

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

APPLICATION FOR OSHPD PREAPPROVAL	OFFICE USE ONLY				
OF MANUFACTURER'S CERTIFICATION (OPM)	APPLICATION #: OPM-0378-13				
OSHPD Preapproval of Manufacturer's Certification (OPM)					
Type: New Renewal Update to Pre-CBC 2013 O	PA Number:				
Manufacturer Information					
Manufacturer: Accuray, Inc.					
Manufacturer's Technical Representative:					
Mailing Address: 1310 Chesapeake Terrace, Sunnyvale, CA. 94089					
Telephone: On File	0.				
Product Information	M.D.L.				
Product Name: Radixact Patient Table	- E				
Product Type: Other Electrical & Mechanical Components	CE				
Product Model Number: N/A By: Jeffrey Enzl	er				
General Description: Radiation Treatment Used in Oncology					
DATE: 06/26/2017	7				
	N N				
Applicant Information	CODÊP '				
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: 10/10/16				
Title:   Principal Engineer   Company Name:   EASE	Со.				
"Access to Safe, Quality Healthcare Environments that Meet California's Diverse and Dvnamic 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. California License Number: S4197							
Mailing Address:5877 Pine Ave. Suite 210, Chino Hills, CA. 91709							
Telephone: 909-606-7622 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 1950-16         Other*       (Please Specify):       OPM-0378-13							
<ul> <li>*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.</li> <li>Analysis</li> <li>DATE: 06/26/2017</li> <li>Experience Data</li> <li>Combination of Testing, Analysis, and/or Experience Data (Please Specify):</li> </ul>							
List of Attachments Supporting the Manufacturer's Certification							
<ul> <li>□ Test Report</li></ul>							
OFFICE USE ONLY – OSHPD APPROVAL VALID FOR CBC 2016 & ALL PRE-2016 CODE BASED PROJECTS							
Signature:							
"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							

	EQUIPMENT ANCHORAGE & SEISMIC ENGINEERING Office of Statewide Health Planning and Development PREAPPROVAL OF MANUFACTURER'S CERTIFICATION OPM-0378-13 THIS PREAPPROVAL CONFORMS TO THE 2016 CALIFORNIA BUILDING CODE	5877 Pine Ave, Ste. 210 Chino Hills, CA. 91709 Phn: (909) 606-7622
	UFACTURER: ACCURAY INC PMENT NAME: Radixact PATIENT TABLE	Sheet: <u>1 of 8</u> Date: 6/23/17
1. T (I 2. T S 3. T S 4. F V V S 5. T 6. A 7. C 8. C	HERAL NOTES HIS OSHPD PREAPPROVAL OF MANUFACTURER'S CERTIFICATION (OPM) IS BASED ON THE 2016 CBC. THE DE DESIGN FORCES) FOR USE WITH THIS OPM SHALL BE BASED ON THE 2016 CBC. HIS DOCUMENT MAY ONLY BE USED WITH THE EXPRESS WRITTEN CONSENT OF THE MANUFACTURER LISTE SPECIFIC PROJECT SITE AND INSTALLATION LOCATION. THIS DOCUMENT IS INVALID WITHOUT SUCH CONSENT 'HIS PREAPPROVAL CONFORMS TO THE 2016 CALIFORNIA BUILDING CODE WHERE SDS IS NOT GREATER THAN SEE DETAIL FOR APPLICABILITY ORCES PER ASCE 7-10 SECTION 13:3.1, EQUATIONS 13:3-1, 13:3-2 & 13:3-3, VHERE SDS = 2.00, $a_p = 1.0$ , $I_p = 1.5$ , $z/h = 0$ AT CONCRETE SLAB. SEE FOLLOWING SHEETS FOR Ω <sub>0</sub> VHERE SDS = 2.20, $a_p = 1.0$ , $I_p = 1.5$ , $z/h = 1.4$ TO CONCRETE SLAB. SEE FOLLOWING SHEETS FOR Ω <sub>0</sub> VHERE SDS = 2.20, $a_p = 1.0$ , $I_p = 1.5$ , $z/h = 1.4$ TO CONCRETE SLAB. SEE FOLLOWING SHEETS FOR Ω <sub>0</sub> VHERE SDS = 2.20, $a_p = 1.0$ , $I_p = 1.5$ , $z/h = 1.4$ TO CONCRETE SLAB. SEE FOLLOWING SHEETS FOR Ω <sub>0</sub> VHERE SDS = 2.20, $a_p = 1.0$ , $I_p = 1.5$ , $z/h = 1.4$ TO CONCRETE SLAB. SEE FOLLOWING SHEETS FOR Ω <sub>0</sub> VHERE SDS = 2.20, $a_p = 1.0$ , $I_p = 1.5$ , $z/h = 1.4$ TO CONCRETE SLAB. SEE FOLLOWING SHEETS FOR Ω <sub>0</sub> CONCRETE SLAB ON METAL DECK DETAIL VALID FOR DEMANDS SHOWN AT ANY ELEVATION IN THE SUPPORTS AND ATTACHMENTS OF THE EQUIPMENT TO THE STRUCTURAL ENGINEER SLAB ON METAL DECK DETAIL VALID FOR DEMANDS SHOWN AT ANY ELEVATION IN THE BUILDING. CONCRETE SLAB DETAIL VALID FOR DEMANDS SHOWN AT ANY ELEVATION AT OR BELOW GRADE. (i.e. $z/h = 0$ ) <b>ESPONSIBILITIES OF THE STRUCTURAL ENGINEER OF RECORD OF THE BUILDING</b>	D ABOVE FOR THE T. N 2.00 & 2.20. URE. TH DESIGN.
B C D	<ul> <li>A. PROVIDE SUPPORTING STRUCTURE TO SUPPORT WEIGHTS AND FORCES SHOWN IN ADDITION TO ALL OT</li> <li>VERIFY 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 SHO PREAPPROVAL DOCUMENTS.</li> <li>VERIFY THAT PROJECT SPECIFIC VALUES OF SDS &amp; z/h RESULT IN SEISMIC FORCES (Eh, Ev ) THAT DO NOT EXCEED THE VALUES ON THE DETAILS.</li> <li>VERIFY THAT THE CONCRETE SLAB TO WHICH THE EQUIPMENT IS ANCHORED MEETS THE REQUIREMENTS OF THE APPLICABLE ICC ESR. AND THIS OPM.</li> <li>VERIFY THAT THE ANCHORS ARE AN ADEQUATE DISTANCE FROM ANY SLAB</li> </ul>	
F	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.	No. 4197 EXP. 6-30-2018 5, 6/23/17 P// 0 1/ 8

