Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL090031	A. BUILDING: 01 B. WING _____	05/09/2018

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CARILLON ASSISTED LIVING AT INDIAN TRAIl	5306 SECREST SHORT CUT ROAD MONROE, NC 28110

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C 000	Initial Comments Report of a Construction Section Biennial Survey by Ed Miller and Dennis Harrell, conducted on May 9, 2018. Record indicate that the facility was licensure on December 3, 2009 for Ninety-Six (96) Beds, of which Thirty-Six (36) are Special Care Beds. Based on the above information, the facility is required to meet the 2005 Minimum and Desired Standards and Regulations for Homes for the Aged and Infirmed and the 2006 North Carolina State Building Code, Section 407, Institutional Occupancy, Group I-2. Deficiencies were cited that require a Plan of Correction.	C 000		
C 101	Existing Licensed Fac- No less than '71 Rules SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0301 APPLICATION OF PHYSICAL PLANT REQUIREMENTS The physical plant requirements for each adult care home shall be applied as follows: (2) Except where otherwise specified, existing licensed facilities or portions of existing licensed facilities shall meet licensure and code requirements in effect at the time of construction, change in service or bed count, addition, renovation, or alteration; however in no case shall the requirements for any licensed facility where no addition or renovation has been made, be less than those requirements found in the 1971 "Minimum and Desired Standards and Regulations" for "Homes for the Aged and Infirm", copies of which are available at the Division of Health Service Regulation at no cost;	C 101		

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C 101	Continued From page 1 This Rule is not met as evidenced by: 1. Based on observation and interview with Staff, the facility failed to meet the Code requirements in effect at the time of construction or alterations by not having all of the required components to properly operated doors equipped with Special Locking Arrangements. Findings on May 9, 2018: a. Fire Alarm Control Panel - the "Special Locking System" does not have a system components location map, posted at the FACP.	C 101	C101 1a) MAP FOR ALL maglocks IS POST IN Front Vestuble by Fire Alarm Panel	
C 111	Must Have Current San. & Fire Safety Reports SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0302 DESIGN AND CONSTRUCTION(f) The facility shall have current sanitation and fire and building safety inspection reports which shall be maintained in the home and available for review. This Rule is not met as evidenced by: 1. Based on record review, and interview with Maintenance Technician and Business Office Manager the facility failed to maintain in the facility, current (completed within the last twelve months) annual inspection report(s) required by this Rule. Findings on May 9, 2018: a. A current Annual Sprinkler System Inspection and Testing Report in accordance with NFPA 25, was not available for review by the Surveyors.	C 111	C111 1a) ANNUAL Sprinkler Insp IS ONSITE AND copy is ATTACHED to PoC.	
C 132	Bathrooms-Must Provide Privacy SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT	C 132		

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C 132	Continued From page 2 (e) The requirements for bathrooms and toilet rooms are: (5) The bathrooms and toilet rooms shall be designed to provide privacy. Bathrooms and toilet rooms with two or more water closets (commodes) shall have privacy partitions or curtains for each water closet. Each tub or shower shall have privacy partitions or curtains; This Rule is not met as evidenced by: 1. Based on observation, the facility failed to ensure that residents are provided privacy while bathing, dressing, or using toilet facilities. Findings on May 9, 2018: a. Bedroom D5 - the Bathroom opens onto adjacent bedrooms on either side, and neither door can latch to its frame because their strike plates are covered over with metal plates.	C 132	C132 1a) Both Bathroom Doors in D5,6 have been repaired and latching properly	
C 150	Corridors-Free of equipment and Obstructions SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (g) The requirements for corridors are: (4) Corridors shall be free of all equipment and other obstructions. This Rule is not met as evidenced by: 1. Based on observation, corridors are not free of obstructions. This would affect all residents, staff, and visitors by slowing or obstructing egress during an emergency. Findings on May 9, 2018: a. C Hall Nurse Station - in front of the Nurse Station there is an unattended medication cart, which is decreasing the required six feet width corridor to three feet seven inches.	C 150	C150 1a) All carts are mobile on wheels and can be relocated behind Nurse Station as to not intrude in egress path	

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C 154	Continued From page 3	C 154		
C 154	Entrances/Exits-Wanderer Alarms SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (h) The requirements for outside entrances and exits are: (4) In homes with at least one resident who is determined by a physician or is otherwise known to be disoriented or a wanderer, each exit door accessible by residents shall be equipped with a sounding device that is activated when the door is opened. The sound shall be of sufficient volume that it can be heard by staff. If a central system of remote sounding devices is provided, the control panel for the system shall be located in the office of the administrator or in a location accessible only to staff authorized by the administrator to operate the control panel. This Rule is not met as evidenced by: 1. Based on Observation, the facility failed to provide exit doors that are accessible by residents equipped with sounding devices that activated when the door opens. Findings on May 9, 2018: a. SCU Courtyard - this "Special Locking System" exit had an unalarmed protective cover over the emergency release toggle switch. This allows residents unrestricted access to the switch that unlocks that exit. In addition, the exit had no other notification device.	C 154	C154 1a) All Disconnect switches in the SCU will Alarm when turn off to Alert STAFF OF SITUATION	
C 164	Housekeeping and Furnishings-Clean, Repaired SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (a) Adult care homes shall:	C 164		

