

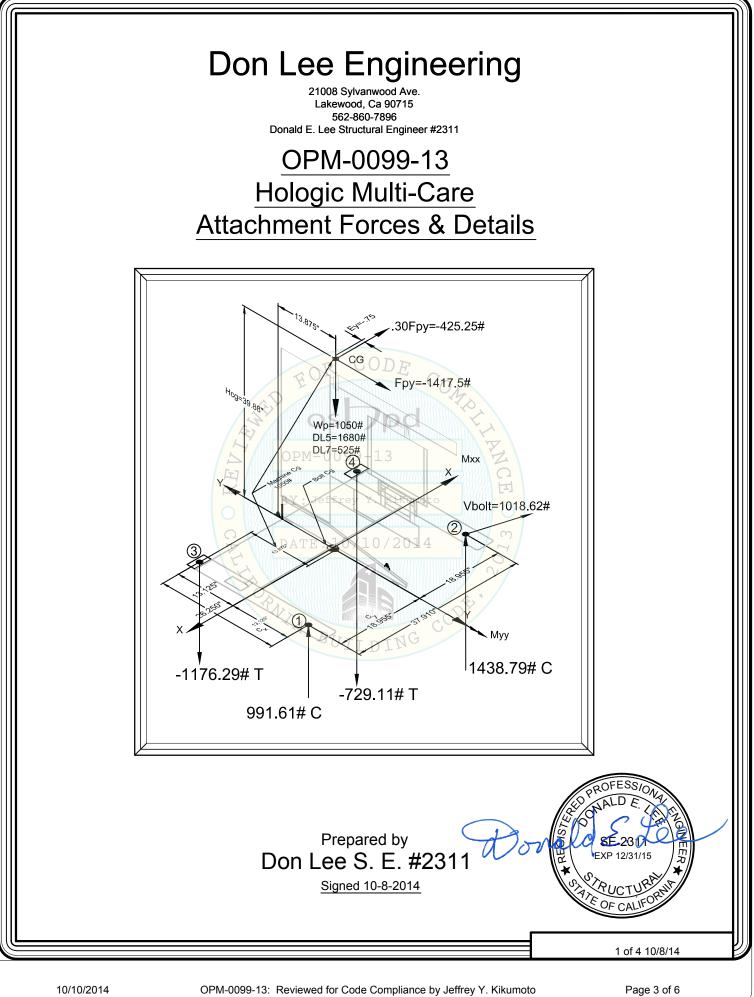
APPLICATION FOR OSHPD PREAPPROVAL OFFICE USE ONLY
OF MANUFACTURER'S CERTIFICATION (OPM) APPLICATION #: OPM-0099-13
OSHPD Preapproval of Manufacturer's Certification (OPM)
Type: New Renewal Vpdate to Pre-CBC 2013 OPA Number: 2531-10
Manufacturer Information
Manufacturer: Hologic
Manufacturer's Technical Representative: Ken DeFreitas, Sr. Staff Mechanical Engineer
Mailing Address: 36 Apple Ridge Road, Danbury, Ct 06810
Telephone: 203-731-8309 Email: Dken.defreitas@Hologic.com
Product Information
Product Name: MultiCare
Product Type: OPM-0099-13
Product Model Number:
General Description: Breast Biopsy System
DATE: 10/10/2014
Et e
Applicant Information
Applicant Company Name: Hologic
Contact Person: Ken DeFreitas, Sr. Staff Mechanical Engineer
Mailing Address: 36 Apple Ridge Road, Danbury, Ct 06810
Telephone: 203-731-8309 Email: ken.defreitas@Hologic.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: 5-1-14
Title: Sr. Staff Mechanical Engineer Company Name: Hologic
"Access to Safe, Quality Healthcare Environments that Meet California's Diverse and Dynamic Needs"
STATE OF CALIFORNIA – HEALTH AND HUMAN SERVICES AGENCY OSH-FD-700 (REV 1/24/13) Page 1 of 2

