

FIRE DEPARTMENT

DAGE 4		NOTIFICATIONS/CONTACT INFORMATION SECTION					
PAGE 1							
☐ CHANGES							
BUSINESS NAME	ROOTS SEASON	NAL CUISINE					
ADDRESS	940 NW PRY	940 NW PRYOR RD, Unit:M, LEES SUMMIT, MO 64081					
OWNER/OPERATOR	NAME VALENCIA C	VALENCIA CONST LLC:			TELEPHONI	≡ (816	6) 537-7482
ADDRESS	4729 SW GU LEES SUMM Primary: (816 Cell: (816) 53	IT, MO 6408) 537-7482					
		EMERGENO	CY CONTAC	T INFORM	ATION		
NAME TELEPHONE							
1							
2							
3.							
4.							
		LOS	S REDUCTION	ON TYPE			
Occupancy] Semi-Annual	☐ Annual	☐ Life Sat	fety	Sprinkler		zardous Material rmit
☐ Complaint ☐	Explosive Storage	UST	☐ Post-In	cident	☐ Open Burning	☐ Otl	her
CLASS:	Мар#:	PFA#:	KNOX BOX	:	KNOX LOCATION:	PE	RMIT#
A-2					-		
		LOSS	REDUCTION	NAKKAII	/E		
☐ NO VIOLATIO					ATIONS RESOLV		
Last Inspection	1st Inspection	2nd	d Inspection	3rd	d Inspection	4th I	nspection
INSPECTION		ECTOR		OUTCOME	DATE		
Alarm Test	Craiç	g Hill		Passed	Tuesday,	April 20	6, 2022
Alternate Protect Inspection	ion Systems Craiç	g Hill		Passed	Tuesday,	April 20	6, 2022

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	