

FIRE DEPARTMENT

NOTIFICATIONS/CONTACT INFORMATION SECTION

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BUSINESS NAME	LSR7 - LSHS - 2020 ATHLETIC COMPLEX IMPROVEMENTS		
ADDRESS	400 SE BLUE PKWY, LEES SUMMIT, MO 64063		
OWNER/OPERATOR NAME	LEES SUMMIT SCHOOL DIST R 7:	TELEPHONE	<no primary<br="">PHONE></no>
ADDRESS	600 MILLER LEES SUMMIT, MO 640634241 Primary: <no phone="" primary=""> Cell: <no cell="" phone=""></no></no>		-

EMERGENCY CONTACT INFORMATION

NAME	TELEPHONE
1.	
2.	
3.	
4.	

LOSS REDUCTION TYPE

Occupancy	Semi-Annual	🗖 Annual	Life Safety	Sprinkler		Hazardous Material Permit
Complaint	Explosive Sto	rage 🔲 UST	Post-Incident	🔲 Open Bu	ning 🔲	
CLASS: A-5	Map#:	PFA#:	KNOX BOX:	KNOX LOCAT	ON:	PERMIT #
LOSS REDUCTION NARRATIVE						
□ NO VIOLATIONS NOTED □ ALL VIOLATIONS RESOLVED						
Last Inspection	1st Inspection	on 2nd	Inspection	3rd Inspection		4th Inspection
INSPECTION		INSPECTOR	OUTCOM	E DAT	E	
INSPECTION Occupancy Inspec	tion - Fire	INSPECTOR Craig Hill				just 23, 2021
Occupancy Inspec	equired:	Craig Hill		ary C of O Mor	nday, Aug	just 23, 2021

DATE OF REPORT	INSPECTOR	PREVENTION FOLLOW-UP REQUIRED?	RESPONSIBLE SIGNATURE
September 21, 2021	Michael Weissenbach	□ Yes □ No	