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

Business Name	Meridian at Stone Creek (The)	***Provider Number***	2365
Address	1111 S 376th ST ,	***Approval Status***	Approved
City, State, Zip	Milton, WA	***Facility Type***	Residential Care

On 01/08/2026 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement	Statement of Violation

1 Systems Out of Service

Where a required fire protection system is out of service, the fire department and the fire code official shall be notified immediately and, where required by the fire code official, the building shall either be evacuated or an approved fire watch shall be provided for all occupants left unprotected by the shut down until the fire protection system has been returned to service. Where utilized, fire watches shall be provided with at least one approved means for notification of the fire department and their only duty shall be to perform constant patrols of the protected premises and keep watch for fires. Exception: Facilities with an approved notification and impairment management program. The notification and impairment program for water-based fire protection systems shall comply with NFPA 25. (IFC 901.7 2021)	Update 01/08/26 The fire alarm system monitoring is still non functional. The facility has failed to provide documentation of an ongoing fire watch that is consistent with the cited fire code in Washington State. As of 01/08/2026 the facility is non-compliant and is being referred to DSHS for enforcement. Original Citation 11/12/25 The fire alarm system for the facility is not monitored. Per documentation and confirmation from the previous monitoring service the building has not been monitored for three months, since August 2025. Per the cited code section the facility shall be in fire watch until FACP monitoring has been restored. The fire watch shall at minimum consist of personnel monitoring the fire alarm panel or annunciator panels at all times. Per the cited code section the local fire department shall be contacted and notified of the fire watch status. Per the cited code section fire watch personnel shall be provided with means to contact 911. Per the cited code section fire watch shall be the only duty of personnel assigned. Fire watch personnel and the times which they performed this duty shall be documented.

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Code Requirement	Statement of Violation
2 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 fire alarm panel in the faciltiy has troubles on it. All system troubles must be repaired before approval.

Next inspection scheduled on or after: 02/07/2026

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 *Print Name and Title*

Deputy State Fire Marshal Arthur Jesse Ward
2502 112 ST E
Tacoma WA 984455104
(425) 401-7735

Jesse Ward Digitally signed by Jesse Ward Date: 2026.01.08 11:10:33 -08'00'
Signature

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Code Requirement	Statement of Violation

1 Door Operation

Swinging fire doors shall close from the full-open position and latch automatically. (IFC 705.2.4 2021)	The kitchen back door does not self close and latch. It is also dragging on ground.

2 Systems Out of Service

Where a required fire protection system is out of service, the fire department and the fire code official shall be notified immediately and, where required by the fire code official, the building shall either be evacuated or an approved fire watch shall be provided for all occupants left unprotected by the shut down until the fire protection system has been returned to service. Where utilized, fire watches shall be provided with at least one approved means for notification of the fire department and their only duty shall be to perform constant patrols of the protected premises and keep watch for fires. Exception: Facilities with an approved notification and impairment management program. The notification and impairment program for water-based fire protection systems shall comply with NFPA 25. (IFC 901.7 2021)	The fire alarm system for the facility is not monitored. Per documentation and confirmation from the previous monitoring service the building has not been monitored for three months, since August 2025. Per the cited code section the facility shall be in fire watch until FACP monitoring has been restored. The fire watch shall at minium consist of personnel monitoring the fire alarm panel or annunciator panels at all times. Per the cited code section the local fire department shall be contacted and notified of the fire watch status. Per the cited code section fire watch personnel shall be provided with means to contact 911. Per the cited code section fire watch shall be the only duty of personnel assigned. Fire watch personnel and the times which they performed this duty shall be documented.

3 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 fire alarm panel in the faciltiy has troubles on it. All system troubles must be repaired before approval.

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Code Requirement	Statement of Violation
4 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)	-Facility is unable to provide documentation for the weekly inspections and Monthly 30 minute load testing. -The facility failed to provide documentation indicating a monthly generator battery test was being conducted in accord with NFPA 110 2021 edition section 8.3.6.1

Next inspection scheduled on or after: 12/12/2025

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 *Print Name and Title*

Deputy State Fire Marshal Arthur Jesse Ward
2502 112 ST E
Tacoma WA 984455104
(425) 401-7735

_____
Signature

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Code Requirement	Statement of Violation

1 Open electrical terminations

Open junction boxes and open-wiring splices shall be prohibited. Approved covers shall be provided for all switch and electrical outlet boxes. (IFC 603.2.2, 2021)	Findings during the inspection were: The following locations did not have a electrical receptacle cover: 1. 1st Floor Medication Room 2. Telecom Room Unlocked electrical panel 1WA1 by room W167.

