



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

Business Name	St. Andrews Place Assisted Living	Provider Number	001195
Address	520 E PARK AVE ,	Approval Status	Approved
City, State, Zip	Port Angeles, WA 98362	Facility Type	Residential Care

On 02/19/2025 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

Laura Dodd
Signature

Laura Dodd, Administrator
Print Name and Title

Deputy State Fire Marshal Raul Murcia
PO BOX 42642
Olympia WA 98504
(360) 819-0067

R. Murcia
Signature

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	St. Andrews Place Assisted Living	Provider Number	001195
Address	520 E PARK AVE ,	Approval Status	Disapproved
City, State, Zip	Port Angeles, WA 98362	Facility Type	Residential Care

On 12/19/2024 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

1 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 2021)

Findings during inspection were:

Kitchen has had ceiling tiles removed and fire rated double layer sheetrock removed to fix a leak. Sheetrock penetration needs to be fixed correctly and tiles be replaced.

2 Testing and Maintenance

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

(IFC 903.5 2021)

Findings during inspection were:

Facility failed to provide the following documentation for the fire sprinkler system;

- 3-year dry system full flow trip test.
- Annual forward flow test for the backflow.

Facility fire department connection currently being fixed as pipe burst during hydrostatic test.

Kitchen has sprinkler heads that are loaded with debris.

3 Inspection, Testing and Maintenance

The maintenance and testing schedules and procedures for fire alarm and fire detection systems shall be in accordance with Sections 907.8.1 through 907.8.5 and NFPA 72. Records of inspection, testing and maintenance shall be maintained.

(IFC 907.8 2021)

Findings during inspection were:

Fire alarm electrical breaker in electrical panel missing breaker lock.



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Business Name St. Andrews Place Assisted Living

Provider Number 001195

Address 520 E PARK AVE ,

Approval Status Disapproved

City, State, Zip Port Angeles, WA 98362

Facility Type Residential Care

On 12/19/2024 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

Next inspection scheduled on or after: 01/23/2025

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

Laura Dodd
Signature

Laura Dodd, Administration
Print Name and Title

Deputy State Fire Marshal Raul Murcia
PO BOX 42642
Olympia WA 98504
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