



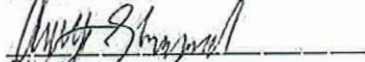
Washington State Patrol
Fire Protection Bureau
Phone: (360) 596-3900

Business Name	Lodge at Arbor Village, The	Provider Number	2037
Address	24004 114TH PL SE,	Approval Status	Approved
City, State, Zip	Kent, WA	Facility Type	Residential Care

On 12/10/2025 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


Signature

Anthony Sheppard POD
Print Name and Title

Deputy State Fire Marshal Cozetta Christian
106 11th AVE SW
Olympia WA 98501
(360) 584-5796


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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Fire Protection Bureau
Phone: (360) 596-3900

Business Name Lodge at Arbor Village, The	Provider Number 2037
Address 24004 114TH PL SE,	Approval Status Disapproved
City, State, Zip Kent, WA	Facility Type Residential Care

On 9/10/2025 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement	Statement of Violation
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1 Burning Objects

Lighted matches, cigarettes, cigars, or other burning objects shall not be discarded in such a manner that could cause ignition of other combustible material.

(IFC 310.7 2021)

Corrected

2 Means of Egress - Storage in Buildings

Combustible materials shall not be stored in exits or enclosures for stairways and ramps. Combustible materials in the means of egress during construction, demolition, remodeling or alterations shall comply with Section 3311.3.

(IFC 315.3.2 2021)

The following violation was observed at the time of reinspection:

There is combustible storage under the stairwell in Baker.

3 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)

Corrected

4 Abatement of Electrical Hazards

Abatement of unsafe conditions and electrical hazards. Conditions that constitute an electrical shock or fire hazard shall be abated..

(IFC 603.2 2021)

The following violation was observed at the time of reinspection:

Panel 1L2 by Baker dining area was unlocked.

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



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5 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 at the time of reinspection:

The following locations have electrical panels that does not have the minimum working space:

1. Corrected
2. Janitor closet by cascade laundry

6 Listing

603.5.1 Listing. Relocatable power taps shall be listed in accordance with UL 1363. Current taps shall be listed and labeled in accordance with UL 498A.

(IFC 603.5.1, 2021)

Corrected

7 Smoke Barriers

The fire-resistance rating and smoke-resistant characteristics of smoke barriers shall be maintained.

(IFC 701.3 2021)

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 2018 WAC 51-54A)	Corrected
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9 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 2021)	The following violation was observed at the time of reinspection: Penetrations in fire-resistance-rated construction were found out in the following places: 1. Dry Kitchen Storage 2. Corrected 3. Corrected 4. Corrected 5. Corrected
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Code Requirement	Statement of Violation
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10 Door Operation

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

(IFC 705.2.4 2021)

The following violation was observed at the time of reinspection:

The following fire doors did not close and latch from the fully open position during testing:

1. Corrected
2. Room 212
3. Corrected
4. Corrected
5. Corrected

The following fire doors did not close and latch properly due to being propped open:

1. Corrected
2. Corrected
3. Room 210
4. Corrected
5. Corrected
6. Corrected
7. Corrected
8. Room 206
9. Corrected
10. Corrected
11. Corrected
12. Corrected
13. Corrected
14. Corrected



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Code Requirement	Statement of Violation
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11 Duct and Air Transfer Openings - Maintaining Protection

Dampers protecting ducts and air transfer openings shall be inspected and maintained in accordance with NFPA 80 and NFPA 105. Other products or materials used to protect the openings for ducts and air transfer openings shall be securely attached to or bonded to the construction containing the duct or air transfer opening, without visible openings through or into the cavity of the construction. Any damaged products or materials protecting duct and air transfer openings shall be repaired, restored or replaced. (IFC 706.1 2018)	Corrected
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12 Testing and Maintenance

Sprinkler systems shall be tested and maintained in accordance with Section 901. (IFC 903.5 2021)	Corrected
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13 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 violation was observed at the time of reinspection: The facility provided documentation for the inspection and testing of the fire alarm system that occurred in January 2025. However, the facility still needs to provide documentation of the semi-annual inspection and testing of the fire alarm system, as required by NFPA 72. NFPA 72 14.4.3.2 Systems and associated equipment shall be tested according to Table 14.4.3.2. *All inspection reports must verify that the system has no deficiencies, or document that all deficiencies have been corrected
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14 Smoke Detector Sensitivity

