

FIRE DEPARTMENT

DAOE 4			NOTIFIC	ATIONS/CO	NIACI INFORMA	HON SECTION
PAGE 1						
☐ CHANGES						
BUSINESS NAME	FIRESTONE					
ADDRESS	3561 SW MAI SUMMIT, MO		t:IR, LEES	S SUMMIT, N	//O 640823561 SW	MARKET ST, LEES
OWNER/OPERATOR NAME	Westport Group, Inc.:			TELEPHONE (512) 336-8111		
ADDRESS	1008 S Rock Street Georgetown, TX 78626 Primary: (512) 336-8111 Cell: <no cell="" phone=""></no>					
		EMERGENCY	Y CONTA	CT INFORM	ATION	
NAME 1.				TE	LEPHONE	
2.						
3.						
4.						
		LOSS	REDUC	TION TYPE		
☐ Occupancy ☐ Sei	mi-Annual	☐ Annual	☐ Life S	Safety	Sprinkler	Hazardous Material Permit
· ·	olosive Storage	UST		Incident	Open Burning	Other
CLASS: S-1	Мар#:	PFA#:	KNOX BO	OX:	KNOX LOCATION:	PERMIT #
<u>, </u>		LOSS RE	DUCTIO	N NARRATI\	/E	1
☐ NO VIOLATIONS I	NOTED				ATIONS RESOLVE	ED.
Last Inspection	1st Inspection	2nd I	nspection		d Inspection	4th Inspection
INSPECTION	INED	ECTOR		OUTCOME	DATE	
Alarm Test	INSPECTOR Michael Weissen		OUTCOME ach Passed		Tuesday, March 02, 2021	
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Sprinkler - Hydrostati	c Test Mich	ael Weissenb	ach	Passed	Monday, J	January 04, 2021
Sprinkler - Flow Test Michae		ıael Weissenb	ach	Passed	Tuesday.	March 02, 2021

Occupancy Inspection - Fire	Michael Weissenbach	Temporary C of O	Thursday, March 04, 2021
Occupancy Inspection - Fire	Michael Weissenbach	Passed	Wednesday, March 31, 2021
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DATE OF REPORT	INSPECTOR	PREVENTION FOLLOW-UP REQUIRED?	RESPONSIBLE SIGNATURE
March 31, 2021	Michael Weissenbach	☐ Yes ☐ No	