

APPLICATION FOR OSHPD PREAPPROVAL       OFFICE USE ONLY         OF MANUFACTURER'S CERTIFICATION (OPM)       APPLICATION #: OPM-0085-13								
OSHPD Preapproval of Manufacturer's Certification (OPM)								
Type:         New         Renewal         Update to Pre-CBC 2013 OPA Number:								
Manufacturer Information								
Manufacturer: Mavig Corporation								
Manufacturer's Technical Representative: Ben Weisenberg								
Mailing Address: 25 Hytec Circle, Rochester, NY. 14606								
Telephone: (585) 247-1212 Email: Den@ti-ba.com								
Product Information								
Product Name: Injector Head with TS1522-ME Plate Mount – 360 Degree Column								
Product Type: Suspended OPM-0085-13								
Product Model Number: N/A								
General Description: Ceiling Supported Medical Equipment, column rotates 360 degrees freely								
DATE: 09/29/2014								
Applicant Information								
Applicant Company Name: EASE Co.								
Contact Person: Jonathan Roberson, S.E.								
Mailing Address: _ 5877 Pine Ave. Suite 210, Chino Hills, CA. 91709								
Telephone: (909) 606-7622 Email: J.Roberson@EASECo.com								
I hereby agree to reimburse the Office of Statewide Health Planning and Development review fees in accordance with the California Administrative Code, 2013.								
Signature of Applicant: Date: 3/19/14								
Signature of Applicant:       Date: 3/19/14         Title:       Principal Engineer         Company Name:       EASE Co.								
Title: Principal Engineer Company Name: EASE Co.								



## OFFICE OF STATEWIDE HEALTH PLANNING AND DEVELOPMENT FACILITIES DEVELOPMENT DIVISION

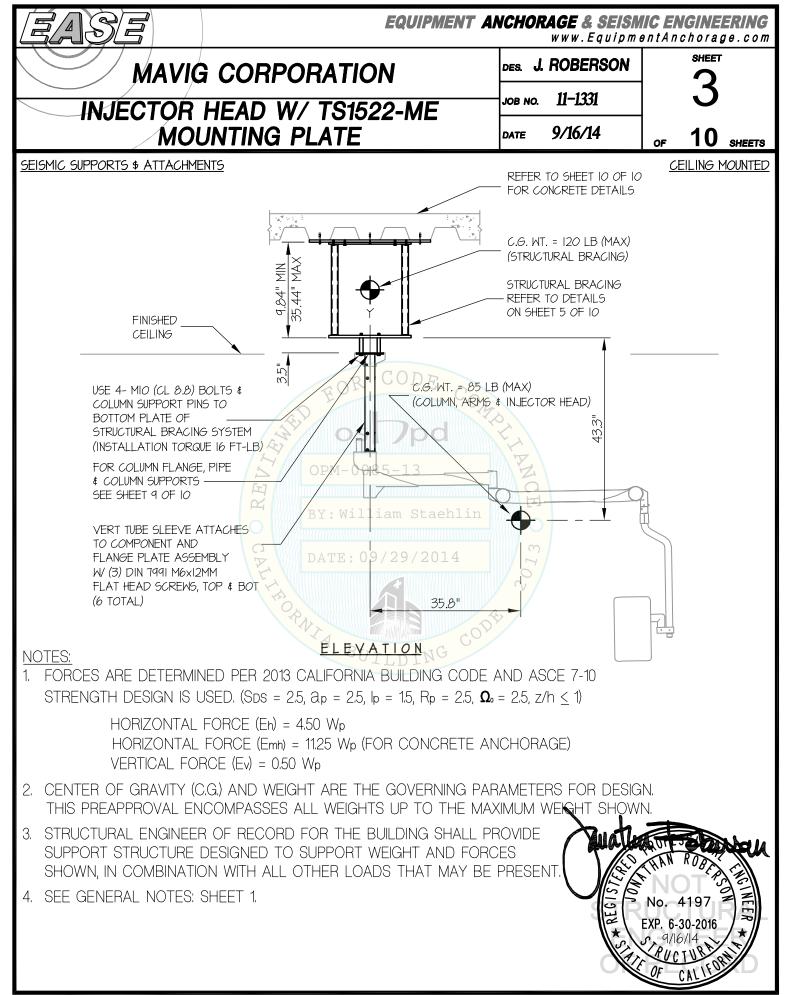
Registered Design Professional Preparing Engineering Recommendations								
Company Name: EASE Co.								
