

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

| APPLICATION FOR OSHPD PREAPPROVAL | OFFICE USE ONLY |
|--|--|
| OF MANUFACTURER'S CERTIFICATION (OPM) | APPLICATION #: OPM-0091-13 |
| (o) | ALL EIGHTION #. OF MI-0031-10 |
| OSHPD Preapproval of Manufacturer's Certification (OPM) | |
| Type: ☐ New ☐ Renewal ☐ Update to Pre-CBC 2013 O | PA Number: |
| Manufacturer Information | |
| Manufacturer: Carlisle Foodservice Products | |
| Manufacturer's Technical Representative: <u>David Briggs</u> | |
| Mailing Address: PO Box 53006, Oklahoma City, OK 73152-3006 | |
| Telephone: 331-355-1760 Email: davidb | riggs@carlislefsp.com |
| Product Information OS Drod | TO TO THE PERSON OF THE PERSON |
| Product Name: Dinex - Thermal Aire II - Senior and Junior retherm do | cking stations. |
| Product Type: Food service equipment OPM-0091-13 | E |
| DOCKS: DXTAIII4782002, DXTAIII478210 DXTAIII4782103, DXTAIII4782203. CART DXTAIII4792026, DXTAIII4792030 | |
| General Description: Heating and cooling equipment for food service. | 207 |
| | - A. ¹ |
| Applicant Information | 307 |
| Applicant Company Name: Carlisle FoodService Products | |
| Contact Person: Rob Paterson | |
| Mailing Address: PO Box 53006, Oklahoma City, OK 73152-3006 | |
| Telephone: 615-453-6995 Email: robpat | terson@bellsouth.net |
| I hereby agree to reimburse the Office of Statewide Health F accordance with the California Administrative Code, 2016. | Planning and Development review fees in |
| Signature of Applicant: Daul Bust | Date: 10-6-2015 |
| Title: Director of Healthcare Equipment Company Name: Carlisle | Foodservice Products |
| "Δccess to Safe Ouality Healthcare Environments that Meet California's | MAMAM OSHPD |
| STATE OF CALIFORNIA – HEALTH AND HUMAN SERVICES AGENCY | A A A I I I I I I I I I I I I I I I I I |



OSH-FD-700 (REV 12/16/15)



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

| Registered Design Professional Preparing Engineering Recommendations | | | |
|--|--|--|--|
| Company Name: Degenkolb Engineers | | | |
| Name: Robert Graff California License Number: SE 5113 | | | |
| Mailing Address: 375 Beale St, Suite 500, San Francisco CA 94105 | | | |
| Telephone: 415-392-6952 Email: rgraff@degenkolb.com | | | |
| OSHPD Special Seismic Certification Preapproval (OSP) | | | |
| □ Special Seismic Certification is preapproved under OSP- (Separate application for OSP is required) □ Special Seismic Certification is not preapproved | | | |
| Certification Method(s) | | | |
| ☐ Testing in accordance with: ☐ ICC-ES AC156 ☐ FM 1950-16 ☐ Other* (Please Specify): | | | |
| OPM-0091-13 | | | |
| *Use of criteria other than those adopted by the California Building Standards Code, 2016 (CBSC 2016) 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 2016 may be used when approved by OSHPD prior to testing. Analysis | | | |
| Experience Data | | | |
| Combination of Testing, Analysis, and/or Experience Data (Please Specify): | | | |
| List of Attachments Comparting the May of Manuals Contification | | | |
| List of Attachments Supporting the Manufacturer's Certification ☐ Test Report ☐ Drawings ☐ Calculations ☐ Manufacturer's Catalog ☐ Other(s) (Please Specify): | | | |
| | | | |
| OFFICE USE ONLY - OSHPD APPROVAL VALID FOR CBC 2016 & ALL PRE-2016 CODE BASED PROJECTS | | | |
| Signature: Date: 09-10-2018 | | | |
| Print Name: | | | |
| Title: SSE | | | |
| Condition of Approval (if applicable): | | | |
| | | | |

"Access to Safe Quality Healthcare Environments that Meet California's





Page 2 of 2

GENERAL NOTES

I. GENERAL

- THIS OSHPD PREAPPROVAL OF MANUFACTURER'S CERTIFICATION (OPM) IS BASED ON THE CALIFORNIA BUILDING CODE (CBC) 2016. THE DEMAND (DESIGN FORCES) FOR USE WITH THIS OPM SHALL BE BASED ON THE CBC 2016.
- 2. EQUIPMENT: DINEX THERMAL AIRE III DOCKING SYSTEM SENIOR OR JUNIOR DOCKING STATION WATER-COOLED COMPRESSOR AND CART 30 TRAY MAXIMUM CAPACITY.

