



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

Business Name White River Memory Care
Address 2454 COLE ST ,
City, State, Zip Enumclaw, WA 98022

Provider Number 2707
Approval Status Approved
Facility Type Residential Care

On 8/19/2025 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

Maintenance Director
Print Name and Title

Deputy State Fire Marshal Alan Harian
2803 156TH AVE SE
Bellevue WA 98007
(425) 495-7121


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	White River Memory Care	Provider Number	2707
Address	2454 COLE ST ,	Approval Status	Disapproved
City, State, Zip	Enumclaw, WA	Facility Type	Residential Care

On 07/07/2025 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

1 Administration

	Approved 30 day extension on 3/5/25, 4/8/25 approved for a 2 week extension, approved for another 30 days 4/15/25, 5/22/25 - Facility emailed about COVID outbreak in facility. On 7/7/2025 an unannounced Fire and Life Safety Code re-inspection was conducted at White River Memory care by a representative of the Washington State Patrol, State Fire Marshal's Office to determine compliance with all applicable codes. The following deficiencies were cited as a result of this re-inspection:
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2 Initiation

Where a fire alarm system is provided, emergency evacuation drills shall be initiated by activating the fire alarm system. (IFC 405.8, 2021)	Corrected
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3 Abatement of Electrical Hazards

Abatement of unsafe conditions and electrical hazards. Conditions that constitute an electrical shock or fire hazard shall be abated.. (IFC 603.2 2021)	Corrected
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4 Installation

Relocatable power tap cords shall not extend through walls, ceilings, floors, under doors or floor coverings, or be subject to environmental or physical damage. (IFC 603.5.3, 2021)	Corrected
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Code Requirement

Statement of Violation

5 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)

Corrected

6 Listed and Labeled

Only listed and labeled portable, electric space heaters shall be used.

(IFC 603.9.1, 2021)

Corrected

7 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)

Corrected

8 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 2021)

Corrected



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Code Requirement

Statement of Violation

9 Inspection, Testing and Maintenance

Fire protection and life safety systems shall be maintained in an operative condition at all times, and shall be replaced or repaired where defective. Nonrequired fire protection and life safety systems and equipment shall be inspected, tested and maintained or removed in accordance with Section 901.8. (IFC 901.6 2021)	Corrected
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10 Testing and Maintenance

Sprinkler systems shall be tested and maintained in accordance with Section 901. (IFC 903.5 2021)	The following violation was observed at the time of re-inspection: ✓ The facility was unable to provide documentation for their annual forward flow report. All inspection reports must verify that the system has no deficiencies, or document that all deficiencies have been corrected.
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11 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)	Corrected
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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 2021)	The following violation was observed at the time of re-inspection: The facilities annual fire alarm shows multiple deficiencies, 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

13 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 violation was observed at the time of re-inspection:

The facilities smoke detector sensitivity report shows multiple detectors failed.

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

14 Maintenance

Carbon monoxide alarms and carbon monoxide detection systems shall be maintained in accordance with NFPA 72. Carbon monoxide alarms and carbon monoxide detectors that become inoperable or begin producing end-of-life signals shall be replaced.

(IFC 915.6 2021 WAC)

Corrected

15 Means of Egress Illumination

Illumination shall be provided in the means of egress in accordance with Section 1008.2. Under emergency power, means of egress illumination shall comply with Section 1008.3.

(IFC 1008.1 2021)

Corrected



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Code Requirement

Statement of Violation

16 Unlatching

The unlatching of any door or leaf for egress shall require not more than one motion in a single linear or rotational direction to release all latching and all locking devices.

Exceptions:

1. Places of detention or restraint.
2. Where manually operated bolt locks are permitted by Section 1010.2.5.
3. Doors with automatic flush bolts as permitted by Section 1010.2.4, Item 4.
4. Doors from individual dwelling units and sleeping units of Group R occupancies as permitted by Section 1010.2.4, Item 5.

(IFC 1010.2.1 2021)

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Code Requirement

Statement of Violation

17 Lock and Latches

Locks and latches shall be permitted to prevent operation of doors where any of the following exists:

1. Places of detention or restraint.
2. In buildings in occupancy Group A having an occupant load of 300 or less, Groups B, F, M, and S, and in places of religious worship, the main door or doors are permitted to be equipped with key-operated locking devices from the egress side provided:
 - 2.1. The locking device is readily distinguishable as locked;
 - 2.2. A readily visible sign is posted on the egress side on or adjacent to the door stating: THIS DOOR TO REMAIN UNLOCKED WHEN BUILDING IS OCCUPIED. The sign shall be in letters 1 inch (25 mm) high on a contrasting background; and
 - 2.3. The use of the key-operated locking device is revocable by the building official for due cause.
3. Where egress doors are used in pairs, approved automatic flush bolts shall be permitted to be used, provided that the door leaf having the automatic flush bolts has no doorknob or surface-mounted hardware.
4. Doors from individual dwelling or sleeping units of Group R occupancies having an occupant load of 10 or less are permitted to be equipped with a night latch, dead bolt, or security chain, provided such devices are operable from the inside without the use of a key or a tool.
5. Fire doors after the minimum elevated temperature has disabled the unlatching mechanism in accordance with listed fire door test procedures.
6. Doors serving roofs not intended to be occupied shall be permitted to be locked preventing entry to the building from the roof.
7. Approved, listed locks without delayed egress shall be permitted in Group I-1 condition 2 assisted living facilities licensed under chapter 388-78A WAC and Group I-1 Condition 2 residential treatment facilities licensed under chapter 246-337 WAC by the state of Washington, provided that:
 - 7.1. The clinical needs of one or more patients require specialized security measures for their safety.
 - 7.2. The doors unlock upon actuation of the automatic sprinkler system or automatic fire detection system.

Corrected



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- 7.3. The doors unlock upon loss of electrical power controlling the lock or lock mechanism.
- 7.4. The lock shall be capable of being deactivated by a signal from a switch located in an approved location.
- 7.5. There is a system, such as a keypad and code, in place that allows visitors, staff persons and appropriate residents to exit. Instructions for exiting shall be posted within six feet of the door.
8. Other than egress courts, where occupants must egress from an exterior space through the building for means of egress, exit access doors shall be permitted to be equipped with an approved locking device where installed and operated in accordance with all of the following:
- 8.1. The occupant load of the occupied exterior area shall not exceed 300 as determined by IBC Section 1004.
- 8.2. The maximum occupant load shall be posted where required by Section 1004.9. Such sign shall be permanently affixed inside the building and shall be posted in a conspicuous space near all the exit access doorways.
- 8.3. A weatherproof telephone or two-way communication system installed in accordance with Sections 1009.8.1 and 1009.8.2 shall be located adjacent to not less than one required exit access door on the exterior side.
- 8.4. The egress door locking device is readily distinguishable as locked and shall be a key-operated locking device.
- 8.5. A clear window or glazed door opening, not less than 5 square feet (0.46 m²) sq. ft. in area, shall be provided at each exit access door to determine if there are occupants using the outdoor area.
- 8.6. A readily visible durable sign shall be posted on the interior side on or adjacent to each locked required exit access door serving the exterior area stating: THIS DOOR TO REMAIN UNLOCKED WHEN THE OUTDOOR AREA IS OCCUPIED. The letters on the sign shall be not less than 1 inch high on a contrasting background.
9. Locking devices are permitted on doors to balconies, decks, or other exterior spaces serving individual dwelling or sleeping units.
10. Locking devices are permitted on doors to balconies,



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decks, or other exterior spaces of 250 square feet or less, serving a private office space.oor.

(IFC 1010.2.4 2021 WAC 51-54A)

18 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 1031.2 2021)

Corrected

19 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

20 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

21 Inspection Frequency

Fire extinguishers shall be inspected when initially placed in service and thereafter at approximately 30-day intervals. Fire extinguishers shall be inspected, manually or by electronic monitoring, at more frequent intervals when circumstances require.

(NFPA Standard 10 Section 6.2.1)

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Code Requirement

Statement of Violation

22 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

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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

23 Fire Drills

In all Group I, Group E, and Group R2 Occupancies licensed by the state, at least twelve planned and unannounced fire drills shall be held every year. Drills shall be conducted quarterly on each shift in Group I and Group R2, Occupancies and monthly in Group E Occupancies to familiarize personnel with signals and emergency action required under varied conditions. A detailed written record of all fire drills shall be maintained and available for inspection at all times. When drills are conducted between 9:00 p.m. and 6:00 a.m., a coded announcement may be used instead of audible alarms. Fire drills shall include the transmission of a fire alarm signal and simulation of emergency conditions. The fire alarm monitoring company shall be notified prior to the activation of the fire alarm system for drill purposes and again at the conclusion of the transmission and restoration of the fire alarm system to normal mode.

(WAC 212-12-044)

Corrected



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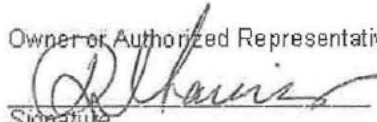
Code Requirement

Statement of Violation

Next inspection scheduled on or after: 08/06/2025

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

ROBINA GAINES, EXECUTIVE
Print Name and Title DIRECTOR

Deputy State Fire Marshal Cozetta Christian
2502 112TH E
Tacoma WA 984455104
(360) 584-5796


Signature



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Business Name White River Memory Care
Address 2454 COLE ST ,
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Provider Number 2707
Approval Status Disapproved
Facility Type Residential Care

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

Code Requirement

Statement of Violation

1 Administration

On 02/06/2025 an unannounced Fire and Life Safety Code inspection was conducted at White River Memory Care by a representative of the Washington State Patrol, State Fire Marshal's Office to determine compliance with all applicable codes.

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

2 Initiation

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

(IFC 405.8, 2021)

The following violation was observed at the time of inspection:

The facility did not initiate the fire alarm during their swing shift fire drill for January.

*Fire drills shall be initiated by the activation of the fire alarm system. When drills are conducted between 9 p.m. and 6 a.m. a coded announcement may be used instead of audible alarms.

3 Abatement of Electrical Hazards

Abatement of unsafe conditions and electrical hazards. Conditions that constitute an electrical shock or fire hazard shall be abated..

(IFC 603.2 2021)

The following violation was observed at the time of inspection:

The emergency light cord in the kitchen has wires showing.

4 Installation

Relocatable power tap cords shall not extend through walls, ceilings, floors, under doors or floor coverings, or be subject to environmental or physical damage.

(IFC 603.5.3, 2021)

The following violation was observed at the time of inspection:

The kitchen has a power strip that has not been properly mounted and is hang by its cord.

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



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Code Requirement	Statement of Violation
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5 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)

The following violation was observed at the time of inspection:

There is an extension cord in the kitchen plugged into two freezer appliances.

6 Listed and Labeled

Only listed and labeled portable, electric space heaters shall be used.

(IFC 603.9.1, 2021)

The following violation was observed at the time of inspection:

The reception desk has an unapproved heater in use.

7 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 violation was observed at the time of inspection:

The facility was unable to provide documentation for their annual and semi annual hood cleaning.

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

8 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 2021)

The following violation was observed at the time of inspection:

The facility was unable to provide documentation for their annual fire door inspection.

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

Fire protection and life safety systems shall be maintained in an operative condition at all times, and shall be replaced or repaired where defective. Nonrequired fire protection and life safety systems and equipment shall be inspected, tested and maintained or removed in accordance with Section 901.8.

(IFC 901.6 2021)

The following violation was observed at the time of inspection:

There is escutcheon ring missing in the hall (east) outside of the med office.

The escutcheon ring in the office by the reception desk is taped to ceiling.

10 Testing and Maintenance

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

(IFC 903.5 2021)

The following violation was observed at the time of inspection:

The facility was unable to provide inspection documentation for the following:

1. Annual sprinkler inspection
2. Quarterly sprinkler inspection
3. 5 year internal pipe testing
4. 5 year FDC (Fire Department Connection) testing
5. 3 year dry system full flow trip test
6. Annual forward flow

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

11 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 violation was observed at the time of inspection:

The facility was unable to provide service reports showing that the kitchen suppression system has been serviced annually and semi-annually in the past 12 months.

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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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 2021)

The following violation was observed at the time of inspection:

The facility was unable to provide record of their annual inspection for their fire alarm system.

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

13 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 violation was observed at the time of inspection:

The facility was unable to provide documentation for their last smoke detector sensitivity test report.

14 Maintenance

Carbon monoxide alarms and carbon monoxide detection systems shall be maintained in accordance with NFPA 72. Carbon monoxide alarms and carbon monoxide detectors that become inoperable or begin producing end-of-life signals shall be replaced.

(IFC 915.6 2021 WAC)

The following violation was observed at the time of inspection:

The facility was unable to provide documentation showing that monthly testing of their CO detectors have been performed in the past 12 months.

15 Means of Egress Illumination

Illumination shall be provided in the means of egress in accordance with Section 1008.2. Under emergency power, means of egress illumination shall comply with Section 1008.3.

(IFC 1008.1 2021)

The following violation was observed at the time of inspection:

The emergency light outside of exit by room 208 did not function properly when tested.



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Code Requirement	Statement of Violation
16 Unlatching The unlatching of any door or leaf for egress shall require not more than one motion in a single linear or rotational direction to release all latching and all locking devices. Exceptions: 1. Places of detention or restraint. 2. Where manually operated bolt locks are permitted by Section 1010.2.5. 3. Doors with automatic flush bolts as permitted by Section 1010.2.4, Item 4. 4. Doors from individual dwelling units and sleeping units of Group R occupancies as permitted by Section 1010.2.4, Item 5. (IFC 1010.2.1 2021)	The following violation was observed at the time of inspection: The exit in the East dining room was tied shut with a rope.

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17 Lock and Latches

Locks and latches shall be permitted to prevent operation of doors where any of the following exists:

1. Places of detention or restraint.
2. In buildings in occupancy Group A having an occupant load of 300 or less, Groups B, F, M, and S, and in places of religious worship, the main door or doors are permitted to be equipped with key-operated locking devices from the egress side provided:
 - 2.1. The locking device is readily distinguishable as locked;
 - 2.2. A readily visible sign is posted on the egress side on or adjacent to the door stating: THIS DOOR TO REMAIN UNLOCKED WHEN BUILDING IS OCCUPIED. The sign shall be in letters 1 inch (25 mm) high on a contrasting background; and
 - 2.3. The use of the key-operated locking device is revocable by the building official for due cause.
3. Where egress doors are used in pairs, approved automatic flush bolts shall be permitted to be used, provided that the door leaf having the automatic flush bolts has no doorknob or surface-mounted hardware.
4. Doors from individual dwelling or sleeping units of Group R occupancies having an occupant load of 10 or less are permitted to be equipped with a night latch, dead bolt, or security chain, provided such devices are openable from the inside without the use of a key or a tool.
5. Fire doors after the minimum elevated temperature has disabled the unlatching mechanism in accordance with listed fire door test procedures.
6. Doors serving roofs not intended to be occupied shall be permitted to be locked preventing entry to the building from the roof.
7. Approved, listed locks without delayed egress shall be permitted in Group I-1 condition 2 assisted living facilities licensed under chapter 388-78A WAC and Group I-1 Condition 2 residential treatment facilities licensed under chapter 246-337 WAC by the state of Washington, provided that:
 - 7.1. The clinical needs of one or more patients require specialized security measures for their safety.
 - 7.2. The doors unlock upon actuation of the automatic sprinkler system or automatic fire detection system.

The following violation was observed at the time of inspection:
The exit gate outside; on the east side has an extra latch on it.



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

Business Name	White River Memory Care	Provider Number	2707
Address	2454 COLE ST ,	Approval Status	Disapproved
City, State, Zip	Enumclaw, WA 98022	Facility Type	Residential Care

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

Code Requirement	Statement of Violation
7.3. The doors unlock upon loss of electrical power controlling the lock or lock mechanism. 7.4. The lock shall be capable of being deactivated by a signal from a switch located in an approved location. 7.5. There is a system, such as a keypad and code, in place that allows visitors, staff persons and appropriate residents to exit. Instructions for exiting shall be posted within six feet of the door. 8. Other than egress courts, where occupants must egress from an exterior space through the building for means of egress, exit access doors shall be permitted to be equipped with an approved locking device where installed and operated in accordance with all of the following: 8.1. The occupant load of the occupied exterior area shall not exceed 300 as determined by IBC Section 1004. 8.2. The maximum occupant load shall be posted where required by Section 1004.9. Such sign shall be permanently affixed inside the building and shall be posted in a conspicuous space near all the exit access doorways. 8.3. A weatherproof telephone or two-way communication system installed in accordance with Sections 1009.8.1 and 1009.8.2 shall be located adjacent to not less than one required exit access door on the exterior side. 8.4. The egress door locking device is readily distinguishable as locked and shall be a key-operated locking device. 8.5. A clear window or glazed door opening, not less than 5 square feet (0.46 m2) sq. ft. in area, shall be provided at each exit access door to determine if there are occupants using the outdoor area. 8.6. A readily visible durable sign shall be posted on the interior side on or adjacent to each locked required exit access door serving the exterior area stating: THIS DOOR TO REMAIN UNLOCKED WHEN THE OUTDOOR AREA IS OCCUPIED. The letters on the sign shall be not less than 1 inch high on a contrasting background. 9. Locking devices are permitted on doors to balconies, decks, or other exterior spaces serving individual dwelling or sleeping units. 10. Locking devices are permitted on doors to balconies,	



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Address	2454 COLE ST ,	Approval Status	Disapproved
City, State, Zip	Enumclaw, WA 98022	Facility Type	Residential Care

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Code Requirement	Statement of Violation
decks, or other exterior spaces of 250 square feet or less, serving a private office space.oor. (IFC 1010.2.4 2021 WAC 51-54A)	

18 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 1031.2 2021)	The following violation was observed at the time of inspection: The exit inside and outside of TV room was blocked by chairs and a wheel chair.
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19 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)	The following violation was observed at the time of inspection: The facility was unable to provide documentation showing that 30-second monthly testing of the emergency lighting has been performed in the last 12 months.
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20 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)	The following violation was observed at the time of inspection: The facility was unable to provide documentation indicating they have conducted an annual 90-minute test of their battery backup lights within the last 12 months.
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21 Inspection Frequency

Fire extinguishers shall be inspected when initially placed in service and thereafter at approximately 30-day intervals. Fire extinguishers shall be inspected, manually or by electronic monitoring, at more frequent intervals when circumstances require. (NFPA Standard 10 Section 6.2.1)	The following violation was observed at the time of inspection: The fire extinguishers throughout the facility only have January monthly sign offs.
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Business Name White River Memory Care
Address 2454 COLE ST,
City, State, Zip Enumclaw, WA 98022

Provider Number 2707
Approval Status Disapproved
Facility Type Residential Care

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

Code Requirement

Statement of Violation

22 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 violation was observed at the time of inspection:

The kitchen door by the mechanical room has a small penetration where the old door handle used to be.

The following doors did not close / latch properly when tested:

1. Kitchen door - by hood
2. Resident room 207 - due to door being taped
3. Exit door by 108 - keypad doesn't work, have to open door from outside.
4. Corridor C, D by room 102



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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	

23 Fire Drills

In all Group I, Group E, and Group R2 Occupancies licensed by the state, at least twelve planned and unannounced fire drills shall be held every year. Drills shall be conducted quarterly on each shift in Group I and Group R2, Occupancies and monthly in Group E Occupancies to familiarize personnel with signals and emergency action required under varied conditions. A detailed written record of all fire drills shall be maintained and available for inspection at all times. When drills are conducted between 9:00 p.m. and 6:00 a.m., a coded announcement may be used instead of audible alarms. Fire drills shall include the transmission of a fire alarm signal and simulation of emergency conditions. The fire alarm monitoring company shall be notified prior to the activation of the fire alarm system for drill purposes and again at the conclusion of the transmission and restoration of the fire alarm system to normal mode. (WAC 212-12-044)	The following violation was observed at the time of inspection: The facility was not able to provide documentation for the completion of twelve planned and unannounced fire drills in the previous 12 months.
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Code Requirement	Statement of Violation
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Next inspection scheduled on or after: 03/08/2025

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

Print Name and Title

Deputy State Fire Marshal Cozetta Christian
2502 112TH E
Tacoma WA 984455104
(360) 584-5796

Signature

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