



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

Business Name	Judson Park Retirement Community	Provider Number	000681
Address	23600 MARINE VIEW ,	Approval Status	Approved
City, State, Zip	Des Moines, WA 98198	Facility Type	Residential Care

On 09/28/2023 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

Print Name and Title

Joe Sperry Dir. of Building
& Grounds

Deputy State Fire Marshal Cozetta Christian
2502 112TH E
Tacoma WA 984455104
(360) 584-5796

Signature

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

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	Judson Park Retirement Community	Provider Number	000681
Address	23600 MARINE VIEW ,	Approval Status	Disapproved
City, State, Zip	Des Moines, WA 98198	Facility Type	Residential Care

On 07/24/2023 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

1 Administration

On 07/24/2023 an unannounced Fire and Life Safety Code inspection was conducted at Judson Park Retirement by a representative of the Washington State Patrol, State Fire Marshal's Office to determine compliance with all applicable codes.

The following deficiencies were cited as a result of this inspection:

2 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 2018 WAC 51-54A)

The following violation was observed at the time of inspection:

The facility was unable to provide record of their annual fire wall inspection and/or repairs for all fire-resistant-rated construction.

3 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 2018)

The following violation was observed at the time of inspection: ✓

The Air lock room has a penetration in the wall.



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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)

The following violation was observed at the time of inspection:

The facility was unable to provide documentation for their last fire/smoke damper testing.

All inspection reports must verify that the system has no deficiencies, or document that all deficiencies have been corrected.

19.4 Periodic Inspection and Testing.

19.4.1 Each damper shall be tested and inspected 1 year after installation.

19.4.1.1 The test and inspection frequency shall then be every 4 years, except in hospitals, where the frequency shall be every 6 years.

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Code Requirement

Statement of Violation

5 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

The following violation was observed at the time of inspection: ✓

The following fire doors have been modified:

1. Memory Care Clean Linen door
2. Memory Care Soiled Linen door
3. Memory Care Electrical room by room L415



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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: 08/23/2023

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Owner or Authorized Representative

Signature

Print Name and Title

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