

# SPRING LAKE FIRE DEPARTMENT: FIRE PREVENTION DIVISION FIRE PREVENTION INSPECTION REPORT

P1726B

DATE OF INSPECTION <i>3-9-2009</i>	TIME INITIATED <i>11:30</i>	REPORT NUMBER <i>07-03-07 01</i>	RE-INSPECTION DATE	INSPECTION FEE: PERMIT FEE: <i>0.00</i> TOTAL FEES:
BUSINESS NAME <i>FTCC Spring Lake Campus</i>	BUSINESS ADDRESS <i>171 LAKETREE BLVD</i>		TELEPHONE NUMBER <i>678-1000</i>	EMERGENCY NUMBER

TYPE OF OCCUPANCY: *EDUCATIONAL*      PRIMARY FUNCTION: *EDUCATIONAL*

TYPE OF INSPECTION:	OCCUPANCY	ANNUAL	RE-INSPECTION	PERMIT <i>RI</i> ✓	ZONING	COMPLAINT	POST-FIRE
PROTECTION SYSTEMS: SMOKE		HEAT	SPRINKLER	STANDPIPE	HOOD	MANUAL ALARM	

PERMITS REQUIRED? *Y* ✓; N \_\_\_\_\_ TYPES: *ASSEMBLY/FLAM-COMBLIQ/HAZ-MAT/MCS/WELD-CUT*

THE FOLLOWING ITEMS ARE IN VIOLATION OF THE NORTH CAROLINA STATE FIRE PREVENTION CODE, YOU ARE HEREBY REQUIRED TO CORRECT ALL ITEMS LISTED BELOW BY THE NOTED DATE OF RE-INSPECTION. EACH INSPECTION CONDUCTED WILL BE ACCOMPANIED BY AN INSPECTION FEE. ALL REMITTANCE FOR FEES AND PERMITS SHOULD BE SENT TO: THE TOWN OF SPRING LAKE 300 RUTH STREET, PO BOX 617, SPRING LAKE, NC. WITHIN 14-DAYS OF INSPECTION. PERMITS WILL NOT BE FORWARDED TO YOUR BUSINESS UNTIL ALL FEES ARE PAID. FEES MAY BE PAID BY CHECK, CASH OR MONEY ORDER.

ITEM NUMBER	CODE REFERENCE	TYPE OF VIOLATION	ITEM NUMBER	CODE REFERENCE	TYPE OF VIOLATION
		<i>No Violations @ time of PRI</i>			
		<i>21 620 97 639600 11207</i>			

RECEIVED

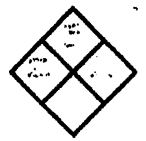
MAR 09 2009

FTCC  
PLANT OPERATIONS

NOTES:

*cc Dr Whitt*

PLACARD REQUIRED  
Y  N \_\_\_\_\_



FAILURE TO COMPLY SHALL RESULT IN ADDITIONAL FEES AND FINES UNTIL VIOLATIONS ARE CORRECTED UNDER NCGS 14-68 AND NCGS 14.4 NORTH CAROLINA STATE FIRE PREVENTION CODE AND THE TOWN OF SPRING LAKE ORDINANCES, EACH DAY'S VIOLATION CONSTITUTES A SEPARATE DISTRICT OFFENSE.

I HAVE READ AND UNDERSTOOD THE ABOVE INFORMATION:

*[Signature]*      *2-9-09*