



LEE'S SUMMIT, MISSOURI FIRE DEPARTMENT LOSS REDUCTION PROGRAM

NOTIFICATIONS/CONTACT INFORMATION SECTION

PAGE 1

☐ CHANGES										
BUSINESS NAME	USINESS NAME QUICK TRIP DIESEL PUMP ADDITION									
ADDRESS	ss 1001 SW BLUE PKWY, LEES SUMMIT, MO 64063									
OWNER/OPERATO	ER/OPERATOR NAME DOUBLE CHECK COMPANY:					TELEPHONE <no phone="" primary=""></no>				
ADDRESS	4000 RAYTOWN RD. KANSAS CITY, MO 64129 Primary: <no phone="" primary=""> Cell: <no cell="" phone=""></no></no>								THONE	
			EMERGENC	Y CONT	ACT INFOR	RMATION				
NAME	AME TELEPHONE									
1.										
2.										
3.										
4.										
			LOS	S REDU	CTION TYP	E				
☐ Occupancy ☐ Semi-Annual			☐ Annual	Annual Life Safety		☐ Spri	Sprinkler		Hazardous Material Permit	
☐ Complaint ☐ Explosive Storage			☐ UST	☐ Post-Incident		□ Оре	n Burning		Other	
		Map#: PFA#: 95E		KNOX BOX:		KNOX L	KNOX LOCATION:		PERMIT#	
	·		LOSS R	EDUCTI	ON NARRA	TIVE				
☐ NO VIOLATIONS NOTED ☐ ALL VIOLATIONS RESOLVED										
Last Inspection	1st Ins	pection	2nd	Inspection		3rd Inspecti	on		4th Inspection	
INSPECTION		INSP	ECTOR		OUTCOM	E	DATE			
DATE OF REPORT		INSPECTOR			PREVENTION FOLLOW-UP REQUIRED?			RESPONSIBLE SIGNATURE		
July 13 2012		Joe Dir			Π Vas Π No					