

OFFICE OF STATEWIDE HEALTH PLANNING AND DEVELOPMENT FACILITIES DEVELOPMENT DIVISION

APPLICATION FOR OSHPD PREAPPROVAL	OFFICE USE ONLY		
OF MANUFACTURER'S CERTIFICATION (OPM)	APPLICATION #: OPM-0363-13		
OSHPD Preapproval of Manufacturer's Certification (OPM)			
Type: \[
Manufacturer Information			
Manufacturer: STEELCASE CORPORATION			
Manufacturer's Technical Representative: Michael Abson			
Mailing Address: 901 44 th Street, Grand Rapids, MI. 49508			
Telephone: On File Email: On File			
Product Information	MADIA		
Product Name: Answer Work Station A	- E		
Product Type: Interior Partitions	- CF		
Product Model Number: N/A BY: William Staehl	in		
General Description: Partitioned work station with work surface and ca	abinet		
DATE: 08/16/2017			
	N		
Applicant Information	CODE '		
Applicant Company Name: EASE Co.	30		
Contact Person: Jonathan Roberson, S.E.			
Mailing Address: 5877 Pine Ave. Suite 210, Chino Hills, CA. 91709			
Telephone: (909) 606-7622 Email: J.Robe	rson@EASECo.com		
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:	Date: 6/30/16		
Title: Principal Engineer Company Name: EASE	Со.		
"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 12/16/15)	Page 1 of 2		



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. 0	California License Number: <u>S4197</u>		
Mailing Address:5877 Pine Ave. Suite 210, Chino Hills, CA. 9	91709		
Telephone: 909-606-7622 Ema	il: <u>J.Roberson@EASECo.com</u>		
OSHPD Special Seismic Certification Preapproval (OS	Р)		
 Special Seismic Certification is preapproved under OSP- (Separate application for OSP is required) Special Seismic Certification is not preapproved 			
Certification Method(s)	E Co.		
 Testing in accordance with: Other* (Please Specify): 	FM 1950-16		
 *Use of criteria other than those adopted by the California Buildin supports and attachments are not permitted. For distribution sys seismic bracings, test criteria other than those adopted in the CE to testing. Analysis	tem, interior partition wall, and suspended ceiling SC 2016 may be used when approved by OSHPD prior		
List of Attachments Supporting the Manufacturer's Ce	rtification		
 ☐ Test Report ☑ Drawings ☑ Other(s) (Please Specify): 	s 🔲 Manufacturer's Catalog		
OFFICE USE ONLY – OSHPD APPROVAL VALID FOR CBC 2	2016 & ALL PRE-2016 CODE BASED PROJECTS		
Signature: Milliam Staehlin Print Name: William Staehlin Title: SSE Condition of Approval (if applicable):	Date:08-16-2017		
"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 12/16/15)	Page 2 of 2		

	EQUIRMENT ANCHORAGE & SEISMIC ENGINEERING Office of Statewide Health Planning and Development PREAPPROVAL OF MANUFACTURER'S CERTIFICATION OPM-0363-13 THIS PREAPPROVAL CONFORMS TO THE 2016 CALIFORNIA BUILDING CODE	5877 Pine Ave, Ste. 210 Chino Hills, CA. 91709 Phn: (909) 606-7622
	AFACTURER: STEELCASE INC ANSWER WORK STATION "A"	Sheet: <u>1 of 9</u> Date: 7/10/17
GENERAL NOTES 1. THIS OSHPD PREAPPROVAL OF MANUFACTURER'S CERTIFICATION (OPM) IS BASED ON THE 2016 CBC. THE DEMANDS (DESIGN FORCES) FOR USE WITH THIS OPM SHALL BE BASED ON THE 2016 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 2016 CALIFORNIA BUILDING CODE WHERE SDS IS NOT GREATER THAN 1.25 & 1.70. SEE DETAIL FOR APPLICABILITY 4. FORCES PER ASCE 7-10 SECTION 13.3.1, EQUATIONS 13.3-1, 13.3-2 & 13.3-3, WHERE SDS = 1.25, ap = 1.0, lp = 1.5, Rp = 2.5, zh = 0 AT CONCRETE SLAB ON METAL DECK. SEE FOLLOWING SHEETS FOR Ω. WHERE SDS = 1.26, ap = 1.0, lp = 1.5, Rp = 2.5, zh = 0 AT CONCRETE SLAB ON METAL DECK. SEE FOLLOWING SHEETS FOR Ω. WHERE SDS = 1.70, ap = 1.0, lp = 1.5, Rp = 2.5, zh = 0 AT CONCRETE SLAB ON METAL DECK. SEE FOLLOWING SHEETS FOR Ω. WHERE SDS = 1.70, ap = 1.0, lp = 1.5, Rp = 2.5, zh = 0 AT CONCRETE SLAB ON METAL DECK. SEE FOLLOWING SHEETS FOR Ω. WHERE SDS = 1.70, ap = 1.0, lp = 1.5, Rp = 2.5, zh = 0 AT CONCRETE SLAB ON METAL DECK. SEE FOLLOWING SHEETS FOR Ω. MHERE SDS = 1.70, ap = 1.0, lp = 1.5, Rp = 2.5, zh = 0 AT CONCRETE SLAB ON METAL DECK. SEE FOLLOWING SHEETS FOR Ω. CONCRETE SLAB ON NOT THE DRAWINGS ARE FACTORED LOADS THAT SHALL BE USED FOR STRENGTH DESIGN. CONCRETE SLAB ON METAL DECK DETAIL VALID FOR DEMANDS SHOWN AT ANY ELEVATION IN THE BUILDING. (i.e. zh ≤ 1) 8. CONCRETE SLAB DETAIL VALID FOR DEMANDS SHOWN AT OR BELOW GRADE. (i.e. zh = 0)		
B. C. D. E.	PROVIDE SUPPORTING STRUCTURE TO SUPPORT WEIGHTS AND FORCES SHOWN IN ADDITION TO ALL OVERIFY THAT THE INSTALLATION IS IN CONFORMANCE WITH THE 2016 CBC AND WITH THE DETAILS, MATERIAL AND GAGE OF THE UNIT WHERE ATTACHMENTS ARE MADE AGREE WITH THE INFORMATION SUPREAPPROVAL DOCUMENTS. VERIFY THAT PROJECT SPECIFIC VALUES OF SDS & z/h RESULT IN SEISMIC FORCES (Eh, Ev) THAT DO NOT EXCEED THE VALUES ON THE DETAILS. VERIFY THAT THE CONCRETE SLAB TO WHICH THE EQUIPMENT IS ANCHORED MEETS THE REQUIREMENTS OF THE SPECIFIED ICC ESR. VERIFY THAT THE ANCHORS ARE AN ADEQUATE DISTANCE FROM ANY SLAB EDGES OR OPENINGS (SEE TYPICAL DETAIL ON SHEET 2). VERIFY THAT ALL NEW OR EXISTING ANCHORS ARE AN ADEQUATE DISTANCE FROM THE UNIT ATTACHMENTS AND CHECK FOR INTERACTION WHERE OTHER ANCHORS ARE WITHIN 18" OR 6hef FROM THIS UNIT'S ANCHORS.	HOWN ON THE

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