



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

Business Name	Heritage Heights at Lake Chelan	Provider Number	001223
Address	505 HIGHLAND ,	Approval Status	Disapproved
City, State, Zip	Chelan, WA 98816	Facility Type	Residential Care

On 10/29/2025 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement	Statement of Violation
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1 Equipment Rooms

Combustible material shall not be stored in boiler rooms, mechanical rooms, electrical equipment rooms or in fire command centers as specified in Section 508.1.5.

(IFC 315.2.3 2021)

The following violation was observed:

-In the Attic there was a significant amount of combustible storage blocking the aisle ways and access to HVAC and mechanical equipment. *(Violation remains)

2 General - Electrical

603.1 General. Electrical equipment, wiring and systems required by this code or the International Building Code shall be installed, used and maintained in accordance with NFPA 70 and Sections 603.2 through 603.10.

(IFC 603.1 2021)

The following violation was observed:

-In the Memory Care unit on the second floor, the electrical panels located in the corridor near Room 201 were unsecured, allowing potential tampering. (Corrected)

3 Open electrical terminations

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

(IFC 603.2.2, 2021)

The following violation was observed:

-In the first floor in the Medication Room, there was an open junction box behind the desk area. (Corrected)

4 Working Space and Clearance

Working space and clearances. Working space around electrical equipment shall be provided in accordance with Section 110.26 of NFPA 70 for electrical equipment rated 1,000 volts or less, and Section 110.32 of NFPA 70 for electrical equipment rated over 1,000 volts. The minimum required working space shall be not less than 30 inches (762 mm) in width, 36 inches (914 mm) in depth and 78 inches (1981 mm) in height in front of electrical service equipment. Where the electrical service equipment is wider than 30 inches (762 mm), the minimum working space shall be not less than the width of the equipment. Storage of materials shall not be located within the designated working space.

(IFC 603.4, 2021)

The following violation was observed:

-In the Basement, there was combustible storage blocking access to the electrical panels in the Maintenance Room. (Corrected)



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5 Application and Use

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

Exceptions:

1. Where approved for use in a Group A occupancy or in a meeting room in a Group B occupancy, not more than five relocatable power taps shall be permitted to be connected together or connected to an extension cord for temporary use to supply power to electronic equipment.

2. Current taps and relocatable power taps shall not be required to connect directly to a permanently installed receptacle outlet where used for 90 days or less for the purpose of testing the performance of such devices.

(IFC 603.5.2, 2021)

The following violation was observed:

-On the first floor in the Cook's Office, there was a desk with a power strip installed plugged into another power strip in use. (Corrected)

6 Extension Cords

Extension cords. Extension cords shall not be a substitute for permanent wiring and shall be listed and labeled in accordance with UL 817. Extension cords shall not be affixed to structures, extended through walls, ceilings or floors, or under doors or floor coverings, nor shall such cords be subject to environmental damage or physical impact. Extension cords shall be used only with portable appliances. Extension cords marked for indoor use shall not be used outdoors..

(IFC 603.6 2021)

The following violation was observed:

-On the exterior of the building above the patio area there was an extension cord in use. (Corrected)

7 Cleaning

Hoods, grease-removal devices, fans, ducts and other appurtenances shall be cleaned at intervals as required by Sections 606.3.3.1 through 606.3.3.3.

(IFC 606.3.3 2021)

The following violation was observed:

-The facility was unable to provide documentation of both semi-annual commercial hood cleanings within the past twelve months. (Corrected)



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8 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)

The following violation was observed:

-The facility failed to provide documentation of the annual fire-resistance-rated construction inspection, testing, and maintenance completed within the past twelve months.
*(Violation remains)

-On the first floor in the Breakroom, there was a penetration in the wall. (Corrected)

-On the first floor in the hallway near the Breakroom there was a penetration in the wall near the ceiling. (Corrected)

-On the first floor in Room 102A, there was a breach in the ceiling (missing tile) in the bathroom. *(Violation remains)

