

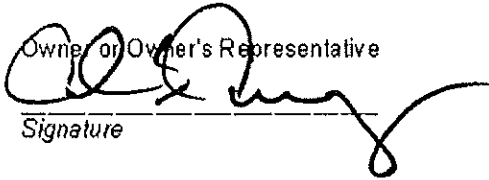


Washington State Patrol
Fire Protection Bureau
Phone: (360) 596-3900

Business Name	Brookdale MontClair Poulsbo	Provider Number	2274
Address	1250 Lincoln RD ,	Approval Status	Approved
City, State, Zip	Poulsbo, WA	Facility Type	Residential Care

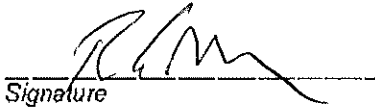
On 09/02/2025 the Office of the State Fire Marshal conducted an inspection at your facility.

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

Owner or Owner's Representative

Signature

ADAM B. CARY Executive Director
Print Name and Title

Deputy State Fire Marshal Raul Murcia
PO BOX 42642
Olympia WA 98504
(360) 819-0067


Signature

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



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Business Name	Brookdale MontClair Poulsbo	Provider Number	2274
Address	1250 Lincoln RD ,	Approval Status	Disapproved
City, State, Zip	Poulsbo, WA	Facility Type	Residential Care

On 07/23/2025 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

1 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)

Findings during inspection were:

Facility failed to maintain kitchen oven, oven is plugged into a power strip.

2 Cleaning

Hoods, grease-removal devices, fans, ducts and other appurtenances shall be cleaned at intervals as required by Sections 606.3.3.1 through 606.3.3.3.
(IFC 606.3.3 2021)

Findings during inspection were:

Facility failed to provide documents showing kitchen hood is being cleaned twice a year.

3 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)

Findings during inspection were:

Facility failed to provide annual report that all fire-resistance-rated construction is being inspected (fire wall inspection)

Back wall of 1st communications room has electrical conduit with no fire rated caulking.

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



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Code Requirement

Statement of Violation

4 Duct and Air Transfer Openings - Maintaining Protection

Dampers protecting ducts and air transfer openings shall be inspected and maintained in accordance with NFPA 80 and NFPA 105. Other products or materials used to protect the openings for ducts and air transfer openings shall be securely attached to or bonded to the construction containing the duct or air transfer opening, without visible openings through or into the cavity of the construction. Any damaged products or materials protecting duct and air transfer openings shall be repaired, restored or replaced.

(IFC 706.1 2018)

Findings during inspection were:

Fire/smoke damper report from 9/7/22 shows dampers that failed, facility needs to provide report that dampers have been fixed.

5 Testing and Maintenance

Sprinkler systems shall be tested and maintained in accordance with Section 901.

(IFC 903.5 2021)

Findings during inspection were:

Facility failed to provide the following documentation for the fire sprinkler system;

- Five-year internal pipe inspection
- Three-year dry system FULL flow trip test.
- Five-year fire department connection hydrostatic test.

Fire sprinkler head outside of room 18 in memory care is loaded with debris.

6 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)

Findings during inspection were:

Facility failed to provide the following reports for the fire alarm;

- Fire alarm sensitivity test report.
- Monthly inspection of fire alarms with batteries.

7 Maintenance

Carbon monoxide alarms and carbon monoxide detection systems shall be maintained in accordance with NFPA 72. Carbon monoxide alarms and carbon monoxide detectors that become inoperable or begin producing end-of-life signals shall be replaced.

(IFC 915.6 2021 WAC)

Findings during inspection were:

Facility failed to provide report showing testing and maintenance of CO detectors.

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Code Requirement

Statement of Violation

8 Activation Test

Emergency lighting equipment shall be tested monthly for a duration of not less than 30 seconds. The test shall be performed manually or by an automated self-testing and self-diagnostic routine. Where testing is performed by self-testing and self-diagnostics, a visual inspection of the emergency lighting equipment shall be conducted monthly to identify any equipment displaying a trouble indicator or that has become damaged or otherwise impaired.

(IFC 1032.10.1 2021)

Findings during inspection were:

Facility failed to provide documentation showing monthly 30 second test of exits and emergency lights.

9 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)

Findings during inspection were:

Facility failed to provide documentation showing annual 1.5 hrs test of exits and emergency lights.



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Business Name Brookdale MontClair Poulsbo
Address 1250 Lincoln RD ,
City, State, Zip Poulsbo, WA

Provider Number 2274
Approval Status Disapproved
Facility Type Residential Care

On 07/23/2025 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

10 NFPA 80 Fire Door Inspection and Testing

5.2.1 Inspection and Testing. Upon completion of the installation, door, shutters, and window assemblies shall be inspected and tested in accordance with 5.2.4.
5.2.4 Periodic Inspection and Testing.
5.2.4.1 Periodic inspections and testing shall be performed not less than annually.

5.2.2.4 A record of all inspections and testing shall be provided that includes, but is not limited to, the following information:

1. Date of inspection
2. Name of facility
3. Address of facility
4. Name of person(s) performing inspections and testing
5. Company name and address of inspecting company
6. Signature of inspector of record
7. Individual record of each inspected and tested fire door assembly
8. Opening identifier and location of each inspected and tested fire door assembly
9. Type and description of each inspected and tested fire door assembly
10. Verification of visual inspection and functional operation
11. Listing of deficiencies in accordance with 5.2.3, Section 5.3, and Section 5.4

And the following shall be checked:

1. Labels are clearly visible and legible
2. No open holes or breaks exist in surfaces of either the door or frame
3. Glazing, vision light frames, and glazing beads are intact and securely fastened in place, if so equipped.
4. The door, frame, hinges, hardware, and non combustible threshold are secured, aligned and in working order with no visible, signs of damage
5. No parts are missing or broken
6. Door clearances do not exceed clearances listed in 4.8.4 and 6.3.1.7
7. The self-closing device is operational; that is, the active door completely closes when operated from the full open position
8. If a coordinator is installed, the inactive lead close before the active lead

Findings during inspection were:

Facility failed to provide annual inspection report for fire doors.

Double doors by puzzle table on 3rd floor failed to latch.

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Code Requirement

Statement of Violation

9. Latching hardware operates and secures the door when it is in the closed position
10. Auxiliary hardware items that interfere or prohibit operation are not installed on the door or frame
11. No field modification to the door assembly have been performed that void the label.
12. Meeting edge protection, gasketing and edge seals where required, are inspected to verify their presence and integrity
13. Signage affixed to a door meets the requirements listed in 4.1.4

Next inspection scheduled on or after: 08/30/2025

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

William H. Arnold Jr.
M.D.
Print Name and Title

Deputy State Fire Marshal Raul Murcia
PO BOX 42642
Olympia WA 98504
(360) 819-0067

Signature