



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

**APPLICATION FOR OSHPD PREAPPROVAL
OF MANUFACTURER'S CERTIFICATION (OPM)**

OFFICE USE ONLY	
APPLICATION #:	OPM-0153-13

OSHPD Preapproval of Manufacturer's Certification (OPM)

Type: New Renewal Update to Pre-CBC 2013 OPA Number: _____

Manufacturer Information

Manufacturer: Nexspan Healthcare, LLC.

Manufacturer's Technical Representative: John P. Kasten

Mailing Address: 270 Scientific Dr., Suite 14, Norcross, GA. 30092

Telephone: (678) 578-7835 Email: John.kasten@nexspan.com

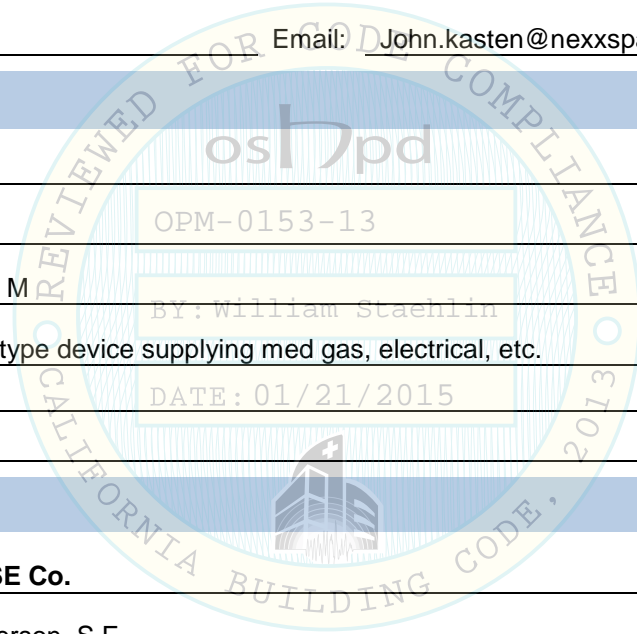
Product Information

Product Name: Matrixx M

Product Type: Cantilever

Product Model Number: Matrixx M

General Description: Headwall type device supplying med gas, electrical, etc.



Applicant Information

Applicant Company Name: EASE Co.

Contact Person: Jonathan Roberson, S.E.

Mailing Address: 5877 Pine Ave. Suite 210, Chino Hills, CA. 91709

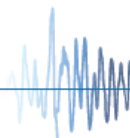
Telephone: (909) 606-7622 Email: J.Roberson@EASECo.com

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: 11/3/14

Title: Principal Engineer Company Name: EASE Co.

"Access to Safe, Quality Healthcare Environments that Meet California's Diverse and Dynamic Needs"





**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: J.Roberson@EASECo.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 1950-10
- Other* (Please Specify): _____

*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.

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

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 2013 ONLY

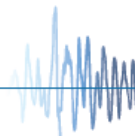
Signature: *William Staehlin* Date: January 21, 2015

Print Name: William Staehlin

Title: Senior Structural Engineer

Condition of Approval (if applicable): _____

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**EQUIPMENT ANCHORAGE
& SEISMIC ENGINEERING**

5877 Pine Ave, Ste. 210
Chino Hills, CA. 91709
Phn: (909) 606-7622

Office of Statewide Health Planning and Development
PREAPPROVAL OF MANUFACTURER'S CERTIFICATION
OPM-0153-13

