



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

Business Name	Overlake Terrace Assisted Living	Provider Number	2551
Address	2956 152ND ,	Approval Status	Approved
City, State, Zip	Redmond, WA 98052	Facility Type	Residential Care

On 10/9/2023 the Office of the State Fire Marshal conducted an inspection at your facility.

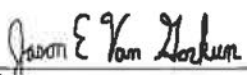
All violations noted during previous related inspection(s) have been corrected.

Owner or Owner's Representative


Signature

Russ Trafimenco / Maint. Director
Print Name and Title

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


Signature

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

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



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

Business Name	Overlake Terrace Assisted Living	Provider Number	2551
Address	2956 152ND ,	Approval Status	Disapproved
City, State, Zip	Redmond, WA 98052	Facility Type	Residential Care

On 9/6/2023 the Office of the State Fire Marshal conducted an inspection at your facility.

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. on the 2nd floor stairwell is being blocked

2 Record Keeping

Records shall be maintained of required emergency evacuation drills and include the following information:

1. Identity of the person conducting the drill.
2. Date and time of the drill.
3. Notification method used.
4. Employees on duty and participating.
5. Number of occupants evacuated.
6. Special conditions simulated.
7. Problems encountered.
8. Weather conditions when occupants were evacuated.
9. Time required to accomplish complete evacuation.

(IFC 0405.5 2018)

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

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

1. Facility cannot provide documentation for the completion of twelve planned and unannounced fire drills in the previous 12 months.

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

3 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. Sprinkler room
2. 2nd floor family adviser office

4 Unapproved conditions

Open junction boxes and open-wiring splices shall be prohibited. Approved covers shall be provided for all switch and electrical outlet boxes.

(IFC 604.6, 2018)

At time of inspection the following was observed:

1. found on 1st floor in maintenance office

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



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

Business Name Overlake Terrace Assisted Living
Address 2956 152ND ,
City, State, Zip Redmond, WA 98052

Provider Number 2551
Approval Status Disapproved
Facility Type Residential Care

On 9/6/2023 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

5 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.

6 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.

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



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

Business Name	Overlake Terrace Assisted Living	Provider Number	2551
Address	2956 152ND ,	Approval Status	Disapproved
City, State, Zip	Redmond, WA 98052	Facility Type	Residential Care

On 9/6/2023 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

7 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. 3rd floor storage room

8 Door Operation

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

(IFC 705.2.4 2018)

At time of inspection the following was observed:

1. double doors by resident room 278
2. double doors by resident room 107

9 Testing and Maintenance

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

(IFC 903.5 2009, 2012, 2015, 2018)

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

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

1. 5-Year internal pipe Testing (NFPA 25 14.2.1.1)
2. 3-Year Dry System Full flow trip test (NFPA 25 13.1.1.2)
3. Annual forward flow test (NFPA 25 13.7.2)
4. 5-years Backflow internal pipe (IFC 901.6)
5. 5-Year FDC Hydro testing (IFC 912.7)
6. Quarterly inspections

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

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



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

Business Name Overlake Terrace Assisted Living

Provider Number 2551

Address 2956 152ND ,

Approval Status Disapproved

City, State, Zip Redmond, WA 98052

Facility Type Residential Care

On 9/6/2023 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

10 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 904.12.5.2 2018)

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

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

1. First semi-annual servicing
2. Second semi-annual service
3. Annual replacement of fusible links/auto sprinkler heads (IFC 904.12.5.3)
4. NAFED certification (IFC 904.1.1/WAC 51-54A-0904)

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

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



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

Business Name Overlake Terrace Assisted Living
Address 2956 152ND ,
City, State, Zip Redmond, WA 98052

Provider Number 2551
Approval Status Disapproved
Facility Type Residential Care

On 9/6/2023 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

11 Portable Fire Extinguishers - General Requirements

Portable fire extinguishers shall be selected, installed and maintained in accordance with this section and NFPA 10.

Exceptions:

1. The distance of travel to reach an extinguisher shall not apply. The travel distance to reach an extinguisher shall not apply to the spectator seating portions of Group A-5 occupancies.

2. Thirty-day inspections shall not be required and maintenance shall be allowed to be once every three years for dry-chemical or halogenated agent portable fire extinguishers that are supervised by a listed and approved electronic monitoring device, provided that all of the following conditions are met:

2.1. Electronic monitoring shall confirm that extinguishers are properly positioned, properly charged and unobstructed.

2.2. Loss of power or circuit continuity to the electronic monitoring device shall initiate a trouble signal.

2.3. The extinguishers shall be installed inside of a building or cabinet in a noncorrosive environment.

2.4. Electronic monitoring devices and supervisory circuits shall be tested every 3 years when extinguisher maintenance is performed.

2.5. A written log of required hydrostatic test dates for extinguishers shall be maintained by the owner to verify that hydrostatic tests are conducted at the frequency required by NFPA 10.

