

## FIRE DEPARTMENT

## NOTIFICATIONS/CONTACT INFORMATION SECTION

PAGE 1									
☐ CHANGES									
BUSINESS NAME	LIBATIONS								
ADDRESS	25 SE 3RD S	T, LEES SUM	MIT, MO 6	4063					
OWNER/OPERATOR NAME	brad@rivercitymidwest.com: TELEPHONE								
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ADDRESS	Primary: Cell: <no ce<="" td=""><td>ELL PHONE&gt;</td><td></td><td></td><td></td><td></td><td></td><td></td></no>	ELL PHONE>							
		EMERGENC	Y CONTAC	T INFORI	MATION	I			
NAME	TELEPHONE								
1									
2.									
3.									
4.									
		LOSS	S REDUCT	ION TYPE					
☐ Occupancy ☐ Sen	ni-Annual	☐ Annual	☐ Life Sa	afety	☐ Sp	orinkler		Hazardous Material Permit	
☐ Complaint ☐ Exp	losive Storage	UST	Post-li	ncident	☐ Op	en Burning		Other	
CLASS: A-2	Мар#:	PFA#:	KNOX BO	X:	KNOX	LOCATION:		PERMIT#	
		LOSS R	EDUCTION	NARRAT	IVE				
$\square$ NO VIOLATIONS NOTED $\square$ ALL VIOLATIONS RESOLVED									
Last Inspection	1st Inspection	2nd	Inspection	;	Brd Inspec	tion	•	4th Inspection	
INSPECTION	INSP	ECTOR		OUTCOME		DATE			
Alarm Test	Craig Hill		Not Required		ired	Thursday, April 28, 2022			
Sprinkler - Hydrostatio	: <b>Test</b> Crai	g Hill		Not Requ	ired	Friday, A	oril 1	15, 2022	
Sprinkler - Flow Test Cra		raig Hill		Not Required		Friday, A	Fridav. April 15. 2022		

Occupancy Inspection - Fire Corrective Action Required: 1 Post occupant load Emergency and exi	-	Failed	Thursday, April 28, 2022
Occupancy Inspection - Fire	e Ben Hicks	Passed	Friday, April 29, 2022
DATE OF REPORT	INSPECTOR	PREVENTION FOLLOW-U REQUIRED?	RESPONSIBLE SIGNATURE
April 29, 2022	Ben Hicks	□ Yes □⊠ No	