Form Approved OMB No. 0938-0242

A. BUILDING B. WING C. FLOOR B. WING C.						
PART I — Life & Safety Code, New and Existing PART IV — Waiver Recommendation Form    Identifying information as shown in applicable records. Enter changes, if any, alongside each item, giving date of change.   2. (A) MULTIPLE CONSTRUCTION (BLDGS)   2. (B) ADDRESS OF FACILITY (STREET, CITY, STATE, ZIP CODE)   A.   Fully Sprinklered (All squared areas are sprinklered (All squared areas ar			AKL	PROVIDER NUM		EDICAID I.D. NO.
2. (A) MULTIPLE CONSTRUCTION (BLDSS) A. BUILDING B. WING C. FLOOR A. BUILDING B. WING C. FLOOR B. WING B. Partially Sprinklered (All required areas are sprinkler B. Partially Sprinklered B. Partially Sprinkle						
A. BUILDING B. WING C. FLOOR B. WING C.	Identifying information as shown in applicat	ole records. Enter changes, if any, al	ongside each ite	m, giving dat	e of change.	
B. WING C. FLOOR B. WING C. FLOOR B. WING C. FLOOR B. B.   Partially Springer system)	2. NAME OF FACILITY 2.		2. (B) ADDRESS (	OF FACILITY (ST	REET, CITY, STATE,	/ A any opinimers
3. SURVEY FOR	кз	B. WING				(Not all required areas are sprinkler  C. None (No sprinkler system)
5. SURVEY FOR CERTIFICATION OF  1. HOSPITAL 2. SKILLED/NURSING FACILITY 4. ICF/MR UNDER HEALTH CARE 5. HOSPICE  1. HOSPITAL 2. SKILLED/NURSING FACILITY 4. ICF/MR UNDER HEALTH CARE 5. HOSPICE  1. ENTIRE FACILITY 2. DISTINCT PART OF (SPECIFY)  3. IF DISTINCT PART OF HOSPITAL, IS HOSPITAL ACCREDITED BY JCAHO/AOA? a. YES b. NO  6. BED COMPOSITION a. TYES b. NO  6. BED COMPOSITION b. NUMBER OF HOSPITAL BEDS CERTIFIED FOR MEDICARE CERTIFIED FOR MEDICARE CERTIFIED FOR MEDICAID  7. A. THE FACILITY MEETS, BASED UPON (CHECK ALL APPROPRIATE BOXES)  1. COMPLIANCE WITH ALL PROVISIONS 2. ACCEPTANCE OF A PLAN OF CORRECTION 3. RECOMMENDED WAIVERS 4. FSES 5. PERFORMANCE BASED DESIGN SURVEYOR (Signature)  TITLE  OFFICE  DATE	3. SURVEY FOR 4.	DATE OF SURVEY	DATE OF PLAN AF	PROVAL	SURVEY UNDER	1 10100
1. HOSPITAL 2. SKILLED/NURSING FACILITY 4. ICF/MR UNDER HEALTH CARE 5. HOSPICE  IF "2" OR "5" ABOVE IS MARKED, CHECK APPROPRIATE ITEM(S) BELOW  1. ENTIRE FACILITY 2. DISTINCT PART OF (SPECIFY)  3. JIF DISTINCT PART OF HOSPITAL, IS HOSPITAL ACCREDITED BY JCAHO/AOA? a. YES b. NO  6. BED COMPOSITION a. TOTAL NO. OF BEDS IN THE FACILITY			K6		_	G 6. 2000 NEW
1. ENTIRE FACILITY 2. DISTINCT PART OF (SPECIFY) JCAHO/AOA? a. YES b. NO  6. BED COMPOSITION a. TOTAL NO. OF BEDS IN THE FACILITY LITTLE BEDS CERTIFIED FOR MEDICARE CERTIFIED FOR MEDICARE CERTIFIED FOR MEDICARE CERTIFIED FOR MEDICAID  7. A. THE FACILITY MEETS, BASED UPON (CHECK ALL APPROPRIATE BOXES) 1. COMPLIANCE WITH ALL PROVISIONS 2. ACCEPTANCE OF A PLAN OF CORRECTION 3. RECOMMENDED WAIVERS 4. FSES 5. PERFORMANCE BASED DESIGN  B. THE FACILITY DOES NOT MEET THE STANDARD  SURVEYOR (Signature)  TITLE  OFFICE  DATE			NDER HEALTH CAR	E 5.	HOSPICE	
a. TOTAL NO. OF BEDS IN THE FACILITY b. NUMBER OF HOSPITAL BEDS CERTIFIED FOR MEDICARE c. NUMBER OF SKILLED BEDS CERTIFIED FOR MEDICARE d. NUMBER OF SKILLED BEDS CERTIFIED FOR MEDICAID e. NUMBER OF NF or ICF/MR BEDS CERTIFIED FOR MEDICAID c. NUMBER OF NF OR ICF/MR BEDS CERTIFIED FOR MEDICAID c. NUMBER OF NF OR ICF/MR BEDS CERTIFIED FOR MEDICAID c. NUMBER OF NF OR ICF/MR BEDS CERTIFIED FOR MEDICAID c. NUMBER OF NF OR ICF/MR BEDS CERTIFIED FOR MEDICAID c. NUMBER OF NF OR ICF/MR BEDS CERTIFIED FOR MEDICAID c. NUMBER OF NF OR ICF/MR BEDS CERTIFIED FOR MEDICAID c. NUMBER	·	,		3. IF DISTI	AOA?	
1. COMPLIANCE WITH ALL PROVISIONS 2. ACCEPTANCE OF A PLAN OF CORRECTION 3. RECOMMENDED WAIVERS 4. FSES 5. PERFORMANCE BASED DESIGN  B. THE FACILITY DOES NOT MEET THE STANDARD  SURVEYOR (Signature)  TITLE  OFFICE  DATE  SURVEYOR ID  K10						
B. THE FACILITY DOES NOT MEET THE STANDARD  SURVEYOR (Signature)  SURVEYOR ID  K10	7. A. THE FACILITY MEETS, BASED UPON (CH	ECK ALL APPROPRIATE BOXES)	·			
SURVEYOR (Signature)  SURVEYOR ID  K10  DATE	1. COMPLIANCE WITH ALL PROVISION	S 2. ACCEPTANCE OF A PLAN OF COR	RECTION 3. R	ECOMMENDED	WAIVERS 4. FSE	ES 5. PERFORMANCE BASED DESIGN
SURVEYOR ID K10	B. THE FACILITY DOES NOT MEET THE STA	ANDARD				
K10	SURVEYOR (Signature)	TITLE	OFFICE			DATE
FIRE AUTHORITY OFFICIAL (Signature)  TITLE  OFFICE  DATE	SURVEYOR ID K10					
	FIRE AUTHORITY OFFICIAL (Signature)	TITLE	OFFICE			DATE

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-0242. The time required to complete this information collection is estimated to average 5 minutes per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have any comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to CMS, Attn: PRA Reports Clearance Officer, 7500 Security Boulevard, Baltimore, Maryland 21244-1850.

