



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

Business Name	Gencare Lifestyle Federal Way at Steel Lake	Provider Number	2484
Address	31200 23RD AVE S,	Approval Status	Disapproved
City, State, Zip	Federal Way, WA	Facility Type	Residential Care

On 05/12/2026 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

1 Admin Fire & Life Safety

This report is the result of an unannounced fire and life safety Re-inspection, re-certification survey conducted at Gencare Lifestyle Federal Way at Steel Lake (Madrona Park) on 5/12/2026 by a DSFM representative of the Washington State Patrol, Fire Protection Bureau to determine compliance with all applicable codes.

All inspection reports must be completely filled out from the vendor and verify the report shows no deficiencies. If deficiencies are noted on report, additional documentation will be required to show that deficiencies have been corrected prior to re-inspection.

The facility is not in compliance at the time of this inspection.

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 deficiencies were cited as a result of this re-inspection:

At time of inspection the following was observed:

1. Combustible materials found on the 1st floor stairwell outside of kitchen.

3 Cleaning

Hoods, grease-removal devices, fans, ducts and other appurtenances shall be cleaned at intervals as required by Sections 606.3.3.1 through 606.3.3.3.

(IFC 606.3.3 2021)

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

At time of inspection the following was observed:

1. The facility will need to show they have increase the cleaning schedule to quarterly clearings.

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4 Inspection and Maintenance

Opening protective's in fire-resistance-rated assemblies shall be inspected and maintained in accordance with NFPA 80. Opening protective's in smoke barriers shall be inspected and maintained in accordance with NFPA 80 and NFPA 105. Openings in smoke partitions shall be inspected and maintained in accordance with NFPA 105. Fire doors and smoke and draft control doors shall not be blocked, obstructed, or otherwise made inoperable. Fusible links shall be replaced promptly whenever fused or damaged. Opening protective's and smoke and draft control doors shall not be modified.

(IFC 705.2 2021)

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

To aid the AHJ during the review of the inspections and testing reports, the records should include a description of the type of fire door assembly as follows:

- Type 6: Swinging door with builders hardware
- Type 7: Swinging fire door with fire door hardware
- Type 8: Horizontally sliding fire door
- Type 9: Special purpose horizontally accordion or folding

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

At time of inspection the following was observed:

1. On the 2nd floor, the housekeeping door is missing the seal between door and door frame.

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door Type 10: Vertically sliding fire door Type 11: Rolling steel door Type 12: Fire shutter Type 13: Service counter fire door Type 14: Hoistway doors for elevators and dumbwaiter Type 15: Chute door Type 16: Access door Type 17: Fire window 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 As a minimum, the following items shall be verified: 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 noncombustible 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 leaf closes before the active leaf. 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 modifications 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 integrity. 13. Signage affixed to a door meets the requirements listed in 4.1.4 (NFPA 80.5.2)	

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5 Door Operation

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

(IFC 705.2.4 2021)

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

At time of inspection the following was observed:

1. On the 2nd floor the south elevator door would not latch.

6 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 904.13.5.2 2021)

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

At the time of inspection, the following documentation was not provided. Documents shall include the following, where applicable:

1. First semi-annual servicing report (before 10/17/2025 report).

7 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 deficiencies were cited as a result of this re-inspection:

At the time of inspection, the following documentation was not provided. Documents shall include the following, where applicable:

1. Semi-Annual Report
2. Sole power replaceable battery, smoke detection in resident rooms power requirements are met for at least 1 year and including weekly required periodic tested. (NFPA 72.29.9.7)

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8 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 deficiencies were cited as a result of this re-inspection:

At the time of inspection, the following documentation was not provided. Documents shall include the following, where applicable:

1. Smoke detector sensitivity Report

9 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 2021 WAC 51-54A)

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

At the time of inspection, the following documentation was not provided. Documents shall include the following, where applicable:

1. The facility must maintain detailed documentation of carbon monoxide detector locations, including monthly inspection reports detailing testing dates, modifications, and repairs.

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 2021)

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

At the time of inspection, the following documentation was not provided. Documents shall include the following, where applicable:

1. Annual service report
2. Monthly 30-minute full load test

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Next inspection scheduled on or after: 06/11/2026

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 Jason Van Gorkum
2502 112 ST E
Tacoma WA 984455104
(509) 406-7209

DSFM Van Gorkum, Jason

Digitally signed by DSFM Van Gorkum, Jason
Date: 2026.05.13 10:07:35 -07'00'

Signature

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