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

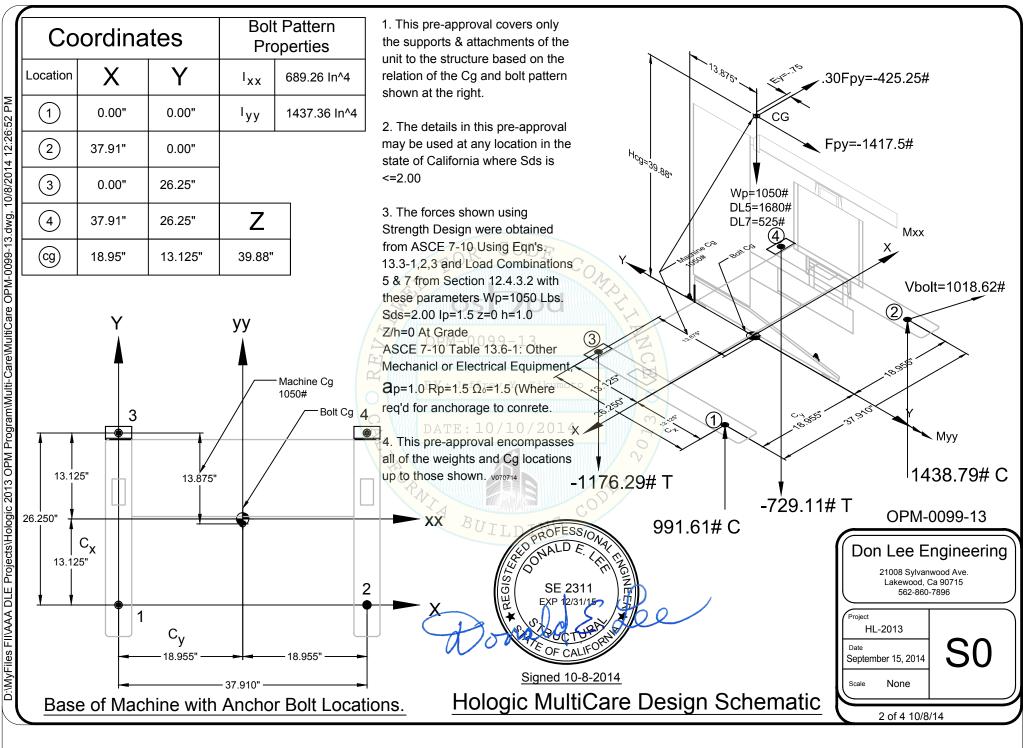
Registered Design Professional Preparing Engineering Recommendations
Company Don Lee Engineering Name:
Name: Donald E. Lee California License Number: SE 2311
Mailing Address: 21008 Sylvanwood Ave., Lakewood, Ca 90715
Telephone: 562-860-7896 Email: donleese@aol.com
OSHPD Special Seismic Certification Preapproval (OSP)
<ul> <li>Special Seismic Certification is preapproved under OSP- (Separate application for OSP is required)</li> </ul>
Special Seismic Certification is not preapproved
Certification Method(s)
<ul> <li>Testing in accordance with: ICC-ES AC156 FM 1950-10</li> <li>Other* (Please Specify):</li></ul>
OSLIDO E
<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> <li>(Please Specify):</li> </ul>
List of Attachments Supporting the Manufacturer's Certification
<ul> <li>☐ Test Report</li> <li>☑ Drawings</li> <li>☑ Calculations</li> <li>☐ Manufacturer's Catalog</li> <li>☐ Other(s) (Please Specify):</li> </ul>
OFFICE USE ONLY – OSHPD APPROVAL VALID FOR CBC 2013 ONLY         Signature:
Print Name: USeffrey Y. Kikumoto
Title: Senior Structural Engineer
Condition of Approval (if applicable):
"Access to Safe, Quality Healthcare Environments that Meet California's Diverse and Dynamic Needs"

