

SNOHOMISH CO.

FIRE DISTRICT



Serving Brier, Edmonds, and
Mountlake Terrace

www.FireDistrict1.org



22808 100th AVE W

12425 Meridian Ave S
Everett, WA 98208
Phone (425) 551-1200
Fax (425) 551-1272

FIRE PREVENTION INSPECTION REPORT

- EDMONDS
- BRIER
- MOUNTLAKE TERRACE
- UNINCORPORATED

LOCATION: 22808 100 th Avenue W 98026

BUSINESS NAME: Great Clips

PHONE: 4257754246

MAILING ADDRESS: 22808 100th Avenue W, Edmonds, WA 98026

BUSINESS OWNER: Rooney, Susan

HOME PHONE:

EMERGENCY-1: R Rock Marketing
KEY ACCESS-2:

HOME PHONE: 4255587710
HOME PHONE:

EMAIL: _____

FREQUENCY	STATION & SHIFT
2016*	20-C
SCHEDULED DATE DUE ▶ Feb 2016	
UFIR ▶ 557 53	

CURRENT CITY BUSINESS LICENSE	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
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INITIAL INSPECTION DATE	03-10-16
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PERSON CONTACTED: * Sonya Agamalyan
NAME OF INSPECTOR: GARRETT OWENS

FIRE SYSTEMS: FE 1

Date Last Serviced:

HAZARDS FOUND AND LOCATIONS / COMMUNICATIONS

1	2x Fire Extinguisher - PAST DUE (needs to be serviced) 1 in office & 1 in hallway	1
2		2
3	FOLLOW-UP PHONE 9-26-16 WINSTON SPOKE WITH DANIELLE EXT - 3-17 EXP.	3
4		4
5		5
6		6
7		7

I AGREE TO CORRECT THE ABOVE VIOLATION(S) IN THE NEXT 30 DAYS X *Agamalyan*

In our continuing effort to promote fire safety and prevention within the community, your fire department conducts regularly scheduled "Fire Safety Survey Inspections" of all businesses and multi-family occupancies in the **Cities covered by Snohomish County Fire District 1.**

You are to be congratulated on the relative good condition of your occupancy in regards to fire safety. Above you will find the item(s) that were noted during our inspection which require attention to bring them into compliance with the minimum standards adopted by the **above jurisdictions.**

Any overlooked hazards or violations of the fire regulations does not imply approval of such conditions or violation. If you require additional information or to schedule a re-inspection for Edmonds, call (425) 775-7720; for Mountlake Terrace or Brier, call (425) 744-6231.



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FIRE PREVENTION INSPECTION REPORT
 EDMONDS
 BRIER
 MOUNTLAKE TERRACE
 UNINCORPORATED

LOCATION: 22808 100 th Avenue W 98026
 BUSINESS NAME: Great Clips
 MAILING ADDRESS: 22808 100th Avenue W, Edmonds, WA 98026
 BUSINESS OWNER: Rooney, Susan ✓
 EMERGENCY-1: R Rock Marketing
 KEY ACCESS-2:
 EMAIL:

PHONE: 4257754246

HOME PHONE:
 HOME PHONE: 4255587710
 HOME PHONE:

FREQUENCY 2015	STATION & SHIFT 20-B
SCHEDULED DATE DUE Feb 2015	
UFIR 557 53	

CURRENT CITY BUSINESS LICENSE	YES	NO
	<input checked="" type="checkbox"/>	<input type="checkbox"/>

PERSON CONTACTED: Victoria Guidry
 NAME OF INSPECTOR: Guidry
 FIRE SYSTEMS: FE 3/2015

INITIAL INSPECTION DATE
8-18-2015

HAZARDS FOUND AND LOCATIONS / COMMUNICATIONS	
1	1
2	2
3	3
4	4
5	5
6	6
7	7

I AGREE TO CORRECT THE ABOVE VIOLATION(S) IN THE NEXT 30 DAYS X

1st RE-INSPECTION		2nd RE-INSPECTION		EXTENSION GRANTED TO:	FINAL RE-INSPECTION	VIOLATIONS CITED:
DATE DUE:		DATE DUE:			DATE DUE:	
PERSON CONTACTED:		PERSON CONTACTED:			PERSON CONTACTED:	1
INSPECTOR:		INSPECTOR:			INSPECTOR:	2
DATE:		DATE:			DATE:	3
1	5	1	5	PRE-CITATION LETTER SENT	CITATION ISSUED NUMBER:	4
2	6	2	6	DATE:	CODE SECTION:	5
3	7	3	7	RETURN RECEIPT RECEIVED	DISPOSITION:	6
4	8	4	8	DATE:		7
LETTER NEEDED <input type="checkbox"/> YES <input type="checkbox"/> NO		LETTER NEEDED <input type="checkbox"/> YES <input type="checkbox"/> NO				8



