



APPLICATION FOR PREAPPROVAL SPECIAL SEISMIC CERTIFICATION OF EQUIPMENT AND COMPONENTS

For Office Use Only

APPLICATION NO.

OSP – 0124-10

Check whether application is: NEW RENEWAL

1.0 Computerized Elevator Control Corp. Lazar Kamer, EE
Manufacturer *Manufacturer's Technical Representative*
24 Empire Blvd, Moonachie NJ 07074
Mailing Address

201-508-2340 Lazar.Kamer@Swiftcec.com
Telephone *E-mail Address*

2.0 Swift Futura Controller Futura Controller
Product Name *Product Type*

SERIAL NO. FUTURA 32012 #1
Product model No (List all unique product identification numbers and/or serial numbers)

General Description: Rigid Floor Mounted elevator controller for speed up to 1600fpm and 10000lbs

3.0 Computerized Elevator Control Corp. Lazar Kamer, EE
Applicant Company Name *Contact Person*
24 Empire Blvd, Moonachie, NJ 07074
Mailing Address

201-508-2300 Lazar@Swiftcec.com
Telephone *E-mail Address*

I hereby agree to reimburse the Office of Statewide Health Planning and Development for the actual costs incurred by the department for review.

Signature of Applicant

August 24th 2010

Date

General Manager

Title

Computerized Elevator Control Corp.

Company Name



Registered Design Professional Preparing the Report

4.0 **EDDINTON ENGINEERING**
 Company Name

Ronald Eddington
 Contact Name

S3376
 California License Number

6001 Helva Lane, Carmichael, CA 95608
 Mailing Address

916-359-5300
 Telephone

eddingtoneengineering@comcast.net
 E-mail Address

California Licensed Structural Engineer Review and Acceptance of the Report

5.0 **EDDINTON ENGINEERING**
 Company Name

Ronald Eddington
 Contact Name

S3376
 California License Number

6001 Helva Lane, Carmichael, CA 95608
 Mailing Address

916-359-5300
 Telephone

eddingtoneengineering@comcast.net
 E-mail Address

Anchorage Pre-Approval

6.0

Anchorage is pre-approved under OPA-
 (Separate application for anchorage pre-approval is required)

Anchorage is not Pre-approved

Certification Method

7.0 Testing in accordance with: ICC-ES AC-156 Other (Please Specify):

Analysis

Experience data

Combination of Testing, Analysis, and/or Experience Data (Please Specify):

Testing Laboratory (if applicable)

8.0 Dayton T. Brown, Inc.
 Company Name

David R. Gibbings
 Contact Name

1195 Church Street, Bohemia, NY 11716-5014
 Mailing Address

631-589-6300 Ext.550
 Telephone

dgibbings@dtbtest.com
 E-mail:



Approval Parameters

9.0

Design in accordance with ASCE 7-05 Chapter 13: Yes No

Design Basis of Equipment or Components (F_p/W_p) = 0.86g

S_{DS} (Spectral response acceleration at short period) = 1.2g

a_p (In-structure equipment or component amplification factor) = 1.0

R_p (Equipment or component response modification factor) = 2.5

I_p (Importance factor) = 1.5

z/h (Height factor ratio) = 1.0

Equip. or Component Natural Frequencies = Vert: 32.56 Hz, Transverse: 6.88 Hz, Longitudinal: 6.99 Hz

Building period limits (if any) = None

Overall dimensions and weight (or range thereof) = 22.625"(W)x31.5"(D)X 73.75"(H), Weight = 440lbs.

Equipment or Components @ grade designed in accordance with ASCE 7-05 Chapter 15: Yes No

Design Basis of Equipment or Components (V/W) =

S_{DS} (Spectral response acceleration at short period) =

S_1 (Spectral response acceleration at 1 second period) =

R (Response modification coefficient) = 1.0

Ω_0 (System overstrength factor) = 1.0

C_d (Deflection amplification factor) = 1.0

I_p (Importance factor) = 1.5

Height to Center of Gravity above base =

Equipment or Component fundamental period(s) = Sec

Overall dimensions and weight (or range thereof) =

Tank(s) designed in accordance with ASME BPVC, 2007: Yes No

10.0 List of attachments supporting the special seismic certification of equipment or components:

- Test Report
- Drawings
- Manufacturer's Catalog
- Calculations
- Others (Please Specify):

11.0 OSHPD Approval (For Office Use Only)

Chris Tokas

10/18/10

December 31, 2016

Signature & Date

Approval Expiration Date

Chris Tokas, SHFR

S_{DS} (g) = 1.2 z/h = 1.0

Name & Title

Special Seismic Certification Valid Up to

Condition of Approval (if any):