2 Listing

603.5.1 Listing. Relocatable power taps shall be listed in accordance with UL 1363. Current taps shall be listed and labeled in accordance with UL 498A. (IFC 0603.5.1, 2021)	Findings during the inspection were: Relocatable power taps not listed were founded in the following locations: 1. Room W211 2. Maintenance Director Office 3. Marketing office CRD2 4. Printer Area 5. Marketing Coordinator's office Multi plug power tap not listed was founded in the following locations: 1. Room 125 2. Blue Room

3 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)	Findings during the inspection were: Extension cords used as permanent wiring in the following locations: 1. Room E224 2. Room E107 3. Clinical support office 4. 1st floor Medication room 5. Main electrical Room

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Code Requirement	Statement of Violation

4 Listed and Labeled

Only listed and labeled portable, electric space heaters shall be used. (IFC 603.9.1, 2021)	Findings during the inspection were: The Marketing Coordinator's office has an unlisted portable electrical space heater

5 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 the inspection were: No documentation was provided for the two most recent cleanings, which should have occurred within the past 12 months. *All inspection reports must verify that the system has no deficiencies, or document that all deficiencies have been corrected.*

6 Appliance Connection to Building Piping

Gas-fired commercial cooking appliances installed on casters and appliances that are moved for cleaning and sanitation purposes shall be connected to the piping system with an appliance connector listed as complying with ANSI Z21.69/CSA 6.16. The commercial cooking appliance connector installation shall be configured in accordance with the manufacturer's installation instructions. Movement of appliances with casters shall be limited by a restraining device installed in accordance with the connector and appliance manufacturer's instructions. (IFC 606.4 2021)	Findings during the inspection were: Kitchen burners on casters do not have a restraining device installed.

7 Smoke Barriers

The fire-resistance rating and smoke-resistant characteristics of smoke barriers shall be maintained. (IFC 701.3 2021)	Findings during the inspection were: There is a false ceiling tile missing in the Activity office.

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Code Requirement	Statement of Violation

8 Penetrations - Maintaining Protection

Materials and firestop systems used to protect membrane and through penetrations in fire-resistance-rated construction and construction installed to resist the passage of smoke shall be maintained. The materials and firestop systems shall be securely attached to or bonded to the construction being penetrated with no openings visible through or into the cavity of the construction. Where the system design number is known, the system shall be inspected to the listing criteria and manufacturer's installation instructions. (IFC 703.1 2021)	Findings during the inspection were: Penetrations in fire-resistance-rated construction were found in the Telecom Room.

9 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)	Findings during the inspection were: The provided document did not include an inspection of all fire doors, including those in the resident rooms. *All reports must confirm that the system has no deficiencies or document that any deficiencies have been corrected, including the date of correction.*

10 Labeling Requirements

Where approved by the fire code official, the application of field-applied labels associated with the maintenance of opening protectives shall follow the requirements of the approved third-party certification organization accredited for listing the opening protective. (IFC 705.2.1 2021)	Findings during the inspection were: The following fire doors were held open with either a door stop or another object: 1. Room E325 2. Room E312 3. Activity Office

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Code Requirement	Statement of Violation

11 Door Operation

Swinging fire doors shall close from the full-open position and latch automatically. (IFC 705.2.4 2021)	Findings during the inspection were: The kitchen's back door leading to the employee hallway fire door did not latch during testing.

12 Testing and Maintenance

Sprinkler systems shall be tested and maintained in accordance with Section 901. (IFC 903.5 2021)	Findings during the inspection were: The facility was unable to provide documentation on the following tests: 1. Annual Trip Test 2. 5 year FDC Hydro Testing *All inspection reports must verify that the system has no deficiencies, or document that all deficiencies have been corrected.*

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Code Requirement	Statement of Violation

13 Portable Fire Extinguishers - General Requirements

Portable fire extinguishers shall be selected, installed and maintained in accordance with this section and NFPA 10. Exceptions: 1. The distance of travel to reach an extinguisher shall not apply The travel distance to reach an extinguisher shall not apply to the spectator seating portions of Group A-5 occupancies. 2. Thirty-day inspections shall not be required and maintenance shall be allowed to be once every three years for dry-chemical or halogenated agent portable fire extinguishers that are supervised by a listed and approved electronic monitoring device, provided that all of the following conditions are met: 2.1. Electronic monitoring shall confirm that extinguishers are properly positioned, properly charged and unobstructed. 2.2. Loss of power or circuit continuity to the electronic monitoring device shall initiate a trouble signal. 2.3. The extinguishers shall be installed inside of a building or cabinet in a noncorrosive environment. 2.4. Electronic monitoring devices and supervisory circuits shall be tested every 3 years when extinguisher maintenance is performed. 2.5. A written log of required hydrostatic test dates for extinguishers shall be maintained by the owner to verify that hydrostatic tests are conducted at the frequency required by NFPA 10. 3. In Group I-3, portable fire extinguishers shall be permitted to be located at staff locations. (IFC 906.2 2021)	Findings during the inspection were: The facility did not consistently conduct the required monthly inspections for portable fire extinguishers.