II. RESPONSIBILITIES OF THE STRUCTURAL ENGINEER OF RECORD

- 1. VERIFY MATERIALS AND WORKMANSHIP TO CONFORM WITH THE 2016 EDITION OF THE CALIFORNIA BUILDING CODE AND THE REQUIREMENTS OF THIS PRE-APPROVAL DOCUMENT.
- 2. VERIFY THE ADEQUACY OF THE EXISTING FRAMING TO SUPPORT THE LOADS INDICATED IN DETAIL 1/S2, IN ADDITION TO ALL OTHER LOADS.
- 3. VERIFY ANCHORS ARE ADEQUATE DISTANCES FROM OPENINGS AND EDGES OF SLABS.
- 4. VERIFY ANCHORS ARE ADEQUATE DISTANCES FROM NEW OR EXISTING ANCHORS.
- 5. DESIGN ANY SUPPLEMENTARY MEMBER AND THEIR ATTACHMENTS OTHER THAN THOSE DETAILED WITHIN THIS PRE-APPROVAL
- 6. VERIFY THE EQUIPMENTS WEIGHT, C.G. LOCATION. ANCHOR LOCATIONS AND ANCHOR DETAILS AGREE WITH THE INFORMATION SHOWN IN THIS PRE-APPROVAL.

III. MECHANICAL ANCHORS

- 1. WEDGE ANCHORS INTO CONCRETE: USE ZINC COATED CARBON STEEL OR STAINLESS STEEL HILTI KB-TZ (ICC ESR-1917). INSTALL ANCHORS IN ACCORDANCE WITH ICC REPORT.
- 2. IF REINFORCEMENT IS ENCOUNTERED DURING DRILLING. ABANDON AND SHIFT THE HOLE LOCATION TO AVOID THE REINFORCEMENT. PROVIDE A MINIMUM OF 2 ANCHOR DIAMETERS OR 1 INCH, WHICHEVER IS LARGER, OF SOUND CONCRETE BETWEEN THE DOWEL AND THE ABANDONED HOLE. FILL THE ABANDONED HOLE WITH NON-SHRINK GROUT APPROVED BY THE ENGINEER OF RECORD. NOTIFY THE ENGINEER OF RECORD IF ANY REINFORCING IS DAMAGED.
- 3. ANCHORS WILL BE PROOF-TESTED BY OWNER'S TESTING AND INSPECTION AGENCY REPORT OF THE TEST RESULTS TO BE SUBMITTED TO OSHPD.
- 4. IF ANY ANCHOR FAILS TESTING, REPLACE ANCHOR AND TEST ADDITIONAL ANCHORS OF THE SAME CATEGORY NOT PREVIOUSLY TESTED UNTIL TWENTY (20) CONSECUTIVE PASS, THEN RESUME INITIAL TESTING FREQUENCY.
- 5. TEST ANCHORS NO SOONER THAN 24 HOURS AFTER INSTALLATION.
- 6. TEST 50% WEDGE ANCHORS PER THE FOLLOWING METHOD:
 - A. TORQUE WRENCH METHOD: TEST ANCHORS TO THE TORQUE LOAD INDICATED IN THE TABLE BELOW WITHIN THE FOLLOWING LIMITS:
 - 1. ONE-HALF TURN OF THE NUT.

| WEDGE | | |
|---------------------|-------------------------|--|
| ANCHOR DIA. (IN) | TORQUE LOAD (FT-LBS) | |
| 3/8 | 25 | |
| 1/2 | 40 | |
| 5/8 | 60 | |

IV. STRUCTURAL STEEL

1. STRUCTURAL STEEL TO CONFORM TO THE FOLLOWING UNLESS OTHERWISE NOTED:

| SECTIONS | TYPE |
|----------------------------------|---|
| PLATES | ASTM A572 GR 50 |
| ANGLES | ASTM A36 |
| MACHINE BOLTS | ASTM A307 |
| THREADED AND HANGER ROD | ASTM A36 |
| NUTS FOR BOLTS AND MACHINE BOLTS | ASTM A563 |
| PLAIN WASHERS | ANSI B18.22.1 |
| STAINLESS STEEL | ASTM A666 & A314 TYPE 304 OR 316 |
| TURNBUCKLE | ASTM A666 & A314 TYPE 304 OR 314 GRADE 18-8 |

