



LEE'S SUMMIT, MISSOURI FIRE DEPARTMENT LOSS REDUCTION PROGRAM



NOTIFICATIONS/CONTACT INFORMATION SECTION

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☐ CHANGES

BUSINESS NAME	REJUVENATE		
ADDRESS	400 SW LONGVIEW BLVD, Unit:160, LEES SUMMIT, MO 64081		
OWNER/OPERATOR NAME	HOFFMAN CORTES CONTRACTING COMPANY:	TELEPHONE	(816) 842-6170
	1600 BALTIMORE, STE 102		
ADDRESS	KANSAS CITY, MO 64108		
	Primary: (816) 842-6170		
	Cell: <NO CELL PHONE>		

EMERGENCY CONTACT INFORMATION

NAME	TELEPHONE
1.	
2.	
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#: 194E	PFA#:	KNOX BOX:	KNOX LOCATION:	PERMIT # PRCOM20114294

LOSS REDUCTION NARRATIVE

☐ NO CORRECTIONS NOTED

☐ ALL CORRECTIONS COMPLETED

Last Inspection

1st Inspection 11/10/11

2nd Inspection

3rd Inspection

4th Inspection

INSPECTION	INSPECTOR	OUTCOME	DATE
Alarm Test	Joe Dir	Passed	Thursday, November 10, 2011
Sprinkler - Hydrostatic Test	Joe Dir	Not Required	Thursday, November 10, 2011
Sprinkler - Flow Test	Joe Dir	Not Required	Thursday, November 10, 2011
Occupancy Inspection - Fire	Joe Dir	Temporary C of O	Thursday, November 10, 2011
Corrective Action Required:			
1	(1) install sprinkler head eschution rings as neded throughout		
	(2) cover all open j-boxes in ceiling at the front reception area. light fixtures to be installed later		
	(3) mount fire extinguisher to wall in the rear -mid office area.		

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