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C 164	Continued From page 4 (1) have walls, ceilings, and floors or floor coverings kept clean and in good repair; (2) have no chronic unpleasant odors; (3) have furniture clean and in good repair; (e) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: 1. Based on Observation, the facility failed to provide lighting in good repair. Findings on May 9, 2018: a. Corridor near Bedroom A10 - the sconce is missing its globe. b. Corridor near Bedroom A9 - the sconce is missing its globe. c. Corridor near Bedroom A12 - the sconce is missing its globe. 2. Based on Observation, the facility failed to prevent chronic unpleasant odors. This would affect residents, staff, and visitors by exposing them to an unpleasant environment. Findings on May 9, 2018: a. Bedroom A10 Bathroom - the plumbing fixtures' (sink, shower and commode) traps have dried-up, allowing sewer gases to enter the Building.	C 164	C164 1a) Sconce has been replaced b) Same as Above c) Same as Above 2a) A10 Bathroom has had water poured into Drains AND MAINT has verified All other Drains have Been Done	
C 166	Housekeeping-Maintained Free of Hazards SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (a) Adult care homes shall: (5) be maintained in an uncluttered, clean and orderly manner, free of all obstructions and hazards; (e) This Rule shall apply to new and existing facilities.	C 166		

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C 166	Continued From page 5 This Rule is not met as evidenced by: 1. Based on Observation, the Building is not maintained free of hazards, if oxygen cylinders fall, breaking their valves, propelling the cylinder, and turning it into a dangerous projectile. Findings on May 9, 2018: a. Service Area - a portable medical oxygen cylinder is stored standing up on the floor, not secured. Deficiency corrected before Construction Surveyors departed site. 2. Based on observation, the Building plumbing equipment was not maintained in a clean and orderly manner free if hazards. Findings on May 9, 2018: a. Kitchen - the ice machine drain is only ½ inch above the floor drain resulting in the potential for the drain line to clog and contaminate the ice due to backflow. Deficiency corrected before Construction Surveyors departed site.	C 166	C166 1a) Corrected while Surveyor onsite 2a) Corrected while Surveyor onsite	
C 185	Fire Safety-Rehearsals on Each Shift SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0309 PLAN FOR EVACUATION (b) There shall be rehearsals of the fire plan quarterly on each shift in accordance with the requirement of the local Fire Prevention Code Enforcement Official. (c) Records of rehearsals shall be maintained and copies furnished to the county department of social services annually. The records shall include the date and time of the rehearsals, the shift, staff members present, and a short description of what the rehearsal involved. (f) This Rule shall apply to new and existing facilities.	C 185		

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C 185	Continued From page 6 This Rule is not met as evidenced by: 1. Based on Record review and interview with Maintenance Technician & Business Office Manager, fire drill rehearsals are not being performed regularly with at least one per shift for each quarter. Findings on May 9, 2018: a. In the 1st quarter for the last 12 months, no rehearsal was performed during 1st and 2nd and 3rd shift. b. In the 2nd quarter for the last 12 months, no rehearsal was performed during 1st and 2nd and 3rd shift. c. In the 3rd quarter for the last 12 months, no rehearsal was performed during 3rd shift. d. In the 4th quarter for the last 12 months, no rehearsal was performed during 1st and 2nd and 3rd shift. 2. Based on Record review and interview with Maintenance Technician & Business Office Manager, the Facility failed to document the time of the rehearsals, staff members present, and a short description of what the rehearsal involved. Findings on May 9, 2018: a. The rehearsal records did not included the time, staff members present, and no description of what the rehearsal involved.	C 185	C185 1a)b)c)d) Regional Maint. has trained New Maintenance Director how to train Staff on Fire Drills and to be Descriptive on Forms with STAFF SIGNATURES 2a) Please read above as this pertains to same issues	
C 189	Building Equipment Maintained Safe, Operating SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (a) The building and all fire safety, electrical, mechanical, and plumbing equipment in an adult care home shall be maintained in a safe and operating condition.	C 189		

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C 189	Continued From page 7 (k) This Rule shall apply to new and existing facilities with the exception of Paragraph (e) which shall not apply to existing facilities. This Rule is not met as evidenced by: 1. Based on observation, the building's emergency equipment was not maintained in a safe and operating condition. This would affect all if they could not promptly find their way to an exit during an emergency. Findings on May 9, 2018: a. Corridor near Bedroom A14 -the wall-mounted self-contained emergency light's output is faint and makes a buzzing sound when the test button is pushed. b. Dining Exterior Exit - the exit sign did not illuminate on backup power when tested. Exit signs must work on backup power to provide directions during power outages. c. Corridor near Bedroom C6 -the wall-mounted self-contained emergency light's output is faint and makes a buzzing sound when the test button is pushed. 2. Based on observation, the Building was not maintained in a safe and operating condition, because the door(s) protecting the opening in the smoke barrier did not close completely and latch to restrict fire and smoke. This could affect all residents, staff, and visitors by not containing the smoke of the fire in the compartment of origin. Findings on May 9, 2018: a. D Hall Smoke Barrier - the front leaf, of the double-egress cross-corridor doors, did not close completely when the fire alarm system released the doors. Deficiency corrected before Construction Surveyors departed site. 3. Based on observations, the Building fire	C 189	C189 1a) Emergency Light at A14 has been repaired b) Exit Sign has been repaired at Dining Ext. c) Emergency Light at C6 has been repaired 2 a) Corrected while Surveyor onsite	

