



LEE'S SUMMIT, MISSOURI FIRE DEPARTMENT LOSS REDUCTION PROGRAM



NOTIFICATIONS/CONTACT INFORMATION SECTION

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☐ CHANGES

BUSINESS NAME	ORKIN		
ADDRESS	2810 NE INDEPENDENCE AVE, LEES SUMMIT, MO 64064		
OWNER/OPERATOR NAME	CAPITAL CONSTRUCTION SERVICES LLC:	TELEPHONE	(816) 875-0018
ADDRESS	2642 NE HAGAN RD		
	LEES SUMMIT, MO 64064		
	Primary: (816) 875-0018		
	Cell: (816) 918-2665 DOUG LISTER		

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#: 175R	PFA#:	KNOX BOX:	KNOX LOCATION:	PERMIT # PRCOM20110540

LOSS REDUCTION NARRATIVE

☐ NO CORRECTIONS NOTED

☐ ALL CORRECTIONS COMPLETED

Last Inspection

1st Inspection 6/10/11

2nd Inspection

3rd Inspection

4th Inspection

INSPECTION	INSPECTOR	OUTCOME	DATE
Alarm Test	Joe Dir	Passed	Friday, June 10, 2011
Sprinkler - Hydrostatic Test	Joe Dir	Not Required	Wednesday, June 08, 2011
Sprinkler - Flow Test	Joe Dir	Not Required	Wednesday, June 08, 2011
Occupancy Inspection - Fire	Joe Dir	Passed	Friday, June 10, 2011
Corrective Action Required:			
1 need to post a NFPA 704 placard with the MSDS ratings on the rear door by the loading dock area.			

DATE OF REPORT	INSPECTOR	PREVENTION FOLLOW-UP REQUIRED?	RESPONSIBLE SIGNATURE
June 10, 2011	Joe Dir	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	