Name: Jonathan Roberson, S.E. California License Number: S4197								
Mailing Address: _5877 Pine Ave. Suite 210, Chino Hills, CA. 91709								
Telephone: 909-606-7667 Email: <u>J.Roberson@EASECo.com</u>								
OSHPD Special Seismic Certification Preapproval (OSP)								
<ul> <li>Special Seismic Certification is preapproved under OSP- (Separate application for OSP is required)</li> <li>Special Seismic Certification is not preapproved</li> </ul>								
Certification Method(s)								
Testing in accordance with:       ICC-ES AC156       FM 1950-10         Other*       (Please Specify):								
<ul> <li>*Use of test criteria other than those adopted by the California Building Standards Code, 2013 (CBSC 2013) for component supports and attachments are not permitted. For distribution system, interior partition wall, and suspended ceiling seismic bracings, test criteria other than those adopted in the CBSC 2013 may be used when approved by OSHPD prior to testing.</li> <li>Analysis</li> <li>Experience Data</li> <li>Combination of Testing, Analysis, and/or Experience Data</li> </ul>								
List of Attachments Supporting the Manufacturer's Certification								
<ul> <li>Test Report</li></ul>								
OFFICE USE ONLY – OSHPD APPROVAL VALID FOR CBC 2013 ONLY								
Signature: Nell Jack Date: 09/29/2014								
Print Name: William Staehlin								
Title: SSE								
