



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

<b>Business Name</b>	Farrington Court Retirement Community	<b>Provider Number</b>	2145
<b>Address</b>	516 KENOSIA ,	<b>Approval Status</b>	Approved
<b>City, State, Zip</b>	Kent, WA	<b>Facility Type</b>	Residential Care

On 11/06/2025 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

JUAN GONZALEZ  
Signature

JUAN GONZALEZ Maintenance  
Print Name and Title

Deputy State Fire Marshal Cozetta Christian  
106 11th AVE SW  
Olympia WA 98501  
(360) 584-5796

Cozetta Christian  
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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<b>City, State, Zip</b> Kent, WA 98031	<b>Facility Type</b> Residential Care

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Code Requirement	Statement of Violation
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**1 Admin - (ITM) Inspection, Testing, & Maintenance**

Any citation that requires inspection, testing, or maintenance (ITM) is required to have the testing completed, paper results delivered, and any deficiencies found during the ITM corrected before the citation is cleared."	On 07/24/2025 an unannounced Fire and Life Safety Code inspection was conducted at Farrington Court Retirement Community 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:
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**2 Working Space and Clearance**

Working space and clearances. Working space around electrical equipment shall be provided in accordance with Section 110.26 of NFPA 70 for electrical equipment rated 1,000 volts or less, and Section 110.32 of NFPA 70 for electrical equipment rated over 1,000 volts. The minimum required working space shall be not less than 30 inches (762 mm) in width, 36 inches (914 mm) in depth and 78 inches (1981 mm) in height in front of electrical service equipment. Where the electrical service equipment is wider than 30 inches (762 mm), the minimum working space shall be not less than the width of the equipment. Storage of materials shall not be located within the designated working space.  (IFC 603.4, 2021)	The following violation was observed:  Electrical panel room in building B had multiple combustibles being stored within 36" of panels.
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**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)	The following violation was observed:  1) The Salon had an extension cord being used for permanent wiring.  2) Front entrance patio had extension cord in use to run patio lights located in patio cover.
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**4 Appliance Connection to Building Piping**

<p>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.</p> <p>(IFC 606.4 2021)</p>	<p>The following violation was observed:</p> <p>The gas fired appliance's in central kitchen did not have tethers attached to wall to prevent disconnection of gas lines.</p>
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**5 Owner's Responsibility**

<p>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.</p> <p>(IFC 701.6 2021)</p>	<p>The following violation was observed:</p> <ol style="list-style-type: none"> <li>1) Facility failed to provide documentation that the annual inspection of fire resistance-rated construction had been inspected.</li> <li>2) The following rooms had multiple penetrations through the fire resistance-rated construction from electrical and water piping to the hot water heater located in closet:           <ol style="list-style-type: none"> <li>1) B - 205</li> <li>2) A - 215</li> <li>3) A - 203</li> <li>4) D - 109</li> </ol> </li> </ol>
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**6 Inspection and Maintenance**

<p>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.</p> <p>(IFC 705.2 2021)</p>	<p>The following violation was observed:</p> <ol style="list-style-type: none"> <li>1) The facility failed to provide documentation that wing "B" had annual fire door inspection had been performed. Reference: NFPA - 80 5.2</li> <li>2) Building B north fire door is falling apart making closing and latching of the door inoperable. Door crash bar is missing end cap and potentially causing operational issues.</li> <li>3) Building A south fire door has a piece of wire being used to hold magnet release that is for door closing when fire alarm is activated. Door also has a piece missing from crash bar potentially causing operational issues.</li> </ol>
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**7 Door Operation**

<p>Swinging fire doors shall close from the full-open position and latch automatically.</p> <p>(IFC 705.2.4 2021)</p>	<p>The following violation was observed:</p> <p>The following doors did not latch from fully a opened position:</p> <ol style="list-style-type: none"> <li>1) Salon</li> <li>2) D103</li> <li>3) D101</li> </ol>
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**8 Inspection, Testing and Maintenance**