ID PREFIX				MET	NOT MET	N/A	REMARKS
		PART I - LSC REQUIREMENTS - It	tems in italics relate to the FSES				
		BUILDING CON	ISTRUCTION				
K11	the resi add sha	ne building has a common wall common wall is a fire barrier hastance rating constructed of malition. Communicating openings all be protected by approved self 1.1.4.1, 18.1.1.4.2, 19.1.1.4.1,	aving at least a two hour fire aterials as required for the soccur only in corridors and lf-closing fire doors.				
K12	200	0 EXISTING					
		Iding construction type and height. 1.6.2, 19.1.6.3, 19.1.6.4, 19.3.5					
	1	I (443), I (332), II (222)	Any Height				
	2	II (111)	One story only (non-sprinklered).				
	3	II (111)	Not over three stories with complete automatic sprinkler system.				
	4	III (211)					
	5	V (111)	Not over two stories with				
	6	IV (2HH)	complete automatic sprinkler system.				
	7	II (000)					
	8	III (200)	Not over one story with complete automatic				
	9	V (000)	sprinkler system.				
	Give of s	stories, including basements, floo	S, of the construction, the number ors on which patients are located, and dates of approval. Complete				Page (

ID PREFIX					MET	NOT MET	N/A	REMARKS
K12	2000 NEW							
			ing construction type and height 6.2, 18.1.6.3, 18.2.5.1	meets one of the following:				
	1		I (443), I (332), II (222)	Any height with complete automatic sprinkler system				
	2		II (111)	Not over three stories with complete automatic sprinkler system				
	3		III (211)					
	4		V (111)	Not over one story with complete automatic sprinkler system.				
	5		IV (2HH)					
	6		II (000)					
	7		III (200)	Not Downsitted				
	8		V (000)	Not Permitted				
	☐ Building contains fire treated wood.  Give a brief description, in REMARKS, of the construction, the number of stories, including basements, floors on which patients are located, location of smoke or fire barriers and dates of approval. Complete sketch or attach small floor plan of the building as appropriate.							
K103	Interior walls and partitions in buildings of Type I or Type II construction shall be noncombustible or limited-combustible materials. 18.1.6.3, 19.1.6.3							
	(Indicate N/A for existing buildings using listed fire retardant treated wood studs within non-load bearing one-hour rated partitions.)							

ID PREFIX		MET	NOT MET	N/A	REMARKS
	INTERIOR FINISH	1		•	
K14	2000 EXISTING				
	Interior finish for corridors and exitways, including exposed interior surfaces of buildings such as fixed or movable walls, partitions, columns, and ceilings has a flame spread rating of Class A or Class B. 19.3.3.1, 19.3.3.2				
	Indicate flame spread rating/s				
	2000 NEW				
	Interior finish for corridors and exitways, including exposed interior surfaces of buildings such as fixed or movable walls, partitions, columns, and ceilings has a flame spread rating of Class A or Class B. Lower portion of corridor walls can be Class C. 18.3.3.1, 18.3.3.2				
	Indicate flame spread rating/s				
K15	2000 EXISTING				
	Interior finish for rooms and spaces not used for corridors or exitways, including exposed interior surfaces of buildings such as fixed or movable walls, partitions, columns, and ceilings has a flame spread rating of Class A or Class B. (In fully-sprinklered buildings, flame spread rating of Class A, Class B, or Class C may be continued in use within rooms separated in accordance with 19.3.6 from the access corridors.) 19.3.3.1, 19.3.3.2				
	Indicate flame spread rating/s				
	Interior finish for rooms and spaces not used for corridors or exitways, including exposed interior surfaces of buildings such as fixed or movable walls, partitions, columns, and ceilings has a flame spread rating of Class A or Class B. (Rooms not over 4 persons in capacity may have a flame spread rating of Class A, Class B, or Class C). 18.3.3.1, 18.3.3.2.  Indicate flame spread rating/s				
	AS 2796D (vy/vy) Province Versions Obsolets				Page 4

ID PREFIX		MET	NOT MET	N/A	REMARKS
K18	2000 EXISTING				
	Doors protecting corridor openings in other than required enclosures of vertical openings, exits, or hazardous areas shall be substantial doors, such as those constructed of 1³/4 inch solid-bonded core wood, or capable of resisting fire for at least 20 minutes. Doors in fully sprinklered smoke compartments are only required to resist the passage of smoke. There is no impediment to the closing of the doors. Doors shall be provided with a means suitable for keeping the door closed. Dutch doors meeting 19.3.6.3.6 are permitted. 19.3.6.3 Roller latches are prohibited by CMS regulations in all health care facilities.				
	Show in REMARKS, details of doors, such as fire protection ratings, automatic closing devices, etc.				
	2000 New				
	Doors protecting corridor openings shall be constructed to resist the passage of smoke. Doors shall be provided with positive latching hardware. Dutch doors meeting 18.3.6.3.6 are permitted. Roller latches shall be prohibited. 18.3.6.3				
	Show in REMARKS, details of doors, such as fire protection ratings, automatic closing devices, etc.				
K19	Vision panels in corridor walls or doors shall be fixed window assemblies in approved frames. (In fully sprinklered smoke compartments, there are no restrictions in the area and fire resistance of glass and frames.) 18.3.6.5, 18.3.6.3.1, 19.3.6.2.3, 19.3.6.3.8, 19.3.6.5				
K22	Access to exits shall be marked by approved, readily visible signs in all cases where the exit or way to reach exit is not readily apparent to the occupants. 7.10.1.4				
	VERTICAL OPENINGS				
K20	2000 EXISTING				
	Stairways, elevator shafts, light and ventilation shafts, chutes, and other vertical openings between floors are enclosed with construction having a fire resistance rating of at least one hour. An atrium may be used in accordance with 8.2.5.6, 19.3.1.1				

