



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

Business Name	Evergreen Residential Care	Provider Number	2138
Address	14120 E 3RD AVE ,	Approval Status	Approved
City, State, Zip	Spokane Valley, WA	Facility Type	Residential Care

On 04/02/2026 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

1 Testing and Maintenance

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

(IFC 903.5 2021)

The following violation was observed:

The fire sprinkler in B side janitors closet appears to have a leak from above. Sprinkler was replaced.

2 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)

Report received.

3 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)

Generator report received.



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City, State, Zip Spokane Valley, WA

Facility Type Residential Care

On 04/02/2026 the Office of the State Fire Marshal conducted an inspection at your facility.

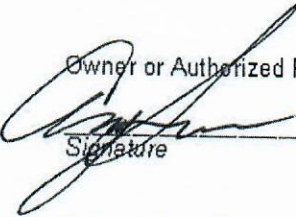
Code Requirement

Statement of Violation

Next inspection scheduled on or after: 04/30/2027

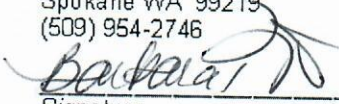
Right of appeal. Any person may appeal any decision made by the Fire Protection Bureau in accordance with WAC 212-12.

Owner or Authorized Representative


Signature

 / Director
Print Name and Title

Deputy State Fire Marshal Barbara McMullen
6403 W ROWAND DR
Spokane WA 99219
(509) 954-2746


Signature



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

Business Name	Evergreen Residential Care	Provider Number	2138
Address	14120 E 3RD AVE ,	Approval Status	Disapproved
City, State, Zip	Spokane Valley, WA	Facility Type	Residential Care

On 03/10/2026 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

1 Admin - (ITM) Inspection, Testing, & Maintenance

Any citation that requires inspection, testing, or maintenance (ITM) is required to have the testing completed, paper results delivered, and any deficiencies found during the ITM corrected before the citation is cleared."

For your information.

2 Testing and Maintenance

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

(IFC 903.5 2021)

The following violation was observed:

The fire sprinkler in B side janitors closet appears to have a leak from above.

3 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:

Facility is unable to provide documentation for the required smoke detector sensitivity testing.

4 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:

Facility is unable to provide documentation for the annual servicing of the emergency generator.



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Business Name	Evergreen Residential Care	Provider Number	2138
Address	14120 E 3RD AVE ,	Approval Status	Disapproved
City, State, Zip	Spokane Valley, WA	Facility Type	Residential Care

On 03/10/2026 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

Next inspection scheduled on or after: 04/09/2026

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 Barbara McMullen
6403 W ROWAND DR
Spokane WA 99219
(509) 954-2746

Signature

Initials of Authorized Facility Representative: _____

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