Serving Brier, Edmonds
Mountlake Terrace, and
the Town of Woodway
www.FireDistrict1.org

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Everett, WA 98208
Phone (425) 551-1200
Fax (425) 551-1272

**FIRE PREVENTION
INSPECTION REPORT**
 EDMONDS
 BRIER
 WOODWAY
 MOUNTLAKE TERRACE
 UNINCORPORATED

LOCATION: **22808 100th Avenue** **W**

BUSINESS NAME: **Great Clips** PHONE: **4257754246**

MAILING ADDRESS: **22808 100Th Ave W Edmonds 98020**

BUSINESS OWNER: **R Rock Marketing** HOME PHONE: **4255587710** **ACTIVE**

EMERGENCY-1: **Rooney, Susan** HOME PHONE: **4255587710**
 KEY ACCESS-2: **Rooney, Jim** HOME PHONE: **4259858729**

FREQUENCY 731	STATION & SHIFT 20 D
SCHEDULED DATE DUE ▶	01/01/13
UFIR ▶ 557	1 053

CURRENT CITY BUSINESS LICENSE YES NO

PERSON CONTACTED: Sonya
 NAME OF INSPECTOR: McAllister 9609
 INITIAL INSPECTION DATE: 5-20-13

FIRE SYSTEMS: _____ FE 513 ANNUAL

HAZARDS FOUND AND LOCATIONS / COMMUNICATIONS		
1	<u>No violations Noted</u>	1
2		2
3		3
4		4
5		5
6		6
7		7

I AGREE TO CORRECT THE ABOVE VIOLATION(S) IN THE NEXT 30 DAYS

1st RE-INSPECTION		2nd RE-INSPECTION		EXTENSION GRANTED TO:	FINAL RE-INSPECTION	VIOLATIONS CITED:
DATE DUE:		DATE DUE:			DATE DUE:	
PERSON CONTACTED:		PERSON CONTACTED:			PERSON CONTACTED:	1
INSPECTOR:		INSPECTOR:			INSPECTOR:	2
DATE:		DATE:			DATE:	3
1	5	1	5	PRE-CITATION LETTER SENT	CITATION ISSUED NUMBER:	4
2	6	2	6	DATE:	CODE SECTION:	5
3	7	3	7	RETURN RECEIPT RECEIVED		6
4	8	4	8	DATE:	DISPOSITION:	7
LETTER NEEDED <input type="checkbox"/> YES <input type="checkbox"/> NO		LETTER NEEDED <input type="checkbox"/> YES <input type="checkbox"/> NO				8



CITY OF EDMONDS

121 5TH AVENUE N. • EDMONDS, WASHINGTON 98020 • (425) 771-0215

FIRE DEPARTMENT

FIRE PREVENTION SAFETY SURVEY

LOCATION: **22808 100th Avenue** **W**

BUSINESS NAME: **Great Clips**

PHONE: **4257754246**

MAILING ADDRESS: **22808 100Th Ave W Edmonds 98020**

BUSINESS OWNER: **R Rock Marketing**

HOME PHONE: **4255587710**

ACTIVE

EMERGENCY-1: **Rooney, Susan**

HOME PHONE: **4255587710**

KEY ACCESS-2: **Rooney, Jim**

HOME PHONE: **4259858729**

FREQUENCY 731	STATION & SHIFT 20 B
SCHEDULED DATE DUE ▶	01/01/11
UFIR ▶ 557	1 053

PERSON CONTACTED:	INITIAL INSPECTION DATE
NAME OF INSPECTOR: <i>JIC</i>	<i>1/13/11</i>

FIRE SYSTEMS:

FE *440*
ANNUAL

HAZARDS FOUND AND LOCATIONS / COMMUNICATIONS	ENTER CODE ONLY ONCE ▶	VIOLATION CODE
<i>Found</i>		1
		2
		3
		4
		5
		6
		7
		8

1st RE-INSPECTION	2nd RE-INSPECTION	EXTENSION GRANTED TO:	FINAL RE-INSPECTION	VIOLATIONS CITED:
DATE DUE:	DATE DUE:		DATE DUE:	
PERSON CONTACTED:	PERSON CONTACTED:		PERSON CONTACTED:	1
INSPECTOR:	INSPECTOR:		INSPECTOR:	2
DATE:	DATE:		DATE:	3
1 5	1 5	PRE-CITATION LETTER SENT	CITATION ISSUED	4
2 6	2 6	DATE:	NUMBER:	5
3 7	3 7	RETURN RECEIPT RECEIVED	CODE SECTION:	6
4 8	4 8	DATE:	DISPOSITION:	7
LETTER NEEDED <input type="checkbox"/> YES <input type="checkbox"/> NO	LETTER NEEDED <input type="checkbox"/> YES <input type="checkbox"/> NO			8