



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

Business Name Nikkei Manor	Provider Number 001186
Address 700 6TH AVE S,	Approval Status Approved
City, State, Zip Seattle, WA 98104	Facility Type Residential Care

On 11/29/2023 the Office of the State Fire Marshal conducted an inspection at your facility.

All violations noted during previous related inspection(s) have been corrected.

Owner or Owner's Representative

Signature

Allen D Russell

Print Name and Title

Deputy State Fire Marshal Jason Van Gorkum
2803 156 AVE SE
Bellevue WA 98007
(509) 406-7209

Signature

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

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



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Business Name Nikkei Manor	Provider Number 001186
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On 10/12/2023 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

1 Unapproved conditions

Open junction boxes and open-wiring splices shall be prohibited. Approved covers shall be provided for all switch and electrical outlet boxes.

(IFC 604.6, 2018)

At time of inspection the following was observed:

1. Broken cover found in Activities storage room

2 Cleaning

Hoods, grease-removal devices, fans, ducts and other appurtenances shall be cleaned at intervals as required by Sections 607.3.3.1 through 607.3.3.3.

(IFC 607.3.3 2018)

At time of inspection the following was observed:

1. Check on deficiency from report

3 Owner's Responsibility

The owner shall maintain an inventory of all required fire-resistance-rated construction, construction installed to resist the passage of smoke and the construction included in Sections 703 through 707 and Sections 602.4.1 and 602.4.2 of the International Building Code. Such construction shall be visually inspected by the owner annually and properly repaired, restored or replaced where damaged, altered, breached or penetrated. Records of inspections and repairs shall be maintained. Where concealed, such elements shall not be required to be visually inspected by the owner unless the concealed space is accessible by the removal or movement of a panel, access door, ceiling tile or similar movable entry to the space.

(IFC 701.6 2018 WAC 51-54A)

The following deficiencies were cited as a result of this inspection:

At the time of inspection the following paperwork was not provided:

1. Facility will need to identify and establish a schedule for inspection of Fire-Rated construction by 30 days of this inspection.
2. Annual inspection of fire-resistance-rated construction will need to be performed and completed by end of 2023.

All inspection reports must verify that the system has no deficiencies, or document that all deficiencies have been corrected.

4 Door Operation

Swinging fire doors shall close from the full-open position and latch automatically.

(IFC 705.2.4 2018)

At time of inspection the following was observed:

1. Double doors will not latch going into activities area 119



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Code Requirement	Statement of Violation
5 Extinguishing System Service Automatic fire-extinguishing systems shall be serviced not less frequently than every six months and after activation of the system. Inspection shall be by qualified individuals, and a certificate of inspection shall be forwarded to the fire code official upon completion. (IFC 904.12.5.2 2018)	The following deficiencies were cited as a result of this inspection: At the time of inspection the following paperwork was not provided: 1. First semi-annual servicing ✓ All inspection reports must verify that the system has no deficiencies, or document that all deficiencies have been corrected. At time of inspection the following was observed: 1. Facility needs to perform a heat survey for the kitchen hood to determine the fusible link required for installation.

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6 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 2015, 2018)

At time of inspection the following was observed:

1. Missed signed off fire extinguishers found in Boiler room and IT room

7 Maintenance

Carbon monoxide alarms and carbon monoxide detection systems shall be maintained in accordance with NFPA 720. Carbon monoxide alarms and carbon monoxide detectors that become inoperable or begin producing end-of-life signals shall be replaced.

(IFC 915.6 2018)

At time of inspection the following was observed:

1. There were missing Carbon Monoxide alarms in the boiler room that has appliances connecting to a fossil fuel burning..



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8 Door Operations

Except as specifically permitted by this section, egress doors shall be readily openable from the egress side without the use of a key or special knowledge or effort. (IFC 1010.1.9 2015, 2018)	At time of inspection the following was observed: 1. Gate swings the incorrect way blocking the path 2. Door handles, pulls, latches, locks and other operating devices on doors required to be accessible by Chapter 11 of the International Building Code shall not require tight grasping, tight pinching or twisting of the wrist to operate. (IFC 1010.1.9.1 2015, 2018)
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9 Emergency Lighting Equipment Inspection and Testing

Emergency lighting shall be maintained in accordance with Section 1008 and shall be inspected and tested in accordance with Sections 1031.10.1 and 1031.10.2. (IFC 1031.10 2018)	At time of inspection the following was observed: 1. Emergency lighting ES21/2 not working
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Code Requirement	Statement of Violation
10 NFPA 80 Fire Door Inspection and Testing	
5.2.1 Inspection and Testing. Upon completion of the installation, door, shutters, and window assemblies shall be inspected and tested in accordance with 5.2.4. 5.2.4 Periodic Inspection and Testing. 5.2.4.1 Periodic inspections and testing shall be performed not less than annually. 5.2.4.4 A record of all inspections and testing shall be provided that includes, but is not limited to, the following information: 1. Date of inspection 2. Name of facility 3. Address of facility 4. Name of person(s) performing inspections and testing 5. Company name and address of inspecting company 6. Signature of inspector of record 7. Individual record of each inspected and tested fire door assembly 8. Opening identifier and location of each inspected and tested fire door assembly 9. Type and description of each inspected and tested fire door assembly 10. Verification of visual inspection and functional operation 11. Listing of deficiencies in accordance with 5.2.3, Section 5.3, and Section 5.4 And the following shall be checked: 1. Labels are clearly visible and legible 2. No open holes or breaks exist in surfaces of wither the door or frame 3. Glazing, vision light frames, and glazing beads are intact and securely fastened in place, if so equipped. 4. The door, frame, hinges, hardware, and non combustible threshold are secured, aligned and in working order with no visible, signs of damage 5. No parts are missing or broken 6. Door clearances do not exceed clearances listed in 4.8.4 and 6.3.1.7 7. The self-closing device is operational; that is, the active door completely closes when operated from the full open position 8. If a coordinator is installed, the inactive lead close before the active lead	The following deficiencies were cited as a result of this inspection: At the time of inspection the following paperwork was not provided: 1. Facility will need to identify and establish a schedule for inspection of Fire Doors by 30 days of this inspection. 2. Annual inspection of fire doors will need to be performed and completed by end of 2023. All inspection reports must verify that the system has no deficiencies, or document that all deficiencies have been corrected.



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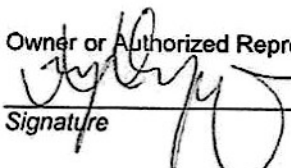
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9. Latching hardware operates and secures the door when it is in the closed position 10. Auxiliary hardware items that interfere or prohibit operation are not installed on the door or frame 11. No field modification to the door assembly have been performed that void the label. 12. Meeting edge protection, gasketing and edge seals where required, are inspected to verify their presence and intertie 13. Signage affixed to a door meets the requirements listed in 4.1.4	

Next inspection scheduled on or after: 11/13/2023

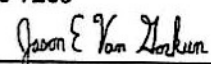
Right of appeal. Any person may appeal any decision made by the Fire Protection Bureau in accordance with WAC 212-12.

Owner or Authorized Representative


Signature

Amy Nguyen, Executive Director
Print Name and Title

Deputy State Fire Marshal Jason Van Gorkum
2803 156 AVE SE
Bellevue WA 98007
(509) 406-7209


Signature