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

Business Name	Christopher House	***Provider Number***	2067
Address	100 Cleveland ,	***Approval Status***	Approved
City, State, Zip	Wenatchee, WA 98801	***Facility Type***	Residential Care

On 09/01/2026 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement	Statement of Violation

1 Admin - Portable Heaters

Portable heaters are compliant as per 2021 International Fire Code: 603.9 Portable, electric space heaters. Where not prohibited by other sections of this code, portable, electric space heaters shall be permitted to be used in all occupancies in accordance with Sections 603.9.1 through 603.9.5. 603.9.1 Listed and labeled. Only listed and labeled portable, electric space heaters shall be used. 603.9.2 Power supply. Portable, electric space heaters shall be plugged directly into an approved receptacle. 603.9.3 Extension cords. Portable, electric space heaters shall not be plugged into extension cords. 603.9.4 Prohibited areas. Portable, electric space heaters shall not be operated within 3 feet (914 mm) of any combustible materials. Portable, electric space heaters shall be operated only in locations for which they are listed. 603.9.5 Group I-2 occupancies and ambulatory care facilities. Where used in Group I-2 and ambulatory care facilities, portable, electric space heaters shall be limited to those having a heating element that cannot exceed a temperature of 212°F (100°C), and such heaters shall only be used in nonsleeping staff and employee areas.	The following violations were observed: There was a portable heater left unattended within 3' of combustibles in the Christopher House, Room 308 which does not comply with WAC 388-78A-2990 and IFC Chapter 6, Section 603.9. *CORRECTED*

This document was prepared by Residential Care Services for the Locator website.

Initials of Authorized Facility Representative: K.V

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Code Requirement	Statement of Violation

2 Compliance with "No Smoking" signs.

Smoking shall not be permitted nor shall a person smoke, throw or deposit any lighted or smoldering substance in any place where "No Smoking" signs are posted. (IFC 310.5 2021)	The following violations were observed: In the following areas, used smoking materials, ashes, and heavy aromas of smoke were observed: -Room 406 in the Christopher House (an ashtray and approximately 7 used filter cigarettes were disposed of on the TV tray across from the television) *CORRECTED* -Room 205 in the Manor Facility (Two soda cans with approximately 5 used filter cigarettes were disposed on the nightstand next to the bed. Resident was educated on no smoking requirements, and referred to smoke and dispose of smoking materials in the designated smoking areas outside of the facility) *CORRECTED*

3 Relocatable power taps and current taps

Relocatable power taps and current taps. The construction and use of current taps and relocatable power taps shall be in accordance with NFPA 70 and this code. (IFC 603.5, 2021)	The following violations were observed: In the Christopher House, the following areas had appliances plugged into power strips. -Room 503A (microwave, coffee maker, and fridge) *CORRECTED* -Room 503B (microwave, coffee maker, and fridge) *CORRECTED* -Maintenance Room (microwave, coffee maker, and fridge) *CORRECTED* -Activity Room (microwave, coffee maker) *CORRECTED*

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Code Requirement	Statement of Violation
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 violations were observed: In the Christopher House, the following areas had extension cords in use in place of permanent wiring: . -Room 506A (Orange extension cord near TV) *CORRECTED* -Room 506B (White extension cord to unfused cube to power strip) *CORRECTED*
5 Owner's Responsibility	
The owner shall maintain an inventory of all required fire-resistance-rated construction, construction installed to resist the passage of smoke and the construction included in Sections 703 through 707 and Sections 602.4.1 and 602.4.2 of the International Building Code. Such construction shall be visually inspected by the owner annually and properly repaired, restored or replaced where damaged, altered, breached or penetrated. Records of inspections and repairs shall be maintained. Where concealed, such elements shall not be required to be visually inspected by the owner unless the concealed space is accessible by the removal or movement of a panel, access door, ceiling tile or similar movable entry to the space. (IFC 701.6 2021)	The following violation was observed: -Documentation of the annual fire-resistance-rated construction inspection for the Christopher House and Manor Facility failed to specify the date it was conducted. *CORRECTED*
6 Repair of joints and voids	
Repair of joints and voids. Where damaged, materials used to protect joints and voids shall be replaced or restored with materials or systems that meet or exceed the code requirements applicable at the time when the assembly was constructed, remodeled or altered.	The following violations were observed: In the Christopher House, the following rated fire doors leading from the elevator lobby to the corridor had an approximate gap of 1" from the floor to the bottom of the door: -2nd Floor Door *CORRECTED* -3rd Floor Door *CORRECTED* -4th Floor Door *CORRECTED* -5th Floor Door *CORRECTED*

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Code Requirement	Statement of Violation
7 Testing and Maintenance	
Sprinkler systems shall be tested and maintained in accordance with Section 901. (IFC 903.5 2021)	The following violations were observed: The facility was unable to provide documentation that the following deficiencies were corrected on the annual fire sprinkler system service conducted on August 21, 2025: Christopher House Facility: -"Documentation of five year not posted at riser only in the Tegris reporting (IPE, Air, Watergauge, FDC). The area this dry system covers isn't very accessible to perform the visual fire sprinkler inspection. 2 feet area access through the roof hatches. The inspector test valve is located in the elevator control room door that access the roof." *CORRECTED* Manor Facility: -"Main drain is not piped outside or an area that is possible flow. A hose is needed to connect to flow main drain and perform water flow test." *CORRECTED* -The facility was unable to provide documentation of the annual forward flow testing on the fire sprinkler system within the past twelve months. *CORRECTED, n/a per Fire Alarm Report from 2026* -The facility was unable to provide documentation of the fire sprinkler system quarterly inspections were conducted for the first and fourth quarters within the past twelve months. *CORRECTED* -In Room #308 of the Christopher House, there was a painted sprinkler head in the bathroom. *CORRECTED*