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C 189	Continued From page 8 safety was not maintained in a safe and operating condition. This could expose all to fire/smoke if not contained in Room of origin. Findings on May 9, 2018: a. Conference Room- the joints of a one-hour fire-resistance-rated gypsum ceiling assembly are deteriorating and cannot stop a fire. b. Water Heater Room - three PVC pipes, larger than 2-inch, penetrate the one-hour fire-resistance-rated ceiling assembly but their fire collars have dropped from the ceiling, removing the required firestop protection. c. Water Heater Room - there is a gap around a copper pipe not firestopped as it penetrates the fire-resistance-rated ceiling assembly. d. D Hall End Porch- the joints of a one-hour fire-resistance-rated gypsum ceiling assembly are deteriorating and cannot stop a fire. 4. Based on observation, the Building was not maintained in a safe and operating condition, because the commercial kitchen hood's fire suppression system lacked the inspections, maintenance, and documentation required to ensure a properly working system. This could affect residents, staff, and visitors if the commercial kitchen hood's suppression system fails to operate properly when needed. Findings on May 9, 2018: a. Kitchen -since the last semi-annual maintenance of the commercial kitchen hood's fire suppression system, performed in January 2018, there has been one documentation of the monthly in-house/owner inspections. 5. Based on Observation, the corridor doors are not maintained in a safe and operating condition. This affects all by not containing smoke and fire in the room of origin. Findings on May 9, 2018:	C 189	C189 3a) Joints in Conference Room have been mudded b) Fire Collars have been reattached in the Water Htr Room c) Gap in Water Htr Room at Cooper Pipe has been Fire caulked d) D hall Porch ceiling joints have been mudded 4a) ALL HOODS ARE Inspected AND Cleaned by OUTSIDE CONTRACTORS Semi-ANNUALLY	

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C 189	Continued From page 9 a. Service Area - the corridor door has an oxygen caddy holding the door open. This prevents the rapid release of the door with a light push or pull of the door, to close and latch. Deficiency corrected before Construction Surveyors departed site. b. Resident Care Director Office - the corridor door has a box holding the door open. This prevents the rapid release of the door with a light push or pull of the door, to close and latch. Deficiency corrected before Construction Surveyors departed site. c. Bedroom B11 - the corridor door has a wreath hanger blocking the door open. This prevents the rapid closing of the door with a light push or pull of the door, to close and latch. Deficiency corrected before Construction Surveyors departed site. 6. Based on observation, the Building was not maintained in a safe and operating condition, because the corridor doors do not resist the passage of smoke. Corridor door must positively/automatically latch into their frame under normal closing force. This could affect all residents, staff, and visitors if the doors did not latch to contain smoke/fire in the room of origin. Findings on May 9, 2018: a. Bedroom A11 - the corridor door is missing its latch bolt, and cannot latch to its frame to provide positive latching. b. Bedroom A17 - the corridor door hits the top of the doorframe, preventing it from closing and latching. c. Bedroom B7 - the corridor door is missing its latch bolt, and cannot latch to its frame to provide positive latching. d. Bedroom C5 - the corridor door does not latch into its frame. e. Bedroom C8 - the corridor door hit the carpet	C 189	C189 5a) Corrected while Surveyor onsite b) Same as above c) Same as above 6a) All Door latch has been repaired b) A17 has been adjusted to open properly c) B7 latch has been repaired d) C5 latch has been repaired e) C8 Door has been adjusted to open and close properly	

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C 189	Continued From page 10 and is difficult to closed and latched. Once the door is closed, it is equally difficult to open. f. Bedroom C14 - the corridor door's strike plate is filled with a paper and tape preventing the door from latching. g. Bedroom C15 - the corridor door's strike plate is covered over with a metal plate preventing the door from latching. 7. Based on observation, the Facility failed to maintain the electrical system in a safe and operating condition. Findings on May 9, 2018: a. SCU Courtyard - the emergency release switch, at the gate, is not enclosed in a weatherproof enclosure. b. A Hall Front Porch - the ground-fault circuit-interrupter (GFCI) electrical power receptacle is missing its weather resistant cover. c. D Hall Front Porch - the ground-fault circuit-interrupter (GFCI) electrical power receptacle is missing its weather resistant cover. 8. Based on observation, the Building was not maintained in a safe and operating condition exposing openings through the fire-resistance-rated finishes that allows the spread of smoke and heat.. This could affect all residents, staff, and visitors if smoke/fire is not contained in the Room or compartment of origin. Findings on May 9, 2018: a. A Hall End Porch - the fire sprinkler is missing its escutcheon plate, b. B Hall Spa - the fire sprinkler escutcheon plate has dropped down from the fire-resistance-rated ceiling c. B Hall Corridor near Electrical - the fire sprinkler escutcheon plate has dropped down d. B Hall End Porch - one of the fire sprinkler	C 189	C189 F) C14 has had all debris so Door latches properly g) C15 Door has been Adjusted to latch properly 7a) Weatherproof Cover has been put on Emergency release at GATE b) Cover has been installed to GFI on A hall Frt. Porch c) Weatherproof Cover has been installed to GFI Receptacle 8 a) b) c) d) e) f) g) h) All escutcheons to the previous locations have been installed or adjusted to seal sprinkler heads appropriately	

