

FIRE DEPARTMENT

NOTIFICATIONS/CONTACT INFORMATION SECTION

□ CHANGES

| BUSINESS NAME | SUBTECHNOLOGY | | | |
|---|---|--|----------------|--|
| ADDRESS | 2301 NE INDEPENDENCE AVE, LEES SUMMIT, MO 64064 | | | |
| OWNER/OPERATOR NAME HGK CONSTRUCTION MANAGEMENT: TELEPH | | | (816) 356-7022 | |
| ADDRESS | 6532 BLUE RIDGE CUT-OFF RAYTOWN, MO 64133 Primary: (816) 356-7022 Cell: (816) 918-7645 | | | |

EMERGENCY CONTACT INFORMATION

| NAME | TELEPHONE |
|------|-----------|
| 1. | |
| 2. | |
| 3. | |
| 4. | |

LOSS REDUCTION TYPE

| 🗵 Occupancy 🗖 Se | mi-Annual | Annual | Life Safety | Sprinkler | Hazardous Material Permit |
|------------------|-----------------|--------|---------------|----------------|----------------------------------|
| 🔲 Complaint 🔲 Ex | plosive Storage | UST | Post-Incident | Open Burning | Other |
| CLASS: | Map#: | PFA#: | KNOX BOX: | KNOX LOCATION: | PERMIT # |
| MIX | 175V | | | | prcom20132126 |

LOSS REDUCTION NARRATIVE

| \Box NO VIOLATIONS NOTED | | | □ ALL VIOLATIONS RESOLVED | | | |
|---|-----------------------|--------------------------------------|---------------------------|-------------------------|--|--|
| Last Inspection | 1st Inspection | 2nd Inspection | 3rd Inspectio | on 4th Inspection | | |
| | | | | | | |
| INSPECTION | INSPECTO | | OUTCOME | DATE | | |
| Occupancy Inspection | - Fire Joe Dir | | Temporary C of O | Tuesday, March 25, 2014 | | |
| | showing sprinkler t | amper alarm oom to say "sprinkler | room" | | | |
| Sprinkler - Hydrostatic | Test Joe Dir | | Not Required | Friday, March 21, 2014 | | |
| Alarm Test Corrective Action Require | Joe Dir ed: | | Passed | Friday, March 21, 2014 | | |
| 1 - program outs | side horn/strobe to a | activate on water flow | N only | | | |

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| DATE OF REPORT | INSPECTOR | PREVENTION FOLLOW-UP REQUIRED? | RESPONSIBLE SIGNATURE |
|----------------|-----------|-----------------------------------|-----------------------|
| March 25, 2014 | Joe Dir | ⊠Yes □ No | |