CAL

OF

EQUIPMENT ANCHORAGE & SEISMIC ENGINEERING www.EquipmentAnchorage.com											
ACCURAY INC						DES	DES. J. ROBERSON				
							JOE	no. <b>11-1</b>	624	2	
	Radixact PATIENT TABLE							DAT	e 6/23	= 6/23/17 <sub>oF</sub> 8 s	
	10. EXPANSION ANCHORS:										
/	A. ATTACHMENT IS TO BE MADE WITH THE ANCHORS LISTED BELOW AND INSTALLED AS DESCRIBED IN THE CORRESPONDING ICC REPORT.										
	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 Tension Test
	3/8"	Sand Light Weight	3000	Hilti Kwik Bolt TZ	ESR-1917	2"	6.75"	12"	See Detail "A"	25 FT-LB	1186 lb
	5/8"	Normal Weight	3000	Hilti Kwik Bolt TZ	ESR-1917	3.125"	12"	24"	5"	60 FT-LB	3135 lb
E	B. THIS PREAPPROVAL ALLOWS FOR UP TO A MAXIMUM OF 2 ADJACENT CONCRETE SLAB EDGES, 24" AWAY MINIMUM (i.e CORNER). SEE ADJACENT DETAIL FOR ADDITIONAL MINIMUM ALLOWABLE CONCRETE EDGE DISTANCES.									36" (MIN)	
(	C. TESTING OF EXPANSION ANCHORS PER 2016 CBC, 1910A.5: TESTING SHALL BE DONE IN THE PRESENCE OF THE SPECIAL INSPECTOR AND A REPORT OF THE TEST RESULTS SHALL BE SUBMITTED TO OSHPD (i) AFTER AT LEAST 24 HOURS HAVE ELAPSED SINCE INSTALLATION, DIRECT PULL TENSION TEST OR TORQUE TEST AT LEAST 50% OF										
		HE ANCHORS.		BY	:Jett	rey E	inzle:		O	l	
	(ii) ACCEPTANCE CRITERIA:								BOLT SPACING		
	OBSERVABLE MOVEMENT AT THE TEST LOAD. A PRACTICAL WAY TO DETERMINE OBSERVABLE MOVEMENT IS THAT THE WASHER									EDGE DETAIL	
	BECOMES LOOSE.      TORQUE TEST: THE APPLICABLE TORQUE MUST BE ACHIEVED     WITHIN THE FOLLOWING LIMITS: WEDGE TYPE: 1/2 TURN OF THE     NUT      WITHIN THE FOLLOWING LIMITS: WEDGE TYPE: 1/2 TURN OF THE     NUT										
	. ,	ANY ANCHUR	K FAILS, I	EST ALL ANCHOR	.5.						
[				STEEL REINFORC		CRETE SI	_AB				
E	E. PROV	DE FOR FULL	. THREAD	ENGAGEMENT O	F NUT & WA	SHER.					
11. BC	LTS THR	OUGH CONCR	RETE ON I	METAL DECK							
/	<ul> <li>BOLTS SHALL BE TORQUED BY 3/4 TURN OF THE NUTS AFTER THE SNUG TIGHT (THE SNUG-TIGHT CONDITION IS DEFINED AS THE TIGHTNESS REQUIRED TO BRING THE CONNECTED PLIES INTO FIRM CONTACT) CONDITION IS ACHIEVED, UNLESS OTHERWISE NOTED.</li> </ul>										
E	B. THROUGH BOLT HOLES SHALL BE 1/16" LARGER THAN BOLT SIZE (HOLE SIZE = BOLT SIZE + 1/16) FOR CONCRETE.									TAN ROBERT	
(	C. THROUGH-BOLTS IN CONCRETE SHALL RECEIVE SPECIAL INSPECTION AND TESTING (THROUGH BOLTS WITH STEEL TO STEEL CONNECTION IN TENSION DO NOT REQUIRE TENSION TESTING) IN ACCORDANCE WITH REQUIREMENTS FOR POST-INSTALLED ANCHORS.										