	MET	NOT MET	N/A	REMARKS
If all vertical openings are properly enclosed with construction providing at least a two hour fire resistance rating, also check this box. □				
If enclosures are less than required, give a brief description and specific location in REMARKS.				
2000 NEW				
Stairways, elevator shafts, light and ventilation shafts, chutes, and other vertical openings between floors are enclosed with construction having a fire resistance rating of at least two hours connecting four stories or more. (One hour for single story building and sprinklered buildings up to three stories in height.) 18.3.1.1. An atrium may be used in accordance with 8.2.2.3.5.				
If enclosures are less than required, give a brief description and specific location in REMARKS.				
Any door in an exit passageway, stairway enclosure, horizontal exit, smoke barrier or hazardous area enclosure shall be permitted to be held open only by devices arranged to automatically close all such doors by zone or throughout the facility upon activation of:				
$\square$ (a) The required manual fire alarm system and				
□ (b) Local smoke detectors designed to detect smoke passing through the opening or a required smoke detection system and				
$\square$ (c) The automatic sprinkler system, if installed				
18.2.2.2.6, 19.2.2.2.6, 7.2.1.8.2				
Describe method used in REMARKS				
2000 EXISTING				
Exit components (such as stairways) are enclosed with construction having a fire resistance rating of at least one hour, are arranged to provide a continuous path of escape, and provide protection against fire or smoke from other parts of the building. 8.2.5.2, 19.3.1.1				
	providing at least a two hour fire resistance rating, also check this box.   If enclosures are less than required, give a brief description and specific location in REMARKS.  2000 NEW  Stairways, elevator shafts, light and ventilation shafts, chutes, and other vertical openings between floors are enclosed with construction having a fire resistance rating of at least two hours connecting four stories or more. (One hour for single story building and sprinklered buildings up to three stories in height.) 18.3.1.1. An atrium may be used in accordance with 8.2.2.3.5.  If enclosures are less than required, give a brief description and specific location in REMARKS.  Any door in an exit passageway, stairway enclosure, horizontal exit, smoke barrier or hazardous area enclosure shall be permitted to be held open only by devices arranged to automatically close all such doors by zone or throughout the facility upon activation of:  (a) The required manual fire alarm system and (b) Local smoke detectors designed to detect smoke passing through the opening or a required smoke detection system and (c) The automatic sprinkler system, if installed 18.2.2.2.6, 19.2.2.2.6, 7.2.1.8.2  Describe method used in REMARKS  2000 EXISTING  Exit components (such as stairways) are enclosed with construction having a fire resistance rating of at least one hour, are arranged to provide a continuous path of escape, and provide protection against fire or smoke from other parts of the	If all vertical openings are properly enclosed with construction providing at least a two hour fire resistance rating, also check this box. □   If enclosures are less than required, give a brief description and specific location in REMARKS.   2000 NEW     Stairways, elevator shafts, light and ventilation shafts, chutes, and other vertical openings between floors are enclosed with construction having a fire resistance rating of at least two hours connecting four stories or more. (One hour for single story building and sprinklered buildings up to three stories in height.) 18.3.1.1. An atrium may be used in accordance with 8.2.2.3.5.   If enclosures are less than required, give a brief description and specific location in REMARKS.   Any door in an exit passageway, stairway enclosure, horizontal exit, smoke barrier or hazardous area enclosure shall be permitted to be held open only by devices arranged to automatically close all such doors by zone or throughout the facility upon activation of:	### ### ### ### ### ### ### ### ### ##	If all vertical openings are properly enclosed with construction providing at least a two hour fire resistance rating, also check this box.

ID PREFIX		MET	NOT MET	N/A
	If all vertical openings are properly enclosed with construction providing at least a two hour fire resistance rating, also check this box.			
	If enclosures are less than required, give a brief description and specific location in REMARKS.			
	2000 NEW			
	Exit components (such as stairways) in buildings four stories or more are enclosed with construction having a fire resistance rating of at least two hours, are arranged to provide a continuous path of escape, and provide a protection against fire and smoke from other parts of the building. In all buildings less than four stories, the enclosure is at least one hour. 8.2.5.4, 18.3.1.1			
	If enclosures are less than required, give a brief description and specific location in REMARKS.			
	SMOKE COMPARTMENTATION AND CONTROL			
K23	2000 EXISTING			
	Smoke barriers shall be provided to form at least two smoke compartments on every sleeping room floor for more than 30 patients. 19.3.7.1, 19.3.7.2			
	2000 NEW			
	Smoke barriers shall be provided to form at least two smoke compartments on every floor used by inpatients for sleeping or treatment, and on every floor with an occupant load of 50 or more persons, regardless of use. Smoke barriers shall also be provided on floors that are usable, but unoccupied. 18.3.7.1, 18.3.7.2			
K24	The smoke compartments shall not exceed 22,500 square feet and the travel distance to and from any point to reach a door in the required smoke barrier shall not exceed 200 feet. 18.3.7.1, 19.3.7.1			
	Detail in REMARKS zone dimensions including length of zones and dead end corridors.			
	10.0700P ( / ) P : 1/ : 01 1 /			

ID PREFIX		MET	NOT MET	N/A	REMARKS
K25	2000 EXISTING  Smoke barriers shall be constructed to provide at least a one-half hour fire resistance rating and constructed in accordance with 8.3. Smoke barriers shall be permitted to terminate at an atrium wall. Windows shall be protected by fire-rated glazing or by wired glass panels and steel frames. A minimum of two separate compartments shall be provided on each floor. Dampers shall not be required in duct penetrations of smoke barriers in fully ducted heating, ventilating, and air conditioning systems.19.3.7.3, 19.3.7.5, 19.1.6.3, 19.1.6.4				
	2000 NEW  Smoke barriers shall be constructed to provide at least a one-hour fire resistance rating and constructed in accordance with 8.3. Smoke barriers shall be permitted to terminate at an atrium wall. Windows shall be protected by fire-rated glazing or by wired glass panels in approved frames. A minimum of two separate compartments shall be provided on each floor. Dampers shall not be required in duct penetrations of smoke barriers in fully ducted heating, ventilating, and air conditioning systems. 18.3.7.3, 18.3.7.5, 18.1.6.3				
K26	Space shall be provided on each side of smoke barriers to adequately accommodate those occupants served. 18.3.7.4, 19.3.7.4				
K27	2000 EXISTING  Door openings in smoke barriers have at least a 20 minute fire protection rating or are at least 1 <sup>3</sup> / <sub>4</sub> inch thick solid bonded core wood. Non-rated protective plates that do not exceed 48 inches from the bottom of the door are permitted. Horizontal sliding doors comply with 7.2.1.14. Doors shall be self-closing or automatic-closing in accordance with 19.2.2.2.6. Swinging doors are not required to swing with egress and positive latching is not required. 19.3.7.5, 19.3.7.6, 19.3.7.7				
	2000 NEW  Door openings in smoke barriers have at least a 20 minute fire protection rating or are at least 1 <sup>3</sup> / <sub>4</sub> inch thick solid bonded core wood. Non-rated protective plates that do not exceed 48 inches from the bottom of the door are permitted. Horizontal sliding doors comply with 7.2.1.14. Swinging doors shall be arranged so that each door swings in an opposite direction. Doors shall be self-closing and rabbets, bevels or astragals are required at the meeting edges. Positive latching is not required. 18.3.7.5, 18.3.7.6, 18.3.7.8				