THIS PREAPPROVAL CONFORMS TO THE 2013 CALIFORNIA BUILDING CODE

MANUFACTURER: **NEXXSPAN HEALTHCARE, LLC**
EQUIPMENT NAME: **MATRIX M**

Sheet: 1 of 4
Date: 1/6/15

GENERAL NOTES

1. THIS OSHPD PREAPPROVAL OF MANUFACTURER'S CERTIFICATION (OPM) IS BASED ON THE 2013 CBC. THE DEMANDS (DESIGN FORCES) FOR USE WITH THIS OPM SHALL BE BASED ON THE 2013 CBC
2. 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.
3. THIS PREAPPROVAL CONFORMS TO THE 2013 CALIFORNIA BUILDING CODE.
4. FORCES PER ASCE 7-10 SECTION 13.3.1, EQUATIONS 13.3-1, 13.3-2 & 13.3-3, WHERE $S_{ds} = 2.2$, $a_p = 2.5$, $I_p = 1.5$, $R_p = 2.5$, $z/h \leq 1$.
5. THE DETAILS IN THIS PREAPPROVAL MAY BE USED AT ANY LOCATION IN THE STATE OF CALIFORNIA, WHERE SDS IS NOT GREATER THAN 2.2.
6. ALL DESIGN FORCES SHOWN ON THE DRAWINGS ARE FACTORED LOADS THAT SHALL BE USED FOR STRENGTH DESIGN.
7. SHEET METAL SCREWS SHALL BE TEKS SCREWS BY ITW BUILDEX (ICC ESR-1976).
8. THIS PREAPPROVAL COVERS ONLY THE SUPPORTS AND ATTACHMENTS OF THE EQUIPMENT TO THE STRUCTURE.
9. RESPONSIBILITIES OF THE STRUCTURAL ENGINEER OF RECORD OF THE BUILDING
 - A. PROVIDE SUPPORTING STRUCTURE REQUIRED TO SUPPORT WEIGHTS AND FORCES SHOWN, IN ADDITION TO ALL OTHER LOADS.
 - B. VERIFY THAT THE INSTALLATION IS IN CONFORMANCE WITH THE 2013 CBC AND WITH THE DETAILS SHOWN IN THIS PREAPPROVAL. VERIFY THAT THE ACTUAL EQUIPMENT'S WEIGHT, CG LOCATION, ANCHOR LOCATIONS, ANCHOR DETAILS AND THE MATERIAL AND GAGE OF THE UNIT WHERE ATTACHMENTS ARE MADE AGREE WITH THE INFORMATION SHOWN ON THE PREAPPROVAL DOCUMENTS.
 - C. VERIFY THAT THE COMBINATION OF S_{ds} & z/h RESULT IN SEISMIC FORCES (E_h , E_v) THAT ARE NOT GREATER THAN THE VALUES ON THE DETAILS.
 - D. DESIGN BACKING BARS, STUDS, ETC. WHICH THE UNITS ARE ATTACHED TO AS NOTED ON THE DRAWINGS.



