



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

|                         |                            |                        |                  |
|-------------------------|----------------------------|------------------------|------------------|
| <b>Business Name</b>    | Vineyard Park at Bremerton | <b>Provider Number</b> | 2695             |
| <b>Address</b>          | 2707 CLARE AVE ,           | <b>Approval Status</b> | Approved         |
| <b>City, State, Zip</b> | Bremerton, WA              | <b>Facility Type</b>   | Residential Care |

On 10/22/2025 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

*Bobbie Cruz*  
Signature

Bobbie Cruz - Executive Director  
Print Name and Title

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

*R Murcia*  
Signature

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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On 08/14/2025 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)

Corrected

**2 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)

Corrected

**3 Testing and Maintenance**

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

(IFC 903.5 2021)

Corrected



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On 08/14/2025 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

4 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 2021)

Corrected

5 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)

Corrected



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On 08/14/2025 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

6 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)

Findings during inspection were:

Sensitivity report from May 30th, 2025 states 20 smoke detectors failed sensitivity test. Deficiencies shall be corrected.

7 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 1032.10.1 2021)

Corrected

8 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 2021)

Corrected

9 Reliability

Required exit accesses, exits and exit discharges shall be continuously maintained free from obstructions or impediments to full instant use in the case of fire or other emergency when the building area served by the means of egress is occupied. An exit or exit passageway shall not be used for any purpose that interferes with a means of egress.

(IFC 1032.2 2021)

Corrected



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Code Requirement

Statement of Violation

10 Maintenance

Emergency and standby power systems shall be maintained in accordance with NFPA 110 and NFPA 111 such that the system is capable of supplying service within the time specified for the type and duration required.

Corrected

(IFC 1203.4 2021)

11 Securing Compressed Gas Containers, Cylinders and Tanks

Compressed gas containers, cylinders and tanks shall be secured to prevent falling caused by contact, vibration or seismic activity. Securing of compressed gas containers, cylinders and tanks shall be by one of the following methods:

Corrected

1. Securing containers, cylinders and tanks to a fixed object with one or more restraints.
2. Securing containers, cylinders and tanks on a cart or other mobile device designed for the movement of compressed gas containers, cylinders or tanks.
3. Nesting of compressed gas containers, cylinders and tanks at container filling or servicing facilities or in sellers' warehouses not open to the public. Nesting shall be allowed provided that the nested containers, cylinders or tanks, if dislodged, do not obstruct the required means of egress.
4. Securing of compressed gas containers, cylinders and tanks to or within a rack, framework, cabinet or similar assembly designed for such use.

Exception: Compressed gas containers, cylinders and tanks in the process of examination, filling, transport or servicing.

(IFC 5303.5.3 2021)



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On 08/14/2025 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

**12 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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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: 09/18/2025

**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

Murcia  
Signature

Dobbie Cruz - Executive Director  
Print Name and Title

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

**Raul Murcia**

Signature

Digitally signed by Raul Murcia  
Date: 2025.08.22 09:58:20 -07'00'



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| <b>City, State, Zip</b> | Bremerton, WA 98310        | <b>Facility Type</b>   | Residential Care |

On 03/13/2025 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)

Findings during inspection were:

Facility failed to provide documentation showing fire drills are being conducted once per shift per quarter for the last year.

2 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)

Findings during inspection were:

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

3 Testing and Maintenance

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

(IFC 903.5 2021)

Findings during inspection were:

Facility failed to provide the following documentatin for the fire sprinkler system;

- Three-year dry system full flow trip test.
- Five-year fire department connection hydrostatic test.

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On 03/13/2025 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

4 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 2021)

Findings during inspection were:

Facility failed to maintain portable fire extinguisher in 1st floor laundry room, missed annual inspection.

5 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)

Findings during inspection were:

Fire alarm report from 11/18/24 states deficiencies that shall be corrected, need new batteries.



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On 03/13/2025 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

6 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)

Findings during inspection were:

Facility failed to provide fire alarm sensitivity test.

7 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 1032.10.1 2021)

Findings during inspection were:

Facility failed to provide 30-second monthly activation test of all exit signs.

8 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 2021)

Findings during inspection were:

Facility failed to provide 90-minute power test of all exit signs.

9 Reliability

Required exit accesses, exits and exit discharges shall be continuously maintained free from obstructions or impediments to full instant use in the case of fire or other emergency when the building area served by the means of egress is occupied. An exit or exit passageway shall not be used for any purpose that interferes with a means of egress.

(IFC 1032.2 2021)

Findings during inspection were:

Facility failed to maintain exit going out of memory care courtyard, exit blocked by 2x6x12 lumber and center stairwell exit door.



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On 03/13/2025 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

10 Maintenance

Emergency and standby power systems shall be maintained in accordance with NFPA 110 and NFPA 111 such that the system is capable of supplying service within the time specified for the type and duration required.

(IFC 1203.4 2021)

Findings during inspection were:

Facility failed to provide the following documentation;

- Annual inspection report for generator.
- Log of weekly inspections
- Log of monthly 30 minute load test.

11 Securing Compressed Gas Containers, Cylinders and Tanks

Compressed gas containers, cylinders and tanks shall be secured to prevent falling caused by contact, vibration or seismic activity. Securing of compressed gas containers, cylinders and tanks shall be by one of the following methods:

1. Securing containers, cylinders and tanks to a fixed object with one or more restraints.
2. Securing containers, cylinders and tanks on a cart or other mobile device designed for the movement of compressed gas containers, cylinders or tanks.
3. Nesting of compressed gas containers, cylinders and tanks at container filling or servicing facilities or in sellers' warehouses not open to the public. Nesting shall be allowed provided that the nested containers, cylinders or tanks, if dislodged, do not obstruct the required means of egress.
4. Securing of compressed gas containers, cylinders and tanks to or within a rack, framework, cabinet or similar assembly designed for such use.

Exception: Compressed gas containers, cylinders and tanks in the process of examination, filling, transport or servicing.

(IFC 5303.5.3 2021)

Findings during inspection were:

Facility failed to maintain oxygen tank in room 336, unsecured tank.

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**Address** 2707 CLARE AVE ,  
**City, State, Zip** Bremerton, WA 98310

**Provider Number** 2695  
**Approval Status** Disapproved  
**Facility Type** Residential Care

On 03/13/2025 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

12 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.

5.2.4.2 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 inspection were:

-Facility failed to provide annual inspection report of all fire doors.

Facility failed to maintain the following fire doors.

- 4th floor storage room by room 431, not latching.
- 4th floor women's bathroom by room 404, self closer is broken.
- 3rd floor elevator door does not latch.
- 2nd floor room 202 missing self closer.

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On 03/13/2025 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: 04/13/2025

**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

Benny  
Signature

Bobbie Cruz - Executive Director  
Print Name and Title

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

[Signature]  
Signature