



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

|                         |                             |                        |                  |
|-------------------------|-----------------------------|------------------------|------------------|
| <b>Business Name</b>    | Merrill Gardens at Kirkland | <b>Provider Number</b> | 2135             |
| <b>Address</b>          | 201 KIRKLAND ,              | <b>Approval Status</b> | Approved         |
| <b>City, State, Zip</b> | Kirkland, WA                | <b>Facility Type</b>   | Residential Care |

On 06/23/2025 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

Levi Novak Maintenance Director  
Print Name and Title

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

Jason Van Gorkum Date: 2025.07.01 11:12:50 -07'00'  
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.



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**Business Name** Merrill Gardens at Kirkland  
**Address** 201 KIRKLAND ,  
**City, State, Zip** Kirkland, WA 98033

**Provider Number** 2135  
**Approval Status** Disapproved  
**Facility Type** Residential Care

On 01/29/2025 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)

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 0405.6 2021)

Where a fire alarm system is provided, emergency evacuation drills shall be initiated by activating the fire alarm system.

(IFC 405.8, 2021)

At time of inspection the following was observed:

1. Facility will need to perform one fire drill per shift in the next 30 days.

Day  
Evening  
Night

**2 Modified or damaged.**

Electrical wiring, devices, equipment and appliances that are modified or damaged, and constitute an electrical shock or fire hazard, shall not be used until repaired or replaced in accordance with this code and NFPA 70.

(IFC 603.2.1 2021)

At time of inspection the following was observed:

1. Kitchen #K-1-15 receptacle shows signs of ware. ✓

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Code Requirement

Statement of Violation

**3 Extension Cords**

Extension cords. Extension cords shall not be a substitute for permanent wiring and shall be listed and labeled in accordance with UL 817. Extension cords shall not be affixed to structures, extended through walls, ceilings or floors, or under doors or floor coverings, nor shall such cords be subject to environmental damage or physical impact. Extension cords shall be used only with portable appliances. Extension cords marked for indoor use shall not be used outdoors..

(IFC 603.6 2021)

At time of inspection the following was observed:

1. Wellness center has a multi plug in-use.
2. Laundry storage has multi-plugs in-use.
3. Extension cord in-use for ecolab system.
4. Front desk has an extension cord in-use connected to a power strip.

**4 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 inspection:

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

1. First semi-annual hood cleaning

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

**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 2021)

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. Annual inspection of fire-resistance-rated construction will need to be performed and completed.

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

**6 Door Operation**

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

(IFC 705.2.4 2021)

At time of inspection the following was observed:

1. 5th floor double doors by room 512 will not latch

**7 Testing and Maintenance**

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

(IFC 903.5 2021)

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. 5-Year FDC Hydro testing (NFPA 25 13.8.5)

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. Missing Escutcheon found in hallway from parking lot by employee bathroom.

**8 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 inspection:

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

1. Second semi-annual service

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 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 inspection:

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

1. Report performed on 9/12/2024 shows 6 deficiencies.
2. Fire Alarm System is found in supervisor

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

**10 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 inspection:

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

1. Sensitivity Testing (IFC 907.8.3)

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

**11 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 inspection:

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

1. Carbon Monoxide Alarms and Detectors will need to be tested, maintained and documented on an monthly schedule

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

**12 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)

At time of inspection the following was observed:

1. #75 emergency light by room 215 will not come on when test button is pushed.

**13 Emergency Lighting Equipment Inspection and Testing**

Emergency lighting shall be maintained in accordance with Section 1008 and shall be inspected and tested in accordance with Sections 1031.10.1 and 1031.10.2.

(IFC 1032.10 2021)

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 test (IFC 1032.10.1) ✓
2. Annual 90 minute power test had 5 deficiencies on report (IFC 1032.10.2) 0

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

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**14 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. Annual inspection of fire doors will need to be performed and completed.

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

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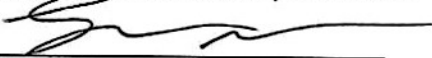
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| Code Requirement                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 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: 02/28/2025

**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

Levi Novak maintenance Director  
Print Name and Title

Deputy State Fire Marshal Jason Van Gorkum  
2803 156 AVE SE  
Bellevue WA 98007  
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Signature