NEXXSPAN HEALTHCARE, LLC

DES. **J. ROBERSON**

SHEET

2

JOB NO. **11-1438**

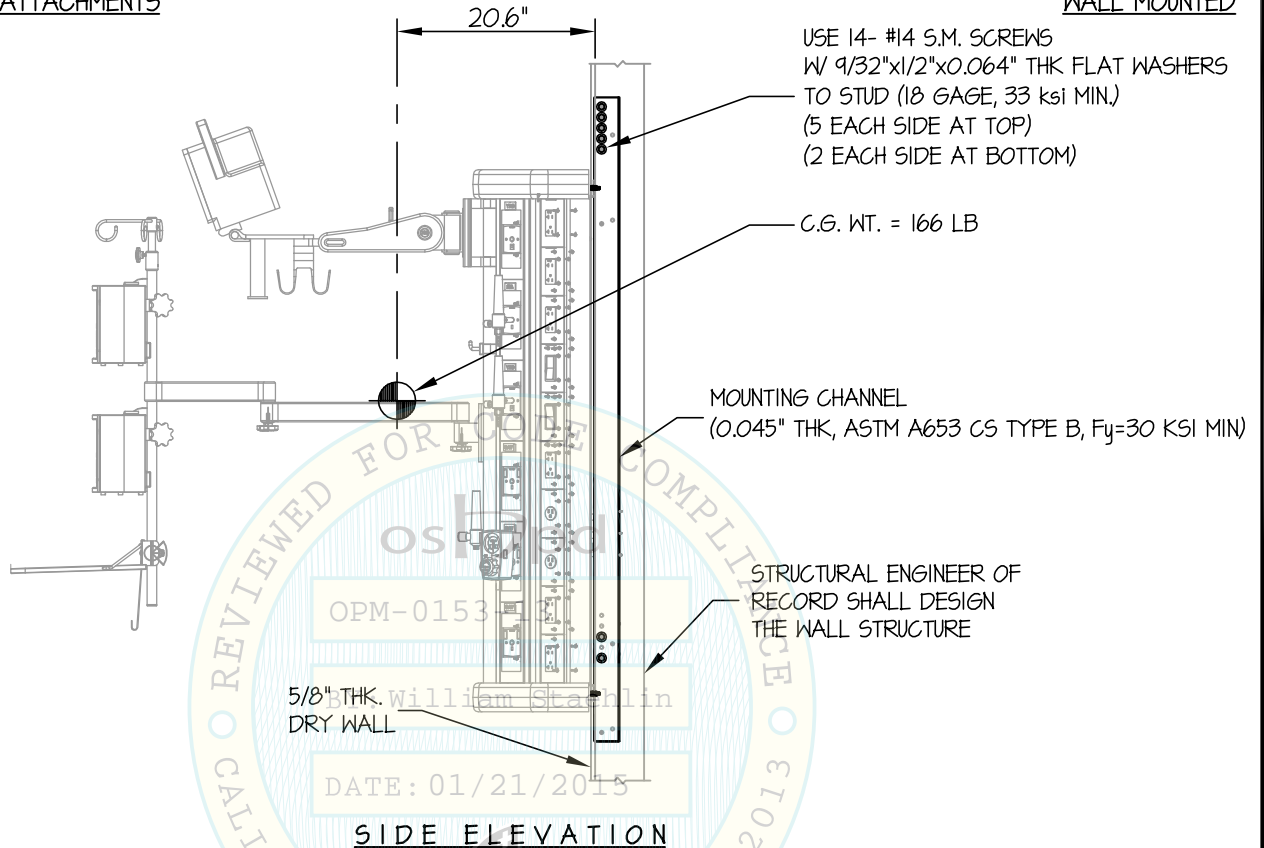
MATRIX M

DATE **1/6/15**

OF **4** SHEETS

SEISMIC SUPPORTS & ATTACHMENTS

WALL MOUNTED



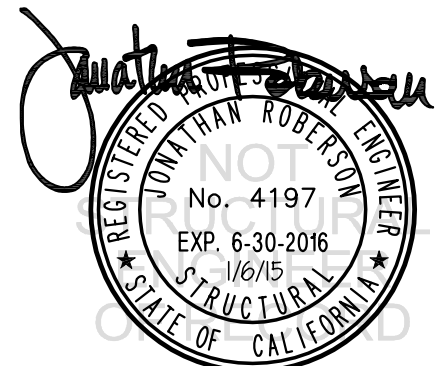
NOTES:

- FORCES ARE DETERMINED PER 2013 CALIFORNIA BUILDING CODE AND ASCE 7-10 STRENGTH DESIGN IS USED. ($S_{Ds} = 2.2$, $a_p = 2.5$, $I_p = 15$, $R_p = 2.5$, $z/h \leq 1$)

HORIZONTAL FORCE (E_h) = $3.96 W_p$

VERTICAL FORCE (E_v) = $0.44 W_p$

- CENTER OF GRAVITY (C.G.) AND WEIGHT ARE THE GOVERNING PARAMETERS FOR DESIGN. THIS PREAPPROVAL ENCOMPASSES ALL WEIGHTS UP TO THE MAXIMUM WEIGHT SHOWN.
- STRUCTURAL ENGINEER OF RECORD FOR THE BUILDING SHALL PROVIDE SUPPORT STRUCTURE DESIGNED TO SUPPORT WEIGHTS AND FORCES SHOWN IN COMBINATION WITH ALL OTHER LOADS THAT MAY BE PRESENT.
- SEE GENERAL NOTES: SHEETS 1



