



LEE'S SUMMIT, MISSOURI FIRE DEPARTMENT LOSS REDUCTION PROGRAM



NOTIFICATIONS/CONTACT INFORMATION SECTION

PAGE 1

☐ CHANGES

BUSINESS NAME	SALON VIRTUALY		
ADDRESS	622 SW 3RD ST, Unit:G, LEES SUMMIT, MO 64063		
OWNER/OPERATOR NAME	KERRY KIMBLE:	TELEPHONE	<NO PRIMARY PHONE>
ADDRESS	17804 EAST CLIFF DR INDEPENDENCE, MO 64055 Primary: <NO PRIMARY PHONE> Cell: (816) 960-7177		

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#: 195F	PFA#:	KNOX BOX:	KNOX LOCATION:	PERMIT # PRCOM20116035

LOSS REDUCTION NARRATIVE

☐ NO CORRECTIONS NOTED

☐ ALL CORRECTIONS COMPLETED

Last Inspection 1st Inspection 12/21/11 2nd Inspection 3rd Inspection 4th Inspection

INSPECTION	INSPECTOR	OUTCOME	DATE
Occupancy Inspection - Fire	Joe Dir	Passed	Wednesday, December 21, 2011
OK to occupy once cleared through codes administration			
DATE OF REPORT	INSPECTOR	PREVENTION FOLLOW-UP REQUIRED?	RESPONSIBLE SIGNATURE
December 21, 2011	Joe Dir	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	