



**Seattle Fire Marshal's Office**  
220 3<sup>rd</sup> Avenue South, 2<sup>nd</sup> Floor  
Seattle, WA 98104  
(206) 386-1340

## REPORT OF IMPAIRED SYSTEM

For planned or emergency impairments to fire protection systems with a duration of more than 8 hours

SFD Administrative Rule 9.04

<b>SECTION 1: REPORTING PARTY INFORMATION</b>  Name of person reporting impairment: <u>Robert Nelson</u>  Phone number: <u>206-9633249</u> Email: <u>theolivianmaint@greystar.com</u>  Company name: <u>Greystar</u>  Date: <u>04/27/2023</u> Time: <u>15:52</u>	<b>SECTION 2: BUILDING INFORMATION</b>  Building name: <u>The Olivian</u>  Building address: <u>809 Olivie Way</u>  Building owner or occupant: <u>MMP Olivian Owner, LLC</u>  Occupant's phone (if known): <u>206 340-0809</u> Email address: <u>Theolivianmgr@greystar.com</u>
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**SECTION 3: IMPAIRED SYSTEM INFORMATION**  
  
I am reporting a:    ☐ Planned Impairment    ☒ Emergency Impairment  
  
System affected and specific location: Fire Suppression System, Fire Alarm Panel  
  
Nature of impairment: Failed sprinkler heads on the 27th and 5th floor have cause significant water damage to building.  
Fire Suppression system is not operable and Fire alarm panel in not operable.  
  
Technician: Scott Rose    Phone: (253) 926-2290    Email: scott.rose@patriotfire.com  
  
Impairment coordinator: James Cho    Phone: (253) 344-3056    Email: james.cho@patriotfire.com  
*(Property owner or designated agent)*

**SECTION 4: MITIGATION MEASURES – Complete applicable section below**

<b>Planned Impairment (to be completed by Impairment Coordinator)</b>  Impairment period start: Date: <u>04/27/2023</u> Time: <u>09:44</u>  Impairment period end (estimated): Date: <u>05/02/2023</u> Time: <u>17:00</u>  Fire watch scheduled? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No  Building occupants notified? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No  Onsite responsible representative: Name: <u>Robert NelsonScott</u>	<b>Emergency Impairment (to be completed by Technician)</b>  Technician name: <u>James Cho</u>  Phone: <u>(253) 344-3056</u> Email: <u>james.cho@patriotfire</u>  Expected to last 8 hours or more? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No  Impairment coordinator notified of impairment? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No  Impairment coordinator notified whether a fire watch is required (see requirements/exceptions in Client Assist Memo 5991)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No  Means of notification: <input checked="" type="checkbox"/> Phone <input type="checkbox"/> Fax <input type="checkbox"/> Email
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### INSTRUCTIONS FOR NOTIFYING THE SEATTLE FIRE DEPARTMENT OF SYSTEM IMPAIRMENTS

SFD must be notified immediately of emergency impairments that are anticipated to last 8+ hours. SFD must be notified 5 business days in advance of planned impairments that will last 8+ hours. The notification process has two mandatory steps:

1. Email this form to [SFD\\_Impairments@seattle.gov](mailto:SFD_Impairments@seattle.gov)
2. Submit report of red-tagged system to SFD using [www.thecomplianceengine.com](http://www.thecomplianceengine.com).