ID					Т	NOT	
PREFIX				N		NOT MET	N/A
K28	2000 EXISTING						
	Door openings in smoke width of 32 inches (81 cr Vision panels are of firesteel frames. 19.3.7.5, 1	m) for swinging or rated glazing or	or horizontal doc	ors.			
	2000 NEW						
	Door openings in smoke horizontal doors shall pro						
	Provider Type	Swinging Doors	Horizontal Slidir	g Doors			
	Hospitals and Nursing Facilities	41.5 inches (105 cm)	83 inche (211 cm	- 11			
	Psychiatric Hospitals and Limited Care Facilities	32 inches (81 cm)	64 inche (163 cm	- 11			
	Vision panels of fire-rate frames are provided for			roved			
K104	Penetrations of smoke b accordance with 8.3.6.	parriers by ducts	are protected in				
	Describe any mechanica	al smoke control	system in REM/	ARKS.			
		HAZARDOUS	AREA				
K29	2000 EXISTING						
	One hour fire rated cons an approved automatic f with 8.4.1 and/or 19.3.5. approved automatic fire areas shall be separated partitions and doors. Do field-applied protective p the bottom of the door a	ire extinguishing 4 protects hazar extinguishing sy d from other sparors shall be self-plates that do not re permitted. 19	system in accordous areas. Whe stem option is under the ces by smoke reclosing and non the exceed 48 inches. 3.2.1	rdance en the sed, the ssisting -rated or es from			
	Area a. Boiler and Fuel-Fired Heater Roor		atic Sprinkler Separation	on N/A			
	c. Laundries (greater than 100 sq fee						
	d. Repair Shops and Paint Shops e. Laboratories (if classified a Severe l	Hazard - see K31)					
	f. Combustible Storage Rooms/Space						
	g. Trash Collection Rooms i. Soiled Linen Rooms						
	Describe the floor and zo are deficient in REMARK.		azardous areas tr	hat			

ID		T	NOT		
PREFIX		MET	MET	N/A	REMARKS
	2000 NEW Hazardous areas are protected in accordance with 8.4. The areas shall be enclosed with a one hour fire-rated barrier, with a <sup>3</sup> / <sub>4</sub> hour fire-rated door, without windows (in accordance with 8.4). Doors shall be self-closing or automatic closing in accordance with 7.2.1.8. 18.3.2.1  Area  Automatic Sprinkler  Automatic Sprinkler  Separation  N/A				
	c. Laundries (greater than 100 sq feet) d. Repair, Maintenance and Paint Shops e. Laboratories (if classified a Severe Hazard - see K31) f. Combustible Storage Rooms/Spaces (over 50 and less than 100 sq feet) g. Trash Collection Rooms i. Soiled Linen Rooms m.Combustible Storage Rooms/Spaces (over 100 sq feet)  Describe the floor and zone locations of hazardous areas that are deficient in REMARKS.				
K30	Gift shops shall be protected as hazardous areas when used for storage or display of combustibles in quantities considered hazardous. Non-rated walls may separate gift shops that are not considered hazardous, have separate protected storage and that are completely sprinkled. Gift shops may be open to the corridor if they are not considered hazardous, have separate protected storage, are completely sprinklered and do not exceed 500 square of eet. 18.3.2.5, 19.3.2.5    Area				
K211	2000 EXISTING Where Alcohol Based Hand Rub (ABHR) dispensers are installed: ☐ The corridor is at least 6 feet wide ☐ The maximum individual fluid dispenser capacity shall be 1.2 liters (2 liters in suites of rooms) ☐ The dispensers shall have a minimum spacing of 4 ft from each other ☐ Not more than 10 gallons are used in a single smoke compartment outside a storage cabinet. ☐ Dispensers are not installed over or adjacent to an ignition source. ☐ If the floor is carpeted, the building is fully sprinklered. 19.3.2.7 CFR 403.744, 418.100, 460.72, 482.41, 483.70, 483.623, 485.623				

ID PREFIX		MET	NOT MET	N/A	REMARKS
K211	2000 NEW Where Alcohol Based Hand Rub (ABHR) dispensers are installed:  The corridor is at least 6 feet wide The maximum individual fluid dispenser capacity shall be 1.2 liters (2 liters in suites of rooms) The dispensers shall have a minimum spacing of 4 ft from each other Not more than 10 gallons are used in a single smoke compartment outside a storage cabinet. Dispensers are not installed over or adjacent to an ignition source. If the floor is carpeted, the building is fully sprinklered. 18.3.2.7. CFR 403.744, 418.100, 460.72, 482.41, 483.70, 483.623, 485.623		IVIE I		
	EXIT AND EXIT ACCESS				
K32	Not less than two exits, remote from each other, are provided for each floor or fire section of the building. Only one of these two exits may be a horizontal exit. 18.2.4.1, 18.2.4.2, 19.2.4.1, 19.2.4.2				
	EXITS AND EGRESS		•		
K34	Stairways and smokeproof towers used as exits are in accordance with 7.2. 18.2.2.4, 19.2.2.3, 19.2.2.4				
K35	Capacity of exits in number of persons per unit of exit width is in accordance with 7.3. 18.2.3.1, 19.2.3.1				
K36	Travel distance (exit access) to exits are in accordance with 7.6. 18.2.6, 19.2.6				
K37	2000 EXISTING  Existing dead-end corridors shall be permitted to be continued to be used if it is impractical and unfeasible to alter them so that exists are accessible in not less than two different directions from all points in aisles, passageways, and corridors. 19.2.5.10				