Condition of Approval (if applicable):								
"Access to Safe, Quality Healthcare Environments that Meet California's Diverse and Dynamic Needs"								

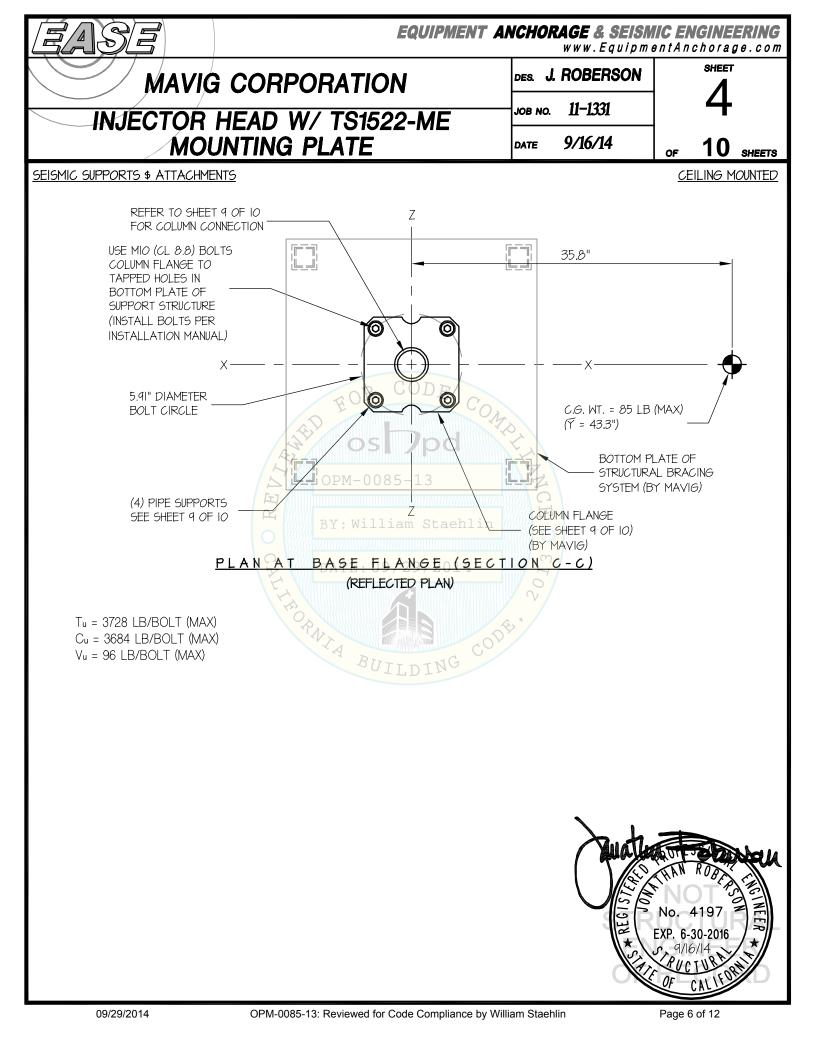
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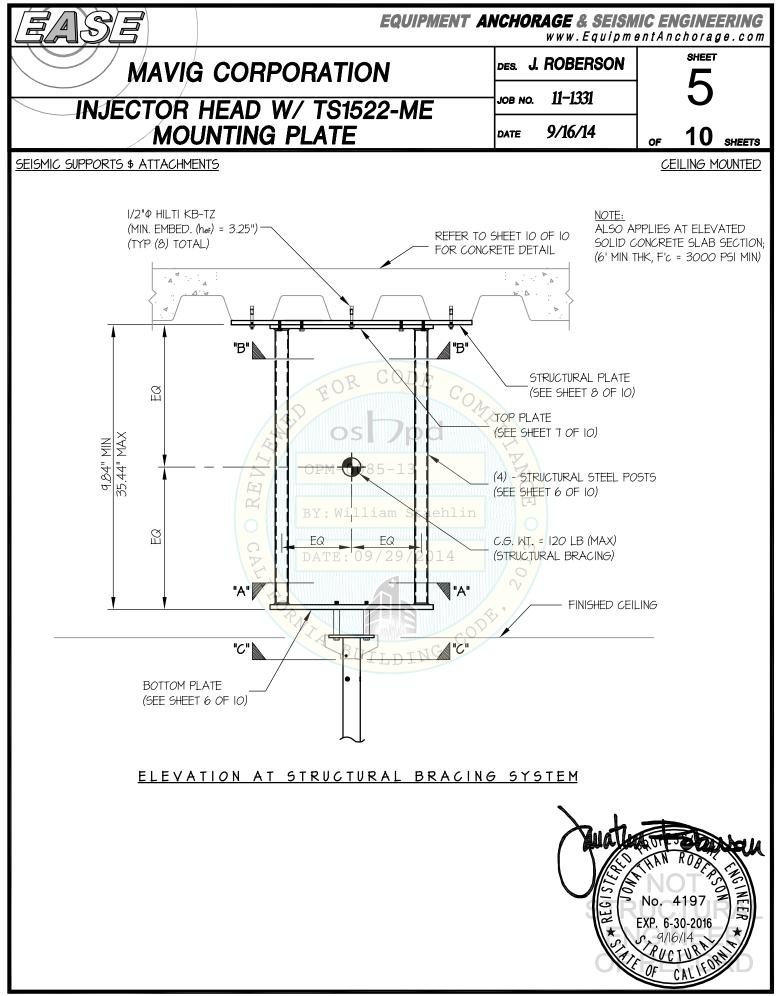
			PREAPF	Office of Statewide Health Planning and Develop ROVAL OF MANUFACTURER'S CE OPM-0085-13 PROVAL CONFORMS TO THE 2013 CALIFORNIA		5877 Pine Ave, Ste. 210 Chino Hills, CA. 91709 Phn: (909) 606-7622			
		ACTURER: MENT NAME:	MAVIG COR INJECTOR H	PORATION IEAD W/ TS1522- ME MOUNTING	G PLATE	Sheet: <u>1 of 10</u> Date: 9/16/14			
GE	NE	RAL NOTES							
	TH	IS OSHPD PREA		FACTURER'S CERTIFICATION (OPM) IS BASED ON OPM SHALL BE BASED ON THE 2013 CBC	THE 2013 CBC. THE D	EMANDS			
2.	<ol> <li>THIS DOCUMENT MAY ONLY BE USED WITH THE EXPRESS WRITTEN CONSENT OF THE MANUFACTURER LISTED ABOVE FOR THE SPECIFIC PROJECT SITE AND INSTALLATION LOCATION. THIS DOCUMENT IS INVALID WITHOUT SUCH CONSENT.</li> </ol>								
3.	TH	S PREAPPROV	AL CONFORMS TO T	HE 2013 CALIFORNIA BUILDING CODE.	T				
4.	FO	RCES PER ASC	E 7-10 SECTION 13.3	1, EQUATIONS 13.3-1, 13.3-2 & 13.3-3, WHERE SDS	= 2.5, <b>a</b> p = 2.5, lp = 1.5,	Rp = 2.5, z/h ≤ 1.			
		e following s			E	_			
5.	5. THE DETAILS IN THIS PREAPPROVAL MAY BE USED AT ANY LOCATION IN THE STATE OF CALIFORNIA, WHERE SDS IS NOT GREATER THAN 2.5.								