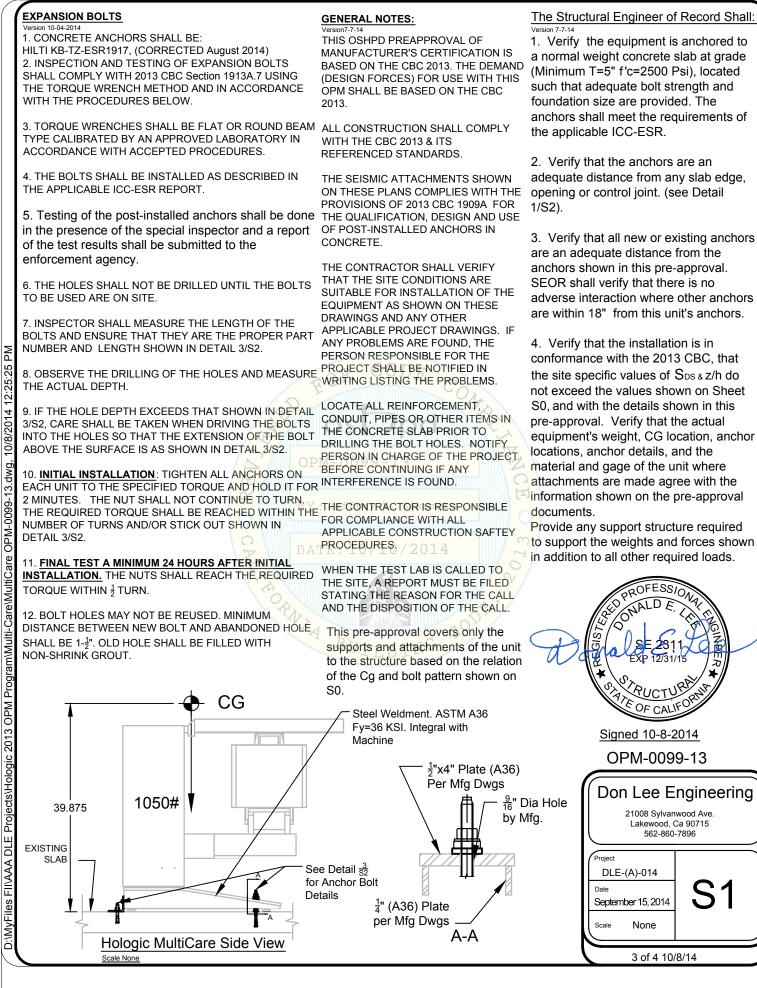
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STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY OSH-FD-700 (REV 1/24/13)



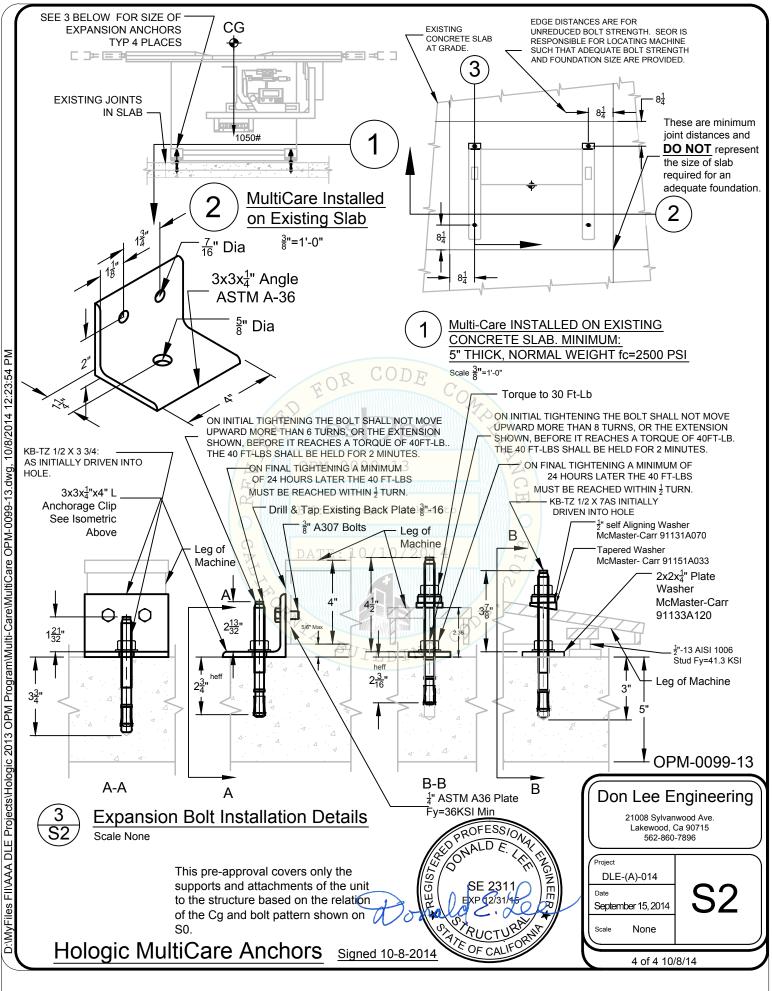
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10/10/2014

OPM-0099-13: Reviewed for Code Compliance by Jeffrey Y. Kikumoto



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