<p>Fire protection and life safety systems shall be maintained in an operative condition at all times, and shall be replaced or repaired where defective. Nonrequired fire protection and life safety systems and equipment shall be inspected, tested and maintained or removed in accordance with Section 901.8.</p> <p>(IFC 901.6 2021)</p>	<p>The following violation was observed:</p> <p>Room D 217 had multiple sprinkler heads covered in plastic. At time of inspection the room was not actively being worked on.</p>
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**9 Testing and Maintenance**

<p>Sprinkler systems shall be tested and maintained in accordance with Section 901.  (IFC 903.5 2021)</p>	<p>The following violation was observed:</p> <p>1) The facility was unable to provide documentation that 5 year hydro testing had been performed. Reference: NFPA 25 - 13.8.5</p> <p>2) The facility failed to provide documentation that the automatic sprinkler system inspection for the 3rd quarter of 2024 had been performed.</p>
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**10 Extinguishing System Service**

<p>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)</p>	<p>The following violation was observed:</p> <p>The facility failed to provide documentation that 1st semi annual kitchen suppression system servicing of 2025 had been performed.</p>
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**11 Smoke Detector Sensitivity**

<p>Smoke detector sensitivity shall be checked within one year after installation and every alternate year thereafter. After the second calibration test, where sensitivity tests indicate that the detector has remained within its listed and marked sensitivity range (or 4-percent obscuration light grey smoke, if not marked), the length of time between calibration tests shall be permitted to be extended to a maximum of 5 years. Where the frequency is extended, records of detector-caused nuisance alarms and subsequent trends of these alarms shall be maintained. In zones or areas where nuisance alarms show any increase over the previous year, calibration tests shall be performed.  (IFC 907.8.3 2021)</p>	<p>The following violation was observed:</p> <p>Facility failed to provide documentation that during the sensitivity test that was performed on 10-01-2024 that the deficiencies on the report had been corrected.</p>
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**12 Inspection, Testing and Maintenance**

<p>The building owner shall be responsible to maintain the fire and life safety systems in an operable condition at all times. Service personnel shall meet the qualification requirements of NFPA 72 for inspection, testing and maintenance of such systems. Records of inspection, testing and maintenance shall be maintained.</p> <p>(IFC 907.8.4 2021)</p>	<p>The following violation was observed:</p> <p>Smoke detector was removed from room B104.</p>
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**13 Clear Space Around Connections**

<p>A working space of not less than 36 inches (914 mm) in width, 36 inches (914 mm) in depth and 78 inches (1981 mm) in height shall be provided and maintained in front of and to the sides of wall-mounted fire department connections and around the circumference of free-standing fire department connections, except as otherwise required or approved by the fire code official.</p> <p>(IFC 912.4.2 2021)</p>	<p>The following violation was observed:</p> <p>The fire department connection valve on south side of facility near sprinkler room was obstructed by shrubs and flowers.</p>
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**14 Illumination Level Under Emergency Power**

<p>initial illumination that is not less than an average of 1 footcandle (11 lux) and a minimum at any point of 0.1 footcandle(1 lux) measured along the path of egress at floor level. Illumination levels shall be permitted to decline to 0.6 footcandle (6 lux) average and a minimum at any point of 0.06 footcandle (0.6 lux) at the end of the emergency lighting time duration. A maximum-to-minimum illumination uniformity ratio of 40 to 1 shall not be exceeded. In Group I-2 occupancies, failure of a single lamp in a luminaire shall not reduce the illumination level to less than 0.2 foot-candle (2.2 lux).</p> <p>(IFC 1008.3.5 2021)</p>	<p>The following violation was observed:</p> <p>Emergency lighting needs to be provided along the exterior path of egress to the area of refuge in the following locations:</p> <ol style="list-style-type: none"> <li>1) Building A north exit.</li> <li>2) Building C north exit.</li> </ol>
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**15 Bolt Locks**

