



LEE'S SUMMIT, MISSOURI FIRE DEPARTMENT LOSS REDUCTION PROGRAM



NOTIFICATIONS/CONTACT INFORMATION SECTION

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☐ CHANGES

BUSINESS NAME	PROGRESSIVE INSURANCE		
ADDRESS	400 SW LONGVIEW BLVD, Unit:280, LEES SUMMIT, MO 64081		
OWNER/OPERATOR NAME	A L HUBER INC:	TELEPHONE	(913) 341-4880
ADDRESS	10770 EL MONTE OVERLAND PARK, KS 66211 Primary: (913) 341-4880 Cell: <NO CELL PHONE> Scott 8169187431		

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#: 194E	PFA#:	KNOX BOX:	KNOX LOCATION:	PERMIT # prcom20122337

LOSS REDUCTION NARRATIVE

☐ NO VIOLATIONS NOTED

☐ ALL VIOLATIONS RESOLVED

Last Inspection

1st Inspection 12/7/12

2nd Inspection

3rd Inspection

4th Inspection

INSPECTION	INSPECTOR	OUTCOME	DATE
Alarm Test	Joe Dir	Not Required	Friday, December 07, 2012
Occupancy Inspection - Fire	Joe Dir	Passed	Friday, December 07, 2012
Corrective Action Required: 1 suite was built out as a white box finish, no dividers , furniture, fixtures, or other finishes were in place as per the plans as per plans			
Sprinkler - Hydrostatic Test	Joe Dir	Not Required	Friday, December 07, 2012
Sprinkler - Flow Test	Joe Dir	Not Required	Friday, December 07, 2012

DATE OF REPORT December 07, 2012	INSPECTOR Joe Dir	PREVENTION FOLLOW-UP REQUIRED? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	RESPONSIBLE SIGNATURE
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