



LEE'S SUMMIT, MISSOURI FIRE DEPARTMENT LOSS REDUCTION PROGRAM



NOTIFICATIONS/CONTACT INFORMATION SECTION

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☐ CHANGES

BUSINESS NAME	Liberty Mutual		
ADDRESS	3340 NE RALPH POWELL RD, Unit:A, LEES SUMMIT, MO 64064		
OWNER/OPERATOR NAME	HOFFMAN CORTES CONTRACTING COMPANY:	TELEPHONE	<NO PRIMARY PHONE>
ADDRESS	1600 BALTIMORE, STE 102 KANSAS CITY, MO 64108 Primary: <NO PRIMARY PHONE> Cell: <NO CELL PHONE>		

EMERGENCY CONTACT INFORMATION

NAME	TELEPHONE
1.	
2. REQUESTED	
3.	
4.	

LOSS REDUCTION TYPE

<input checked="" type="checkbox"/> Occupancy	<input type="checkbox"/> Semi-Annual	<input type="checkbox"/> Annual	<input type="checkbox"/> Life Safety	<input type="checkbox"/> Sprinkler	<input type="checkbox"/> Hazardous Material Permit
<input type="checkbox"/> Complaint	<input type="checkbox"/> Explosive Storage	<input type="checkbox"/> UST	<input type="checkbox"/> Post-Incident	<input type="checkbox"/> Open Burning	<input type="checkbox"/> Other
CLASS: B	Map#: 175M	PFA#:	KNOX BOX:	KNOX LOCATION:	PERMIT # PRCOM20100207

LOSS REDUCTION NARRATIVE

☐ NO CORRECTIONS NOTED

☐ ALL CORRECTIONS COMPLETED

Last Inspection 1st Inspection 2/17/11 2nd Inspection 3rd Inspection 4th Inspection

INSPECTION	INSPECTOR	OUTCOME	DATE
Alarm Test	Joe Dir	Passed	Thursday, February 17, 2011
all notification and activation devices operated as designed at time of test			
Occupancy Inspection - Fire	Joe Dir	Passed	Thursday, February 17, 2011
OK to occupy once cleared through codes administration			
DATE OF REPORT	INSPECTOR	PREVENTION FOLLOW-UP REQUIRED?	RESPONSIBLE SIGNATURE
February 17, 2011	Joe Dir	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	