



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

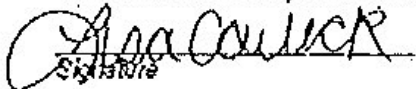
Business Name Lauren Glen at Bremerton Senior Living
Address 2707 CLARE AVE,
City, State, Zip Bremerton, WA 98310

Provider Number 2625
Approval Status Approved
Facility Type Residential Care

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

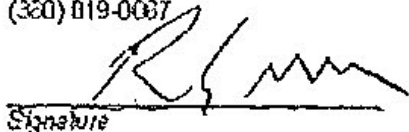
All violations noted during previous related inspection(s) have been corrected.

Owner or Owner's Representative


Signature

Lisa Carlock Executive Director
Print Name and Title

Deputy State Fire Marshal Raul Murcia
PO BOX 42642
Olympia WA 98504
(360) 019-0037


Signature

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	Vineyard Park of Bremerton	Provider Number	2396
Address	2707 CLARE AVE ,	Approval Status	Disapproved
City, State, Zip	Bremerton, WA 98310	Facility Type	Residential Care

On 05/07/2024 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

1 COVID - 19 Pandemic (ALFs)

Memorandum of record: Due to the state of emergency declaration of the COVID-19 pandemic event, DSHS revoked the request per RCW 18.20.130, of the Washington State Fire Marshal Office (SFMO) to conduct renewal licensing inspections of licensed Assisted Living Facilities (ALFs) except those specifically requested by DSHS from April 1, 2020 to July 31, 2021. A 2021 renewal inspection request was not received for this facility.	
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2 Ceiling Clearance

Storage shall be maintained 2 feet (610 mm) or more below the ceiling in nonsprinklered areas of buildings or not less than 18 inches (457 mm) below sprinkler head deflectors in sprinklered areas of buildings. Exceptions: 1. The 2-foot (610 mm) ceiling clearance is not required for storage along walls in nonsprinklered areas of buildings. 2. The 18-inch (457 mm) ceiling clearance is not required for storage along walls in areas of buildings equipped with an automatic sprinkler system in accordance with Section 903.3.1.1, 903.3.1.2 or 903.3.1.3. (IFC 315.3.1 2018)	Corrected.
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This document was prepared by Residential Care Services for the Locator website.



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

Business Name	Vineyard Park of Bremerton	Provider Number	2396
Address	2707 CLARE AVE ,	Approval Status	Disapproved
City, State, Zip	Bremerton, WA 98310	Facility Type	Residential Care

On 05/07/2024 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

3 Working Space and Clearance

A working space of not less than 30 inches (762 mm) in width, 36 inches (914 mm) in depth and 78 inches (1981 mm) in height shall be provided in front of electrical service equipment. Where the electrical service equipment is wider than 30 inches (762 mm), the working space shall be not less than the width of the equipment. Storage of materials shall not be located within the designated working space.

Exceptions:

1. Where other dimensions are required or allowed by NFPA 70.
2. Access openings into attics or under-floor areas that provide a minimum clear opening of 22 inches (559 mm) by 30 inches (762 mm).

(IFC 604.3 2018)

Findings during the inspection were:

Facility failed to maintain electrical panels located in 2nd floor linen closet across from room 234, bags of clothes within 3 feet of panels.

*on 5/7/24 re-inspection additional items were stored such as a laundry basket and a wheelchair.

4 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)

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 2018 WAC 51-54A)

Corrected.



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

Business Name Vineyard Park of Bremerton	Provider Number 2396
Address 2707 CLARE AVE ,	Approval Status Disapproved
City, State, Zip Bremerton, WA 98310	Facility Type Residential Care

On 05/07/2024 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

6 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)

Corrected.

7 Testing and Maintenance

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

(IFC 903.5 2009, 2012, 2015, 2018)

Findings during the inspection were:

-Facility failed to provide the following documentation for the sprinkler system;

1. Annual inspection report.
2. Three-year dry system FULL flow trip test.
3. Annual trip test.
4. Annual forward flow test for the back flow.
5. Five-year HYDROSTATIC test for the fire department connection.

-Facility failed to maintain sprinkler heads in the kitchen, loaded sprinkler heads.

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 904.12.5.2 2018)

Findings during the inspection were:

Facility failed to provide documentation showing first semi-annual inspection of the kitchen suppression system. Shall be inspected twice a year.