V. STRUCTURAL TESTS, INSPECTIONS, AND OBSERVATIONS

- 1. AN INDEPENDENT APPROVED TESTING AGENCY AND SPECIAL INSPECTORS WILL BE RETAINED BY THE OWNER TO PERFORM THE FOLLOWING TESTS AND INSPECTION. PROVIDE ACCESS AND FURNISH SAMPLES TO THE AGENCY AS REQUIRED.
- 2. THE FOLLOWING ITEMS REQUIRE TESTS AND INSPECTIONS IN ACCORDANCE WITH THE REQUIREMENTS OF THE CHAPTER "STRUCTURAL TESTS AND INSPECTIONS" OF THE
- 3. MECHANICAL ANCHORS:
 - A. VERIFY TYPE OF ANCHOR, ANCHOR DIMENSIONS, CONCRETE TYPE AND COMPRESSIVE STRENGTH, PREDRILLED HOLE DIMENSIONS, ANCHOR SPACING, EDGE DISTANCE, SLAB THICKNESS AND ANCHOR EMBEDMENT.
 - B. PROOF-TEST AS INDICATED IN THE MECHANICAL ANCHORS SECTION OF THESE GENERAL NOTES.

VI. DESIGN CRITERIA PM-0091-13

- 1. APPLICABLE CODE: 2016 CALIFORNIA BUILDING CODE AND ASCE 7-10 INCLUDING SUPPLEMENTS 1 AND 2.
- BY: Jeffrey Y. Kikumoto 2. SEISMIC DESIGN:

SEISMIC FORCE $F_D = 1.875W_D$ $E_{V} = 0.500 W_{D}$

WHERE: z/h <= 1.0 (SUPPORTS & ATTACHMENTS AT ANY FLR) Sps = 2.5WORST CASE ACCEL. z/h = 0.0 (SUPPORTS & ATTACHMENTS AT GROUND FLR) lp = 1.5

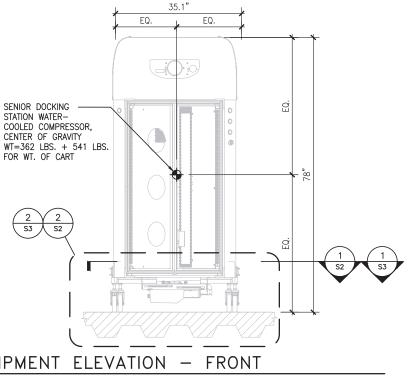
FOR ESSENTIAL EQUIP. Rp = 6.0 - AIR - SIDE2016 SECTION ap = 2.5 - CABINET1616A.1.17 Ω o = 2.0 - HEATER

VII. HOW TO USE THIS PRE-APPROVAL

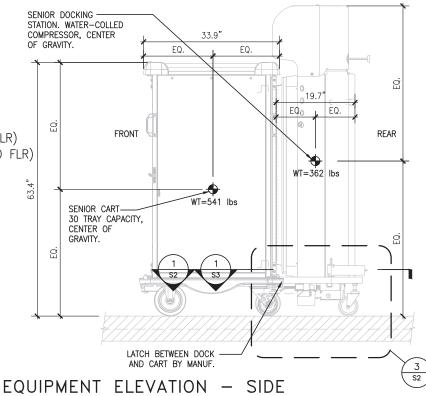
- 1. REVIEW AND UNDERSTAND ALL GENERAL NOTES AND FIGURES BEFORE PROCEEDING.
- DETERMINE TYPE OF SLAB AND LOCATION WITHIN STRUCTURE.
- SELECT CORRECT INSTALLATION OPTION FOR LOCATION AND SLAB TYPE.
- DETERMINE THE MAXIMUM DEMANDS ON THE EXISTING STRUCTURE FROM THE NEW UNIT. AND VERIFY THE ADEQUACY OF THE EXISTING STRUCTURE WITH THE STRUCTURAL ENGINEER OF RECORD FOR THE BUILDING

