

FIRE DEPARTMENT

NOTIFICATIONS/CONTACT INFORMATION SECTION

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□ CHANGES

BUSINESS NAME	SAINT LUKES EAST RADIATION ONCOLOGY/UROLOGY				
ADDRESS	100 NE SAINT LUKES BLVD, LEES SUMMIT, MO 64086110 NE SAINT LUKES BLVD, Unit:120, LEES SUMMIT, MO 64086				
OWNER/OPERATOR NAME	JE DUNN CONSTRUCTION:	TELEPHONE	(816) 474-8600		
ADDRESS	1001 LOCUST KANSAS CITY, MO 64106 Primary: (816) 474-8600 Cell: <no cell="" phone=""></no>				

EMERGENCY CONTACT INFORMATION

NAME	TELEPHONE
1.	
2.	
3.	
4.	

LOSS REDUCTION TYPE

					– Hazardous Material
🖾 Occupancy 🔲 🤅	Semi-Annual	Annual	Life Safety	Sprinkler	Permit
Complaint	Explosive Storage	🔲 UST	Post-Incident	Open Burning	Other
CLASS: I-2	Map#: 175X	PFA#:	KNOX BOX:	KNOX LOCATION:	PERMIT # prcom20130027
		LOSS RE	DUCTION NARRA	TIVE	
□ NO VIOLATIONS NOTED □ ALL VIOLATIONS RESOLVED					
Last Inspection	1st Inspection	2nd I	nspection	3rd Inspection	4th Inspection
INSPECTION	INSF	ECTOR	OUTCOM		
Alarm Test	Joe	Dir	Passed	Thursday	r, August 29, 2013
- mag hold - on the si	eaders need to dr	to drop off on om the facp - I	alarm activation, co both horns and strok	rs, stairways, passago me fully closed bes need to terminate	
Sprinkler - Hydrosta	atic Test Joe	Dir	Passed	Thursday	v, August 15, 2013

Sprinkler	-	Flow	Test

Joe Dir

Passed

Thursday, August 15, 2013

DATE OF REPORT	INSPECTOR	PREVENTION FOLLOW-UP REQUIRED?	RESPONSIBLE SIGNATURE
August 29, 2013	Joe Dir	□ Yes □ No	