9 Inspection and Maintenance

The following violations were observed:

-The facility failed to provide documentation of the annual fire and smoke rated door inspection, testing, and maintenance completed within the past twelve months. (Corrected)

-Upon inspection of the facility, there was replacement flooring which caused the fire and smoke door assemblies installed to have a gap of approximately 1/2" to 1", which do not comply with NFPA 80, Section 7.2.3.3.4. An inventory list of all fire and smoke doors which are exceeding floor clearance requires documentation of any repairs for approval. NFPA 80, Section 7.2.3.3.4 Clearance Dimensions.
Clearance under doors, in the closed position, shall not exceed 3/8 in. (10 mm) above raised noncombustible sills and not more than 3/4 in. (20 mm) above the floor where there is no raised noncombustible sill. (Corrected)

-The facility failed to provide documentation of the annual kitchen fire door drop inspection, testing, and maintenance completed within the past twelve months. (Corrected)



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10 Hold-Open Devices and Closers

Hold-open devices and automatic door closers, where provided, shall be maintained. During the period that such device is out of service for repairs, the door it operates shall remain in the closed position.

(IFC 705.2.3 2021)

The following violations were observed:

The following doors were propped open with door wedges:

- Breakroom Door (Corrected)
- Kitchen Door (Corrected)
- Kitchen Storage Room Door (Corrected)
- Medication Room (Corrected)

11 Door Operation

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

(IFC 705.2.4 2021)

The following violations were observed:

The following doors did not fully latch and close when released from the open position:

- On the first floor, Fireplace Room Door (Corrected)
- On the second floor, Room 214 (Corrected)

12 Acceptance Criteria and Reports

Where required to exhibit improved fire performance, curtains, draperies, fabric hangings and other similar combustible decorative materials suspended from walls or ceilings shall be tested by an approved agency and meet the flame propagation performance criteria of Test Method 1 or Test Method 2, as appropriate, of NFPA 701 or exhibit a maximum rate of heat release of 100 kW when tested in accordance with NFPA 289, using the 20 kW ignition source. Reports of test results shall be prepared in accordance with the test method used and furnished to the fire code official upon request.

(IFC 807.3 2021)

The following violation was observed:

- The facility was unable to provide documentation that the two tarps installed on the exterior patio were compliant with NFPA 701 standards. (Corrected)



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13 Testing and Maintenance

Sprinkler systems shall be tested and maintained in accordance with Section 901. (IFC 903.5 2021)	The following violations were observed: -The facility was unable to provide documentation of the annual fire sprinkler system inspection, testing, and maintenance within the past twelve months. (Corrected) -The facility was unable to provide documentation of the annual forward flow testing on the fire sprinkler system within the past twelve months. (Corrected) -The facility was unable to provide documentation of the fire sprinkler system quarterly inspections for the first and second quarters within the past twelve months. (Corrected)
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14 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)	The following violations were observed: -The facility was unable to provide documentation of the annual inspection, testing, and maintenance of the fire alarm system within the past twelve months. (Corrected) -The facility was unable to provide documentation of the semi-annual inspection, testing, and maintenance of the fire alarm system within the past twelve months. (Corrected) -The circuit breaker supplying power to the Fire Alarm Control Panel was not locked to prevent accidental trip or tampering. *(Violation remains)
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15 Buildings

In the event of power supply failure, in buildings that require two or more exit or access to exits, an emergency electrical system shall automatically illuminate all of the following areas: 1. Exterior exit access stairways and ramps 2. Interior and exterior exit stairways and ramps. 3. Exit passageways 4. Vestibules and areas on the level of discharge used for exit discharge in accordance with Section 1028.2 5. Exterior landings as required by Section 1010.1.5 for exit doorways that lead directly to the exit discharge. (IFC 1008.3.2 2021)	The following violation was observed: -There was no emergency exit lighting installed in the long Attic aisle ways to illuminate the means of egress. *(Violation remains)
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16 Directional Signage

Directional signage indicating the location of all other means of egress and which of those are accessible means of egress shall be provided at the following: 1. At exits serving a required accessible space but not providing an approved accessible means of egress. 2. At elevator landings. 3. Within areas of refuge. (IFC 1009.10 2021)	The following violation was observed: -On the second floor near the elevator, there was no signage directing occupants to the stairway and means of egress. (Corrected)
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17 Lock and Latches

Locks and latches shall be permitted to prevent operation of doors where any of the following exists:

1. Places of detention or restraint.
2. In buildings in occupancy Group A having an occupant load of 300 or less, Groups B, F, M, and S, and in places of religious worship, the main door or doors are permitted to be equipped with key-operated locking devices from the egress side provided:
 - 2.1. The locking device is readily distinguishable as locked;
 - 2.2. A readily visible sign is posted on the egress side on or adjacent to the door stating: THIS DOOR TO REMAIN UNLOCKED WHEN BUILDING IS OCCUPIED. The sign shall be in letters 1 inch (25 mm) high on a contrasting background; and
 - 2.3. The use of the key-operated locking device is revocable by the building official for due cause.
3. Where egress doors are used in pairs, approved automatic flush bolts shall be permitted to be used, provided that the door leaf having the automatic flush bolts has no doorknob or surface-mounted hardware.
4. Doors from individual dwelling or sleeping units of Group R occupancies having an occupant load of 10 or less are permitted to be equipped with a night latch, dead bolt, or security chain, provided such devices are openable from the inside without the use of a key or a tool.
5. Fire doors after the minimum elevated temperature has disabled the unlatching mechanism in accordance with listed fire door test procedures.
6. Doors serving roofs not intended to be occupied shall be permitted to be locked preventing entry to the building from the roof.
7. Approved, listed locks without delayed egress shall be permitted in Group I-1 condition 2 assisted living facilities licensed under chapter 388-78A WAC and Group I-1 Condition 2 residential treatment facilities licensed under chapter 246-337 WAC by the state of Washington, provided that:
 - 7.1. The clinical needs of one or more patients require specialized security measures for their safety.
 - 7.2. The doors unlock upon actuation of the automatic sprinkler system or automatic fire detection system.

The following violations were observed:

There was no key pad instructions posted within 6 feet of the keypads to open the fire exit doors to the means of egress at the following locations:

- The Exit Door near the Attic (Corrected)
- The Memory Care Gate on the exterior walkway *(Violation remains)



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7.3. The doors unlock upon loss of electrical power controlling the lock or lock mechanism. 7.4. The lock shall be capable of being deactivated by a signal from a switch located in an approved location. 7.5. There is a system, such as a keypad and code, in place that allows visitors, staff persons and appropriate residents to exit. Instructions for exiting shall be posted within six feet of the door. 8. Other than egress courts, where occupants must egress from an exterior space through the building for means of egress, exit access doors shall be permitted to be equipped with an approved locking device where installed and operated in accordance with all of the following: 8.1. The occupant load of the occupied exterior area shall not exceed 300 as determined by IBC Section 1004. 8.2. The maximum occupant load shall be posted where required by Section 1004.9. Such sign shall be permanently affixed inside the building and shall be posted in a conspicuous space near all the exit access doorways. 8.3. A weatherproof telephone or two-way communication system installed in accordance with Sections 1009.8.1 and 1009.8.2 shall be located adjacent to not less than one required exit access door on the exterior side. 8.4. The egress door locking device is readily distinguishable as locked and shall be a key-operated locking device. 8.5. A clear window or glazed door opening, not less than 5 square feet (0.46 m²) sq. ft. in area, shall be provided at each exit access door to determine if there are occupants using the outdoor area. 8.6. A readily visible durable sign shall be posted on the interior side on or adjacent to each locked required exit access door serving the exterior area stating: THIS DOOR TO REMAIN UNLOCKED WHEN THE OUTDOOR AREA IS OCCUPIED. The letters on the sign shall be not less than 1 inch high on a contrasting background. 9. Locking devices are permitted on doors to balconies, decks, or other exterior spaces serving individual dwelling or sleeping units. 10. Locking devices are permitted on doors to balconies,	



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decks, or other exterior spaces of 250 square feet or less, serving a private office space.oor. (IFC 1010.2.4 2021 WAC 51-54A)	

18 Security

Compressed gas containers, cylinders, tanks and systems shall be secured against accidental dislodgement and against access by unauthorized personnel in accordance with Sections 5303.5.1 through 5303.5.3. (IFC 5303.5 2021)	The following violations were observed: There were no "Oxygen In Use" signs located on the following resident rooms on the first floor: -Room 102A (Corrected) -Room 104 (Corrected)
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19 Securing Compressed Gas Containers, Cylinders and Tanks

Compressed gas containers, cylinders and tanks shall be secured to prevent falling caused by contact, vibration or seismic activity. Securing of compressed gas containers, cylinders and tanks shall be by one of the following methods: 1. Securing containers, cylinders and tanks to a fixed object with one or more restraints. 2. Securing containers, cylinders and tanks on a cart or other mobile device designed for the movement of compressed gas containers, cylinders or tanks. 3. Nesting of compressed gas containers, cylinders and tanks at container filling or servicing facilities or in sellers' warehouses not open to the public. Nesting shall be allowed provided that the nested containers, cylinders or tanks, if dislodged, do not obstruct the required means of egress. 4. Securing of compressed gas containers, cylinders and tanks to or within a rack, framework, cabinet or similar assembly designed for such use. Exception: Compressed gas containers, cylinders and tanks in the process of examination, filling, transport or servicing. (IFC 5303.5.3 2021)	The following violations were observed: -On the first floor, there was an unsecured LPG cylinder located near the barbecue on the patio. (Corrected) -On the first floor in Room 102A, there were two unsecured oxygen cylinders near the front door. *(Violation remains, one unsecured)
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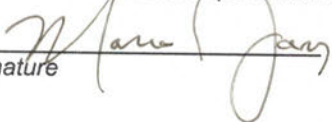
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Next inspection scheduled on or after: 11/28/2025

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

Maria Jay, ED, RN
Print Name and Title

Deputy State Fire Marshal Andrea Ely
2715 RUDKIN RD
Union Gap WA
(509) 531-3384

Digitally signed by Andrea Ely
Date: 2025.10.30 02:39:50
+0700'

Signature



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1 Equipment Rooms

Combustible material shall not be stored in boiler rooms, mechanical rooms, electrical equipment rooms or in fire command centers as specified in Section 508.1.5.

(IFC 315.2.3 2021)

The following violation was observed:

-In the Attic there was a significant amount of combustible storage blocking the aisle ways and access to HVAC and mechanical equipment.

2 General - Electrical

603.1 General. Electrical equipment, wiring and systems required by this code or the International Building Code shall be installed, used and maintained in accordance with NFPA 70 and Sections 603.2 through 603.10.

(IFC 603.1 2021)

The following violation was observed:

-In the Memory Care unit on the second floor, the electrical panels located in the corridor near Room 201 were unsecured, allowing potential tampering.

3 Open electrical terminations

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

(IFC 603.2.2, 2021)

The following violation was observed:

-In the first floor in the Medication Room, there was an open junction box behind the desk area.

4 Working Space and Clearance

Working space and clearances. Working space around electrical equipment shall be provided in accordance with Section 110.26 of NFPA 70 for electrical equipment rated 1,000 volts or less, and Section 110.32 of NFPA 70 for electrical equipment rated over 1,000 volts. The minimum required working space shall be not less than 30 inches (762 mm) in width, 36 inches (914 mm) in depth and 78 inches (1981 mm) in height in front of electrical service equipment. Where the electrical service equipment is wider than 30 inches (762 mm), the minimum working space shall be not less than the width of the equipment. Storage of materials shall not be located within the designated working space.

(IFC 603.4, 2021)

The following violation was observed:

-In the Basement, there was combustible storage blocking access to the electrical panels in the Maintenance Room.



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5 Application and Use

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

Exceptions:

1. Where approved for use in a Group A occupancy or in a meeting room in a Group B occupancy, not more than five relocatable power taps shall be permitted to be connected together or connected to an extension cord for temporary use to supply power to electronic equipment.
2. Current taps and relocatable power taps shall not be required to connect directly to a permanently installed receptacle outlet where used for 90 days or less for the purpose of testing the performance of such devices.

(IFC 603.5.2, 2021)

The following violation was observed:

- On the first floor in the Cook's Office, there was a desk with a power strip installed plugged into another power strip in use.

6 Extension Cords

Extension cords. Extension cords shall not be a substitute for permanent wiring and shall be listed and labeled in accordance with UL 817. Extension cords shall not be affixed to structures, extended through walls, ceilings or floors, or under doors or floor coverings, nor shall such cords be subject to environmental damage or physical impact. Extension cords shall be used only with portable appliances. Extension cords marked for indoor use shall not be used outdoors.

(IFC 603.6 2021)

The following violation was observed:

- On the exterior of the building above the patio area there was an extension cord in use.

7 Cleaning

Hoods, grease-removal devices, fans, ducts and other appurtenances shall be cleaned at intervals as required by Sections 606.3.3.1 through 606.3.3.3.

(IFC 606.3.3 2021)

The following violation was observed:

- The facility was unable to provide documentation of both semi-annual commercial hood cleanings within the past twelve months.



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8 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)

The following violation was observed:

- The facility failed to provide documentation of the annual fire-resistance-rated construction inspection, testing, and maintenance completed within the past twelve months.
- On the first floor in the Breakroom, there was a penetration in the wall.
- On the first floor in the hallway near the Breakroom there was a penetration in the wall near the ceiling.
- On the first floor in Room 102A, there was a breach in the ceiling (missing tile) in the bathroom.

9 Inspection and Maintenance

The following violations were observed:

- The facility failed to provide documentation of the annual fire and smoke rated door inspection, testing, and maintenance completed within the past twelve months.

Upon inspection of the facility, there was replacement flooring which caused the fire and smoke door assemblies installed to have a gap of approximately 1/2" to 1", which do not comply with NFPA 80, Section 7.2.3.3.4. An inventory list of all fire and smoke doors which are exceeding floor clearance requires documentation of any repairs for approval.

NFPA 80, Section 7.2.3.3.4 Clearance Dimensions.
Clearance under doors, in the closed position, shall not exceed 3/8 in. (10 mm) above raised noncombustible sills and not more than 3/4 in. (20 mm) above the floor where there is no raised noncombustible sill.

- The facility failed to provide documentation of the annual kitchen fire door drop inspection, testing, and maintenance completed within the past twelve months.



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10 Hold-Open Devices and Closers	
Hold-open devices and automatic door closers, where provided, shall be maintained. During the period that such device is out of service for repairs, the door it operates shall remain in the closed position. (IFC 705.2.3 2021)	The following violations were observed: The following doors were propped open with door wedges: -Breakroom Door -Kitchen Door -Kitchen Storage Room Door -Medication Room
11 Door Operation	
Swinging fire doors shall close from the full-open position and latch automatically. (IFC 705.2.4 2021)	The following violations were observed: The following doors did not fully latch and close when released from the open position: -On the first floor, Fireplace Room Door -On the second floor, Room 214
12 Acceptance Criteria and Reports	
Where required to exhibit improved fire performance, curtains, draperies, fabric hangings and other similar combustible decorative materials suspended from walls or ceilings shall be tested by an approved agency and meet the flame propagation performance criteria of Test Method 1 or Test Method 2, as appropriate, of NFPA 701 or exhibit a maximum rate of heat release of 100 kW when tested in accordance with NFPA 289, using the 20 kW ignition source. Reports of test results shall be prepared in accordance with the test method used and furnished to the fire code official upon request. (IFC 807.3 2021)	The following violation was observed: -The facility was unable to provide documentation that the two tarps installed on the exterior patio were compliant with NFPA 701 standards.