ID PREFIX		MET	NOT MET	N/A	REMARKS
	2000 NEW				
	Every exit and exit access shall be arranged so that no corridor, aisle or passageway has a pocket or dead-end exceeding 30 feet. 18.2.5.10				
⟨38	Exit access is so arranged that exits are readily accessible at all times in accordance with 7.1. 18.2.1, 19.2.1				
(39	2000 EXISTING				
	Width of aisles or corridors (clear and unobstructed) serving as exit access shall be at least 4 feet. 19.2.3.3				
	2000 NEW				
	Width of aisles or corridors (clear and unobstructed) serving as exit access in hospitals and nursing homes shall be at least 8 feet. In limited care facility and psychiatric hospitals, width of aisles or corridors shall be at least 6 feet. 18.2.3.3, 18.2.3.4				
K40	2000 EXISTING				
	Exit access doors and exit doors used by health care occupants are of the swinging type and are at least 32 inches in clear width. 19.2.3.5				
	2000 NEW				
	Exit access doors and exit doors used by health care occupants are of the swinging type, with openings of at least 41.5 inches wide. Doors in exit stairway enclosures shall be no less than 32 inches in clear width. In ICFs/MR, doors are at least 32 inches wide. 18.2.3.5				
K41	All sleeping rooms have a door leading to a corridor providing access to an exit or have a door leading directly to grade. One room may intervene in accordance with 18.2.5.1, 19.2.5.1, 18.2.5.9, 19.2.5.9				
	If doors lead directly to grade from each room, check this box. $\Box$				
K42	Any room or suite of rooms of more than 1,000 sq. ft. has at least 2 exit access doors remote from each other. 18.2.5.2, 19.2.5.2				
	AC 2796D (suchus) Provinces Varnings Observed				Page 1

ID		MET	NOT	N/A
PREFIX K43	Patient room doors are arranged such that the patients can open		MET	
	the door from inside without using a key.			
	Special door locking arrangements are permitted in facilities. 18.2.2.2.4, 18.2.2.2.5			
	If door locking arrangement without delay egress is used indicate in REMARKS			
	18.2.2.2.2, 19.2.2.2.2			
K44	Horizontal exits, if used, are in accordance with 7.2.4. 18.2.2.5, 19.2.2.5			
	ILLUMINATION AND EMERGENCY POWER			
K45	Illumination of means of egress, including exit discharge, is arranged so that failure of any single lighting fixture (bulb) will not leave the area in darkness. 18.2.8, 19.2.8, 7.8			
K46	Emergency lighting of at least 1½ hour duration is provided in accordance with 7.9. 18.2.9.1, 19.2.9.1.			
K47	2000 EXISTING			
	Exit and directional signs are displayed in accordance with 7.10 with continuous illumination also served by the emergency lighting system. 19.2.10.1  (Indicate N/A in one story buildings with less than 30 occupants where the line of exit travel is obvious.)			
	2000 NEW			
	Exit and directional signs are displayed with continuous illumination also served by the emergency lighting, system in accordance with 7.10. 18.2.10.1			

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ID PREFIX		MET	NOT MET	N/A	REMARKS
K105	2000 NEW (INDICATE N/A FOR EXISTING)				
	Buildings equipped with or requiring the use of life support systems (electro-mechanical or inhalation anesthetics) have illumination of means of egress, emergency lighting equipment, exit, and directional signs supplied by the Life Safety Branch of the electrical system described in NFPA 99. 18.2.9.2., 18.2.10.2, 18.5.1.1, 18.5.1.2				
	(Indicate N/A if life support equipment is for emergency purposes only).				
K107	2000 NEW (INDICATE N/A FOR EXISTING)				
	Required alarm and detection systems are provided with an alternative power supply in accordance with NFPA 72. 9.6.1, 18.3.4.1.3				
K108	2000 NEW (INDICATE N/A FOR EXISTING)				
	Alarms, emergency communication systems, and illumination of generator set locations are in accordance with NFPA 70. 9.1.2				
	EMERGENCY PLAN AND FIRE DRILLS				
K48	There is a written plan for the protection of all patients and for their evacuation in the event of an emergency. 18.7.1.1, 19.7.1.1				
K50	Fire drills are held at unexpected times under varying conditions, at least quarterly on each shift. The staff is familiar with procedures and is aware that drills are part of established routine. Responsibility for planning and conducting drills is assigned only to competent persons who are qualified to exercise leadership. Where drills are conducted between 9:00 PM and 6:00 AM a coded announcement may be used instead of audible alarms. 18.7.1.2, 19.7.1.2				
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ID PREFIX		MET	NOT MET	N/A	REMARKS
	FIRE ALARM SYSTEMS				
K51	A fire alarm system with approved component, devices or equipment installed according to NFPA 72, National Fire Alarm Code to provide effective warning of fire in any part of the building. Activation of the complete fire alarm system shall be by manual fire alarm initiation, automatic detection or extinguishing system operation. Pull stations in patient sleeping areas, may be omitted provided that manual pull stations are within 200 ft of nurse's stations. Pull stations are located in the path of egress. Electronic or written records of tests shall be available. A reliable second source of power must be provided. Fire alarm systems shall be in accordance with NFPA72, and records of maintenance kept readily available. There shall be annunciation of the fire alarm system to an approved central station. 19.3.4, 9.6	à			
	A fire alarm system with approved component, devices or equipment installed according to NFPA 72, to provide effective warning of fire in any part of the building. Activation of the complete fire alarm system shall be by manual fire alarm initiation, automatic detection or extinguishing system operation. Pull stations are located in the path of egress. Electronic or written records of tests shall be available. A reliable second source of power must be provided. Fire alarm systems shall be maintained in accordance with NFPA72, and records of maintenance kept readily available. There shall be remote annunciation of the fire alarm system to an approved central station. 18.3.4, 9.6				
K52	A fire alarm system required for life safety shall be installed, tested, and maintained in accordance with NFPA 70 National Electrical Code and NFPA 72. The system shall have an approved maintenance and testing program complying with applicable requirement of NFPA 70 and 72. 9.6.1.4				
K155	Where a required fire alarm system is out of service for more than 4 hours in a 24-hour period, the authority having jurisdiction shall be notified, and the building shall be evacuated or an approved fire watch shall be provided for all parties left unprotected by the shutdown until the fire alarm system has been returned to service. 9.6.1.8				