6.	ALI	DESIGN FORC	ES SHOWN ON TH <mark>E</mark>	DRAWINGS ARE FACTORED LOADS THAT SHALL I	BE USED FOR STRENG	GTH DESIGN.			
7.	TH	IS PREAPPROV	AL COVERS ONLY TH	E SUPPORTS AND ATTACHMENTS OF THE EQUIP	MENT TO THE STRUC	TURE.			
8.	RE	SPONSIBILIT	IES OF THE STRU	ICTURAL ENGINEER OF RECORD OF THE	BUILDING				
	А.	PROVIDE SUPF Loads.	PORTING STRUCTUR	E REQUIRED TO SUPPORT WEIGHTS AND FORCE	es shown, in additio	N TO ALL OTHER			
	B.	PREAPPROVAL	VERIFY THAT THE	S IN CONFORMANCE WITH THE 2013 CBC AND WI ACTUAL EQUIPMENT'S WEIGHT, CG LOCATION, A DF THE UNIT WHERE ATTACHMENTS ARE MADE TS.	NCHOR LOCATIONS, A	NCHOR DETAILS			
	C.	VERIFY THAT T VALUES ON TH		F SDS & Z/h RESULT IN SEISMIC FORCES (Eh , Ev)	THAT ARE NOT GREAT	TER THAN THE			
					Anation of the second s	No. 4197 EXP. 6-30-2016			

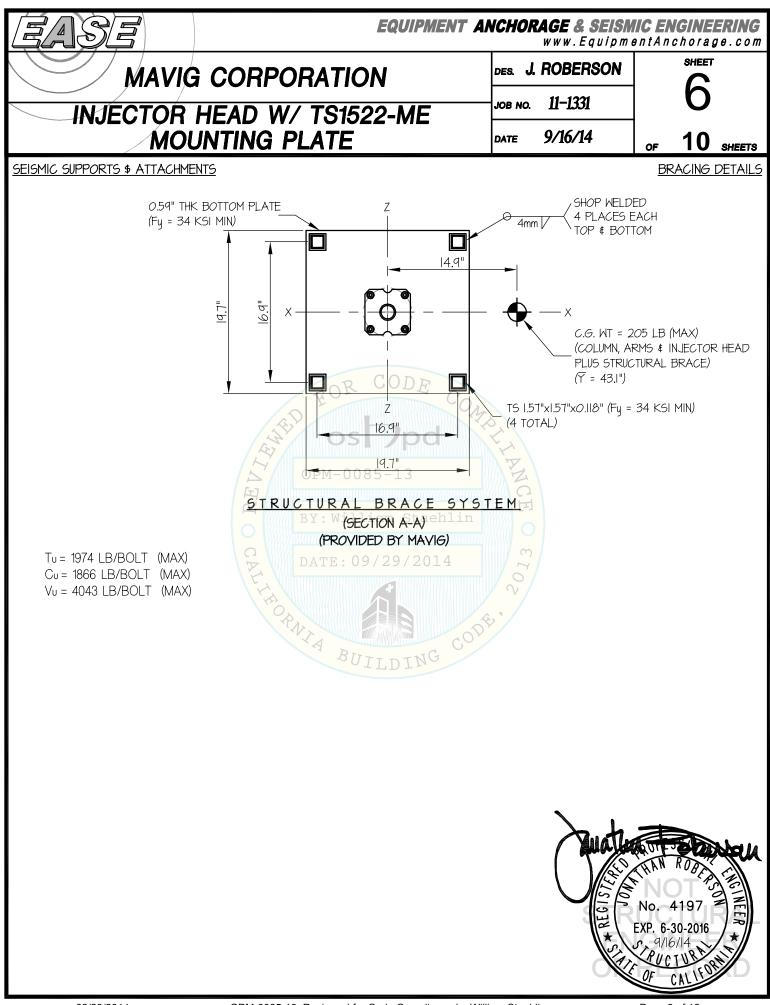
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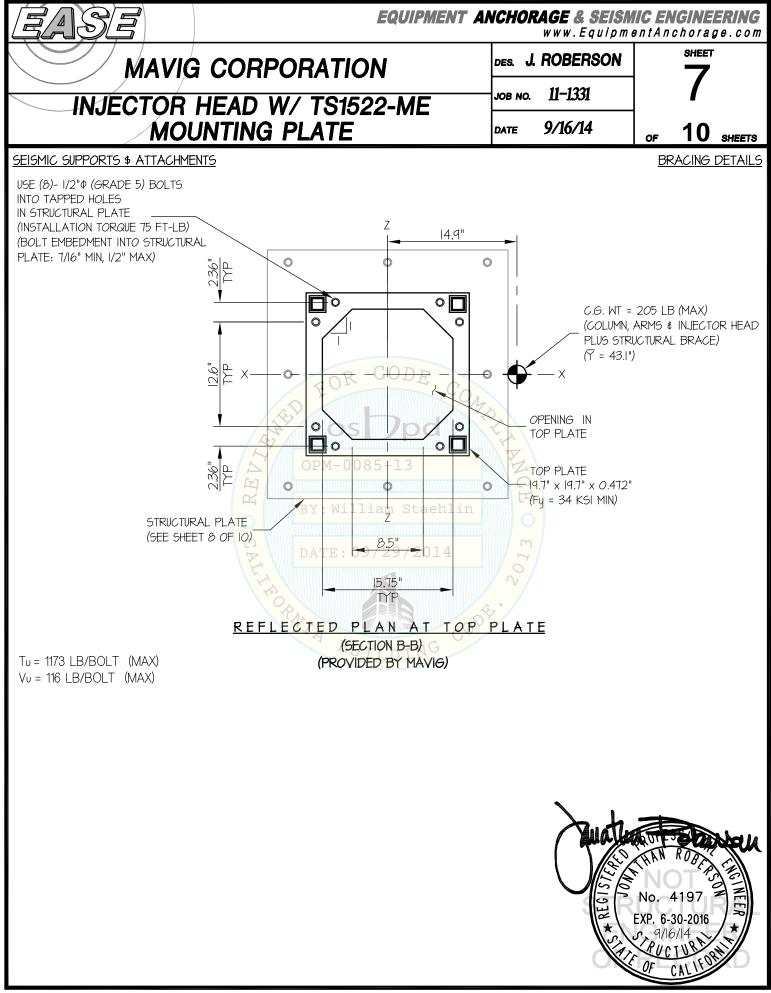
EQUIPMENT ANCHORAGE & SEISMIC ENGINEERING www.EquipmentAnchorage.com											
MAVIG CORPORATION					DES.	DES. J. ROBERSON					
						јов	no. <b>11-1</b>	331	2		
						DATE	<b>9/16</b> /	/14	of 10	SHEETS	