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Business Name	Vineyard Park of Bremerton	Provider Number	2396
Address	2707 CLARE AVE ,	Approval Status	Disapproved
City, State, Zip	Bremerton, WA 98310	Facility Type	Residential Care

On 05/07/2024 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

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)

Findings during the inspection were:

Facility failed to provide documentation showing carbon monoxide detectors are being tested and maintained.

10 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)

Corrected.

11 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)

Corrected.

12 Obstructions

A means of egress shall be free from obstructions that would prevent its use, including the accumulation of snow and ice.

(IFC 1030.3 2015, 2018)

Corrected.

13 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)

Corrected.



Washington State Patrol
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Business Name Vineyard Park of Bremerton
Address 2707 CLARE AVE ,
City, State, Zip Bremerton, WA 98310

Provider Number 2396
Approval Status Disapproved
Facility Type Residential Care

On 05/07/2024 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

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 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

Corrected.



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Business Name	Vineyard Park of Bremerton	Provider Number	2396
Address	2707 CLARE AVE ,	Approval Status	Disapproved
City, State, Zip	Bremerton, WA 98310	Facility Type	Residential Care

On 05/07/2024 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: 06/06/2024

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

NOT AVAILABLE
Signature

Print Name and Title

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

R. Murcia
Signature

Initials of Authorized Facility Representative: _____



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

Business Name	Laurel Glen	Provider Number	2396
Address	2707 CLARE AVE ,	Approval Status	Disapproved
City, State, Zip	Bremerton, WA 98310	Facility Type	Residential Care

On 02/06/2024 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

1 COVID - 19 Pandemic (ALFs)

Memorandum of record:
Due to the state of emergency declaration of the COVID-19 pandemic event, DSHS revoked the request per RCW 18.20.130, of the Washington State Fire Marshal Office (SFMO) to conduct renewal licensing inspections of licensed Assisted Living Facilities (ALFs) except those specifically requested by DSHS from April 1, 2020 to July 31, 2021. A 2021 renewal inspection request was not received for this facility.

2 Ceiling Clearance

Storage shall be maintained 2 feet (610 mm) or more below the ceiling in nonsprinklered areas of buildings or not less than 18 inches (457 mm) below sprinkler head deflectors in sprinklered areas of buildings.

Exceptions:

1. The 2-foot (610 mm) ceiling clearance is not required for storage along walls in nonsprinklered areas of buildings.
2. The 18-inch (457 mm) ceiling clearance is not required for storage along walls in areas of buildings equipped with an automatic sprinkler system in accordance with Section 903.3.1.1, 903.3.1.2 or 903.3.1.3.

(IFC 315.3.1 2018)

corrected.



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Business Name	Laurel Glen	Provider Number	2396
Address	2707 CLARE AVE ,	Approval Status	Disapproved
City, State, Zip	Bremerton, WA 98310	Facility Type	Residential Care

On 02/06/2024 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

3 Working Space and Clearance

A working space of not less than 30 inches (762 mm) in width, 36 inches (914 mm) in depth and 78 inches (1981 mm) in height shall be provided in front of electrical service equipment. Where the electrical service equipment is wider than 30 inches (762 mm), the working space shall be not less than the width of the equipment. Storage of materials shall not be located within the designated working space.

Exceptions:

1. Where other dimensions are required or allowed by NFPA 70.
2. Access openings into attics or under-floor areas that provide a minimum clear opening of 22 inches (559 mm) by 30 inches (762 mm).

(IFC 604.3 2018)

Findings during the inspection were:

Facility failed to maintain electrical panels located in 2nd floor linen closet across from room 234, bags of clothes within 3 feet of panels.

4 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)

Findings during the inspection were:

Facility failed to provide documentation showing kitchen hood is being cleaned twice a year.

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 2018 WAC 51-54A)

corrected.



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Business Name	Laurel Glen	Provider Number	2396
Address	2707 CLARE AVE ,	Approval Status	Disapproved
City, State, Zip	Bremerton, WA 98310	Facility Type	Residential Care

On 02/06/2024 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

6 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)

corrected.