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Code Requirement	Statement of Violation
	-In the Maintenance Room of the Christopher House, there was a blue network cord zip tied to the fire sprinkler pipe above the cabinets. *CORRECTED*

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On 09/01/2026 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement	Statement of Violation
8 Inspection, Testing and Maintenance	
The maintenance and testing schedules and procedures for fire alarm and fire detection systems shall be in accordance with Sections 907.8.1 through 907.8.5 and NFPA 72. Records of inspection, testing and maintenance shall be maintained. (IFC 907.8 2021)	The following violations were observed: The Christopher House and the Manor Facility, both Fire Alarm annunciators located on the first floors, were showing trouble and supervisory signal alarms for the following areas: Christopher House Trouble alarm: -"Elevator Mech Rm W, Trouble missing (2)" -"Elevator Mech Rm S, Trouble missing (2)" *CORRECTED* Manor Facility, Supervisory alarm: -"Active Supervisory DuctP, Floor 1, Room 9, 20005 ID032, 100-100" (Facility noted that this was Room 207, due to a resident placing tape over the indicator light on the smoke detector, which was not present during the inspection of the room) The fire alarm system was inoperational at approximately 1200 hours on July 16, 2026, and staff was directed to contact their licensor and local Fire Department to report the system outage. Staff was also educated that a notification to our office was required for any life safety system outages that occur. A Fire Watch for the affected areas conducted by designated staff for 15-minute increments was required, and staff were informed documentation would need to be submitted for review to our office to release them from fire watch duties. *CORRECTED* -The facility was unable to provide documentation of the semi-annual inspection, testing, and maintenance of the fire alarm system within the past twelve months. *CORRECTED*

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Code Requirement	Statement of Violation
9 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 violation was observed: The facility failed to provide documentation of the carbon monoxide monthly testing within the past twelve months for the Christopher House and Manor Facility: -2026: January -2025: August, September, October, November, and December *CORRECTED*
10 Power Test	
Battery-powered emergency lighting equipment shall be tested annually by operating the equipment on battery power for not less than 90 minutes. (IFC 1031.10.2 2021)	The following violation was observed: -The facility was unable to provide documentation of the annual 90-minute test of their battery backup light testing for the Christopher House and Manor Facility within the last twelve months. *CORRECTED*

Next inspection scheduled on or after: 07/31/2027

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

Karina Valencia, Executive Director
Print Name and Title

Deputy State Fire Marshal Andrea Ely
2715 RUDKIN RD
Union Gap WA
(509) 531-3384

Andrea Ely

Digitally signed by Andrea Ely
Date: 2026.09.01 12:44:01 -07'00'
Adobe Acrobat Reader version: 2026.001.21789

Signature

Initials of Authorized Facility Representative: _____

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Business Name	Christopher House	***Provider Number***	2067
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Code Requirement	Statement of Violation

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3 Relocatable power taps and current taps	
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Code Requirement	Statement of Violation
7 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)	

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Code Requirement	Statement of Violation
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The maintenance and testing schedules and procedures for fire alarm and fire detection systems shall be in accordance with Sections 907.8.1 through 907.8.5 and NFPA 72. Records of inspection, testing and maintenance shall be maintained. (IFC 907.8 2021)	The following violations were observed: The Christopher House and the Manor Facility, both Fire Alarm annunciators located on the first floors, were showing trouble and supervisory signal alarms for the following areas: Christopher House Trouble alarm: -"Elevator Mech Rm W, Trouble missing (2)" -"Elevator Mech Rm S, Trouble missing (2)" Manor Facility, Supervisory alarm: -"Active Supervisory DuctP, Floor 1, Room 9, 20005 ID032, 100-100" (Facility noted that this was Room 207, due to a resident placing tape over the indicator light on the smoke detector, which was not present during the inspection of the room) The fire alarm system was inoperational at approximately 1200 hours on July 16, 2026, and staff was directed to contact their licensor and local Fire Department to report the system outage. Staff was also educated that a notification to our office was required for any life safety system outages that occur. A Fire Watch for the affected areas conducted by designated staff for 15-minute increments was required, and staff were informed documentation would need to be submitted for review to our office to release them from fire watch duties. -The facility was unable to provide documentation of the semi-annual inspection, testing, and maintenance of the fire alarm system within the past twelve months.

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Code Requirement	Statement of Violation
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 violation was observed: The facility failed to provide documentation of the carbon monoxide monthly testing within the past twelve months for the Christopher House and Manor Facility: -2026: January -2025: August, September, October, November, and December
11 Power Test	
Battery-powered emergency lighting equipment shall be tested annually by operating the equipment on battery power for not less than 90 minutes. (IFC 1031.10.2 2021)	The following violation was observed: -The facility was unable to provide documentation of the annual 90-minute test of their battery backup light testing for the Christopher House and Manor Facility within the last twelve months.

Next inspection scheduled on or after: 08/15/2026

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

Karina Valencia, Executive Director
Print Name and Title

Deputy State Fire Marshal Andrea Ely
2715 RUDKIN RD
Union Gap WA
(509) 531-3384

Andrea Ely Digitally signed by Andrea Ely Date: 2026.07.17 13:14:46 -07'00'

Signature

Initials of Authorized Facility Representative: R.V

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