



LEE'S SUMMIT MISSOURI



FIRE DEPARTMENT

NOTIFICATIONS/CONTACT INFORMATION SECTION

PAGE 1

☐ CHANGES

BUSINESS NAME	LEES SUMMIT MEDICAL CENTER - MOB #2310 Spec		
ADDRESS	1980 SE BLUE PKWY, Unit:2310, LEES SUMMIT, MO 64063		
OWNER/OPERATOR NAME	BGS CONSTRUCTION:	TELEPHONE	(816) 566-0351
ADDRESS	34607 E COLBERN RD LONE JACK, MO 64070 Primary: (816) 566-0351 Cell: (816) 985-6156		

EMERGENCY CONTACT INFORMATION

NAME	TELEPHONE
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____

LOSS REDUCTION TYPE

<input 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#:	PFA#:	KNOX BOX:	KNOX LOCATION:	PERMIT #

LOSS REDUCTION NARRATIVE

☐ NO VIOLATIONS NOTED

☐ ALL VIOLATIONS RESOLVED

Last Inspection

1st Inspection

2nd Inspection

3rd Inspection

4th Inspection

INSPECTION	INSPECTOR	OUTCOME	DATE
Alarm Test	Craig Hill	Passed	Friday, September 09, 2022
Sprinkler - Hydrostatic Test	Craig Hill	Not Required	Friday, September 09, 2022
Sprinkler - Flow Test	Craig Hill	Not Required	Friday, September 09, 2022

Occupancy Inspection - Fire Craig Hill

Temporary C of O Friday, September 09, 2022

Corrective Action Required:

1 Emergency lights did not operate properly. Okay for TCO with approval from codes.

DATE OF REPORT	INSPECTOR	PREVENTION FOLLOW-UP REQUIRED?	RESPONSIBLE SIGNATURE
September 09, 2022	Craig Hill	<input type="checkbox"/> Yes <input type="checkbox"/> No	