



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

|                         |                                |                        |                  |
|-------------------------|--------------------------------|------------------------|------------------|
| <b>Business Name</b>    | Aegis of Marymoor              | <b>Provider Number</b> | 2209             |
| <b>Address</b>          | 4585 W LAKE SAMMAMISH PKWY NE, | <b>Approval Status</b> | Approved         |
| <b>City, State, Zip</b> | Redmond, WA 98052              | <b>Facility Type</b>   | Residential Care |

On 9/6/2023 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

Trevon Clark  
Signature

Trevon Clark Maintenance Director  
Print Name and Title

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

[Signature]  
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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Code Requirement

Statement of Violation

**1 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 315.3.1 2018)

At time of inspection the following was observed:

1. combustible materials found in stairwell



**2 Multiplug Adapters**

Multiplug adapters, such as cube adapters, unfused plug strips or any other device not complying with NFPA 70 shall be prohibited.

(IFC 604.4 2018)

At time of inspection the following was observed:

1. found it front desk
2. found in business office



**3 Power Supply**

Relocatable power taps shall be directly connected to a permanently installed receptacle.

(IFC 604.4.2 2018)

At time of inspection the following was observed:

1. There was a power strip plugged into another power strip found in LN office memory care



**4 Cleaning**

Hoods, grease-removal devices, fans, ducts and other appurtenances shall be cleaned at intervals as required by Sections 607.3.3.1 through 607.3.3.3.

(IFC 607.3.3 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 hood cleaning
2. Second semi-annual hood cleaning



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

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Statement of Violation

**5 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.

**6 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)

At time of inspection the following was observed:

1. 2nd floor storage room PPE
2. 1st floor maintenance room
3. 2nd floor storage culinary room

**7 Fusible Link Maintenance**

Fixed temperature-sensing elements shall be maintained to ensure proper operation of the system.

(IFC 904.5.2 2009, 2012, 2015, 2018)

At time of inspection the following was observed:

1. Facility needs to perform a heat survey for the kitchen hood to determine the fusible link required for installation.

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**8 Maintenance**

Carbon monoxide alarms and carbon monoxide detection systems shall be maintained in accordance with NFPA 720. Carbon monoxide alarms and carbon monoxide detectors that become inoperable or begin producing end-of-life signals shall be replaced.

(IFC 915.6 2018)

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

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

1. Carbon Monoxide Alarms and Detectors testing, maintenance and documented

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

At time of inspection the following was observed:

1. install carbon monoxide detectors in corridors

**9 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 1031.10.1 2018)

Battery-powered emergency lighting equipment shall be tested annually by operating the equipment on battery power for not less than 90 minutes.

(IFC 1031.10.2 2018)

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

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

1. 30-second monthly activation testing had not been formed and documented
2. Annual 90 minute power test had not been formed and documented

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

At time of inspection the following was observed:

1. 3rd floor night cap room emergency light not working
2. 2nd floor by resident room 206 has two emergency lights not working
3. emergency light out in memory care area

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**10 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 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 service
2. Log of weekly inspections
3. Monthly 30-minute full load test or an Annual 4 hour load test

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

**11 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 2018)

At time of inspection the following was observed:

1. O2 cylinder found in resident room 332



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**12 Circuit identification and Accessibility**

10.6.5.2 Circuit Identification and Accessibility.  
10.6.5.2.1 The location of the branch circuit disconnecting means shall be permanently identified at the control unit.  
10.6.5.2.2 System circuit disconnecting means shall be permanently identified as to its purpose in accordance with the following:  
(1) "FIRE ALARM" for fire alarm systems  
(2) "EMERGENCY COMMUNICATIONS" for emergency communications systems  
(3) "FIRE ALARM/ECS" for combination fire alarm and emergency communications systems  
10.6.5.2.3 For fire alarm and/or signaling systems, the circuit disconnecting means shall have a red marking.  
10.6.5.2.4 The red marking shall not damage the overcurrent protective devices or obscure the manufacturer's markings.  
10.6.5.2.5 The circuit disconnecting means shall be accessible only to authorized personnel.  
10.6.5.3 Mechanical Protection. The branch circuit(s) and connections shall be protected against physical damage.  
10.6.5.4 Circuit Breaker Lock. Where a circuit breaker is the disconnecting means, a listed breaker locking device shall be installed.  
10.6.5.5 Overcurrent Protection. An overcurrent protective device of suitable current-carrying capacity that is capable of interrupting the maximum short-circuit current to which it can be subject shall be provided in each ungrounded conductor.

(NFPA 72 10.6.5.2)

At time of inspection the following was observed:

1. Fire alarm circuit breaker in the electrical room is missing the required lock device - locking breaker in the 'ON' position.

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Code Requirement

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13 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 either 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 preformed 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: 8/21/2023

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

Treva Clark  
Signature

Treva Clark Maintenance Director  
Print Name and Title

Deputy State Fire Marshal Jason Van Gorkum  
2803 156 AVE SE  
Bellevue WA 98007  
(360) 481-3933

Jason E Van Gorkum  
Signature