14 Unobstructed and Unobscured

Portable fire extinguishers shall not be obstructed or obscured from view. In rooms or areas in which visual obstruction cannot be completely avoided, means shall be provided to indicate the locations of extinguishers. (IFC 906.6 2021)	Findings during the inspection were: A hand-held portable fire extinguisher in the kitchen obstructed by a food cart.

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Code Requirement	Statement of Violation

15 Hangers and Brackets

Hand-held portable fire extinguishers, not housed in cabinets, shall be installed on the hangers or brackets supplied. Hangers or brackets shall be securely anchored to the mounting surface in accordance with the manufacturer's installation instructions. (IFC 906.7 2021)	Findings during the inspection were: The following hand-held portable fire extinguishers were not securely anchored in the following locations: 1. Housekeeping storage near room E122 2. Executive Director Office

16 Unobstructed and Unobscured

Manual fire alarm boxes shall be provided with ready access, unobstructed, unobscured and visible at all times. (IFC 907.4.2.6 2021)	Findings during the inspection were: The manual fire alarm pull station in Bistro was obstructed by a artificial tree.

17 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 the inspection were: The facility provided documentation from the January 2025 annual fire alarm inspection, which identified a deficiency with the system's battery. The facility stated that the batteries were replaced. However, they were unable to provide documentation from either the facility or the fire alarm service company confirming the date of the replacement.

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18 Where Required

Carbon monoxide detection shall be provided in Group I and R occupancies and in classrooms in Group E occupancies in the locations specified in Section 915.2 where any of the conditions in Sections 915.1.2 through 915.1.6 exist. EXCEPTIONS: 1. R-2 occupancies, with the exception of R-2 college dormitories, are required to install carbon monoxide detectors without exception. 2. Sleeping units or dwelling units in I and R-1 occupancies and R-2 college dormitories, hotel, DOC prisons and work releases and assisted living facilities and residential treatment facilities licensed by the state of Washington, which do not themselves contain a fuel-burning appliance, a fuel-burning fireplace, or have an attached garage, need not be provided with carbon monoxide alarms provided that they comply with the exceptions of Section 915.1.4. (IFC 915.1.1 2021 WAC 51-54A)	Findings during the inspection were: Carbon monoxide detection is not installed in the Dryer Access Room located outside the building near the kitchen.

19 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 the inspection were: The facility provided documentation of testing. However, no records were provided showing dates of any corrections for the carbon monoxide alarms and detection systems.

20 Means of Egress Continuity

The path of egress travel along a means of egress shall not be interrupted by any building element other than a means of egress component as specified in this chapter. Obstructions shall not be placed in the minimum width or required capacity of a means of egress component except projections permitted by this chapter. The minimum width or required capacity of a means of egress system shall not be diminished along the path of egress travel. (IFC 1003.6 2021)	Findings during the inspection were: The following path of egresses were blocked in the following locations: 1. House keeping closet 2. Activity Room 2

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Code Requirement	Statement of Violation

21 Door Opening Force

The forces to unlatch doors shall comply with the following: 1. Where door hardware operates by push or pull, the operational force to unlatch the door shall not exceed 15 pounds (66.7 N). 2. Where door hardware operates by rotation, the operational force to unlatch the door shall not exceed 28 inch-pounds (315 N-cm). The force to open doors shall comply with the following: 1. For interior swinging egress doors that are manually operated, other than doors required to be fire rated, the force for pushing or pulling open the door shall not exceed 5 pounds (22 N). 2. For other swinging doors, sliding doors or folding doors, and doors required to be fire rated, the door shall require not more than a 30-pound (133 N) force to be set in motion and shall move to a fullopen position when subjected to not more than a 15-pound (67 N) force. (IFC 1010.1.3 2021)	Findings during the inspection were: The dining area exit door near the private dining room requires excessive force to open.