Smoke detector sensitivity shall be checked within one year after installation and every alternate year thereafter. After the second calibration test, where sensitivity tests indicate that the detector has remained within its listed and marked sensitivity range (or 4-percent obscuration light grey smoke, if not marked), the length of time between calibration tests shall be permitted to be extended to a maximum of 5 years. Where the frequency is extended, records of detector-caused nuisance alarms and subsequent trends of these alarms shall be maintained. In zones or areas where nuisance alarms show any increase over the previous year, calibration tests shall be performed. (IFC 907.8.3 2021)	Corrected
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15 Rooms and Spaces

In the event of power supply failure, and emergency electrical system shall automatically illuminate all of the following areas: 1. Electrical equipment rooms. 2. Fire command centers. 3. Fire Pump rooms 4. Generator rooms 5. Public restrooms with an area greater than 300 square feet (27.87 m2). (IFC 1008.3.3 2021)	Corrected
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Code Requirement	Statement of Violation
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16 Delayed Egress Locking System

The delayed egress locking system shall be installed and operated in accordance with all of the following: 1. The delay electronics of the delayed egress locking system shall deactivate upon actuation of the automatic sprinkler system or automatic fire detection system, allowing immediate, free egress. 2. The delay electronics of the delayed egress locking system shall deactivate upon loss of power controlling the lock or lock mechanism, allowing immediate free egress. 3. The delayed egress locking system shall have the capability of being deactivated at the fire command center and other approved locations. 4. An attempt to egress shall initiate an irreversible process that shall allow such egress in not more than 15 seconds when a physical effort to exit is applied to the egress side door hardware for not more than 3 seconds. Initiation of the irreversible process shall activate an audible signal in the vicinity of the door. Once the delay electronics have been deactivated, rearming the delay electronics shall be by manual means only. Exception: Where approved, a delay of not more than 30 seconds is permitted on a delayed egress door. 5. The egress path from any point shall not pass through more than one delayed egress locking system. Exceptions: 1. In Group I-1, Condition 2, Group I-2 or I-3 occupancies, the egress path from any point in the building shall pass through not more than two delayed egress locking systems provided that the combined delay does not exceed 30 seconds. 2. In Group I-1, Condition 1 or Group I-4 occupancies, the egress path from any point in the building shall pass through not more than two delayed egress locking systems provided that the combined delay does not exceed 30 seconds and the building is equipped throughout with an automatic sprinkler system in accordance with Section 903.3.1.1. 6. A sign shall be provided on the door and shall be located	Corrected
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Code Requirement	Statement of Violation
above and within 12 inches (305 mm) of the door exit hardware: Exception: Where approved , in Group I occupancies, the installation of a sign is not required where care recipients who, because of clinical needs, require restraint or containment as part of the function of the treatment area. 6.1. For doors that swing in the direction of egress, the sign shall read: "PUSH UNTIL ALARM SOUNDS. DOOR CAN BE OPENED IN 15 [30] SECONDS." 6.2. For doors that swing in the opposite direction of egress, the sign shall read: "PULL UNTIL ALARM SOUNDS. DOOR CAN BE OPENED IN 15 [30] SECONDS." 6.3. The sign shall comply with the visual character requirements in ICC A117.1. 7. Emergency lighting shall be provided on the egress side of the door. 8. The delayed egress locking system units shall be listed in accordance with UL 294. (IFC 1010.2.13.1 2021)	

17 Activation Test

Emergency lighting equipment shall be tested monthly for a duration of not less than 30 seconds. The test shall be performed manually or by an automated self-testing and self-diagnostic routine. Where testing is performed by self-testing and self-diagnostics, a visual inspection of the emergency lighting equipment shall be conducted monthly to identify any equipment displaying a trouble indicator or that has become damaged or otherwise impaired. (IFC 1032.10.1 2021)	Corrected
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18 Maintenance

Emergency and standby power systems shall be maintained in accordance with NFPA 110 and NFPA 111 such that the system is capable of supplying service within the time specified for the type and duration required. (IFC 1203.4 2021)	The following violation was observed at the time of reinspection: No documentation provided for the following: 1. Corrected 2. Annual servicing 3. Corrected
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19 Inspection Frequency

Fire extinguishers shall be inspected when initially placed in service and thereafter at approximately 30-day intervals. Fire extinguishers shall be inspected, manually or by electronic monitoring, at more frequent intervals when circumstances require. (NFPA Standard 10 Section 6.2.1)	Corrected
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20 Procedures