SHEET LIST

- S1 GENERAL NOTES
- S2 EQUIP. SUPPORTS AND ATTACHMENT DETAILS
- SINGLE BASE PL. SUPPORTS AND ATTACHMENT DETAILS



EQUIPMENT ELEVATION — FRONT



GENERAL NOTES

DINEX THERMAL AIRE III OSHPD PREAPPROVAL OF MANUFACTURER'S CERTIFICATION (OPM) Sheet Number

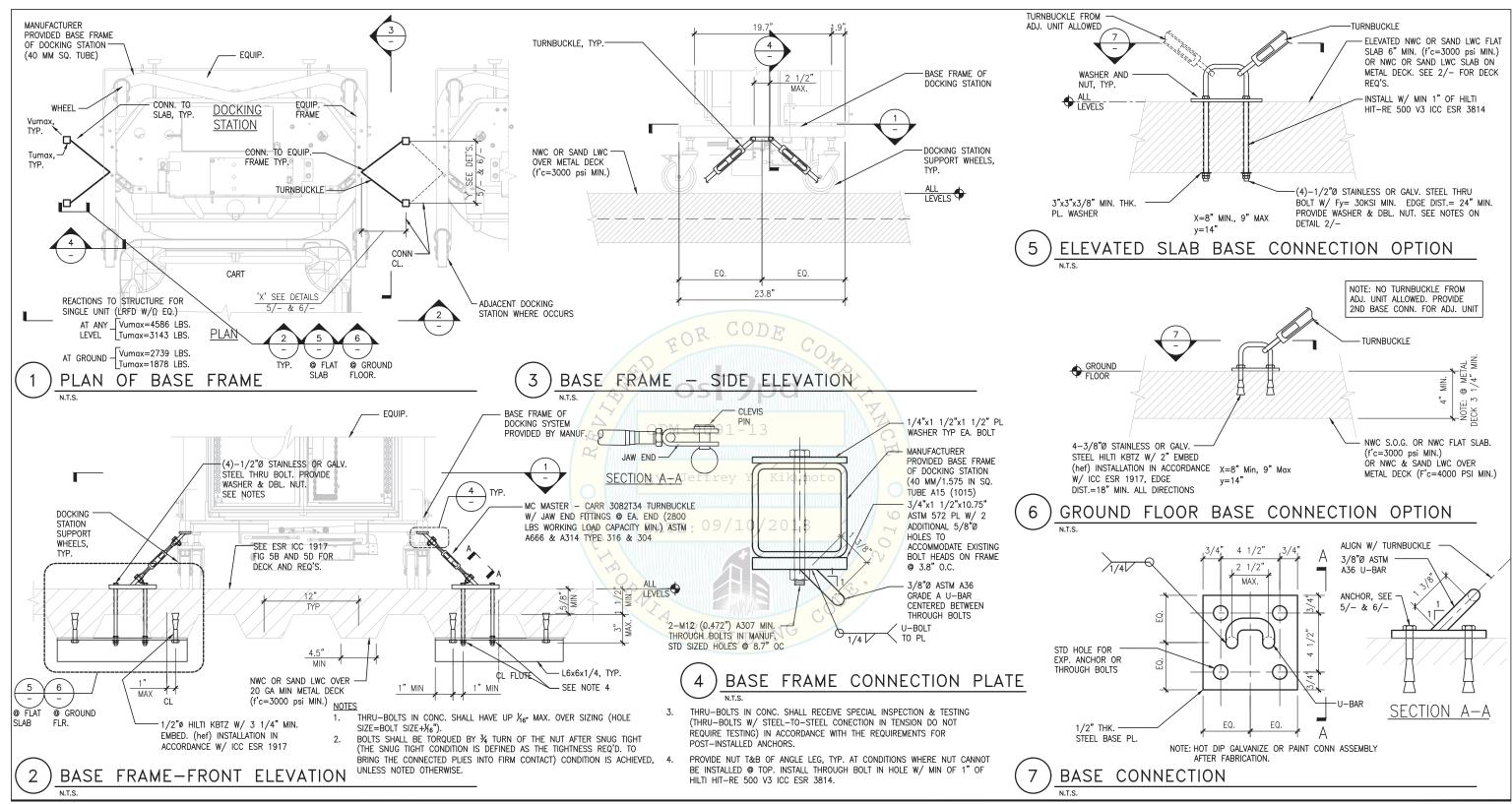
| OLINLIVAL NOTES | | | |
|-----------------|-----|-------------|-----------|
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| Design: | RMG | Check: RM | IG |

6/26/18 Date: 1 OF 3 Sheets

Degenkolb

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DINEX THERMAL AIRE III OSHPD PREAPPROVAL OF MANUFACTURER'S CERTIFICATION (OPM)

