

FIRE DEPARTMENT

PAGE 1		NOTIFICATIONS/CONTACT INFORMATION SECTION							
☐ CHANGES									
BUSINESS NAME	ROOTS SEASON	IAL CUISINE			_				
		ROOTS SEASONAL CUISINE							
ADDRESS		940 NW PRYOR RD, Unit:M, LEES SUMMIT, MO 64081							
OWNER/OPERATOR NA		VALENCIA CONST LLC:			TELEPHONE (816) 537-7482				
ADDRESS	LEES SUMM Primary: (816	4729 SW GULL POINT DR LEES SUMMIT, MO 64082 Primary: (816) 537-7482 Cell: (816) 536-2865							
EMERGENCY CONTACT INFORMATION									
NAME TELEPHONE									
1.									
2.									
3.									
4.									
		LOS	S REDUCT	ION TYPE					
☐ Occupancy ☐	Semi-Annual	☐ Annual	☐ Life Sa	afety	Sprinkler	□ Haza	ardous Material nit		
☐ Complaint ☐	Explosive Storage	UST	☐ Post-I	ncident	☐ Open Burning	Othe	er		
CLASS:	Мар#:	PFA#:	KNOX BO	X:	KNOX LOCATION:	PERI	MIT#		
A-2									
		LOSS R	EDUCTION	N NARRATI	VE				
☐ NO VIOLATIONS NOTED ☐ ALL VIOLATIONS RESOLVED									
Last Inspection	1st Inspection	2nd	Inspection		rd Inspection		spection		
INSPECTION	INSPE	ECTOR		OUTCOME	DATE				
Alarm Test	Craig			Passed	Tuesday,	April 26,	2022		
	•	,			•	•			
Alternate Protectio	Hill Pa		Passed	Tuesday, April 26, 2022		2022			
Inspection									

Sprinkler - Hydrostatic Test	Michael Weissenbach	Not Required	Monday, December 27, 2021
Sprinkler - Flow Test	Michael Weissenbach	Not Required	Monday, December 27, 2021
DATE OF REPORT	INSPECTOR	PREVENTION FOLLOW-UI REQUIRED?	RESPONSIBLE SIGNATURE
April 26, 2022	Craig Hill	☐ Yes ☐ No	