



LEE'S SUMMIT, MISSOURI FIRE DEPARTMENT LOSS REDUCTION PROGRAM

NOTIFICATIONS/CONTACT INFORMATION SECTION

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☐ CHANGES								
BUSINESS NAME	KITCHENS							
ADDRESS	910 NW BLUE PKWY, Unit:M, LEES SUMMIT, MO 64086							
OWNER/OPERATOR NAME	CAMM CONSTRUCTION INC:				TELEPH	IONE ((816) 356-6900	
ADDRESS	7216 MAPLE KANSAS CIT Primary: (816 Cell: (816) 56	356-6900	s @ 804-	0990				
	1	EMERGENCY	CONTAC	CT INFORM	ATION			
NAME 1.	TELEPHONE							
2.								
3.								
4.								
		LOSS	REDUC1	ION TYPE				
⊠ o □ con	ai Annual				Cariaklar		Hazardous Material	
	ni-Annual		☐ Life S	•	Sprinkler		Permit	
<u> </u>	losive Storage	UST	-		Open Burni		Other	
	Map#: 195A	PFA#:	KNOX BC	X:	KNOX LOCATION	N:	PERMIT #	
		LOSS RE	DUCTIO	N NARRATI\	/E			
☐ NO CORRECTIONS	SNOTED		г	TALL COR	RECTIONS CO	MPI F	ren	
	1st Inspection 11/16/11 2nd Inspection			3rd Inspection 4th Inspection				
INSPECTION	INSPECTOR			OUTCOME	DATE	DATE		
Alarm Test	Joe Dir			Passed	Thurs	Thursday, November 17, 2011		
Sprinkler - Flow Test	r - Flow Test Joe Dir			Passed	Thurs	Thursday, November 17, 2011		
Occupancy Inspection	- Fire Joe [Dir		Passed	Thurs	day, No	vember 17, 2011	
OK to occupy once clear	ed through code	es administrati	ion.					
Sprinkler - Hydrostatic Test				Not Require	ed Tueso	Tuesday, November 15, 2011		
DATE OF REPORT	INSPECTO)R		REVENTION FO	DLLOW-UP	RESPO	NSIBLE SIGNATURE	

November 17, 2011	Joe Dir	☐ Yes	⊠No	
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