Washington State Patrol
Fire Protection Bureau
Phone: (360) 596-3900

Business Name	Lakeshore	***Provider Number***	1052
Address	11448 RAINIER AVE S,	***Approval Status***	Approved
City, State, Zip	Seattle, WA 98178	***Facility Type***	Residential Care

On 07/21/2026 the Office of the State Fire Marshal conducted an inspection at your facility.

All violations noted during previous related inspection(s) have been corrected.

Owner or Owner's Representative

Signature

MARIO VALDEZ Facilities Director

Print Name and Title

Deputy State Fire Marshal Cozetta Christian
106 11th AVE SW
Olympia WA 98501
(360) 584-5796

Cozetta

Signature

Right of appeal. Any person may appeal any decision made by the Fire Protection Bureau in accordance with WAC 212-12.

Initials of Authorized Facility Representative: _____

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Business Name	Lakeshore	***Provider Number***	1052
Address	11448 RAINIER AVE S,	***Approval Status***	Disapproved
City, State, Zip	Seattle, WA 98178	***Facility Type***	Residential Care

On 04/01/2026 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement	Statement of Violation

1 Admin Fire & Life Safety Inspection

	This report is the result of an unannounced fire and life safety re-certification survey conducted at The Lakeshore on 4/1/2026 by a DSFM representative of the Washington State Patrol, Fire Protection Bureau to determine compliance with all applicable codes. All inspection reports must be completely filled out from the vendor and verify the report shows no deficiencies. If deficiencies are noted on report, additional documentation will be required to show that deficiencies have been corrected prior to re-inspection. The facility is not in compliance at the time of this inspection.

2 Modified or damaged.

Electrical wiring, devices, equipment and appliances that are modified or damaged, and constitute an electrical shock or fire hazard, shall not be used until repaired or replaced in accordance with this code and NFPA 70. (IFC 603.2.1 2021)	The following deficiencies were cited as a result of this inspection: At time of inspection the following was observed: 1. On the 1st floor, kitchen has a broken receptacle in the prep area.

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Code Requirement	Statement of Violation
3 Working Space and Clearance	
Working space and clearances. Working space around electrical equipment shall be provided in accordance with Section 110.26 of NFPA 70 for electrical equipment rated 1,000 volts or less, and Section 110.32 of NFPA 70 for electrical equipment rated over 1,000 volts. The minimum required working space shall be not less than 30 inches (762 mm) in width, 36 inches (914 mm) in depth and 78 inches (1981 mm) in height in front of electrical service equipment. Where the electrical service equipment is wider than 30 inches (762 mm), the minimum working space shall be not less than the width of the equipment. Storage of materials shall not be located within the designated working space. (IFC 603.4, 2021)	The following deficiencies were cited as a result of this inspection: At time of inspection the following was observed: 1. 1st floor, trash room has a blocked electrical panel. 2. 1st floor kitchen has a blocked electrical panel.
4 Extension Cords	
Extension cords. Extension cords shall not be a substitute for permanent wiring and shall be listed and labeled in accordance with UL 817. Extension cords shall not be affixed to structures, extended through walls, ceilings or floors, or under doors or floor coverings, nor shall such cords be subject to environmental damage or physical impact. Extension cords shall be used only with portable appliances. Extension cords marked for indoor use shall not be used outdoors.. (IFC 603.6 2021)	The following deficiencies were cited as a result of this inspection: At time of inspection the following was observed: 1. On the 2nd floor, community relations office has two extension cords in-use.
5 Ampacity	
The ampacity of the extension cords shall be not less than the rated capacity of the portable appliance supplied by the cord. (IFC 603.6.2 2021)	The following deficiencies were cited as a result of this inspection: At time of inspection the following was observed: 1. On the 2nd floor, community relations room has an appliance plugged into a power strip.

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Code Requirement	Statement of Violation
6 Inspection and Maintenance	
Opening protectives in fire-resistance-rated assemblies shall be inspected and maintained in accordance with NFPA 80. Opening protectives in smoke barriers shall be inspected and maintained in accordance with NFPA 80 and NFPA 105. Openings in smoke partitions shall be inspected and maintained in accordance with NFPA 105. Fire doors and smoke and draft control doors shall not be blocked, obstructed, or otherwise made inoperable. Fusible links shall be replaced promptly whenever fused or damaged. Opening protectives and smoke and draft control doors shall not be modified. (IFC 705.2 2021)	The following deficiencies were cited as a result of this inspection: At the time of inspection, the following documentation was not provided. Documents shall include the following, where applicable: 1. Last tested was 2/2025. 2. Report failed to show residents room doors
7 Door Operation	
Swinging fire doors shall close from the full-open position and latch automatically. (IFC 705.2.4 2021)	The following deficiencies were cited as a result of this inspection: At time of inspection the following was observed: 1. On the 3rd floor, room 313 door would not latch. 2. On the 2nd floor, room 217 door would not latch.
8 Testing and Maintenance	
Sprinkler systems shall be tested and maintained in accordance with Section 901. (IFC 903.5 2021)	The following deficiencies were cited as a result of this inspection: At the time of inspection, the following documentation was not provided. Documents shall include the following, where applicable: 1. Annual forward flow test (NFPA 25 13.7.2.1) 2. On the report from 11/18/2025, it identified deficiencies. The facility will need to show documentation that it has been resolved.