7 Testing and Maintenance

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

(IFC 903.5 2009, 2012, 2015, 2018)

Findings during the inspection were:

-Facility failed to provide the following documentation for the sprinkler system;

1. Annual inspection report.
2. Three-year dry system FULL flow trip test.
3. Annual trip test.
4. Annual forward flow test for the back flow.
5. Five-year HYDROSTATIC test for the fire department connection.

-Facility failed to maintain sprinkler heads in the kitchen, loaded sprinkler heads.

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 904.12.5.2 2018)

Findings during the inspection were:

Facility failed to provide documentation showing first semi-annual inspection of the kitchen suppression system. Shall be inspected twice a year.



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Business Name	Laurel Glen	Provider Number	2396
Address	2707 CLARE AVE ,	Approval Status	Disapproved
City, State, Zip	Bremerton, WA 98310	Facility Type	Residential Care

On 02/06/2024 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

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)

Findings during the inspection were:

Facility failed to provide documentation showing carbon monoxide detectors are being tested and maintained.

10 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)

corrected.

11 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)

corrected.

12 Obstructions

A means of egress shall be free from obstructions that would prevent its use, including the accumulation of snow and ice.

(IFC 1030.3 2015, 2018)

corrected.

13 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)

corrected.



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Business Name	Laurel Glen	Provider Number	2396
Address	2707 CLARE AVE ,	Approval Status	Disapproved
City, State, Zip	Bremerton, WA 98310	Facility Type	Residential Care

On 02/06/2024 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

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 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 the inspection were:

Facility failed to maintain 3rd floor elevator door, door does not latch.



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Business Name	Laurel Glen	Provider Number	2396
Address	2707 CLARE AVE ,	Approval Status	Disapproved
City, State, Zip	Bremerton, WA 98310	Facility Type	Residential Care

On 02/06/2024 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: 03/08/2024

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

NOT AVAILABLE

Signature

Print Name and Title

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

Signature



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

Business Name	Laurel Glen	Provider Number	2396
Address	2707 CLARE AVE ,	Approval Status	Disapproved
City, State, Zip	Bremerton, WA 98310	Facility Type	Residential Care

On 12/19/2023 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

1 COVID - 19 Pandemic (ALFs)

Memorandum of record:
Due to the state of emergency declaration of the COVID-19 pandemic event, DSHS revoked the request per RCW 18.20.130, of the Washington State Fire Marshal Office (SFMO) to conduct renewal licensing inspections of licensed Assisted Living Facilities (ALFs) except those specifically requested by DSHS from April 1, 2020 to July 31, 2021. A 2021 renewal inspection request was not received for this facility.

2 Ceiling Clearance

Storage shall be maintained 2 feet (610 mm) or more below the ceiling in nonsprinklered areas of buildings or not less than 18 inches (457 mm) below sprinkler head deflectors in sprinklered areas of buildings.

Exceptions:

1. The 2-foot (610 mm) ceiling clearance is not required for storage along walls in nonsprinklered areas of buildings.
2. The 18-inch (457 mm) ceiling clearance is not required for storage along walls in areas of buildings equipped with an automatic sprinkler system in accordance with Section 903.3.1.1, 903.3.1.2 or 903.3.1.3.

(IFC 315.3.1 2018)

Findings during the inspection were:

Facility failed to maintain storage in activity closet, items stored less than 18 inches from sprinkler head.

Plan Of Correction for #2 #3 #6 #12
Staff to be educated on keeping item 18" from sprinkler heads and maintaining 36" clearance from all electrical panels and fire extinguishers, staff will also be educated on blocking or stopping fire doors from closing



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Business Name Laurel Glen	Provider Number 2396
Address 2707 CLARE AVE ,	Approval Status Disapproved
City, State, Zip Bremerton, WA 98310	Facility Type Residential Care

On 12/19/2023 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

3 Working Space and Clearance

A working space of not less than 30 inches (762 mm) in width, 36 inches (914 mm) in depth and 78 inches (1981 mm) in height shall be provided in front of electrical service equipment. Where the electrical service equipment is wider than 30 inches (762 mm), the working space shall be not less than the width of the equipment. Storage of materials shall not be located within the designated working space.

Exceptions:

1. Where other dimensions are required or allowed by NFPA 70.
2. Access openings into attics or under-floor areas that provide a minimum clear opening of 22 inches (559 mm) by 30 inches (762 mm).