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Code Requirement	Statement of Violation
22 Exit Signs - Where Required	
Exits and exit access doors shall be marked by an approved exit sign readily visible from any direction of egress travel. The path of egress travel to exits and within exits shall be marked by readily visible exit signs to clearly indicate the direction of egress travel in cases where the exit or the path of egress travel is not immediately visible to the occupants. Intervening means of egress doors within exits shall be marked by exit signs. Exit sign placement shall be such that any point in an exit access corridor or exit passageway is within 100 feet (30 480 mm) or the listed viewing distance of the sign, whichever is less, from the nearest visible exit sign. Exceptions: 1. Exit signs are not required in rooms or areas that require only one exit or exit access. 2. Main exterior exit doors or gates that are obviously and clearly identifiable as exits need not have exit signs where approved by the fire code official. 3. Exit signs are not required in occupancies in Group U and individual sleeping units or dwelling units in Group R-1, R-2 or R-3. 4. Exit signs are not required in dayrooms, sleeping rooms or dormitories in occupancies in Group I-3. 5. In occupancies in Groups A-4 and A-5, exit signs are not required on the seating side of vomitories or openings into seating areas where exit signs are provided in the concourse that are readily apparent from the vomitories. Egress lighting is provided to identify each vomitory or opening within the seating area in an emergency. (IFC 1013.1 2021)	Findings during the inspection were: The main electrical room and bar area have signage to the right of the doors stating “Exit”, but do not have illuminated exit signs. The facility must confirm through their emergency exit plan whether these doors are designated exits. If they are not, the facility must remove the signage and post “Not an Emergency Exit.” If they are designated exits, illuminated exit signs must be installed above the doors.

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Code Requirement	Statement of Violation

23 Power Source

Exit signs shall be illuminated at all times. To ensure continued illumination for a duration of not less than 90 minutes in case of primary power loss, the sign illumination means shall be connected to an emergency power system provided from storage batteries, unit equipment or an on-site generator. The installation of the emergency power system shall be in accordance with Section 603. Group I-2, Condition 2 exit sign illumination shall not be provided by unit equipment batteries only. Exception: Approved exit sign illumination types that provide continuous illumination independent of external power sources for a duration of not less than 90 minutes, in case of primary power loss, are not required to be connected to an emergency electrical system. (IFC 1013.6.3 2021)	Findings during the inspection were: During testing, exit sign located by room 230 failed to operate on backup power.

24 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 the inspection were: No documentation was provided to verify that the facility is conducting the required 30-second monthly testing of exit signs.

25 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)	Findings during the inspection were: The facility was unable to provide documentation of the weekly inspection log and provided inconsistent records of the monthly 30-minute load tests.

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26 Housekeeping

Accumulation of combustible dust on surfaces inside buildings shall be maintained below the critical depth layer in Section 2203.1 . Pressurized air or similar methods shall not be used to remove dust from surfaces. Accumulated combustible dust shall be collected by one of the following methods: 1. Portable vacuum cleaners listed for use in Class II, Group G, Division 1, atmospheres as defined in NFPA 70. 2. Dust collection systems. 3. Other approved means that will not place combustible dust into suspension in air. Exception: Forced-air or similar methods shall be permitted to remove dust in accordance with NFPA 652, NFPA 654 or NFPA 664. (IFC 2203.5 2021)	Findings during the inspection were: Dust accumulation in the laundry room near Room E103 exceeds the critical depth layer specified in IFC 2021, Table 2203.1.

27 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)	Findings during the inspection were: The following locations had unsecured oxygen cylinders: 1. Room W204

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Code Requirement	Statement of Violation
28 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)	Findings during the inspection were: The facility was unable to provide documentation confirming completion of required fire drills for the following quarters and shifts: Q1 of 2025: Day and Swing Shift Q2 of 2025: Swing shift Q3 of 2025: Day shift Q4 of 2024: Swing and Night shift *Fire drills shall be conducted quarterly for each shift. A detailed written record of all drills, including signatures of all employees involved, must be maintained and made available for inspection at all times. If drills are conducted between 9:00 p.m. and 6:00 a.m., a coded announcement may be used in place of audible alarms. Each fire drill will include the transmission of a fire alarm signal and the simulation of emergency conditions. The fire alarm monitoring company shall be notified prior to activating the fire alarm system for drill purposes, and again when the alarm transmission concludes, and the system is restored to normal mode.*

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Code Requirement	Statement of Violation

Next inspection scheduled on or after: 09/10/2025

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 *Print Name and Title*

Deputy State Fire Marshal Damon Roberson
2803 156 AVE SE
Bellevue WA 98007
(360) 584-4392

_____
Signature

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