Other

3. RESTRAINT TYPE:

- RF only w/o base RF only w/ base
- Base Only RF Convertible
- FF w/ Harness BP Booster
- Lap/ Shoulder Lap Only
- Car Bed Vest
- 3 in 1

4. CSS MFG:

5. Model Number:

6. MFG DATE:

 / /

FINDINGS Yes No NA

FINDINGS	Yes	No	NA
7. CSS history known	<input type="radio"/>	<input type="radio"/>	
8. CSS involved in a crash	<input type="radio"/>	<input type="radio"/>	
9. CSS labels missing	<input type="radio"/>	<input type="radio"/>	
10. CSS expired	<input type="radio"/>	<input type="radio"/>	
11. CSS recalled	<input type="radio"/>	<input type="radio"/>	
12. CSS correct direction	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
13. CSS harness correct	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14. Recline angle correct	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
15. Lower anchors correct	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
16. Tether correct	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
17. Seatbelt correct	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

CAREGIVER SIGN-OFF:

- 34. I was provided CSS Education today Yes No
- 35. I participated in the CSS install today Yes No

Caregiver's Initials

18. PD PROVIDED NEW CSS: Yes No

19. CSS MFG:

20. Model Number:

21. MFG DATE:

 / /

COMPLETE THIS SECTION ONLY IF A NEW SEAT WAS PROVIDED BY PD

ON DEPARTURE

22. Child / CSS Vehicle Location

- Front Row Other Location
- Back Row
- 3RD Row

Explain:

23. CSS INSTALLED USING (select all apply)

- Seatbelt Tether
- Lower Anchors Integrated Seat

24. RESTRAINT TYPE:

- RF only w/o base RF only w/ base 3 in 1
- Base Only RF Convertible
- FF w/ Harness BP Booster
- Lap/ Shoulder Lap Only
- Car Bed Vest

25. ANY CORRECTIONS MADE Yes No

26. CSS/VEHICLE Compatible Yes No

TECHNICIAN Discussed: (select all that apply)

- 27. Airbags
- 28. Projectiles
- 29. Unused Seatbelts
- 30. Registration Card Mailed Yes No

31. MATERIALS USED: (select all that apply)

- Locking Clip Belt Shortening Clip
- Noodle(s) Shelf-Liner
- D-Ring Other EXPLAIN:

COMMENTS / ISSUES (IF ANY MISUSE FOUND DETAIL IT BELOW)