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Code Requirement	Statement of Violation
9 Extinguishing System Service	
Automatic fire-extinguishing systems shall be serviced not less frequently than every six months and after activation of the system. Inspection shall be by qualified individuals, and a certificate of inspection shall be forwarded to the fire code official upon completion. (IFC 904.13.5.2 2021)	The following deficiencies were cited as a result of this inspection: At the time of inspection, the following documentation was not provided. Documents shall include the following, where applicable: 1. Second semi-annual service report, after 5/6/2025
10 Carbon Monoxide Detection - General	
Carbon monoxide detection shall be installed in new buildings in accordance with Sections 915.1.1 through 915.6. Carbon monoxide detection shall be installed in existing buildings in accordance with Chapter 11 of the International Fire Code. (IFC 0915.1 2021 WAC 51-54A)	The following deficiencies were cited as a result of this inspection: At the time of inspection, the following documentation was not provided. Documents shall include the following, where applicable: 1. There were missing Carbon Monoxide alarms from the corridors/common areas that had HVAC duct work directly connecting to a fossil fuel burning central heating appliance. The facility will need to verify if the fire alarm system is monitoring carbon monoxide. If the fire alarm system is not, then the facility must maintain detailed documentation of carbon monoxide detector locations, including monthly inspection reports detailing testing dates, modifications, and repairs.
11 Maintenance	
Emergency and standby power systems shall be maintained in accordance with NFPA 110 and NFPA 111 such that the system is capable of supplying service within the time specified for the type and duration required. (IFC 1203.4 2021)	The following deficiencies were cited as a result of this inspection: At the time of inspection, the following documentation was not provided. Documents shall include the following, where applicable: 1. Annual service report

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Code Requirement	Statement of Violation
12 Security	
Compressed gas containers, cylinders, tanks and systems shall be secured against accidental dislodgement and against access by unauthorized personnel in accordance with Sections 5303.5.1 through 5303.5.3. (IFC 5303.5 2021)	The following deficiencies were cited as a result of this inspection: At time of inspection the following was observed: 1. On the 1st floor, kitchen area there is 4 loose tanks

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Code Requirement	Statement of Violation
13 Fire Drills	
In all Group I, Group E, and Group R2 Occupancies licensed by the state, at least twelve planned and unannounced fire drills shall be held every year. Drills shall be conducted quarterly on each shift in Group I and Group R2, Occupancies and monthly in Group E Occupancies to familiarize personnel with signals and emergency action required under varied conditions. A detailed written record of all fire drills shall be maintained and available for inspection at all times. When drills are conducted between 9:00 p.m. and 6:00 a.m., a coded announcement may be used instead of audible alarms. Fire drills shall include the transmission of a fire alarm signal and simulation of emergency conditions. The fire alarm monitoring company shall be notified prior to the activation of the fire alarm system for drill purposes and again at the conclusion of the transmission and restoration of the fire alarm system to normal mode. (WAC 212-12-044) Drills shall be held at unexpected times and under varying conditions to simulate the unusual conditions that occur in case of fire. Exceptions: 1. In severe climates, the fire code official shall have the authority to modify the emergency evacuation drill termination points and frequency. 2. In Groups I-1, I-2, I-3 and R-4, where staff-only emergency evacuation drills are conducted after visiting hours or where care recipients are expected to be asleep, a coded announcement shall be an acceptable alternative to audible alarms. (IFC 405.5 2021) Records shall be maintained of required emergency evacuation drills and include the following information: 1. Identity of the person conducting the drill. 2. Date and time of the drill. 3. Notification method used. 4. Employees on duty and participating. 5. Number of occupants evacuated.	The following deficiencies were cited as a result of this inspection: At the time of inspection, the following documentation was not provided. Documents shall include the following, where applicable: 1. Facility cannot provide documentation for the completion of twelve planned and unannounced fire drills in the previous 12 months. The following drills are missing. 2nd Shift - Quarter 1, 2 3rd Shift - Quarter 2, 3 and 4

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Code Requirement	Statement of Violation
6. Special conditions simulated. 7. Problems encountered. 8. Weather conditions when occupants were evacuated. 9. Time required to accomplish complete evacuation. (IFC 0405.6 2021) Where a fire alarm system is provided, emergency evacuation drills shall be initiated by activating the fire alarm system. (IFC 405.8 2021)	

Next inspection scheduled on or after: 05/01/2026

Right of appeal. Any person may appeal any decision made by the Fire Protection Bureau in accordance with WAC 212-12.

Owner or Authorized Representative

Signature

Mario Valdez - Facilities Director

Print Name and Title

Deputy State Fire Marshal Jason Van Gorkum
2502 112 ST E
Tacoma WA 984455104
(509) 406-7209

DSFM Van Gorkum, Jason Digitally signed by DSFM Van Gorkum, Jason Date: 2026.04.06 13:35:55 -07'00'

Signature

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