PREFIX		MET	NOT MET	N/A	REMARKS
<b>&lt;</b> 53	2000 EXISTING (INDICATE N/A FOR HOSPITAL AND FULLY SPRINKLERED NURSING HOMES)				
	In an existing nursing home, not fully sprinklered, the resident sleeping rooms and public areas (dining rooms, activity rooms, resident meeting rooms, etc) are to be equipped with single station battery-operated smoke detectors. There will be a testing, maintenance and battery replacement program to ensure proper operation. CFR 483.70				
	2000 NEW (NURSING HOME AND EXISTING LIMITED CARE FACILITIES)				
	An automatic smoke detection system is installed in all corridors. (As an alternative to the corridor smoke detection system on patient sleeping room floors, smoke detectors may be installed in each patient sleeping room and at smoke barrier or horizontal exit doors in the corridor.) Such detectors are electrically interconnected to the fire alarm system. 18.3.4.5.3				
K109	2000 EXISTING LIMITED CARE FACILITIES (INDICATE N/A FOR HOSPITALS OR NURSING HOMES)				
	An automatic smoke detection system is installed in all corridors with detector spacing no further apart than 30 ft on center in accordance with NFPA 72. (As an alternative to the corridor smoke detection system on patient sleeping room floors, smoke detectors may be installed in each patient sleeping room and at smoke barrier or horizontal exit doors in the corridors.) Such detectors are electrically interconnected to the fire alarm system. 19.3.4.5.1				
	Smoke Detection System ☐ Corridors ☐ Rooms ☐ Bath				
K54	All required smoke detectors, including those activating door hold-open devices, are approved, maintained, inspected and tested in accordance with the manufacturer's specifications. 9.6.1.3				
	Give a brief description, in REMARKS of any smoke detection system which may be installed.				

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ID PREFIX		MET	NOT MET	N/A	REMARKS
K55	2000 EXISTING  Every patient sleeping room shall have an outside window or				
	outside door. Except for newborn nurseries and rooms intended for occupancy for less than 24 hours. 19.3.8				
	2000 NEW				
	Every patient sleeping room shall have an outside window or outside door. The allowable sill height shall not exceed 36 inches (91 cm) above the floor. Windows are not required for recovery rooms, newborn nurseries, emergency rooms, and similar rooms intended for occupancy for less than 24 hours. Window sill height for limited care facilities shall not exceed 44 inches (112 cm) above the floor. 18.3.8				
	AUTOMATIC SPRINKLER SYSTEMS				
K56	2000 EXISTING				
	Where required by section 19.1.6, Health care facilities shall be protected throughout by an approved, supervised automatic sprinkler system in accordance with section 9.7. Required sprinkler systems are equipped with water flow and tamper switches which are electrically interconnected to the building fire alarm. 19.3.5, NPFA 13				
	2000 NEW				
	There is an automatic sprinkler system installed in accordance with NFPA13, Standard for the Installation of Sprinkler Systems, with approved components, device and equipment, to provide complete coverage of all portions of the facility. Systems are equipped with waterflow and tamper switches, which are connected to the fire alarm system. 18.3.5.				
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PREFIX		MET	NOT MET	N/A	REMARKS
K154	Where a required automatic sprinkler system is out of service for more than 4 hours in a 24-hour period, the authority having jurisdiction shall be notified, and the building shall be evacuated or an approved fire watch system be provided for all parties left unprotected by the shutdown until the sprinkler system has been returned to service. 9.7.6.1.				
	A. Date sprinkler system last checked and necessary maintenance provided.				
	B. Show who provided the service.				
	C. Note the source of water supply for the automatic sprinkler system.				
	(Provide, in REMARKS, information on coverage for any non-required or partial automatic sprinkler system.)				
K60	Initiation of the required fire alarm systems shall be by manual means in accordance with 9.6.2 and by means of any required sprinkler system waterflow alarms, detection devices, or detection systems. 18.3.4.2, 19.3.4.2, 9.6.2.1				
K61	Required automatic sprinkler systems shall have valves supervised so that at least a local alarm will sound when the valves are closed. 9.7.2.1, NFPA 72				
K62	Automatic sprinkler systems are continuously maintained in reliable operating condition and are inspected and tested periodically. 18.7.6, 19.7.6, 4.6.12, NFPA 13, NFPA 25, 9.7.5				
K63	Required automatic sprinkler systems have an adequate and reliable water supply which provides continuous and automatic pressure. 9.7.1.1, NFPA 13				
K64	Portable fire extinguishers shall be provided in all health care occupancies in accordance with 9.7.4.1, NFPA 10. 18.3.5.6, 19.3.5.6				

ID PREFIX		MET	NOT MET	N/A	REMARKS
	SMOKING REGULATIONS				
K66	Smoking regulations shall be adopted and shall include not less than the following provisions: 18.7.4, 19.7.4				
	□ (1) Smoking shall be prohibited in any room, ward, or compartment where flammable liquids, combustible gases, or oxygen is used or stored in any other hazardous location, and such area shall be posted with signs that read NO SMOKING or shall be posted with the international symbol for no smoking.				
	☐ (2) Smoking by patients classified as not responsible shall be prohibited, except when under direct supervision.				
	☐ (3) Ashtrays of noncombustible material and safe design shall be provided in all areas where smoking is permitted.				
	☐ (4) Metal containers with self-closing cover devices into which ashtrays can be emptied shall be readily available to all areas where smoking is permitted.				
	BUILDING SERVICE EQUIPMENT				
K67	Heating, ventilating, and air conditioning shall comply with 9.2 and shall be installed in accordance with the manufacturer's specifications. 18.5.2.1, 19.5.2.1, 9.2, NFPA 90A, 18.5.2.2, 19.5.2.2				
K68	Combustion and ventilation air for boiler, incinerator and heater rooms is taken from and discharged to the outside air. 18.5.2.2, 19.5.2.2.				
K69	Cooking facilities shall be protected in accordance with 9.2.3. 18.3.2.6, 19.3.2.6, NFPA 96				
K70	Portable space heating devices shall be prohibited in all health care occupancies. Except it shall be permitted to be used in non-sleeping staff and employee areas where the heating elements of such devices do not exceed 212°F (100°C).				
	18.7.8, 19.7.8				
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ID PREFIX		MET	NOT MET	N/A	REMARKS
K71	Rubbish Chutes, Incinerators and Laundry Chutes. 18.5.4, 19.5.4, 9.5, 8.4, NFPA 82				
	☐ (1) Any existing linen and trash chute, including pneumatic rubbish and linen systems, that opens directly onto any corridor shall be sealed by fire resistive construction to prevent further use or shall be provided with a fire door assembly having a fire protection rating of 1 hour. All new chutes shall comply with 9.5.				
	☐ (2) Any rubbish chute or linen chute, including pneumatic rubbish and linen systems, shall be provided with automatic extinguishing protection in accordance with 9.7.				
	☐ (3) Any trash chute shall discharge into a trash collection room used for no other purpose and protected in accordance with 8.4.				
	(4) Existing flue-fed incinerators shall be sealed by fire resistive construction to prevent further use.				
K160	2000 EXISTING				
	All existing elevators, having a travel distance of 25 ft or more above or below the level that best serves the needs of emergency personnel for fire fighting purposes, conform with Firefighter's Service Requirements of ASME/ ANSI A17.3, Safety Code for Existing Elevators and Escalators. 19.5.3, 9.4.3.2				
	ANSI A17.1 states 25 ft or more above or below the designated level and defines "designated level" as the main floor or other floor level that best serves the needs of emergency personnel for fire fighting purposes or rescue purposes identified by the building code or fire authority. Depending on floor slab thickness and heights this would generally apply to a three-story building, and almost certainly to a four-story building.				
	Includes firefighters service <b>phase I</b> key recall and smoke detector automatic recall, firefighters service <b>phase II</b> emergency in-car key operation, machine room smoke detectors, and elevator lobby smoke detectors. 19.5.3, 9.4.3.2				Page 21