3. In Group I-3, portable fire extinguishers shall be permitted to be located at staff locations.

(IFC 906.2 2015, 2018)

At time of inspection the following was observed:

1. in the kitchen the fire extinguisher is being hung by a dry wall screw

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



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

Business Name Overlake Terrace Assisted Living
Address 2956 152ND ,
City, State, Zip Redmond, WA 98052

Provider Number 2551
Approval Status Disapproved
Facility Type Residential Care

On 9/6/2023 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

12 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 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 report
2. Sensitivity Testing (IFC 907.8.3)
3. Nuisance Log (IFC 907.8.3)
4. Monthly single and multiple station alarms test (IFC 907.8)
5. NICET or ES/NTS Certification (IFC 907.10.1/WAC 51-54A-0907)

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

13 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.

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



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

Business Name Overlake Terrace Assisted Living
Address 2956 152ND
City, State, Zip Redmond, WA 98052

Provider Number 2551
Approval Status Disapproved
Facility Type Residential Care

On 9/6/2023 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

14 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)

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 performed 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. add emergency exit sign next to resident room 275 showing direction of egress

15 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 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 90 minute power test had not been performed and documented

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

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



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

Business Name Overlake Terrace Assisted Living
Address 2956 152ND ,
City, State, Zip Redmond, WA 98052

Provider Number 2551
Approval Status Disapproved
Facility Type Residential Care

On 9/6/2023 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

17 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.

18 NFPA 80 Fire /Smoke Dampers Inspection and Testing

19.4 Periodic Inspection and Testing.
19.4.1 Each damper shall be tested and inspected 1 year after installation.
19.4.1.1 The test and inspection frequency shall then be every 4 years, except in hospitals, where the frequency shall be every 6 years.

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

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

1. Fire/smoke damper 4-year inspection will need to be performed and documented

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



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

Business Name Overlake Terrace Assisted Living
Address 2956 152ND ,
City, State, Zip Redmond, WA 98052

Provider Number 2551
Approval Status Disapproved
Facility Type Residential Care

On 9/6/2023 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

19 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.

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



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

Business Name Overlake Terrace Assisted Living

Provider Number 2551

Address 2956 152ND ,

Approval Status Disapproved

City, State, Zip Redmond, WA 98052

Facility Type Residential Care

On 9/6/2023 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

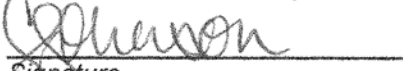
Statement of Violation

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 integrity
13. Signage affixed to a door meets the requirements listed in 4.1.4

Next inspection scheduled on or after: 10/9/2023

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


Signature

Stacy Johnson, Executive Director
Print Name and Title

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


Signature



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

Business Name	Overlake Terrace Assisted Living	Provider Number	2551
Address	2956 152ND ,	Approval Status	Disapproved
City, State, Zip	Redmond, WA 98052	Facility Type	Residential Care

On 7/20/2023 the Office of the State Fire Marshal conducted an inspection at your facility.

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. on the 2nd floor stairwell is being blocked
---	---

2 Record Keeping

Records shall be maintained of required emergency evacuation drills and include the following information: 1. Identity of the person conducting the drill. 2. Date and time of the drill. 3. Notification method used. 4. Employees on duty and participating. 5. Number of occupants evacuated. 6. Special conditions simulated. 7. Problems encountered. 8. Weather conditions when occupants were evacuated. 9. Time required to accomplish complete evacuation. (IFC 0405.5 2018)	The following deficiencies were cited as a result of this inspection: At the time of inspection the following paperwork was not provided: 1. Facility cannot provide documentation for the completion of twelve planned and unannounced fire drills in the previous 12 months. All inspection reports must verify that the system has no deficiencies, or document that all deficiencies have been corrected.
---	--

3 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. Sprinkler room 2. 2nd floor family adviser office
--	--

4 Unapproved conditions

Open junction boxes and open-wiring splices shall be prohibited. Approved covers shall be provided for all switch and electrical outlet boxes. (IFC 604.6, 2018)	At time of inspection the following was observed: 1. found on 1st floor in maintenance office
---	--

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



Washington State Patrol

Fire Protection Bureau

Phone: (360) 596-3900

Business Name Overlake Terrace Assisted Living

Provider Number 2551

Address 2956 152ND ,

Approval Status Disapproved

City, State, Zip Redmond, WA 98052

Facility Type Residential Care

On 7/20/2023 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

5 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.

6 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.

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



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

Business Name	Overlake Terrace Assisted Living	Provider Number	2551
Address	2956 152ND ,	Approval Status	Disapproved
City, State, Zip	Redmond, WA 98052	Facility Type	Residential Care

On 7/20/2023 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

7 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. 3rd floor storage room

8 Door Operation

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

(IFC 705.2.4 2018)

At time of inspection the following was observed:

1. double doors by resident room 278
2. double doors by resident room 107

9 Testing and Maintenance

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

(IFC 903.5 2009, 2012, 2015, 2018)

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

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

1. 5-Year internal pipe Testing (NFPA 25 14.2.1.1)
2. 3-Year Dry System Full flow trip test (NFPA 25 13.1.1.2)
3. Annual forward flow test (NFPA 25 13.7.2)
4. 5-years Backflow internal pipe (IFC 901.6)
5. 5-Year FDC Hydro testing (IFC 912.7)
6. Quarterly inspections