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C 189	Continued From page 11 escutcheon plate has dropped down from the ceiling e. B Hall End Porch - one of the fire sprinkler is missing its escutcheon plate, f. B Hall near Bedroom B8 - the fire sprinkler is covered with painter tape. g. Bedroom B10 - the fire sprinkler is missing its escutcheon plate, h. C Hall Electrical - the fire sprinkler is missing its escutcheon plate,	C 189		
C 193	Ovens, Ranges in Activity or Res. Rooms SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (4) Ovens, ranges and cook tops located in resident activity or recreational areas shall not be used except under facility staff supervision. The degree of staff supervision shall be based on the facility's assessment of the capabilities of each resident. The operation of the equipment shall have a locking feature provided, that shall be controlled by staff. (5) Ovens, ranges and cook tops located in resident rooms shall have a locking feature provided, controlled by staff, to limit the use of the equipment by residents who have been assessed by the facility to be incapable of operating the equipment in a safe manner. (k) This Rule shall apply to new and existing facilities with the exception of Paragraph (e) which shall not apply to existing facilities. This Rule is not met as evidenced by: 1. Based on Observation, and interview with Staff the facility failed to provide an environment in accordance with Rule by not providing proper control over the range. This could affect all s	C 193		

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C 193	Continued From page 12 Findings on May 9, 2018: a. D Hall Activity Room - the range is energized and no staff were found in the room. Deficiency corrected before Construction Surveyors departed site. b. C Hall Activity Room - the range is energized and no staff were found in the room. Deficiency corrected before Construction Surveyors departed site.	C 193	C193 a) This was corrected while Surveyor onsite b) This was corrected while Surveyor onsite	
C 199	Exhaust Ventilation SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (g) The spaces listed in this Paragraph shall be provided with exhaust ventilation at the rate of two cubic feet per minute per square foot. This requirement does not apply to facilities licensed before April 1, 1984, with natural ventilation in these specified spaces: (1) soiled linen storage; (2) soil utility room; (3) bathrooms and toilet rooms; (4) housekeeping closets; and (5) laundry area. (k) This Rule shall apply to new and existing facilities with the exception of Paragraph (e) which shall not apply to existing facilities. This Rule is not met as evidenced by: 1. Based on Observation and testing with a thin plastic sheet, the facility failed to maintain the ventilation system in proper working order. This could affect all residents, staff, and visitors by preventing the exhausting of odors. Findings on May 9, 2018: a. C Hall Utility - the required exhaust ventilation system did not work, and there is odor.	C 199	C199 1a) Chall utility Exhaust Fan has been repaired	

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL090031	A. BUILDING: 01 B. WING _____	05/09/2018

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
CARILLON ASSISTED LIVING AT INDIAN TRAIL	5306 SECREST SHORT CUT ROAD MONROE, NC 28110

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE

PERFORMANCE
Fire Protection, LLC
Performance on Every Level

Form for Inspection, Testing and Maintenance of Dry Pipe Fire Sprinkler Systems

Location Code: 044-CARIND

Contact: Carillon Assisted Living / James Smith

Contact Address: 5306 Secrest Short Cut Road
Monroe, NC 28110

Phone:

Email:

Property Evaluated: Carillon Indian Trail (Residential Board and Care)
5306 Secrest Short Cut Road
Monroe, NC 28110

Description: Dry (2 Dry)

Company: Performance Fire Protection, LLC

Address: 179 Gasoline Alley, Suite 105
Mooresville, NC 28117

Company Phone: 704-663-1664

Inspector: Michael Gantt
33239

Date of Work: 3/16/2018

Frequency: Annual

Attached Files

The are no attachments for this submission

Deficiency Summary

ALL Deficiencies have been corrected

Status: Open

Severity: Non-Critical

I.B

B. Have dry systems been tested for air leakage in past 3 years?

It appears the dry systems have not been air leak tested in the past 3 years. Per NFPA 25 dry systems shall be air leak tested every 3 years. Recommend performing air leak test on the dry systems.

Status: Open

Severity: Non-Critical

I.C

C. Have check valves been internally inspected in past 5 years?

Recommend performing 5 year inspection per NFPA 25.

Status: Open

Severity: Non-Critical

I.D

D. Have gauges been tested or replaced in past 5 years?

It appears the gauges on the dry systems have not been calibrated or replaced in the past 5 years. Per NFPA 25 gauges shall be calibrated or replaced every 5 years. Recommend calibrating or replacing the gauges on the dry systems. (3) air gauges and (2) water gauges.

Status: Open

Severity: Non-Critical

I.E

E. Has piping been internally inspected in past 5 years?

It appears the piping on the dry systems have not been internally inspected in the past 5 years. Per NFPA 25 system piping shall be

internally inspected for obstructions every 5 years. Recommend performing internal inspection of system piping.

Status: Open

Severity: Non-Critical

II.A.3.a

a. Hydraulic nameplate (calculated systems) securely attached to riser and legible?

It appears there are no hydraulic nameplates attached to the dry systems. Only nameplate found was attached to the wet system. Original installing sprinkler contractor is responsible for providing the hydraulic nameplate and calculations for the systems.