NEXXSPAN HEALTHCARE, LLC

DES. J. ROBERSON

SHEET

3

JOB NO. 11-1438

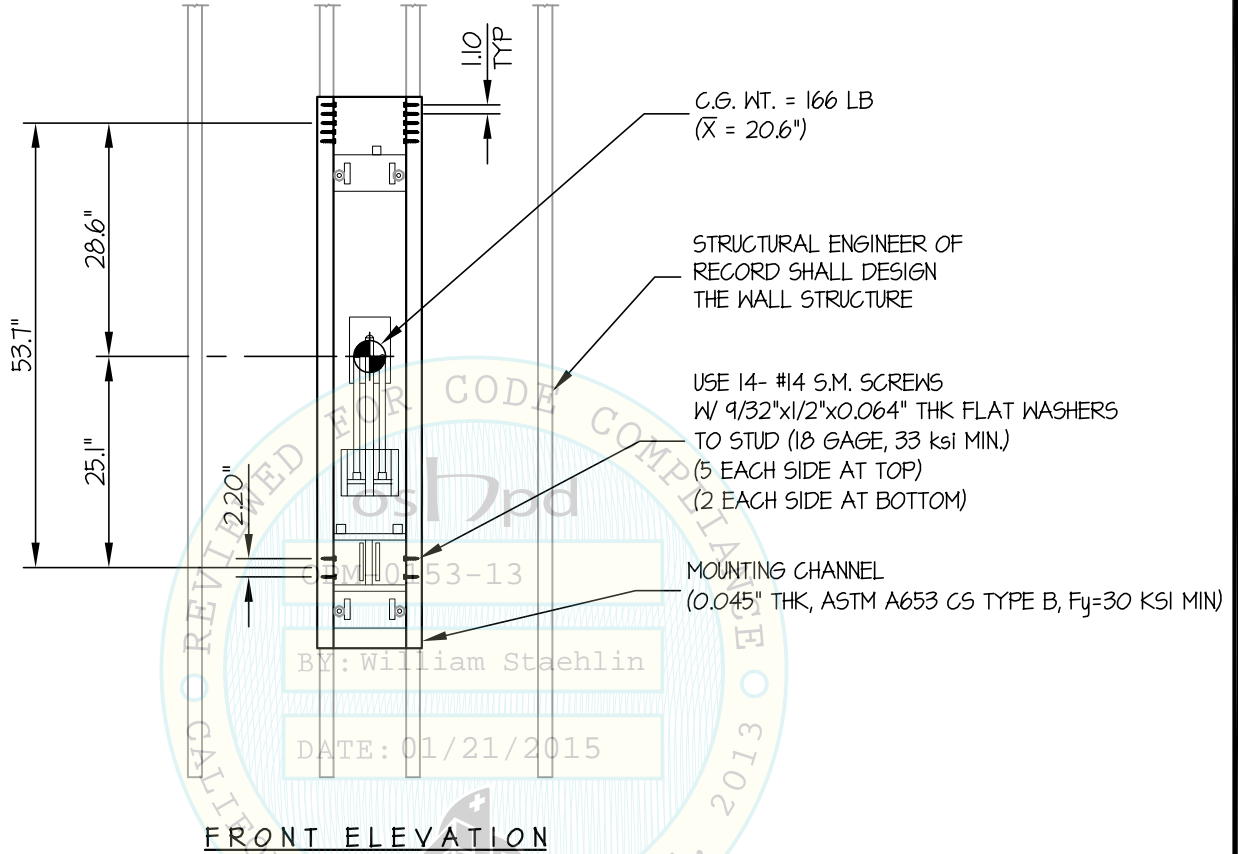
MATRIX M

DATE 1/6/15

OF 4 SHEETS

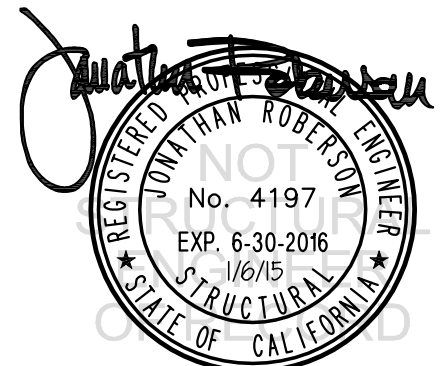
SEISMIC SUPPORTS & ATTACHMENTS

WALL MOUNTED



FRONT ELEVATION

$T_u = 0$ LB/SCREW (MAX)
 $V_u = 100$ LB/SCREW (MAX)



