



LEE'S SUMMIT, MISSOURI FIRE DEPARTMENT LOSS REDUCTION PROGRAM



NOTIFICATIONS/CONTACT INFORMATION SECTION

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☐ CHANGES

BUSINESS NAME	GLASS SHACK OF HAWAII		
ADDRESS	315 SE DOUGLAS ST, LEES SUMMIT, MO 64063		
OWNER/OPERATOR NAME	CML MO HAF LLC:	TELEPHONE	<NO PRIMARY PHONE>
ADDRESS	1010 WALNUT STE 500 KANSAS CITY, MO 64106 Primary: <NO PRIMARY PHONE> Cell: <NO CELL PHONE>		

EMERGENCY CONTACT INFORMATION

NAME	TELEPHONE
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____

LOSS REDUCTION TYPE

<input type="checkbox"/> Occupancy	<input type="checkbox"/> Semi-Annual	<input type="checkbox"/> Annual	<input type="checkbox"/> Life Safety	<input type="checkbox"/> Sprinkler	<input type="checkbox"/> Hazardous Material Permit
<input type="checkbox"/> Complaint	<input type="checkbox"/> Explosive Storage	<input type="checkbox"/> UST	<input type="checkbox"/> Post-Incident	<input type="checkbox"/> Open Burning	<input type="checkbox"/> Other
CLASS: M	Map#: 195G	PFA#:	KNOX BOX:	KNOX LOCATION:	PERMIT # PRCOM20121140

LOSS REDUCTION NARRATIVE

☐ NO CORRECTIONS NOTED

☐ ALL CORRECTIONS COMPLETED

Last Inspection 1st Inspection 6/5/12 2nd Inspection 3rd Inspection 4th Inspection

INSPECTION	INSPECTOR	OUTCOME	DATE
Occupancy Inspection - Fire	Joe Dir	Passed	Tuesday, June 05, 2012
All previous violations have been corrected			
Occupancy Inspection - Fire	Joe Dir	Temporary C of O	Wednesday, May 30, 2012
Corrective Action Required:			
1 (1) replace all painted sprinkler heads (6) (2) remove extension cords going through walls and ceilings, reroute to outlets or install additional outlets to needed areas			
DATE OF REPORT	INSPECTOR	PREVENTION FOLLOW-UP REQUIRED?	RESPONSIBLE SIGNATURE

June 05, 2012

Joe Dir

☐ Yes

☒ No