General Comments

There are no general comments for this submission

PERFORMANCE
Fire Protection, LLC
Performance on Every Level

Performance Fire Protection, LLC
179 Gasoline Alley, Suite 105
Mooresville, NC 28117
Phone: 704-663-1664

Form for Inspection, Testing and Maintenance of Dry Pipe Fire Sprinkler Systems

This form covers the minimum requirements of **NFPA 25-2014** for dry pipe fire sprinkler systems connected to water supplies without tanks or fire pumps. Separate forms are available for fire pumps, tanks, hose connections, and other fire protection systems. More frequent inspection, testing, and maintenance may be necessary depending on the conditions of the occupancy and the water supply.

Notes:
1. All questions are to be answered *Yes, No, or Not Applicable.* All "No" answers are to be explained in the *Comments* for this form.
2. Inspection, Testing and Maintenance are to be performed with water supplies (including fire pumps) in service, unless the impairment procedures of Chapter 15 of NFPA 25 are followed.

The work covered on this form is (select one): Annual

Date of Work: 3/16/2018

All responses refer to the current work (inspection, testing and maintenance) performed on this date.

Owner:
Carillon Assisted Living / James Smith

Owner's Phone Number:

Owner's Address:
5306 Secrest Short Cut Road, Monroe, NC, 28110

Property Being Evaluated:
Carillon Indian Trail (Residential Board and Care)

Property Address:
5306 Secrest Short Cut Road, Monroe, NC, 28110

System(s):
Dry (2 Dry)

(1)-2009 - 6" Reliable D, Dry Pipe Valve w/Accelerator
(1)-2009 - 4" Reliable D, Dry Pipe Valve w/No Accelerator

Part I - Owner's Section

A. Have dry pipe valves and trim been internally inspected in past 5 years?	☑ Yes ☐ No ☐ N/A
B. Have dry systems been tested for air leakage in past 3 years?	☐ Yes ☑ No ☐ N/A
C. Have check valves been internally inspected in past 5 years?	☐ Yes ☑ No ☐ N/A
D. Have gauges been tested or replaced in past 5 years?	☐ Yes ☑ No ☐ N/A
E. Has piping been internally inspected in past 5 years?	☐ Yes ☑ No ☐ N/A
F. Have pressure reducing valves been flow tested in past 5 years?	☐ Yes ☐ No ☑ N/A
G. Have dry standpipes been hydrostatically tested in past 5 years?	☐ Yes ☐ No ☑ N/A

Part II - Inspector's Section

A. Inspections

1. Daily and Weekly Items

a. Dry-pipe valve enclosures maintaining a minimum of 40°F?	☑ Yes ☐ No ☐ N/A
b. Gauges on systems without low pressure alarms in good condition showing normal water and air pressure?	☐ Yes ☐ No ☑ N/A
c. For freezer systems, gauge near the compressor reading the same as the gauge near the dry-pipe valve?	☐ Yes ☐ No ☑ N/A

2. Monthly Inspection Items (in addition to above items)

a. Control valves (including valves on backflow preventers) with locks or electrical supervision:

1. In correct (open or closed) position?	☑ Yes ☐ No ☐ N/A
2. Lock or supervision in place?	☑ Yes ☐ No ☐ N/A
3. Accessible and free from external leaks?	☑ Yes ☐ No ☐ N/A
4. Provided with appropriate wrenches?	☐ Yes ☐ No ☑ N/A
5. Provided with appropriate identification?	☑ Yes ☐ No ☐ N/A
b. Dry-pipe valve free from physical damage, trim in correct (open or closed) position and no leakage from intermediate chamber?	☑ Yes ☐ No ☐ N/A
c. Gauges on systems with low pressure alarms in good condition showing normal water and air pressure?	☑ Yes ☐ No ☐ N/A

3. Quarterly Inspection Items (in addition to above items)

a. Hydraulic nameplate (calculated systems) securely attached to riser and legible?	☐ Yes ☑ No ☐ N/A
b. Fire department connections visible, accessible, couplings and swivels not damaged, gaskets in place and in good condition, plugs and caps are okay, identification sign(s) in place, check valve is not leaking, and clapper and automatic drain valve in place and operating properly? *(If plugs or caps are not in place, inspect interior for obstructions)*	☑ Yes ☐ No ☐ N/A
c. Alarm and supervisory devices not damaged?	☑ Yes ☐ No ☐ N/A
d. Pressure reducing valves in open position, not leaking, with downstream pressure per design criteria, and in good condition with handwheels not broken?	☐ Yes ☐ No ☑ N/A

4. Annual Inspection Items (in addition to above items)

a. Proper number and type of spare sprinklers?	☑ Yes ☐ No ☐ N/A
b. Visible sprinklers:	
1. Proper position: upright, pendent, sidewall?	☑ Yes ☐ No ☐ N/A
2. Free of corrosion and physical damage?	☑ Yes ☐ No ☐ N/A
3. Proper clearance below sprinklers?	☑ Yes ☐ No ☐ N/A
4. Free of foreign materials including paint?	☑ Yes ☐ No ☐ N/A
5. Liquid in all glass bulb sprinklers?	☑ Yes ☐ No ☐ N/A
c. Visible pipe:	
1. In good condition/no external corrosion?	☑ Yes ☐ No ☐ N/A
2. No mechanical damage or leaks?	☑ Yes ☐ No ☐ N/A
3. No external loads?	☑ Yes ☐ No ☐ N/A
d. Visible pipe hangers and seismic braces not damaged or loose?	☑ Yes ☐ No ☐ N/A
e. Dry-pipe valve passed internal inspection?	☑ Yes ☐ No ☐ N/A
f. Low temperature alarms look okay?	☐ Yes ☐ No ☑ N/A
g. Pipe through freezers free of ice blockage?	☐ Yes ☐ No ☑ N/A
h. Sprinkler wrench with spare sprinklers?	☑ Yes ☐ No ☐ N/A

