



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

Business Name	Brookdale Courtyard Puyallup	Provider Number	2366
Address	4610 6TH STREET ,	Approval Status	Approved
City, State, Zip	Puyallup, WA	Facility Type	Residential Care

On 04/15/2026 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

Chris Weeks
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: 2026.04.16 07:03:16
-07'00'
Signature

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



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

Business Name Brookdale Courtyard Puyallup
Address 4610 6TH STREET ,
City, State, Zip Puyallup, WA

Provider Number 2366
Approval Status Disapproved
Facility Type Residential Care

On 8/5/2025 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement	Statement of Violation
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1 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)

Corrected

2 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)

Corrected

3 Door Operation

Swinging fire doors shall close from the full-open position and latch automatically.

(IFC 705.2.4 2021)

Findings during the reinspection were:

Fire doors to second floor cinema room failed to self-close and latch when retested.

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



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Code Requirement	Statement of Violation
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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)	Corrected
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5 Testing and Maintenance

Sprinkler systems shall be tested and maintained in accordance with Section 901. (IFC 903.5 2021)	Findings during the reinspection were: The facility provided the most recent quarterly inspection report dated June 10, 2025. The report identified deficiencies that require correction. The facility must provide documentation confirming that all deficiencies noted in the June 10, 2025 inspection have been corrected.
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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)	Corrected
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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)	Corrected
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Code Requirement	Statement of Violation
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8 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 the reinspection were: The facility provided documentation showing that the 90-minute annual battery test of the emergency lighting and exit signs was performed. The facility did not include documentation for the emergency lights and exit signs that failed the test. The facility must provide documentation detailing the corrections made to the failed units, including the dates the corrections were completed.
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Approval Status Disapproved
Facility Type Residential Care

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Code Requirement	Statement of Violation
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9 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 wither 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

Corrected



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On 8/5/2025 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement	Statement of Violation
before the active lead 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: 9/4/2025

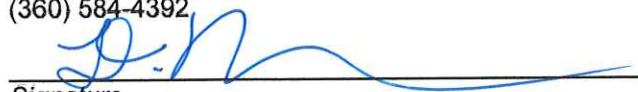
Right of appeal. Any person may appeal any decision made by the Fire Protection Bureau in accordance with WAC 212-12.

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



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

Business Name	Brookdale Courtyard Puyallup	Provider Number	2366
Address	4610 6TH STREET ,	Approval Status	Disapproved
City, State, Zip	Puyallup, WA 98374	Facility Type	Residential Care

On 5/14/2025 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

1 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)

Corrected

2 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 reinspection were:

Unprotected openings observed in the following locations:

- 1) First floor electrical room- Multiple penetrations
- 2) First floor sprinkler riser room- Unapproved firestop systems
- 3) Second floor storage room- One penetration

3 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 reinspection were:

Unable to provide record showing that fire doors have been annually inspected, tested and repaired in the past 12 months.

4 Door Operation

Swinging fire doors shall close from the full-open position and latch automatically.

(IFC 705.2.4 2021)

Findings during the reinspection were:

Fire doors to second floor cinema room failed to self-close and latch when tested.



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Code Requirement	Statement of Violation
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5 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 the reinspection were: Provide documentation of the 2024 inspection, testing, and maintenance of the fire/smoke dampers, which identified deficiencies. There is no follow-up documentation showing that the deficiencies have been corrected.
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6 Testing and Maintenance

Sprinkler systems shall be tested and maintained in accordance with Section 901. (IFC 903.5 2021)	Findings during the reinspection were: 1) Unable to provide fire sprinkler system documentation for the following: - Quarterly inspection reports - No hydraulic calculation plate - The report from Johnson Controls is titled "Backflow Preventor Forward Flow Test" but only documents the backflow test. There is no reference to a forward flow test. Please confirm if it was conducted and provide the appropriate documentation per NFPA 25. 2) Missing fire sprinkler escutcheon ring observed: - Room 321 in closet
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7 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)	Corrected
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8 Extinguishers Weighing More Than 40 Pounds

Hand-held portable fire extinguishers having a gross weight exceeding 40 pounds (18 kg) shall be installed so that their tops are not more than 3.5 feet (1067 mm) above the floor. (IFC 906.9.2 2021)	Corrected
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9 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 reinspection were: Unable to provide last smoke detector sensitivity test report.
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10 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 reinspection were: Unable to provide documentation showing the monthly inspection of the facility's carbon monoxide alarms has been performed in the past 12 months.
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11 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)	Corrected
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Facility Type Residential Care

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Code Requirement

Statement of Violation

12 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 the reinspection were:

- 1) Unable to provide documentation showing that 90-minute annual battery testing of the emergency lighting and exit signs has been performed in the past 12 months.
- 2) Facility will need to conduct a 90-minute annual test of all emergency lighting and exit signs in the building to be in compliance.

13 Inspection Frequency

Fire extinguishers shall be inspected when initially placed in service and thereafter at approximately 30-day intervals. Fire extinguishers shall be inspected, manually or by electronic monitoring, at more frequent intervals when circumstances require.

(NFPA Standard 10 Section 6.2.1)

Corrected



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14 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
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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 wither 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

Findings during the reinspection were:

Corridor doors throughout the facility have a center door gap that exceeds the allowed 1/16 inch.

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before the active lead 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: 6/13/2025

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

Joshua Wyche Business Office Coordinator

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

Signature

Initials of Authorized Facility Representative: JW