



LEE'S SUMMIT, MISSOURI FIRE DEPARTMENT LOSS REDUCTION PROGRAM



NOTIFICATIONS/CONTACT INFORMATION SECTION

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☐ CHANGES

BUSINESS NAME	ACHIEVE CLINIC		
ADDRESS	1121 NE RICE RD, LEES SUMMIT, MO 64086		
OWNER/OPERATOR NAME	CMG CONSTRUCTION:	TELEPHONE	(913) 384-2284
ADDRESS	8336 NIEMAN RD LENEXA, KS 66214 Primary: (913) 384-2284 Cell: (913) 207-1730 Bobby		

EMERGENCY CONTACT INFORMATION

NAME	TELEPHONE
1.	
2.	
3.	
4.	

LOSS REDUCTION TYPE

<input checked="" 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: B	Map#: 195D	PFA#:	KNOX BOX:	KNOX LOCATION:	PERMIT # prcom20120798

LOSS REDUCTION NARRATIVE

☐ NO VIOLATIONS NOTED

☐ ALL VIOLATIONS RESOLVED

Last Inspection

1st Inspection 6/20/12

2nd Inspection

3rd Inspection

4th Inspection

INSPECTION	INSPECTOR	OUTCOME	DATE
Occupancy Inspection - Fire	Joe Dir	Temporary C of O	Wednesday, June 20, 2012
Corrective Action Required:			
1 sprinkler system for complex is due for annual inspection - last was 6/13/12 (Jayhawk) remove slide latch bolt locks from rear exir door remove the wording "this door block from the exterior of the rear door and post the numeric address of 1121			
DATE OF REPORT	INSPECTOR	PREVENTION FOLLOW-UP REQUIRED?	RESPONSIBLE SIGNATURE
June 20, 2012	Joe Dir	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	