5. Fifth Year Inspection Items (in addition to above items)
Not applicable

PERFORMANCE
Fire Protection, LLC
Performance on Every Level

Performance Fire Protection, LLC
179 Gasoline Alley, Suite 105
Mooresville, NC 28117
Phone: 704-663-1664

B. Testing - Report any failures in the Comments for this form

1. Quarterly Tests

a. Mechanical waterflow alarm devices passed tests (alarms actuating and flow observed)? ☐ Yes ☐ No ☑ N/A

b. Priming level correct? ☑ Yes ☐ No ☐ N/A

c. Low air pressure signal passed test? ☑ Yes ☐ No ☐ N/A

d. Quick opening device passed test? ☑ Yes ☐ No ☐ N/A

e. Main drain test for system downstream of backflow device or pressure reducing valve:

1. Record static pressure (psi) and residual pressure(psi):

2. Was flow observed? ☐ Yes ☐ No ☑ N/A

3. Are results comparable to previous tests? ☐ Yes ☐ No ☑ N/A

2. Semiannual Tests (in addition to previous items)

a. Valve supervisory switches indicate movement? ☑ Yes ☐ No ☐ N/A

b. Electrical waterflow alarm devices passed tests (alarms actuating and flow observed)? ☑ Yes ☐ No ☐ N/A

3. Annual Tests (in addition to previous items)

a. Main drain test for systems not tested quarterly:

1. Record static pressure (psi) and residual pressure(psi):

System	Static	Residual	Comments
6" Dry System	90	70	
4" Dry System	90	70	

2. Was flow observed? ☑ Yes ☐ No ☐ N/A

3. Are results comparable to previous tests? ☑ Yes ☐ No ☐ N/A

b. Post indicating valves opened until spring or torsion felt in the rod then closed back ¼ turn? ☐ Yes ☐ No ☑ N/A

c. Are all sprinklers dated 1920 or later? ☑ Yes ☐ No ☐ N/A

d. Sprinklers with fast response elements 20 years old or more replaced or successfully sample tested in last 10 years? ☐ Yes ☐ No ☑ N/A

e. Standard response sprinklers 50 years old or more replaced or successfully sample tested in last 10 years? ☐ Yes ☐ No ☑ N/A

f. Standard response sprinklers 75 years old or more replaced or successfully sample tested in last 5 years? ☐ Yes ☐ No ☑ N/A

g. Dry-type sprinklers replaced or successfully sample tested in last 10 years? ☐ Yes ☐ No ☑ N/A

h. Sprinklers subject to harsh environments replaced or successfully sample tested in last 5 years? ☐ Yes ☐ No ☑ N/A

i. All control valves operated through full range and returned to normal position? ☑ Yes ☐ No ☐ N/A

j. Dry-pipe valve partial flow trip test (unless full trip test done):

1. Initial air pressure (psi) and water pressure (psi):

System	Air (psi)	Water (psi)
6" reliable (A&B halls)	30	90
4" reliable (C&D halls)	33	90

2. When valve tripped, air pressure (psi) and time (sec):

System	Pressure (psi)	Time (sec)
6" reliable (A&B halls)	25	13
4" reliable (C&D halls)	16	16

3. Results comparable to previous tests? ☑ Yes ☐ No ☐ N/A

k. Automatic air maintenance devices passed? ☑ Yes ☐ No ☐ N/A

4. Test for every third year (in addition to previous items)

Not applicable

5. Test for every fifth year (in addition to appropriate items)

Not applicable

C. Maintenance

1. Annual Maintenance Items

a. Operating stem of all OS&Y valves lubricated, completely closed, and reopened? ☑ Yes ☐ No ☐ N/A

b. Interior of dry-pipe valves cleaned? ☑ Yes ☐ No ☐ N/A

c. Low points drained before freezing weather? ☑ Yes ☐ No ☐ N/A

d. Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease build up? ☐ Yes ☐ No ☑ N/A

Part III - Comments

Any "No" answers, test failures or other problems found with the sprinkler system must be explained using the comment specific for each question. Additional comments can be added here.

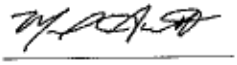
Please see the summary section at the top of the form for the comments.

Part IV - Inspector's Information

Inspected By: Michael Gantt

Inspector License: 33239

I state that the information on this form is correct at the time and place of my inspection, and that all equipment tested at this time was left in operating condition upon completion of this inspection except as noted in the *Comments*.