10. EXPANSIC											
	CORRESPO		de with the An CC Report.	CHORS LIST	TED BELC	ow and i	NSTALLED	AS DESCR	IBED		
Anchor Diameter	Concrete Type	Min. f'c (psi)	Anchor Type	ICC Report No.	Min. Embed.	Min. Spacing	Min. Edge Dist.	Min. Conc. Thickness	Torque Test	Direct Tensi	on
1/2"	Normal Weight	3000	Hilti Kwik Bolt TZ	ESR-1917	3-1/4"	10"	24"	6"	40 FT-LB	3281 lb	
CONC ADJAC EDGE	RETE SLAB E CENT DETAIL DISTANCES.	DGES, 2 FOR ADI	vs for up to a 4" Away minimu Ditional minimu	M (i.e COR JM ALLOWAE	NER). SE	EE CRETE	Ŧ	24" (MIN)	SP -	- <u>- 36"</u> (MIN)	-
TESTII INSPE SUBMI	C. TESTING OF EXPANSION ANCHORS PER 2013 CBC, 1913A.7:										
DI		ENSION	URS HAVE ELAPS	IE TEST AT L	EAST 50	% OF	ds P	ZCE	     •	  -	
(ii) ACCEPTANCE CRITERIA: BY : William Staehlin • DIRECT TENSION TEST: THE ANCHOR SHOULD HAVE NO OBSERVABLE MOVEMENT AT THE TEST LOAD. A PRACTICAL WAY TO DETERMINE OBSERVABLE MOVEMENT IS THAT THE WASHER BECOMES LOOSE. TYPICAL CONCRETE EDGE DETAIL											
•	WITHIN THE		E APPLIC <mark>ABLE TO</mark> WING LIMITS: WE				ODE				
	NUT				ILDI	NG					
()			TEST ALL ANCHO	DRS.							
