



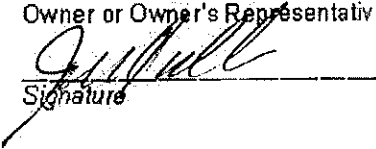
Washington State Patrol
Fire Protection Bureau
Phone: (360) 596-3900

Business Name	Madrona Assisted Living LLC	Provider Number	2210
Address	8800 Madison AVE ,	Approval Status	Approved
City, State, Zip	Bainbridge Island, WA 98110	Facility Type	Residential Care

On 02/06/2025 the Office of the State Fire Marshal conducted an inspection at your facility,

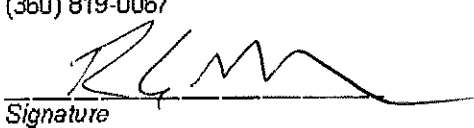
All violations noted during previous related inspection(s) have been corrected.

Owner or Owner's Representative


Signature


Print Name and Title

Deputy State Fire Marshal Raul Murcia
PO BOX 42642
Olympia WA 98504
(360) 819-0067


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	Madrona Assisted Living LLC	Provider Number	2210
Address	8800 Madison AVE ,	Approval Status	Disapproved
City, State, Zip	Bainbridge Island, WA 98110	Facility Type	Residential Care

On 10/01/2024 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

1 Frequency

Required emergency drills shall be held at the intervals specified in Table 405.3 or more frequently where necessary to familiarize all occupants with the drill procedure. (IFC 405.2 2021)	Findings during inspection were: Fire drills shall be conducted once per shift per quarter. Shifts missed during the 2nd and 3rd quarter of 2024.
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2 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)	Findings during inspection were: Facility failed to provide documentation showing annual inspection of all fire-resistance-rated construction (fire wall inspection).
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3 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)	Findings during inspection were: Damper inspection report from 12/19/23 states deficiencies that shall be corrected. 5 damper failed or not accessible.
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Code Requirement

Statement of Violation

4 Testing and Maintenance

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

(IFC 903.5 2021)

Findings during inspection were:

Facility failed to provide documentation showing fire department connection 5 year hydrostatic test.

1st floor laundry room has multiple loaded sprinkler heads.

Sprinkler riser has a pressure gauge that is over 5 years old.

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 2021)

Findings during inspection were:

Fire alarm report from 12/20/23 states deficiencies of horn/strobe, provide paperwork that deficiencies have been corrected.

Fire alarm breaker panel is missing FACP sign outside of breaker and missing electrical breaker lock.

6 Power Test

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 2021)

Findings during inspection were:

Facility failed to provide documentation showing annual 1.5 hour power test of all exits signs and emergency lights.



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Code Requirement

Statement of Violation

7 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

Findings during inspection were:

- Double doors located by bistro on the 3rd floor failed to close.
- Time clock room door has penetrations near door handle.

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



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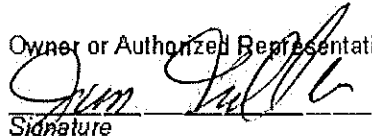
Statement of Violation

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

Next inspection scheduled on or after: 11/01/2024

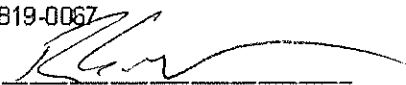
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