<p>Manually operated flush bolts or surface bolts are not permitted.</p> <p>Exceptions:</p> <ol style="list-style-type: none"> <li>1. On doors not required for egress in individual dwelling units or sleeping units.</li> <li>2. Where a pair of doors serves a storage or equipment room, manually operated edge- or surface-mounted bolts are permitted on the inactive leaf.</li> <li>3. Where a pair of doors serves an occupant load of less than 50 persons in a Group B, F or S occupancy, manually operated edge- or surface- mounted bolts are permitted on the inactive leaf. The inactive leaf shall not contain doorknobs, panic bars or similar operating hardware.</li> <li>4. Where a pair of doors serves a Group B, F or S occupancy, manually operated edge- or surface- mounted bolts are permitted on the inactive leaf provided that such inactive leaf is not needed to meet egress capacity requirements and the building is equipped throughout with an automatic sprinkler system in accordance with Section 903.3.1.1. The inactive leaf shall not contain doorknobs, panic bars or similar operating hardware.</li> <li>5. Where a pair of doors serves patient care rooms in Group I-2 occupancies, self-latching edge- or surface-mounted bolts are permitted on the inactive leaf provided that the inactive leaf is not needed to meet egress capacity requirements and the inactive leaf shall not contain doorknobs, panic bars or similar operating hardware.</li> </ol> <p>(IFC 1010.2.5 2021)</p>	<p>The following violation was observed:</p> <p>The fire doors on floor 1 and 2 in the central hallway located near elevator had a deadbolt style locking mechanism installed.</p>
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**16 Exit Signs - Where Required**

<p>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.</p> <p>Exceptions:</p> <ol style="list-style-type: none"> <li>Exit signs are not required in rooms or areas that require only one exit or exit access.</li> <li>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.</li> <li>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.</li> <li>Exit signs are not required in dayrooms, sleeping rooms or dormitories in occupancies in Group I-3.</li> <li>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.</li> </ol> <p>(IFC 1013.1 2021)</p>	<p>The following violation was observed:</p> <p>The following locations did not have illuminated exit signs with battery backup to show direct path of egress to emergency exit:</p> <ol style="list-style-type: none"> <li>1) Building A next to room A-209</li> <li>2) Building A next to room A-210</li> <li>3) Exit sign near room D-210</li> </ol>
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**17 Emergency Lighting Equipment Inspection and Testing**

<p>Emergency lighting shall be maintained in accordance with Section 1008 and shall be inspected and tested in accordance with Sections 1031.10.1 and 1031.10.2.</p> <p>(IFC 1032.10 2021)</p>	<p>The following violation was observed:</p> <p>In the following locations the emergency lights would not illuminate when tested:</p> <ol style="list-style-type: none"> <li>1) Emergency light near room A-112</li> <li>2) Building A stair well south</li> </ol>
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**18 Securing Compressed Gas Containers, Cylinders and Tanks**

<p>Compressed gas containers, cylinders and tanks shall be secured to prevent falling caused by contact, vibration or seismic activity. Securing of compressed gas containers, cylinders and tanks shall be by one of the following methods:</p> <ol style="list-style-type: none"> <li>1. Securing containers, cylinders and tanks to a fixed object with one or more restraints.</li> <li>2. Securing containers, cylinders and tanks on a cart or other mobile device designed for the movement of compressed gas containers, cylinders or tanks.</li> <li>3. Nesting of compressed gas containers, cylinders and tanks at container filling or servicing facilities or in sellers' warehouses not open to the public. Nesting shall be allowed provided that the nested containers, cylinders or tanks, if dislodged, do not obstruct the required means of egress.</li> <li>4. Securing of compressed gas containers, cylinders and tanks to or within a rack, framework, cabinet or similar assembly designed for such use.</li> </ol> <p>Exception: Compressed gas containers, cylinders and tanks in the process of examination, filling, transport or servicing.</p> <p>(IFC 5303.5.3 2021)</p>	<p>The following violation was observed:</p> <p>Multiple oxygen containers were found unsecured in the following rooms:</p> <ol style="list-style-type: none"> <li>1) B210</li> <li>2) B209</li> <li>3) A202</li> </ol>
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Next inspection scheduled on or after: 8/23/2025

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 Alan Harlan  
2803 156TH AVE SE  
Bellevue WA 98007  
(425) 495-7121

Alan Harlan  Digitally signed by Alan Harlan  
Date: 2025.07.29 10:06:36 -0700

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Signature

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