TIGHT REQUI	SHALL BE TO (THE SNUG- RED TO BRIN	orqued Tight Co Ng the C	I METAL DECK ) BY 3/4 TURN OF ONDITION IS DEF CONNECTED PLIE INLESS OTHERW	INED AS TH	E TIGHTN M CONTA	IESS					
			ALL BE 1/16" LAR I/16) FOR CONCR		BOLT SIZ	E					
AND T TENSI	esting (thr on do not f	ROUGH B REQUIRE	RETE SHALL REC OLTS WITH STEE TENSION TESTII -INSTALLED ANC	EL TO STEEL NG) IN ACCO		CTION IN				No. 4197 AN ROBING No. 4197 XP. 6-30-2016 PUCTURN OF CALLED	THE MER X

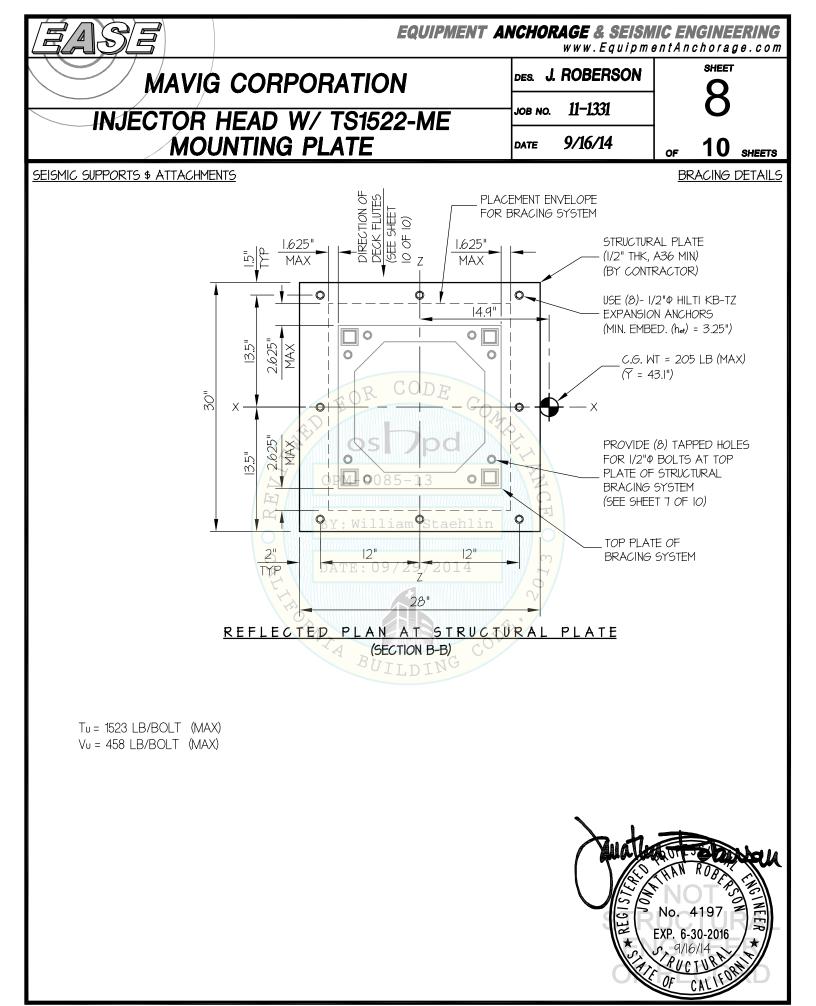












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