



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

Business Name	Empress Senior Living	Provider Number	2613
Address	4020 NE 55TH ST ,	Approval Status	Approved
City, State, Zip	Seattle, WA 98105	Facility Type	Residential Care

On 08/14/2023 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

SOSA BLAKE 8-14-2023
Print Name and Title

Deputy State Fire Marshal Arthur Jesse Ward
2803 156TH AVE SE
Bellevue WA 98007
(425) 401-7735

Jesse Ward

Digitally signed by Jesse Ward
Date: 2023.08.14 12:19:24
-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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Phone: (360) 596-3900

Business Name	Empress Senior Living	Provider Number	2613
Address	4020 NE 55TH ST ,	Approval Status	Disapproved
City, State, Zip	Seattle, WA 98105	Facility Type	Residential Care

On 03/02/2023 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement	Statement of Violation
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1 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)	Facility is unable to provide documentation that the annual fire wall inspection has been completed.
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Facility Type Residential Care

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Code Requirement	Statement of Violation
2 Inspection and Maintenance	
Opening protectives in fire-resistance-rated assemblies shall be inspected and maintained in accordance with NFPA 80. Opening protectives 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 protectives and smoke and draft control doors shall not be modified. (IFC 705.2 2018)	Facility is unable to provide documentation that the annual fire door inspection has been completed. NFPA 80 (2016) 5.2.3.5.2 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.
3 Door Operation	
Swinging fire doors shall close from the full-open position and latch automatically. (IFC 705.2.4 2018)	1. One set of the memory care dining room doors does not close properly. 2. The memory care serenity room door does not close properly.

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4 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)	Facility is unable to provide documentation for the 4 year fire and smoke damper inspection. NFPA 80(2016) 19.5.1.1 Each damper shall be tested and inspected 1 year after acceptance testing. 19.5.1.2 The test and inspection frequency shall then be every 4 years, except in buildings containing a hospital, where the frequency shall be every 6 years.
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5 Testing and Maintenance

Sprinkler systems shall be tested and maintained in accordance with Section 901. (IFC 903.5 2009, 2012, 2015, 2018)	Facility is unable to provide documentation for the annual sprinkler system inspection.
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6 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)	Facility is unable to provide documentation for the annual fire alarm system testing.
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7 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 2012, 2015, 2018)	Facility is unable to provide documentation for the required smoke detector sensitivity testing.
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8 Fuel-burning Appliances and Fuel-Burning Fireplaces

Carbon monoxide detection shall be provided in dwelling units, sleeping units and classrooms that contain a fuel-burning appliance or a fuel-burning fireplace. (IFC 0915.1.2 2015, 2018)	1. Both the first floor and basement fireplaces require the addition of a CO detector in the room. . 2. A CO detector is required in the water heater room due to the fuel burning appliances.
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9 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)	Facility is unable to provide documentation for the monthly carbon monoxide detector testing. NFPA 720 8.7.1 Single - and multiple-station carbon monoxide alarms and all connected appliances shall be inspected and tested in accordance with the manufacturer's published instructions at least monthly.
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10 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)	Facility is unable to provide documentation for the annual 90 minute power test for the emergency lights.
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11 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)	Facility is unable to provide documentation for the annual servicing of the emergency generator.
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Code Requirement

Statement of Violation

Next inspection scheduled on or after: 04/01/2023

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

Print Name and Title

Deputy State Fire Marshal Arthur Jesse Ward
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