Signature of Inspector: 

Date: 3/16/2018

Customer Printed Name: Carillion Assited Living/James Smith

Signature of Customer:

PERFORMANCE
Fire Protection, LLC
Performance on Every Level

Form for Inspection, Testing and Maintenance of Wet Pipe Fire Sprinkler Systems

Location Code: 044-CARIND

Contact: Carillon Assisted Living / James Smith

Contact Address: 5306 Secrest Short Cut Road
Monroe, NC 28110

Phone:

Email:

Property Evaluated: Carillon Indian Trail (Residential Board and Care)
5306 Secrest Short Cut Road
Monroe, NC 28110

Description: Wet (1 Wet)

Company: Performance Fire Protection, LLC

Address: 179 Gasoline Alley, Suite 105
Mooresville, NC 28117

Company Phone: 704-663-1664

Inspector: Michael Gantt
33239

Date of Work: 3/16/2018

Frequency: Annual

Attached Files

The are no attachments for this submission

Deficiency Summary

Status: Open

Severity: Non-Critical

I.B

B. Have check valves been internally inspected in past 5 years?

It appears the riser check valve and FDC check have not been internally inspected in the past 5 years. FDC is remote and the check valve is not accessible. Per NFPA 25 check valves shall be internally inspected every 5 years. Recommend internal inspection of check valves.

Status: Open

Severity: Non-Critical

I.C

C. Have gauges been tested or replaced in past 5 years?

It appears the (2) water gauges on the wet system have not been calibrated or replaced in the past 5 years. Per NFPA 25 gauges shall be calibrated or replaced every 5 years. Recommend calibrating or replacing gauges on the wet system.

Status: Open

Severity: Non-Critical

I.D

D. Has piping been internally inspected in past 5 years?

It appears the piping on the wet system has not been internally inspected in the past 5 years. Per NFPA 25 system piping shall be internally inspected every 5 years for obstructions. Recommend performing internal inspection of system piping.

Status: Open

Severity: Non-Critical

II.A.2.a

a. Fire department connections visible, accessible, couplings and swivels not damaged, gaskets in place and in good condition, plugs

and caps are okay, identification sign(s) in place, check valve is not leaking, clapper in place and operating properly and automatic drain valve in place and operating properly?

(If plugs or caps are not in place, inspect interior for obstructions)

It appears the remote FDC does not have a sign to show its location. Recommend adding an FDC sign on a post near the FDC that's visible to show its location. FDC is located near fireline backflow hotbox.

General Comments

There are no general comments for this submission

PERFORMANCE
Fire Protection, LLC
Performance on Every Level

Performance Fire Protection, LLC
179 Gasoline Alley, Suite 105
Mooresville, NC 28117
Phone: 704-663-1664

Form for Inspection, Testing and Maintenance of Wet Pipe Fire Sprinkler Systems

This form covers the minimum requirements of **NFPA 25-2014** for wet pipe fire sprinkler systems connected to water supplies without tanks or fire pumps. Separate forms are available for fire pumps, tanks, hose connections, and other fire protection systems. More frequent inspection, testing, and maintenance may be necessary depending on the conditions of the occupancy and the water supply.

Notes:
1. All questions are to be answered *Yes, No, or Not Applicable.* All "No" answers are to be explained in the *Comments* for this form.
2. Inspection, Testing and Maintenance are to be performed with water supplies (including fire pumps) in service, unless the impairment procedures of Chapter 15 of NFPA 25 are followed.

The work covered on this form is (select one): Annual

Date of Work: 3/16/2018

All responses refer to the current work (inspection, testing and maintenance) performed on this date.

Owner:
Carillon Assisted Living / James Smith

Owner's Phone Number:

Owner's Address:
5306 Secrest Short Cut Road, Monroe, NC, 28110

Property Being Evaluated:
Carillon Indian Trail (Residential Board and Care)

Property Address:
5306 Secrest Short Cut Road, Monroe, NC, 28110

System(s):
Wet (1 Wet)

2009 - 4" Shotgun w/Reliable Riser Check Valve

Part I - Owner's Section

A. Have alarm valves and trim been internally inspected in past 5 years?	☐ Yes ☐ No ☑ N/A
B. Have check valves been internally inspected in past 5 years?	☐ Yes ☑ No ☐ N/A
C. Have gauges been tested or replaced in past 5 years?	☐ Yes ☑ No ☐ N/A
D. Has piping been internally inspected in past 5 years?	☐ Yes ☑ No ☐ N/A
E. Have pressure reducing valves been flow tested in past 5 years?	☐ Yes ☐ No ☑ N/A
F. Have wet standpipes been flow tested in past 5 years?	☐ Yes ☐ No ☑ N/A
G. Have dry standpipes been hydrostatically tested in past 5 years?	☐ Yes ☐ No ☑ N/A

Part II - Inspector's Section

A. Inspections

1. Monthly Items

a. Control valves and valves on backflow preventers with locks or electrical supervision:	
1. In correct (open or closed) position?	☑ Yes ☐ No ☐ N/A
2. Lock or supervision in place?	☑ Yes ☐ No ☐ N/A
3. Accessible and free from external leaks?	☑ Yes ☐ No ☐ N/A
4. Provided with appropriate wrenches?	☐ Yes ☐ No ☑ N/A
5. Provided with appropriate identification?	☑ Yes ☐ No ☐ N/A
b. Gauges on system in good condition and showing normal water supply pressure?	☑ Yes ☐ No ☐ N/A
c. Alarm valve free from physical damage, trim in correct (open or closed) position and no leakage from retarding chamber or drains?	☐ Yes ☐ No ☑ N/A