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

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



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

Business Name	Overlake Terrace Assisted Living	Provider Number	2551
Address	2956 152ND ,	Approval Status	Disapproved
City, State, Zip	Redmond, WA 98052	Facility Type	Residential Care

On 7/20/2023 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

10 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 904.12.5.2 2018)

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

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

1. First semi-annual servicing
2. Second semi-annual service
3. Annual replacement of fusible links/auto sprinkler heads (IFC 904.12.5.3)
4. NAFED certification (IFC 904.1.1/WAC 51-54A-0904)

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

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



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

Business Name	Overlake Terrace Assisted Living	Provider Number	2551
Address	2956 152ND ,	Approval Status	Disapproved
City, State, Zip	Redmond, WA 98052	Facility Type	Residential Care

On 7/20/2023 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

11 Portable Fire Extinguishers - General Requirements

Portable fire extinguishers shall be selected, installed and maintained in accordance with this section and NFPA 10.

Exceptions:

1. The distance of travel to reach an extinguisher shall not apply. The travel distance to reach an extinguisher shall not apply to the spectator seating portions of Group A-5 occupancies.
2. Thirty-day inspections shall not be required and maintenance shall be allowed to be once every three years for dry-chemical or halogenated agent portable fire extinguishers that are supervised by a listed and approved electronic monitoring device, provided that all of the following conditions are met:
 - 2.1. Electronic monitoring shall confirm that extinguishers are properly positioned, properly charged and unobstructed.
 - 2.2. Loss of power or circuit continuity to the electronic monitoring device shall initiate a trouble signal.
 - 2.3. The extinguishers shall be installed inside of a building or cabinet in a noncorrosive environment.
 - 2.4. Electronic monitoring devices and supervisory circuits shall be tested every 3 years when extinguisher maintenance is performed.
 - 2.5. A written log of required hydrostatic test dates for extinguishers shall be maintained by the owner to verify that hydrostatic tests are conducted at the frequency required by NFPA 10.
3. In Group I-3, portable fire extinguishers shall be permitted to be located at staff locations.

(IFC 906.2 2015, 2018)

At time of inspection the following was observed:

1. in the kitchen the fire extinguisher is being hung by a dry wall screw

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



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

Business Name Overlake Terrace Assisted Living	Provider Number 2551
Address 2956 152ND ,	Approval Status Disapproved
City, State, Zip Redmond, WA 98052	Facility Type Residential Care

On 7/20/2023 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

12 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 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 report
2. Sensitivity Testing (IFC 907.8.3)
3. Nuisance Log (IFC 907.8.3)
4. Monthly single and multiple station alarms test (IFC 907.8)
5. NICET or ES/NTS Certification (IFC 907.10.1/WAC 51-54A-0907)

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

13 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.

*Need Carbon Monoxide
then building*

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



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

Business Name	Overlake Terrace Assisted Living	Provider Number	2551
Address	2956 152ND ,	Approval Status	Disapproved
City, State, Zip	Redmond, WA 98052	Facility Type	Residential Care

On 7/20/2023 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

14 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)

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 performed 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. add emergency exit sign next to resident room 275 showing direction of egress

15 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 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 90 minute power test had not been performed and documented

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

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



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

Business Name	Overlake Terrace Assisted Living	Provider Number	2551
Address	2956 152ND ,	Approval Status	Disapproved
City, State, Zip	Redmond, WA 98052	Facility Type	Residential Care

On 7/20/2023 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

16 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.

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



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

Business Name	Overlake Terrace Assisted Living	Provider Number	2551
Address	2956 152ND ,	Approval Status	Disapproved
City, State, Zip	Redmond, WA 98052	Facility Type	Residential Care

On 7/20/2023 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

17 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.

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



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

Business Name	Overlake Terrace Assisted Living	Provider Number	2551
Address	2956 152ND ,	Approval Status	Disapproved
City, State, Zip	Redmond, WA 98052	Facility Type	Residential Care

On 7/20/2023 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

18 NFPA 80 Fire /Smoke Dampers Inspection and Testing

19.4 Periodic Inspection and Testing.
19.4.1 Each damper shall be tested and inspected 1 year after installation.
19.4.1.1 The test and inspection frequency shall then be every 4 years, except in hospitals, where the frequency shall be every 6 years.

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

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

1. Fire/smoke damper 4-year inspection will need to be performed and documented

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

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



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

Business Name	Overlake Terrace Assisted Living	Provider Number	2551
Address	2956 152ND ,	Approval Status	Disapproved
City, State, Zip	Redmond, WA 98052	Facility Type	Residential Care

On 7/20/2023 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

19 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 wither 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.

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



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

Business Name	Overlake Terrace Assisted Living	Provider Number	2551
Address	2956 152ND ,	Approval Status	Disapproved
City, State, Zip	Redmond, WA 98052	Facility Type	Residential Care

On 7/20/2023 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement	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 preformed 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: 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

Johnson
Signature

Stacey Johnson, Executive 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