



MISSOURI DEPARTMENT OF PUBLIC SAFETY
DIVISION OF FIRE SAFETY (DFS)
LONG TERM CARE FACILITY FIRE INSPECTION REPORT

INTERNAL USE ONLY - EVENT ID											
FACILITY NAME Princeton Senior Living, The					<input type="checkbox"/> RCF <input type="checkbox"/> RCF* <input type="checkbox"/> ALF <input checked="" type="checkbox"/> ALF** <input type="checkbox"/> ICF <input type="checkbox"/> SNF						
ADMINISTRATOR/MANAGER Michael Mayberry				CITY Lee's Summit			COUNTY Jackson				
DFS FIRE INSPECTION		FACILITY NUMBER 32762N		CAPACITY 68		RELATED EXCEPTIONS / WAIVERS <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO					
CENSUS 2		EXIT DATE 4/15/2022		REVISIT #1				REVISIT #2			
VIOLATION OF REGULATIONS		CENSUS		EXIT DATE		CENSUS		EXIT DATE			
YES	NO		CORRECTED	NOT CORRECTED	NO OF CLASS I II III	NEW DEFICIENCY	CORRECTED	NOT CORRECTED	NO OF CLASS I II III	NEW DEFICIENCY	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	CONSTRUCTION									
<input type="checkbox"/>	<input checked="" type="checkbox"/>	FIRE SAFETY									
<input type="checkbox"/>	<input checked="" type="checkbox"/>	PHYSICAL PLANT									
FACILITY REPRESENTATIVE SIGNATURE / TITLE 			FACILITY REPRESENTATIVE SIGNATURE / TITLE Plant Operations Director				FACILITY REPRESENTATIVE SIGNATURE / TITLE				
E-MAIL ADDRESS kpeerson@theprincetonliving.com			E-MAIL ADDRESS				E-MAIL ADDRESS				
DATE 4-15-22			DATE				DATE				
INSPECTOR 			INSPECTOR				INSPECTOR				
INSPECTOR 4-15-22			INSPECTOR				INSPECTOR				
DATE			DATE				DATE				
LIST COMPLAINT NUMBERS INVESTIGATED AND COMMENTS.											