ID PREFIX		MET	NOT MET	N/A	REMARKS
K161	2000 EXISTING  All existing escalators, dumbwaiters, and moving walks conform to the requirements of ASME/ ANSI A17.3, <i>Safety Code for Existing Elevators and Escalators</i> . 19.5.3, 9.4.2.2  Includes escalator emergency stop buttons and automatic skirt obstruction stop. For power dumbwaiters includes hoistway door locking to keep doors closed except for floor where car is being loaded or unloaded.				
	2000 NEW  All elevators, escalators, and conveyors comply with  ASME/ ANSI A17.1, Safety Code for Elevators and Escalators  (Includes car emergency signaling, firefighters service phase I key and smoke detector automatic recall, firefighters service phase II emergency in-car operation, machine room smoke detectors, elevator lobby smoke detectors). 18.5.3, 9.4				
	FURNISHINGS AND DECORATIONS				
K72	Means of egress shall be continuously maintained free of all obstructions or impediments to full instant use in the case of fire or other emergency. No furnishings, decorations, or other objects shall obstruct exits, access thereto, egress there from, or visibility thereof shall be in accordance with 7.1.10				
K73	No furnishings or decorations of highly flammable character shall be used. 18.7.5.2, 18.7.5.3, 18.7.5.4, 19.7.5.2, 19.7.5.3, 19.7.5.4				
K74	Draperies, curtains, including cubicle curtains, and other loosely hanging fabrics and films serving as furnishings or decorations in health care occupancies shall be in accordance with provisions of 10.3.1 and NFPA 13 Standard for the Installation of Sprinkler Systems. Except shower curtains shall be in accordance with NFPA 701.				
	<ul> <li>Newly introduced upholstered furniture shall meet the criteria specified when tested in accordance with the methods cited in 10.3.2 (2) and 10.3.1. 18.3.5.3 and NFPA 13</li> <li>Newly introduced mattresses shall meet the criteria specified when tested in accordance with the method cited in 10.3.2 (3) and 10.3.4. 18.7.5.3, 19.7.5.3</li> </ul>				
	Newly introduced upholstered furniture and mattresses means purchased since March, 2003.				Dogg 22

			NOT		
ID PREFIX		MET	NOT MET	N/A	REMARKS
K75	Soiled linen or trash collection receptacles shall not exceed 32 gal (121 L) in capacity. The average density of container capacity in a room or space shall not exceed .5 gal/ft² (20.4 L/m²). A capacity of 32 gal (121 L) shall not be exceeded within any 64-ft² (5.9-m²) area. Mobile soiled linen or trash collection receptacles with capacities greater than 32 gal (121 L) shall be located in a room protected as a hazardous area when not attended. 18.7.5.5, 19.7.5.5				
	LABORATORIES				
K31	Laboratories employing quantities of flammable, combustible, or hazardous materials that are considered a severe hazard shall be protected in accordance with NFPA 99. (Laboratories that are not considered to be severe hazard shall meet the provision of K29.) Laboratories in Health Care occupancies and medical and dental offices shall be in accordance with NFPA 99, Standard for Health Care Facilities 10.5.1.	1			
K136	Procedures for laboratory emergencies shall be developed. Such procedures shall include alarm actuation, evacuation, and equipment shutdown procedures, and provisions for control of emergencies that could occur in the laboratory, including specific detailed plans for control operations by an emergency control group within the organization or a public fire department in accordance with NFPA 99, 10.2.1.3.1, 18.3.2.2., 19.3.2.1				
K131	Emergency procedures shall be established for controlling chemical spills in accordance with NFPA 99. 10.2.1.3.2				
K132	Continuing safety education and supervision shall be provided, incidents shall be reviewed monthly, and procedures reviewed annually shall be in accordance with NFPA 99. 10.2.1.4.2				
K133	Fume hoods shall be in accordance with NFPA 99. 5.4.3, 5.6.2				
K134	Emergency Shower: Where the eyes or body of any person can be exposed to injurious corrosive materials, suitable fixed facilities for quick drenching or flushing of the eyes and body shall be provided within the work area for immediate emergency use. Fixed eye baths designed and installed to avoid injurious water pressure shall be in accordance with NFPA 99, 10.6.				Dage 25