(IFC 604.3 2018)

Findings during the inspection were:

Facility failed to maintain electrical panels located in 2nd floor linen closet across from room 234, bags of clothes within 3 feet of panels.

See above #2

4 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)

Findings during the inspection were:

Facility failed to provide documentation showing kitchen hood is being cleaned twice a year.

Documentation requested from vendor

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 2018 WAC 51-54A)

Findings during the inspection were:

Facility failed to provide documentation showing annual inspection of all fire-resistance-rated construction (fire wall inspection).

3rd floor medication room has penetrations in ceiling.

Maintenance is required to perform this task annually and will do so starting January 2024 Quarterly inspections will be done and documented If corrective action is needed Documentation will be verified by senior staff



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City, State, Zip Bremerton, WA 98310	Facility Type Residential Care

On 12/19/2023 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

6 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)

Findings during the inspection were:

Facility failed to maintain multiple fire doors on all floors, fire doors shall not be blocked, obstructed, or otherwise made inoperable.

See above #2

7 Testing and Maintenance

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

(IFC 903.5 2009, 2012, 2015, 2018)

All documentation requested from the vendor are in the binder, vendor failed to provide all needed documentation, Annual was done as Quarterly. Three year and Five year test are being scheduled with the new vendor. Backflow testing has been marked in the binder. Sprinkler heads in the kitchen will be cleaned and or replaced as needed

Findings during the inspection were:

Facility failed to provide the following documentation for the sprinkler system;

1. Annual inspection report.
2. Three-year dry system FULL flow trip test.
3. Annual trip test.
4. Annual forward flow test for the back flow.
5. Five-year HYDROSTATIC test for the fire department connection.

Facility failed to maintain sprinkler heads in the kitchen, loaded sprinkler heads.

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 904.12.5.2 2018)

Findings during the inspection were:

Facility failed to provide documentation showing first semi-annual inspection of the kitchen suppression system.

See above #7



Washington State Patrol
Fire Protection Bureau
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Business Name	Laurel Glen	Provider Number	2396
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City, State, Zip	Bremerton, WA 98310	Facility Type	Residential Care

On 12/19/2023 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

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)	Findings during the inspection were: Facility failed to provide documentation showing carbon monoxide detectors are being tested and maintained. Maintenance will test according to manufactures suggested testing and document accordingly, Fixed units will be tested annually by vendor
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10 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)	Findings during the inspection were: Facility failed to provide documentation showing monthly 30 second activation test of exit signs and emergency lighting. Maintenance will test monthly and document testing times 30 second and annual 90 minute test
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11 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)	Findings during the inspection were: Facility failed to provide documentation showing annual 90 minute (1.5 hour) activation test of exit signs and emergency lighting. See Above #10
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12 Obstructions

A means of egress shall be free from obstructions that would prevent its use, including the accumulation of snow and ice. (IFC 1030.3 2015, 2018) Maintenance will address the sagging door and look into the doors not blocking each other	Findings during the inspection were: Facility failed to maintain 2nd floor staircase exit, door blocked by chairs as well as egress path outside blocked by multiple chairs. See above #2. Facility failed to maintain memory care courtyard exit, door blocked by rock and planter. Door is also sagging and could be blocked by another door handle that is located on the other side of the exit. See left side
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Washington State Patrol
Fire Protection Bureau
Phone: (360) 596-3900

Business Name	Laurel Glen	Provider Number	2396
Address	2707 CLARE AVE ,	Approval Status	Disapproved
City, State, Zip	Bremerton, WA 98310	Facility Type	Residential Care

On 12/19/2023 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

13 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)

Findings during the inspection were:

Facility failed to provide the following documentation for the generator;

1. Log of weekly inspections.
2. Monthly 30 minute full load test.

Maintenance will document weekly and monthly test starting 2024



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Code Requirement

Statement of Violation

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

Findings during the inspection were:

Facility failed to provide documentation showing annual inspection of all fire doors.

Facility failed to maintain 3rd floor elevator door, door does not latch.

All fire doors will be inspected annually to insure proper seal and clearance around doors, that all doors close and latch within 7 seconds. All penetrations sealed
Door inspections will be documented annually any corrective action needed documented and repaired.
Senior staff will follow up after inspections are completed.



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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: 01/19/2024

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

NOT AVAILABLE
Signature

Print Name and Title

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

[Signature]
Signature