



Washington State Patrol
Fire Protection Bureau
Phone: (360) 596-3900

Business Name Fairview Assisted Living Inc
Address 1617 Calsipel ,
City, State, Zip Spokane, WA 99205

Provider Number 001146
Approval Status Approved
Facility Type Residential Care

On 04/24/2025 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

1 Testing and Maintenance

Sprinkler systems shall be tested and maintained in accordance with Section 901.

(IFC 903.5 2021)

1. Facility is unable to provide documentation for the quarterly sprinkler system inspections. Report from Patriot received.

2. Forward flow testing of the backflow preventers shall be required. Scheduled for 3/31/25. Report to be provided.

NFPA 25 13.7.2. Testing.

13.7.2.1* All backflow preventers installed in fire protection system piping shall be exercised annually by conducting a forward flow test at a minimum flow rate of the system demand.

13.7.2.1.1 Where water rationing is enforced during shortages lasting more than 1 year, an internal inspection of the backflow preventer to ensure the check valves will fully open shall be permitted in lieu of conducting the annual forward flow test.

13.7.2.1.2 The forward flow test shall not be required where annual fire pump testing causes the system flow rate to flow through the backflow preventer device.

13.7.2.2 Where hydrants or inside hose stations are located downstream of the backflow preventer, the forward flow test shall include hose stream demand.

13.7.2.3 Where connections do not permit verification of the forward flow test at the minimum flow rate of system demand, test shall be conducted at maximum flow rate possible.

The full flow test of the backflow prevention valve can be performed with a test header or other connections downstream of the valve. A bypass around the check valve in the fire department connection line with a control valve in the normally closed position can be an acceptable arrangement. When flow to a visible drain cannot be accomplished, closed loop flow can be acceptable if a flowmeter or sight glass is incorporated into the system to ensure flow.

This document was prepared by Residential Care Services for the Locator website.



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Next inspection scheduled on or after: 05/31/2026

Right of appeal. Any person may appeal any decision made by the Fire Protection Bureau in accordance with WAC 212-12.

Owner or Authorized Representative

K. Samms, RN

Signature

Karen Samms, RN Director of Nursing

Print Name and Title

Deputy State Fire Marshal Barbara McMullen
6403 W ROWAND DR
Spokane WA 99219
(509) 954-2746

Barbara McMullen

Signature



Washington State Patrol
Fire Protection Bureau
Phone: (360) 596-3900

Business Name	Fairview Assisted Living Inc	Provider Number	001146
Address	1617 Calsipel ,	Approval Status	Disapproved
City, State, Zip	Spokane, WA 99205	Facility Type	Residential Care

On 03/27/2025 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

1 Admin - (ITM) Inspection, Testing, & Maintenance

Any citation that requires inspection, testing, or maintenance (ITM) is required to have the testing completed, paper results delivered, and any deficiencies found during the ITM corrected before the citation is cleared."

For your information.

2 Application and Use

603.5.2 Application and use. Relocatable power taps and current taps shall be directly connected to a permanently installed receptacle.

In the following locations have refrigerators plugged into powerstrips:

1. Administrators office has a refrigerator plugged into powerstrip - removed at inspection.
2. 1st floor nurses station has a refrigerator plugged inot a powerstrip - removed at inspection.

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4 Portable Fire Extinguishers - General Requirements

Portable fire extinguishers shall be selected, installed and maintained in accordance with this section and NFPA 10.

Exceptions:

1. The distance of travel to reach an extinguisher shall not apply. The travel distance to reach an extinguisher shall not apply to the spectator seating portions of Group A-5 occupancies.
2. Thirty-day inspections shall not be required and maintenance shall be allowed to be once every three years for dry-chemical or halogenated agent portable fire extinguishers that are supervised by a listed and approved electronic monitoring device, provided that all of the following conditions are met:
 - 2.1. Electronic monitoring shall confirm that extinguishers are properly positioned, properly charged and unobstructed.
 - 2.2. Loss of power or circuit continuity to the electronic monitoring device shall initiate a trouble signal.
 - 2.3. The extinguishers shall be installed inside of a building or cabinet in a noncorrosive environment.
 - 2.4. Electronic monitoring devices and supervisory circuits shall be tested every 3 years when extinguisher maintenance is performed.
 - 2.5. A written log of required hydrostatic test dates for extinguishers shall be maintained by the owner to verify that hydrostatic tests are conducted at the frequency required by NFPA 10.
3. In Group I-3, portable fire extinguishers shall be permitted to be located at staff locations.

(IFC 906.2 2021)

The fire extinguisher located in the elevator mechanical room did not have a monthly/inspection check completed in February 2025.

Initials of Authorized Facility Representative:



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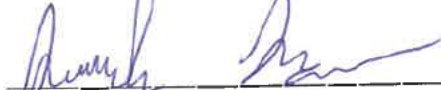
Code Requirement

Statement of Violation

Next inspection scheduled on or after: 04/26/2025

Right of appeal. Any person may appeal any decision made by the Fire Protection Bureau in accordance with WAC 212-12.

Owner or Authorized Representative


Signature

Jeremiah Bruce
Print Name and Title

Deputy State Fire Marshal Barbara McMullen
6403 W ROWAND DR
Spokane WA 99219
(509) 954-2746


Signature

Initials of Authorized Facility Representative:

