



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

**Business Name** Heritage House Buckley

**Provider Number** 2012

**Address** 28833 SR 410 E,

**Approval Status** Approved

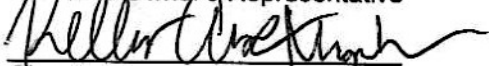
**City, State, Zip** Buckley, WA 98321

**Facility Type** Residential Care

On 11/20/2023 the Office of the State Fire Marshal conducted an inspection at your facility.

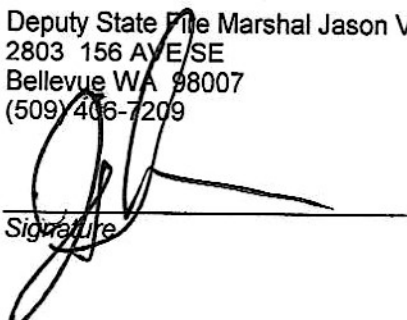
**All violations noted during previous related inspection(s) have been corrected.**

Owner or Owner's Representative

  
Signature

Helley Arsanto-McGee Admin.  
Print Name and Title

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

  
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** Heritage House Buckley

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**Approval Status** Disapproved

**City, State, Zip** Buckley, WA 98321

**Facility Type** Residential Care

On 9/20/2023 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 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.

**2 Penetrations - Maintaining Protection**

Materials and firestop systems used to protect membrane and through penetrations in fire-resistance-rated construction and construction installed to resist the passage of smoke shall be maintained. The materials and firestop systems shall be securely attached to or bonded to the construction being penetrated with no openings visible through or into the cavity of the construction. Where the system design number is known, the system shall be inspected to the listing criteria and manufacturer's installation instructions.

(IFC 703.1 2018)

Corrected

**3 Testing and Maintenance**

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

(IFC 903.5 2009, 2012, 2015, 2018)

At time of inspection the following was observed:

1. loaded sprinkler heads in memory care kitchen  
Corrected
2. loaded sprinkler heads in memory care laundry  
Corrected
3. loaded sprinkler heads in AL laundry



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|                                             |                                       |
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| <b>City, State, Zip</b> Buckley, WA 98321   | <b>Facility Type</b> Residential Care |

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Code Requirement

Statement of Violation

**4 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
2. Second semi-annual service
3. Annual replacement of fusible links/auto sprinkler heads (IFC 904.12.5.3)
4. NAFED certification (IFC 904.1.1/WAC 51-54A-0904)

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

**5 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 2018)

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

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

1. Annual report for Assistance Living Corrected
2. Update on YELLOW statis

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

**6 Carbon Monoxide Detection - General**

Carbon monoxide detection shall be installed in new buildings in accordance with Sections 915.1.1 through 915.6. Carbon monoxide detection shall be installed in existing buildings in accordance with Chapter 11 of the International Fire Code.

(IFC 0915.1 2015, 2018 WAC 51-54A)

Corrected



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| Code Requirement | Statement of Violation |
|------------------|------------------------|
|------------------|------------------------|

**7 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.<br>(IFC 1031.10 2018) | Corrected |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|

**8 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.<br>(IFC 5303.5 2018) | Corrected |
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This document was prepared by Residential Care Services for the Locator website.



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Code Requirement

Statement of Violation

**9 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.

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

Next inspection scheduled on or after: 10/23/2023

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

Kelly Arsanto  
Signature

Kelley Arsanto-McGehee Admin.  
Print Name and Title

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

Jason E Van Gorkum  
Signature