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Code Requirement

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13 Testing and Maintenance

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

(IFC 903.5 2021)

The following violations were observed:

- The facility was unable to provide documentation of the annual fire sprinkler system inspection, testing, and maintenance within the past twelve months.
- The facility was unable to provide documentation of the annual forward flow testing on the fire sprinkler system within the past twelve months.
- The facility was unable to provide documentation of the fire sprinkler system quarterly inspections for the first and second quarters within the past twelve months.

14 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)

The following violations were observed:

- The facility was unable to provide documentation of the annual inspection, testing, and maintenance of the fire alarm system within the past twelve months.
- The facility was unable to provide documentation of the semi-annual inspection, testing, and maintenance of the fire alarm system within the past twelve months.
- The circuit breaker supplying power to the Fire Alarm Control Panel was not locked to prevent accidental trip or tampering.

15 Buildings

In the event of power supply failure, in buildings that require two or more exit or access to exits, an emergency electrical system shall automatically illuminate all of the following areas:

1. Exterior exit access stairways and ramps
2. Interior and exterior exit stairways and ramps.
3. Exit passageways
4. Vestibules and areas on the level of discharge used for exit discharge in accordance with Section 1028.2
5. Exterior landings as required by Section 1010.1.5 for exit doorways that lead directly to the exit discharge.

(IFC 1008.3.2 2021)

The following violation was observed:

- There was no emergency exit lighting installed in the long Attic aisle ways to illuminate the means of egress.



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



Business Name	Heritage Heights at Lake Chelan	Provider Number	001223
Address	505 HIGHLAND ,	Approval Status	Disapproved
City, State, Zip	Chelan, WA 98816	Facility Type	Residential Care

On 09/09/2025 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement	Statement of Violation
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16 Directional Signage

Directional signage indicating the location of all other means of egress and which of those are accessible means of egress shall be provided at the following: 1. At exits serving a required accessible space but not providing an approved accessible means of egress. 2. At elevator landings. 3. Within areas of refuge. (IFC 1009.10 2021)	The following violation was observed: -On the second floor near the elevator, there was no signage directing occupants to the stairway and means of egress.
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17 Lock and Latches

Locks and latches shall be permitted to prevent operation of doors where any of the following exists:

1. Places of detention or restraint.
2. In buildings in occupancy Group A having an occupant load of 300 or less, Groups B, F, M, and S, and in places of religious worship, the main door or doors are permitted to be equipped with key-operated locking devices from the egress side provided:
 - 2.1. The locking device is readily distinguishable as locked;
 - 2.2. A readily visible sign is posted on the egress side on or adjacent to the door stating: THIS DOOR TO REMAIN UNLOCKED WHEN BUILDING IS OCCUPIED. The sign shall be in letters 1 inch (25 mm) high on a contrasting background; and
 - 2.3. The use of the key-operated locking device is revocable by the building official for due cause.
3. Where egress doors are used in pairs, approved automatic flush bolts shall be permitted to be used, provided that the door leaf having the automatic flush bolts has no doorknob or surface-mounted hardware.
4. Doors from individual dwelling or sleeping units of Group R occupancies having an occupant load of 10 or less are permitted to be equipped with a night latch, dead bolt, or security chain, provided such devices are openable from the inside without the use of a key or a tool.
5. Fire doors after the minimum elevated temperature has disabled the unlatching mechanism in accordance with listed fire door test procedures.
6. Doors serving roofs not intended to be occupied shall be permitted to be locked preventing entry to the building from the roof.
7. Approved, listed locks without delayed egress shall be permitted in Group I-1 condition 2 assisted living facilities licensed under chapter 388-78A WAC and Group I-1 Condition 2 residential treatment facilities licensed under chapter 246-337 WAC by the state of Washington, provided that:
 - 7.1. The clinical needs of one or more patients require specialized security measures for their safety.
 - 7.2. The doors unlock upon actuation of the automatic sprinkler system or automatic fire detection system.