Periodic inspection of fire extinguishers shall include a check of at least the following items: (1) Location in designated place (2) No obstruction to access or visibility (3) Operating instructions on nameplate legible and facing outward (4) Safety seals and tamper indicators not broken or missing (5) Fullness determined by weighing or "hefting" (6) Examination for obvious physical damage, corrosion, leakage, or clogged nozzle (7) Pressure gauge reading or indicator in the operable range or position (8) Condition of tires, wheels, carriage, hose, and nozzle checked (for wheeled units) (9) HMIS label in place. (NFPA Standard 10 Section 6.2.2)	Corrected
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Code Requirement	Statement of Violation
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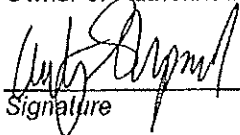
21 Fire Drills

In all Group I, Group E, and Group R2 Occupancies licensed by the state, at least twelve planned and unannounced fire drills shall be held every year. Drills shall be conducted quarterly on each shift in Group I and Group R2, Occupancies and monthly in Group E Occupancies to familiarize personnel with signals and emergency action required under varied conditions. A detailed written record of all fire drills shall be maintained and available for inspection at all times. When drills are conducted between 9:00 p.m. and 6:00 a.m., a coded announcement may be used instead of audible alarms. Fire drills shall include the transmission of a fire alarm signal and simulation of emergency conditions. The fire alarm monitoring company shall be notified prior to the activation of the fire alarm system for drill purposes and again at the conclusion of the transmission and restoration of the fire alarm system to normal mode. (WAC 212-12-044)	Corrected
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Next inspection scheduled on or after: 10/10/2025

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

Anthony Sheppard POP
Print Name and Title

Deputy State Fire Marshal Damon Roberson
2803 156 AVE SE
Bellevue WA 98007
(360) 584-4392


Signature



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

Business Name	Lodge at Arbor Village, The	Provider Number	2037
Address	24004 114TH PL SE,	Approval Status	Disapproved
City, State, Zip	Kent, WA	Facility Type	Residential Care

On 6/16/2025 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement	Statement of Violation
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1 Administration

On 6/16/2025 an unannounced Fire and Life Safety Code inspection was conducted at The Lodge at Arbor Village by a representative of the Washington State Patrol, State Fire Marshal's Office to determine compliance with all applicable codes.

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

2 Burning Objects

Lighted matches, cigarettes, cigars, or other burning objects shall not be discarded in such a manner that could cause ignition of other combustible material.

(IFC 310.7 2021)

The following violation was observed at the time of inspection:

There were cigarette butts found on the ground in the grass area by the kitchen.

3 Means of Egress - Storage in Buildings

Combustible materials shall not be stored in exits or enclosures for stairways and ramps. Combustible materials in the means of egress during construction, demolition, remodeling or alterations shall comply with Section 3311.3.

(IFC 315.3.2 2021)

The following violation was observed at the time of inspection:

There is combustible storage under the stairwell in Baker.

4 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 at the time of inspection:

There is combustible storage located in the mechanical/ electrical room by activities area by Wellness Director office.

5 Abatement of Electrical Hazards

Abatement of unsafe conditions and electrical hazards. Conditions that constitute an electrical shock or fire hazard shall be abated..

(IFC 603.2 2021)

The following violation was observed at the time of inspection:

Panel 1L2 by Baker dining area was unlocked.



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On 6/16/2025 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement	Statement of Violation
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6 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 at the time of inspection:

The following locations have electrical panels that does not have the minimum working space:

1. Storage room by 211
2. Janitor closet by cascade laundry

7 Listing

603.5.1 Listing. Relocatable power taps shall be listed in accordance with UL 1363. Current taps shall be listed and labeled in accordance with UL 498A.

(IFC 603.5.1, 2021)

The following violation was observed at the time of inspection:

Relocatable power taps not listed were founded in the following locations:

1. Activity Room
2. Wellness Director office
3. Concierge area

8 Smoke Barriers

The fire-resistance rating and smoke-resistant characteristics of smoke barriers shall be maintained.

(IFC 701.3 2021)

The following violation was observed at the time of inspection:

There is a false ceiling tile missing in the dry kitchen storage.



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9 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 violation was observed at the time of inspection:

There was no documentation provided to verify that the facility is conducting the required annual inspection of fire-resistance-rated construction.

