

FIRE DEPARTMENT

NOTIFICATIONS/CONTACT INFORMATION SECTION

PAGE 1								
☐ CHANGES								
BUSINESS NAME	HY-VEE #2 REM	ODEL						
ADDRESS	310 SW WAR	D RD, LEES S	SUMMIT,	MO 64081				
OWNER/OPERATOR NAME	HYVEE CON	STRUCTION L	_C:			TELEPHONI	Ε ((515) 645-2300
ADDRESS	5605 NE 22N DES MOINES Primary: (515 Cell: <no ce<="" td=""><td>S , IA 50313 6) 645-2300</td><td></td><td></td><td></td><td></td><td></td><td></td></no>	S , IA 50313 6) 645-2300						
		EMERGENCY	CONTA	CT INFOR	MATI	ON		
NAME				Т	ELEPI	HONE		
1								
2.								
3.								
4.								
		LOSS	REDUC1	ION TYPE	:			
☐ Occupancy ☐ Ser	ni-Annual	☐ Annual	☐ Life S	afety		Sprinkler		Hazardous Material Permit
☐ Complaint ☐ Exp	losive Storage	☐ UST	☐ Post-l	ncident		Open Burning		Other
CLASS: M	Мар#:	PFA#:	KNOX BC	X:	KN	IOX LOCATION:		PERMIT#
		LOSS RE	DUCTIO	N NARRAT	IVE			
☐ NO VIOLATIONS N	IOTED		[☐ ALL VIC	LAT	IONS RESOLV	ED	
Last Inspection	1st Inspection	2nd In	spection	:	3rd Ins	pection	•	4th Inspection
INSPECTION	INSP	ECTOR		OUTCOME		DATE		
Alarm Test	Michael Weissenbach		ach	Partial		Tuesday,	Tuesday, March 09, 2	
Sprinkler - Hydrostatio	: Test Mich	ael Weissenba	ach	Partial		Tuesday,	Ма	rch 09, 2021
Sprinkler - Flow Test	Mich	ael Weissenba	ach	Not Reau	iired	Tuesday.	Feb	oruary 02. 2021

Occupancy Inspection - Fire Occupancy Inspection - Fire		Partial Partial		ay, March 09, 2021 day, March 18, 2021
DATE OF REPORT	INSPECTOR	PREVENTION REQUIRED?	N FOLLOW-UP	RESPONSIBLE SIGNATURE
March 18, 2021	Michael Weissenbach	☐ Yes	□ No	