ID PREFIX		MET	NOT MET	N/A	REMARKS
K135	Flammable and combustible liquids shall be used from and stored in approved containers in accordance with NFPA 30, Flammable and Combustible Liquids Code, and NFPA 45, Standard on Fire Protection for Laboratories Using Chemicals. Storage cabinets for flammable and combustible liquids shall be constructed in accordance with NFPA 30, Flammable and Combustible liquids Code NFPA 99, 4.3, 10.7.2.1.				
	MEDICAL GASES AND ANESTHETIZING AREAS				
<b>&lt;</b> 76	Medical gas storage and administration areas shall be protected in accordance with NFPA 99, Standard for Health Care Facilities.				
	<ul><li>(a) Oxygen storage locations of greater than 3,000 cu.ft. are enclosed by a one-hour separation.</li><li>(b) Locations for supply systems of greater than 3,000 cu.ft. are vented to the outside. NFPA 99, 4.3.1.1.2, 18.3.2.4, 19.3.2.4</li></ul>				
(77	Piped in medical gas systems comply with NFPA 99, Chapter 4.				
<b>&lt;</b> 78	Anesthetizing locations shall be protected in accordance with NFPA 99, Standard for Health Care Facilities.  (a) Shutoff valves are located outside each anesthetizing location and arranged so that shutting off one room or location will not affect others.  (b) Relative humidity is maintained equal to or great than 35%  NFPA 99 4.3.1.2.3(n) and 5.4.1.1, 18.3.2.3, 19.3.2.3				
(140	<ul> <li>(a) Master alarm panels are in two separate locations and have audible and visible signals.</li> <li>(b) There are high/low alarms for +/- 20% operating pressure. This section shall be in accordance with NFPA 99, 4.3.1.2.2</li> <li>(c) Where a level 2 gas system is used, one alarm panel that complies with 4.3.1.2.2(b) 3 a, b, c and d and with 4.3.1.2.2(c) 2 and 5 shall be permitted. (4.4.1 exception No. 4).</li> </ul>				
<141	Non-smoking and no smoking signs in areas where oxygen is used or stored shall be in accordance with 18.3.2.4, 19.3.2.4, NFPA 99, 8.6.4.2				
K142	All occupancies containing hyperbaric facilities shall comply with NFPA 99, Standard for Health Care Facilities, Chapter 19.				

ID		NACT	NOT	N1/A	DEMARKS
PREFIX		MET	MET	N/A	REMARKS
K143	Transferring of oxygen shall be:  (a) separated from any portion of a facility wherein patients are housed, examined, or treated by a separation of a fire barrier of 1-hour fire-resistive construction; and				
	<ul><li>(b) the area that is mechanically ventilated, sprinklered, and has ceramic or concrete flooring; and</li></ul>				
	(c) in an area that is posted with signs indicating that transferring is occurring, and that smoking in the immediate area is not permitted in accordance with NFPA 99 and Compressed Gas Association. 8.6.2.5.2				
	ELECTRICAL				
K106	The hospital and all nursing homes and hospices with life support equipment has a Type I Essential Electrical System powered by a generator with a transfer switch and separate power supply. The EES is in accordance with NFPA 99, 3.4.2.2, 3.4.2.1.4				
K144	Generators inspected weekly and exercised under load for 30 minutes per month and shall be in accordance with NFPA 99, 3.4.4.1, NFPA 110, 8.4.2				
K145	The Type I EES is divided into the critical branch, life safety branch and the emergency system and shall be in accordance with NFPA 99, 3.4.2.2.2				
K146	The nursing home/hospice with no life support equipment shall have an alternate source of power separate and independent from the normal source that will be effective for minimum of 1½ hour after loss of the normal source NFPA 99, 3.6.				
K147	Electrical wiring and equipment shall be in accordance with NFPA 70, National Electrical Code. 9.1.2				
K130	Miscellaneous				
	List in the REMARKS sections, any items that are not listed previously, but are deficient. This information, along with the applicable Life Safety Code or NFPA standard citation, should be included on Form CMS-2567.				

Name of Facility				2000 CODE
	PART IV RE	COMMENDATION FOR WAIVER OF	SPECIFIC LIFE SAFETY CODE PROVISIONS	
	number and si applied, would provisions will	tate the reason for the conclusion that I result in unreasonable hardship on t	d for waiver, list the survey report form item t: (a) the specific provisions of the code, if rigidly the facility, and (b) the waiver of such unmet afety of the patients. If additional space is	
PROVISION NUMBER(S)			JUSTIFICATION	
< 84				
Surveyor <i>(Signature)</i>		Title	Office	Date
Fire Authority Official (Signatu	ıre)	Title	Office	Date

## FIRE SAFETY SURVEY REPORT CRUCIAL DATA EXTRACT (TO BE USED WITH CMS-2786 FORMS)

				100/4-01			
PROVIDE	PROVIDER NUMBER	FACILITY NAME				SURVEY DATE	
<b>X</b>						* K4	
ке ПАТЕ	DATE OF PLAN	K3 MULTIPLE CONSTRUCTION	NSTRUCTION	_		A BUILDING	
	APPROVAL	TOTAL NUMBER OF BUILDINGS	OF BUILDINGS	(0)		B WING	
		NUMBER OF THIS BUILDING	BUILDING				L
LSC FOR	LSC FORM INDICATOR		ŏ	OMPLETE IF	COMPLETE IF ICF/MR IS SURVEYED UNDER CHAPTER 21	D UNDER CHAPTE	R 21
	Health	Health Care Form	<u>s</u>	SMALL	(16 BEDS OR LESS)	<b>6</b>	
12	2786R	2000 EXISTING			1 PROMPT		
13	2786R	2000 NEW	<u>8</u>		2 SLOW		
					3 IMPRACTICAL		
	AS	ASC Form	7	LARGE			
14	2786U	2000 EXISTING			TOMOGOL		
15	2786U	2000 NEW	Š		4 TROMP 4		
			2				
	ICF/	ICF/MR Form			6 IMPRACIICAL		
16	2786V, W, X	2000 EXISTING	A	APARTMENT HOUSE	HOUSE		
17	2786V, W, X	2000 NEW			7 PROMPT		
			<u> </u>		8 SLOW		
* K7	SELECT NUMBEF	SELECT NUMBER OF FORM USED FROM ABOVE	M ABOVE		9 IMPRACTICAL		
(Check if in the 27	K29 or K56 are 1. '86 M, R, T, U, V,	(Check if K29 or K56 are marked as not applicable in the 2786 M, R, T, U, V, W, X and Y.)		NTER E - SO	ENTER E – SCORE HERE		
Ÿ	K29:	K56:		.:	e.g. 2.5		
*K9: FACII	*K9: FACILITY MEETS LSC	'S LSC BASED ON <i>(Check all that apply)</i>	all that apply)				
ď	A1.	A2.	A3.		A4.	A5.	
AL	(COMP. WITH ALL PROVISIONS)	(ACCEPTABLE POC)		(WAIVERS)	(FSES)	(PERFORMANCE BASED DESIGN)	MANCE ESIGN)
FACILITY	FACILITY DOES NOT MEET LSC	ET LSC	K0180 A.		B.	·	
Ю			FULLY SPRINKLERED (All required areas are sprinklere	FULLY SPRINKLERED (All required areas are sprinklered)	PARTIALLY SPRINKLERED (Not all required areas are sprinklered)	ERED NONE vrinklered) (No sprinkler system)	: iystem)
* MANDATORY	TORY						