NEXXSPAN HEALTHCARE, LLC

DES. **J. ROBERSON**

SHEET

4

JOB NO. **11-1438**

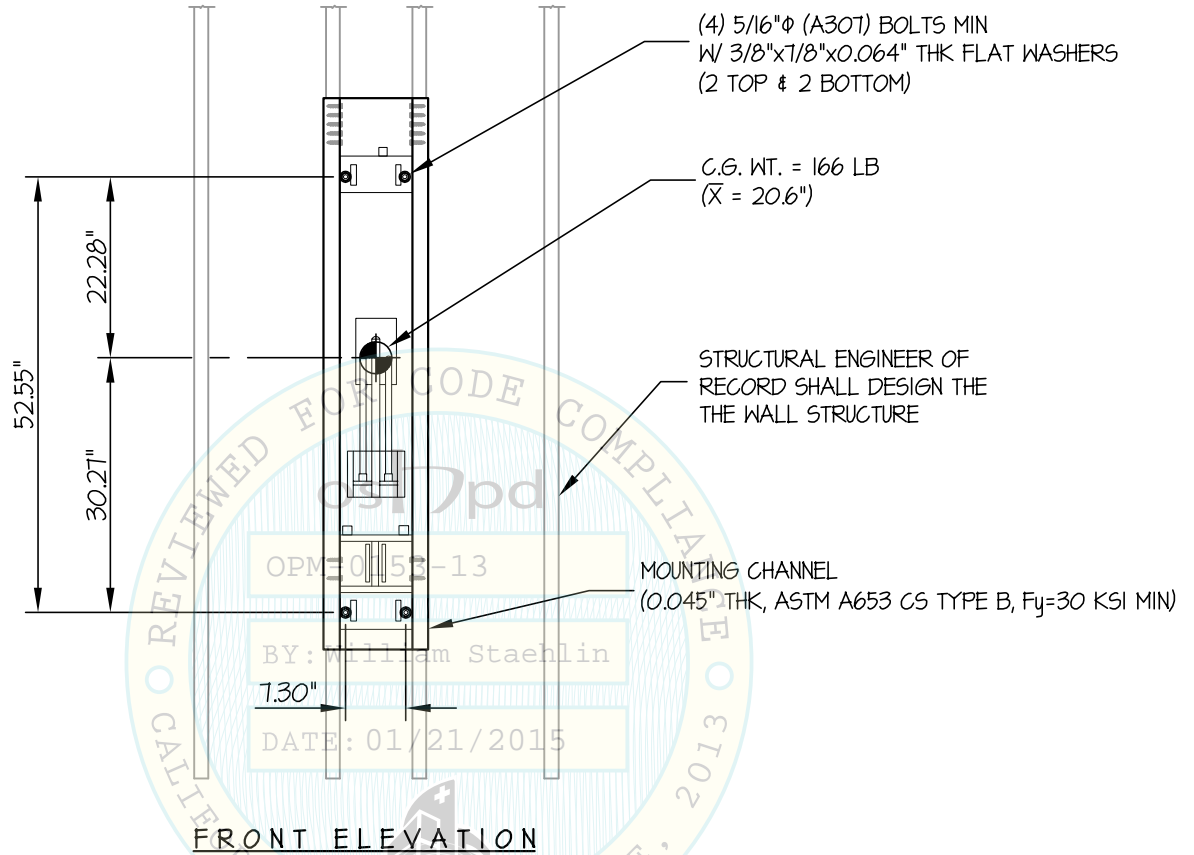
MATRIX M

DATE **1/6/15**

OF **4** SHEETS

SEISMIC SUPPORTS & ATTACHMENTS

WALL MOUNTED



$T_u = 1181$ LB/BOLT (MAX)
 $V_u = 202$ LB/BOLT (MAX)

Jonathan Roberson
REGISTERED PROFESSIONAL ENGINEER
No. 4197
EXP. 6-30-2016
1/6/15
STRUCTURAL
STATE OF CALIFORNIA