

CITY OF NEW HAVEN

DEPARTMENT OF FIRE SERVICE

Office of the Fire Marshal

Justin Elicker

Mayor

John Alston

Chief

INSPECTION CERTIFICATE

Scott Dillon Fire Marshal Fire Marshal's Office 952 Grand Avenue P.O. Box 374 New Haven, CT 06511

TEL: (203) 946-6232 FAX: (203) 946-8383

Effecti	ive 1/1/	10, chan	ges to Section 17-201.4 of the New Haven Code of Ordinance Fire Marshal office inspections prior to issuance of this	
On	6/10/24		the New Haven Office of the Fire Marshal conducted an inspection	
of	Mason Lab			
locat	ted at		9 Hillhouse Ave, New Haven, CT 06511	
in the	e City	of Ne	w Haven to determine the degree of compliance w	ith the fire safety requirements
of Co	onnec	ticut G	eneral Statutes Chapter 541 as authorized by Secti	on 29-305 of the statutes. This
facili	ity wa	ıs evalı	nated as an Existing Assembly as classified by the	
CONNECTICUT STATE FIRE SAFETY CODE. As a result of this inspection, the following				
conditions were found by: Steve Martin FM5				
\boxtimes	I.	At the time of inspection, no code violations were identified. Certificate of approval recommended.		
	II.	At the time of inspection, conditions were discovered to be contrary to the minimum requirements of these codes. An acceptable plan of correction was submitted. (<i>See attached information</i>). Certificate of approval recommended.		
	III.	At the time of inspection, conditions were discovered to be contrary to the minimum requirements of these codes. No approval plan of correction was submitted. (<i>See attached information</i>). Certificate of approval Not recommended.		
	IV. Based on the extreme hazard to public safety discovered at the time of this inspection, this office is currently seeking an injunction from the court through our City Attorney for the purpose of closing or restricting usage of this facility by the public. (See attached information). Certificate of approval Not recommended.			
			Steve Martin (Signature)	6 /10/24 (Date)
_	cott Dill re Mars	_	Shakira Samuel Frank Filardo Deputy Fire Marshal Life Safety Compliance Officer	Heather Allen Public Assembly Inspector

Fee Amount:

Date Paid: _