The following violations were observed:

There was no key pad instructions posted within 6 feet of the keypads to open the fire exit doors to the means of egress at the following locations:

- The Exit Door near the Attic
- The Memory Care Gate on the exterior walkway



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7.3. The doors unlock upon loss of electrical power controlling the lock or lock mechanism. 7.4. The lock shall be capable of being deactivated by a signal from a switch located in an approved location. 7.5. There is a system, such as a keypad and code, in place that allows visitors, staff persons and appropriate residents to exit. Instructions for exiting shall be posted within six feet of the door. 8. Other than egress courts, where occupants must egress from an exterior space through the building for means of egress, exit access doors shall be permitted to be equipped with an approved locking device where installed and operated in accordance with all of the following: 8.1. The occupant load of the occupied exterior area shall not exceed 300 as determined by IBC Section 1004. 8.2. The maximum occupant load shall be posted where required by Section 1004.9. Such sign shall be permanently affixed inside the building and shall be posted in a conspicuous space near all the exit access doorways. 8.3. A weatherproof telephone or two-way communication system installed in accordance with Sections 1009.8.1 and 1009.8.2 shall be located adjacent to not less than one required exit access door on the exterior side. 8.4. The egress door locking device is readily distinguishable as locked and shall be a key-operated locking device. 8.5. A clear window or glazed door opening, not less than 5 square feet (0.46 m2) sq. ft. in area, shall be provided at each exit access door to determine if there are occupants using the outdoor area. 8.6. A readily visible durable sign shall be posted on the interior side on or adjacent to each locked required exit access door serving the exterior area stating: THIS DOOR TO REMAIN UNLOCKED WHEN THE OUTDOOR AREA IS OCCUPIED. The letters on the sign shall be not less than 1 inch high on a contrasting background. 9. Locking devices are permitted on doors to balconies, decks, or other exterior spaces serving individual dwelling or sleeping units. 10. Locking devices are permitted on doors to balconies,	

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decks, or other exterior spaces of 250 square feet or less, serving a private office space.oor. (IFC 1010.2.4 2021 WAC 51-54A)	

18 Security

Compressed gas containers, cylinders, tanks and systems shall be secured against accidental dislodgement and against access by unauthorized personnel in accordance with Sections 5303.5.1 through 5303.5.3. (IFC 5303.5 2021)	The following violations were observed: There were no "Oxygen In Use" signs located on the following resident rooms on the first floor: -Room 102A -Room 104
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19 Securing Compressed Gas Containers, Cylinders and Tanks

Compressed gas containers, cylinders and tanks shall be secured to prevent falling caused by contact, vibration or seismic activity. Securing of compressed gas containers, cylinders and tanks shall be by one of the following methods: 1. Securing containers, cylinders and tanks to a fixed object with one or more restraints. 2. Securing containers, cylinders and tanks on a cart or other mobile device designed for the movement of compressed gas containers, cylinders or tanks. 3. Nesting of compressed gas containers, cylinders and tanks at container filling or servicing facilities or in sellers' warehouses not open to the public. Nesting shall be allowed provided that the nested containers, cylinders or tanks, if dislodged, do not obstruct the required means of egress. 4. Securing of compressed gas containers, cylinders and tanks to or within a rack, framework, cabinet or similar assembly designed for such use. Exception: Compressed gas containers, cylinders and tanks in the process of examination, filling, transport or servicing. (IFC 5303.5.3 2021)	The following violations were observed: -On the first floor, there was an unsecured LPG cylinder located near the barbecue on the patio. -On the first floor in Room 102A, there were two unsecured oxygen cylinders near the front door.
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Next inspection scheduled on or after: 10/09/2025

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

Print Name and Title

Deputy State Fire Marshal Andrea Ely
2715 RUDKIN RD
Union Gap WA
(509) 531-3384

Andrea Ely

Digitally signed by
Andrea Ely
Date: 2025.09.10
13:11:50 -07'00'

Signature