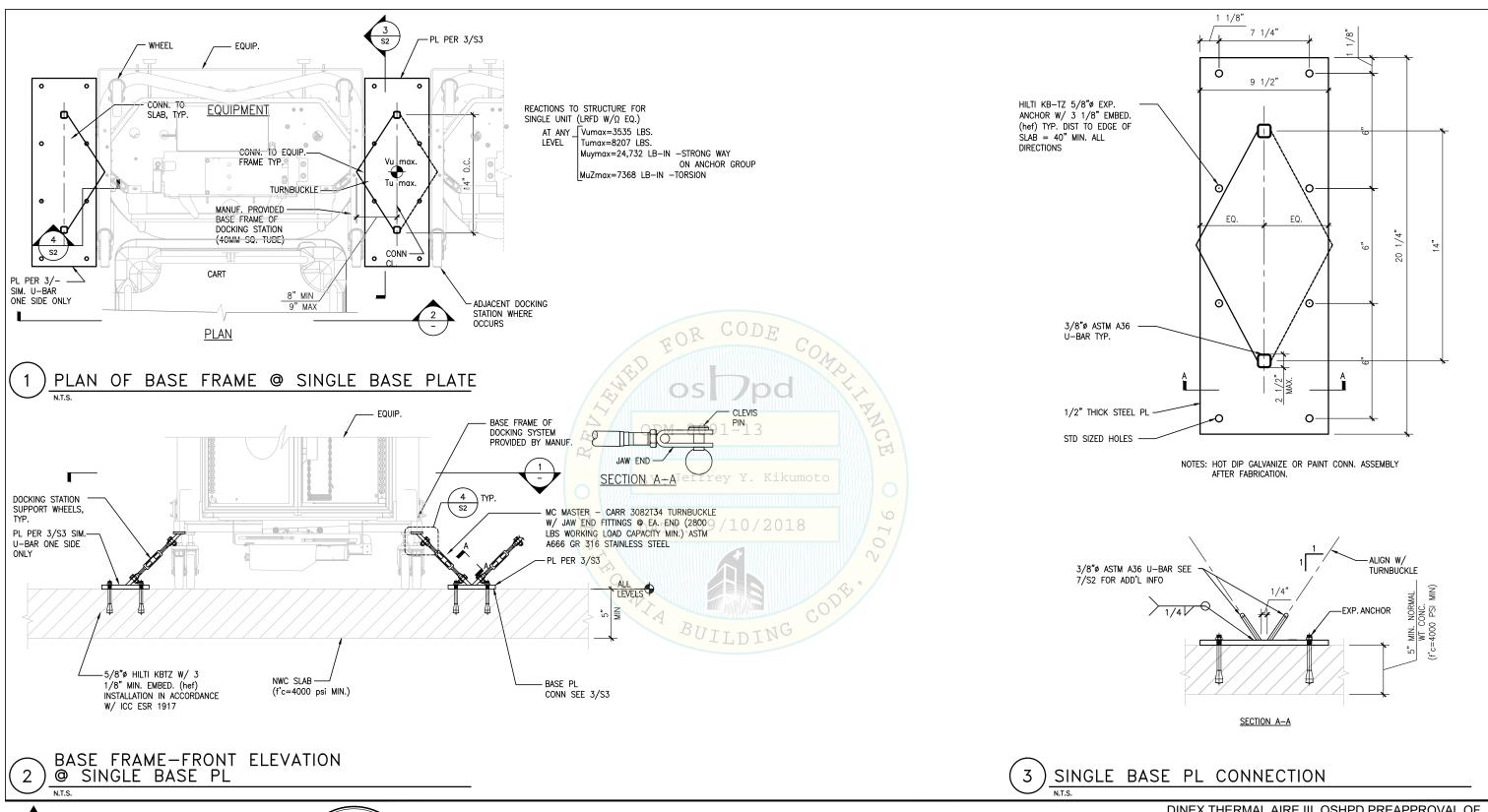
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EQUIP. SUPPORTS AND ATTACHMENT DETAILS

S2

| Drawn: | MAM | Job Num | nber: | B2535005.00 |
|---------|---------|---------|-------|-------------|
| Design: | RMG | Check: | RM | 1G |
| Date: | 6/26/18 | | | |

2 OF 3 Sheets





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DINEX THERMAL AIRE III OSHPD PREAPPROVAL OF MANUFACTURER'S CERTIFICATION (OPM)

Title: SINGLE BASE PL SUPPORTS

Sheet Number

AND ATTACHEMENT DETAILS

| Drawn: | MAM | Job Number | B2535005.00 |
|---------|---------|------------|-------------|
| Design: | RMG | Check: R | MG |
| Date: | 6/26/18 | | |

3 OF 3 Sheets