



Friday, October 07, 2011

Temporary C of O Wednesday, October 12, 2011

LEE'S SUMMIT, MISSOURI FIRE DEPARTMENT LOSS REDUCTION PROGRAM

NOTIFICATIONS/CONTACT INFORMATION SECTION

PAGE

	NOTH	ICATIONS/C	CONTACT INFORMA	TION SECTION	PAGE	
☐ CHANGES						
BUSINESS NAME	SAINT LUKES E	AST				
ADDRESS	100 NE SAIN	Γ LUKES BL	VD, LEES SUMMIT, M	1O 64086		
OWNER/OPERATOR NAME	TURNER CC	NSTRUCTIO	ON CO:	TELEPHONE	(816) 283-0555	
ADDRESS	2345 GRANE KANSAS CIT Primary: (816 Cell: (816) 91	Y, MO 6410) 283-0555	RD SUITE 1000 8			
		EMERGENO	CY CONTACT INFORI	MATION		
NAME			Т	ELEPHONE		
1						
2.						
3.						
4.						
		LOS	S REDUCTION TYPE	i.		
♣ Occupancy ☐ Sem	ni-Annual	☐ Annual	☐ Life Safety	☐ Sprinkler [Hazardous Material	
☐ Complaint ☐ Exp	losive Storage	☐ UST	☐ Post-Incident	☐ Open Burning [☐ Other	
	Map#: 175X	PFA#:	KNOX BOX:	KNOX LOCATION:	PERMIT # prcom20110759	
		LOSS R	EDUCTION NARRAT	IVE		
☐ NO CORRECTIONS	S NOTED			RRECTIONS COMPL	ETED	
	1st Inspection10/1	2/11 2nd		3rd Inspection	4th Inspection	
INSPECTION	INSP	ECTOR	OUTCOME	DATE		
Occupancy Inspection - Fire Joe Dir		Dir	Passed		Monday, December 05, 2011	
ALL PENDING ISSUES	WERE CORRE	ECTED: label	ling needed for the ele	ctrical room		
Alarm Test	Joe	Dir	Passed	Tuesday, C	October 11, 2011	
Sprinkler - Hydrostatic	: Test Joe	Dir	Passed	Friday, Oct	ober 07, 2011	

Corrective Action Required:

Occupancy Inspection - Fire

Sprinkler - Flow Test

(1) Coordinate the testing of the emergency lighting and the exit signs with the generator test.

Passed

Joe Dir

Joe Dir

 (2) Cooridnate the duct detection test with the HVAC contractor. (3) program the delayed egress doors to activate on the depression of the panic bar. (4) uncover the smoke dertectors throughout as the construction dust allows (5) provide the medical gas line test summary 						
DATE OF REPORT	INSPECTOR	PREVENTION FOLLOW-UP REQUIRED?	RESPONSIBLE SIGNATURE			
December 05, 2011	Joe Dir	□ Yes ¥No				