

## FIRE DEPARTMENT

## NOTIFICATIONS/CONTACT INFORMATION SECTION

PAGE 1			NOTH IOATIONS	CONTACT IN CINIA	0	N OLOTION	
☐ CHANGES							
	001104050110	LIONAE OA DE					
BUSINESS NAME		COURAGEOUS HOME CARE					
ADDRESS	300 SW NOEL ST, LEES SUMMIT, MO 64063						
OWNER/OPERATOR NAME	MJ BUILDER	S LLC:		TELEPHON	E (	(816) 359-7449	
ADDRESS	P O BOX 300184 KANSAS CITY, MO 64130 Primary: (816) 359-7449 Cell: <no cell="" phone=""></no>						
		EMERGENC	Y CONTACT INFOR	RMATION			
NAME				TELEPHONE			
1.							
2.							
3.							
4.							
		LOS	S REDUCTION TYP	PE			
☐ Occupancy ☐ Se	mi-Annual	☐ Annual	☐ Life Safety	Sprinkler		Hazardous Material Permit	
☐ Complaint ☐ Ex	plosive Storage	□ UST	☐ Post-Incident	☐ Open Burning		Other	
CLASS:	Мар#:	PFA#:	KNOX BOX:	KNOX LOCATION:		PERMIT #	
В							
		LOSS R	EDUCTION NARRA	TIVE			
☐ NO VIOLATIONS NOTED ☐ ALL VIOLATIONS RESOLVED							
Last Inspection	1st Inspection	2nd	Inspection	3rd Inspection		4th Inspection	
INSPECTION	INSP	ECTOR	OUTCOM	IE DATE			
Occupancy Inspection - Fire Craig Hill		g Hill	Failed Friday,		January 13, 2023		
Corrective Action Requi 1 Exit signs ar Hang fire ex Address doc	nd emergency lig tinguisher.	hts need to b	e installed as printed	d on the plans.			

Occupancy Inspection - Fire	e Craig Hill	Passed	Friday, January 20, 2023
DATE OF REPORT	INSPECTOR	PREVENTION FOLLOW-U REQUIRED?	RESPONSIBLE SIGNATURE
July 05, 2023	Craig Hill	☐ Yes ☐ No	