10 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 2021)

The following violation was observed at the time of inspection:

Penetrations in fire-resistance-rated construction were found out in the following places:

1. Dry Kitchen Storage
2. Laundry storage
3. Main electrical room outside
4. Telecommunication Room outside
5. Cascade dining - ceiling light



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Code Requirement	Statement of Violation
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11 Door Operation

Swinging fire doors shall close from the full-open position and latch automatically.
(IFC 705.2.4 2021)

The following violation was observed at the time of inspection:

The following fire doors did not close and latch from the fully open position during testing:

1. Dry kitchen storage
2. Room 212
3. Room 215
4. Room 114
5. Single dinning door in Denali

The following fire doors did not close and latch properly due to being propped open:

1. Room 214
2. Room 209
3. Room 210
4. Room 202
5. Room 203
6. Room 204
7. Room 205
8. Room 206
9. Room 207
10. Room 108
11. Room 109
12. Room 112
13. Concierge door
14. Dry Storage to Kitchen door

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12 Duct and Air Transfer Openings - Maintaining Protection

Dampers protecting ducts and air transfer openings shall be inspected and maintained in accordance with NFPA 80 and NFPA 105. Other products or materials used to protect the openings for ducts and air transfer openings shall be securely attached to or bonded to the construction containing the duct or air transfer opening, without visible openings through or into the cavity of the construction. Any damaged products or materials protecting duct and air transfer openings shall be repaired, restored or replaced.

(IFC 706.1 2018)

The following violation was observed at the time of inspection:

No documentation provided for the facilities four year fire/smoke damper inspection.

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

13 Testing and Maintenance

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

(IFC 903.5 2021)

The following violation was observed at the time of inspection:

The facility was unable to provide the following:

1. Quarterly sprinkler report for 4th quarter.
2. 5 year internal Pipe Testing

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

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 violation was observed at the time of inspection:

No documentation provided for the inspection and testing of the fire alarm system.

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



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15 Smoke Detector Sensitivity

Smoke detector sensitivity shall be checked within one year after installation and every alternate year thereafter. After the second calibration test, where sensitivity tests indicate that the detector has remained within its listed and marked sensitivity range (or 4-percent obscuration light grey smoke, if not marked), the length of time between calibration tests shall be permitted to be extended to a maximum of 5 years. Where the frequency is extended, records of detector-caused nuisance alarms and subsequent trends of these alarms shall be maintained. In zones or areas where nuisance alarms show any increase over the previous year, calibration tests shall be performed.

(IFC 907.8.3 2021)

The following violation was observed at the time of inspection:

No documentation provided for monthly tests for single and multiple station alarms.

16 Rooms and Spaces

In the event of power supply failure, and emergency electrical system shall automatically illuminate all of the following areas:

1. Electrical equipment rooms.
2. Fire command centers.
3. Fire Pump rooms
4. Generator rooms
5. Public restrooms with an area greater than 300 square feet (27.87 m2).

(IFC 1008.3.3 2021)

The following violation was observed at the time of inspection:

The facility does not have emergency lighting installed in the main electrical room.



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Code Requirement	Statement of Violation
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17 Delayed Egress Locking System

The delayed egress locking system shall be installed and operated in accordance with all of the following:

1. The delay electronics of the delayed egress locking system shall deactivate upon actuation of the automatic sprinkler system or automatic fire detection system, allowing immediate, free egress.
2. The delay electronics of the delayed egress locking system shall deactivate upon loss of power controlling the lock or lock mechanism, allowing immediate free egress.
3. The delayed egress locking system shall have the capability of being deactivated at the fire command center and other approved locations.
4. An attempt to egress shall initiate an irreversible process that shall allow such egress in not more than 15 seconds when a physical effort to exit is applied to the egress side door hardware for not more than 3 seconds. Initiation of the irreversible process shall activate an audible signal in the vicinity of the door.
Once the delay electronics have been deactivated, rearming the delay electronics shall be by manual means only.
Exception: Where approved, a delay of not more than 30 seconds is permitted on a delayed egress door.
5. The egress path from any point shall not pass through more than one delayed egress locking system.
Exceptions:
 1. In Group I-1, Condition 2, Group I-2 or I-3 occupancies, the egress path from any point in the building shall pass through not more than two delayed egress locking systems provided that the combined delay does not exceed 30 seconds.
 2. In Group I-1, Condition 1 or Group I-4 occupancies, the egress path from any point in the building shall pass through not more than two delayed egress locking systems provided that the combined delay does not exceed 30 seconds and the building is equipped throughout with an automatic sprinkler system in accordance with Section 903.3.1.1.
6. A sign shall be provided on the door and shall be located

The following violation was observed at the time of inspection:

The egress door located outside near Baker's dining room did not open during inspection. The facility must ensure this door remains unlocked and accessible for egress until the delayed egress system is properly repaired.