2. Quarterly Inspection Items (in addition to above items)

a. Fire department connections visible, accessible, couplings and swivels not damaged, gaskets in place and in good condition, plugs and caps are okay, identification sign(s) in place, check valve is not leaking, clapper in place and operating properly and automatic drain valve in place and operating properly? *(If plugs or caps are not in place, inspect interior for obstructions)*	☐ Yes ☑ No ☐ N/A
b. Hydraulic nameplate (calculated systems) securely attached to riser and legible?	☑ Yes ☐ No ☐ N/A
c. Alarm & supervisory devices not damaged?	☑ Yes ☐ No ☐ N/A
d. Pressure reducing valves in open position, not leaking, with downstream pressure per design criteria, and in good condition with handwheels not broken?	☐ Yes ☐ No ☑ N/A

3. Annual Inspection Items (in addition to above items)

a. Proper number and type of spare sprinklers?	☑ Yes ☐ No ☐ N/A
b. Visible sprinklers:	
1. Proper position: upright, pendent, sidewall?	☑ Yes ☐ No ☐ N/A
2. Free of leaks, corrosion and damage?	☑ Yes ☐ No ☐ N/A
3. Proper clearance below sprinklers?	☑ Yes ☐ No ☐ N/A
4. Free of foreign materials including paint?	☑ Yes ☐ No ☐ N/A
5. Liquid in all glass bulb sprinklers?	☑ Yes ☐ No ☐ N/A
c. Visible pipe:	
1. In good condition/no external corrosion?	☑ Yes ☐ No ☐ N/A
2. No mechanical damage or leaks?	☑ Yes ☐ No ☐ N/A
3. No external loads?	☑ Yes ☐ No ☐ N/A
d. Visible pipe hangers and seismic braces not damaged or loose?	☑ Yes ☐ No ☐ N/A
e. Sprinkler wrench with spare sprinklers?	☑ Yes ☐ No ☐ N/A

4. Fifth Year Inspection Items (in addition to above items)

Not applicable

B. Testing - Report any failures in the Comments for this form

1. Quarterly Tests

a. Mechanical waterflow alarm devices passed tests (alarms actuated and flow observed)?	☐ Yes ☐ No ☑ N/A
b. Main drain test for system downstream of backflow device or pressure reducing valve:	
1. Record static pressure (psi) and residual pressure(psi):	
2. Was flow observed?	☐ Yes ☐ No ☑ N/A
3. Are results comparable to previous tests?	☐ Yes ☐ No ☑ N/A

2. Semiannual Tests (in addition to previous items)

a. Valve supervisory switches indicate movement?	☑ Yes ☐ No ☐ N/A
b. Electrical waterflow alarm devices passed tests (alarms actuated and flow observed)?	☑ Yes ☐ No ☐ N/A

3. Annual Tests (in addition to previous items)

a. Main drain test for systems not tested quarterly:

1. Record static pressure (psi) and residual pressure(psi):

Performance Fire Protection, LLC
179 Gasoline Alley, Suite 105
Mooresville, NC 28117
Phone: 704-663-1664

System	Static	Residual	Comments
4" Wet	90	70	

2. Was flow observed? ☑ Yes ☐ No ☐ N/A
3. Are results comparable to previous tests? ☑ Yes ☐ No ☐ N/A
b. Post indicating valves opened until spring or torsion felt in the rod then closed back ¼ turn? ☐ Yes ☐ No ☑ N/A
c. Are all sprinklers dated 1920 or later? ☑ Yes ☐ No ☐ N/A
d. Sprinklers with fast response elements 20 years old or more replaced or successfully sample tested in last 10 years? ☐ Yes ☐ No ☑ N/A
e. Standard response sprinklers 50 years old or more replaced or successfully sample tested in last 10 years? ☐ Yes ☐ No ☑ N/A
f. Standard response sprinklers 75 years old or more replaced or successfully sample tested in last 5 years? ☐ Yes ☐ No ☑ N/A
g. Dry-type sprinklers replaced or successfully sample tested in last 10 years? ☐ Yes ☐ No ☑ N/A
h. Sprinklers subject to harsh environments replaced or successfully sample tested in last 5 years? ☐ Yes ☐ No ☑ N/A
i. Antifreeze solution specific gravity:
1. Correct at interface with wet system? ☐ Yes ☐ No ☑ N/A
j. All control valves operated through full range and returned to normal position? ☑ Yes ☐ No ☐ N/A

4. Tests for every fifth year (in addition to appropriate items)
Not applicable

C. Maintenance

1. Annual Maintenance Items

a. Operating stem of all OS&Y valves lubricated, completely closed, and reopened? ☑ Yes ☐ No ☐ N/A
b. Sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems replaced except for bulb-type which show no signs of grease build up? ☐ Yes ☐ No ☑ N/A

Part III - Comments

Any "No" answers, test failures or other problems found with the sprinkler system must be explained using the comment specific for each question. Additional comments can be added here.

Please see the summary section at the top of the form for the comments.

Part IV - Inspector's Information

Inspected By: Michael Gantt
Inspector License: 33239

I state that the information on this form is correct at the time and place of my inspection, and that all equipment tested at this time was left in operating condition upon completion of this inspection except as noted in the *Comments*.

Signature of Inspector: 

Date: 3/16/2018
Customer Printed Name: Carillion Assited Living/James Smith
Signature of Customer: