



LEE'S SUMMIT, MISSOURI FIRE DEPARTMENT LOSS REDUCTION PROGRAM



NOTIFICATIONS/CONTACT INFORMATION SECTION

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☐ CHANGES

BUSINESS NAME	ROCKHILL ORTHOPAEDICS		
ADDRESS	120 NE SAINT LUKES BLVD, Unit:200, LEES SUMMIT, MO 64086		
OWNER/OPERATOR NAME	MCCOWN GORDON CONSTRUCTION:	TELEPHONE	(816) 960-1111
ADDRESS	422 ADMIRAL BLVD SUITE 100 KANSAS CITY, MO 64106--1560 Primary: (816) 960-1111 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: B	Map#: 175X	PFA#:	KNOX BOX:	KNOX LOCATION:	PERMIT #

LOSS REDUCTION NARRATIVE

☐ NO VIOLATIONS NOTED

☐ ALL VIOLATIONS RESOLVED

Last Inspection

1st Inspection

2nd Inspection

3rd Inspection

4th Inspection

INSPECTION	INSPECTOR	OUTCOME	DATE
Occupancy Inspection - Fire	Joe Dir	Temporary C of O	Tuesday, November 27, 2012
Corrective Action Required: 1 -extend sprinkler coverage into the transitional areas: Exam 2E131, 2E64 -addressing off the corridors			
Alarm Test	Joe Dir	Passed	Monday, November 26, 2012
DATE OF REPORT	INSPECTOR	PREVENTION FOLLOW-UP REQUIRED?	RESPONSIBLE SIGNATURE
November 27, 2012	Joe Dir	<input type="checkbox"/> Yes <input type="checkbox"/> No	