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Fire Protection Bureau
Phone: (360) 596-3900

Business Name	Lodge at Arbor Village, The	Provider Number	2037
Address	24004 114TH PL SE,	Approval Status	Disapproved
City, State, Zip	Kent, WA	Facility Type	Residential Care

On 6/16/2025 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement	Statement of Violation
above and within 12 inches (305 mm) of the door exit hardware: Exception: Where approved , in Group I occupancies, the installation of a sign is not required where care recipients who, because of clinical needs, require restraint or containment as part of the function of the treatment area. 6.1. For doors that swing in the direction of egress, the sign shall read: "PUSH UNTIL ALARM SOUNDS. DOOR CAN BE OPENED IN 15 [30] SECONDS." 6.2. For doors that swing in the opposite direction of egress, the sign shall read: "PULL UNTIL ALARM SOUNDS. DOOR CAN BE OPENED IN 15 [30] SECONDS." 6.3. The sign shall comply with the visual character requirements in ICC A117.1. 7. Emergency lighting shall be provided on the egress side of the door. 8. The delayed egress locking system units shall be listed in accordance with UL 294. (IFC 1010.2.13.1 2021)	

18 Activation Test

Emergency lighting equipment shall be tested monthly for a duration of not less than 30 seconds. The test shall be performed manually or by an automated self-testing and self-diagnostic routine. Where testing is performed by self-testing and self-diagnostics, a visual inspection of the emergency lighting equipment shall be conducted monthly to identify any equipment displaying a trouble indicator or that has become damaged or otherwise impaired. (IFC 1032.10.1 2021)	The following violation was observed at the time of inspection: No documentation was provide December's 30 second monthly testing of their emergency lighting.
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19 Maintenance

Emergency and standby power systems shall be maintained in accordance with NFPA 110 and NFPA 111 such that the system is capable of supplying service within the time specified for the type and duration required. (IFC 1203.4 2021)	The following violation was observed at the time of inspection: No documentation provided for the following: 1. Weekly inspection 2. Annual servicing 3. April and May 2025 Monthly 30 minute Full Load Test
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20 Inspection Frequency

Fire extinguishers shall be inspected when initially placed in service and thereafter at approximately 30-day intervals. Fire extinguishers shall be inspected, manually or by electronic monitoring, at more frequent intervals when circumstances require. (NFPA Standard 10 Section 6.2.1)	The following violation was observed at the time of inspection: Main electrical room fire extinguishers has no documentation on monthly inspections.
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This document was prepared by Residential Care Services for the Locator website.



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21 Procedures

Periodic inspection of fire extinguishers shall include a check of at least the following items: (1) Location in designated place (2) No obstruction to access or visibility (3) Operating instructions on nameplate legible and facing outward (4) Safety seals and tamper indicators not broken or missing (5) Fullness determined by weighing or "hefting" (6) Examination for obvious physical damage, corrosion, leakage, or clogged nozzle (7) Pressure gauge reading or indicator in the operable range or position (8) Condition of tires, wheels, carriage, hose, and nozzle checked (for wheeled units) (9) HMIS label in place. (NFPA Standard 10 Section 6.2.2)	The following violation was observed at the time of inspection: The following fire extinguishers were overcharged or undercharged: 1. Near room 110 and stairs 2. Main electrical room
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22 Fire Drills

In all Group I, Group E, and Group R2 Occupancies licensed by the state, at least twelve planned and unannounced fire drills shall be held every year. Drills shall be conducted quarterly on each shift in Group I and Group R2, Occupancies and monthly in Group E Occupancies to familiarize personnel with signals and emergency action required under varied conditions. A detailed written record of all fire drills shall be maintained and available for inspection at all times. When drills are conducted between 9:00 p.m. and 6:00 a.m., a coded announcement may be used instead of audible alarms. Fire drills shall include the transmission of a fire alarm signal and simulation of emergency conditions. The fire alarm monitoring company shall be notified prior to the activation of the fire alarm system for drill purposes and again at the conclusion of the transmission and restoration of the fire alarm system to normal mode.

(WAC 212-12-044)

The following violation was observed at the time of inspection:

The facility was only able to provide documentation for June 2025. No documentation was provided to confirm the completion of unannounced fire drills for each shift per quarter, as required.

Next inspection scheduled on or after: 7/30/2025

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

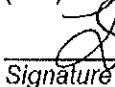


Signature

Anthony Sheppard POB

Print Name and Title

Deputy State Fire Marshal Damon Roberson
2803 156 AVE SE
Bellevue WA 98007
(360) 584-4392



Signature