

Type:

DEPARTMENT OF HEALTH CARE ACCESS AND INFORMATION FACILITIES DEVELOPMENT DIVISION

APPLICATION FOR HCAI PREAPPROVAL OF MANUFACTURER'S CERTIFICATION (OPM)

OFFICE USE ONLY

APPLICATION #: OPM-0675

HCAI Preapprova	I of Manufacturer's	Certification	(OPM)
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X New Renewal/Update

Manufacturer Information

Manufacturer: Deister Electronics USA, Inc.

Manufacturer's Technical Representative: Bill Nuffer

Mailing Address: 8576 Wellington Road, Manassas, VA 20109

Telephone: (703) 659-9497

Email: Bill.Nuffer@deister.com

Product Information

Product Name: texCabinet TCR50 Laundry Return Unit (Small) 0675	1CT
Product Type: Other mechanical and electrical components	
Product Model Number: TCR50 O BY: Mohammad Aliaari	
General Description: Hospital laundry services	
DATE: 03/24/2023	

Applicant Information

	mation		
Applicant Compar	ny Name: EASE LLC		
Contact Person:	Tiffany Tonn	BU	ILDING
Mailing Address: 1515 FAIRVIEW AVE, STE 205,			ULA, MT 59801
Telephone: (406)) 541-3273	Email:	tiffany@easeco.com
Title: Office Mana	ager		





DEPARTMENT OF HEALTH CARE ACCESS AND INFORMATION FACILITIES DEVELOPMENT DIVISION

Registered Design Professonal Preparing Engineering Recommendations Company Name: EASE LLC

Name: Jonathan Roberson

California License Number: S4197

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

Telephone: (951) 295-1892

Email: jon@EASECo.com

HCAI Special Seismic Certification Preapproval (OSP)						
Special Seismic Certification is preapproved under C	OSP OSP Number:					
FOR CODE CON						
Certification Method						
Testing in accordance with: ICC-ES AC156	FM 1950-16					
Other(s) (Please Specify):	PM-0675					
	a Building Standards Code, 2022 (CBSC 2022) for component supports m, interior partition wall, and suspended ceiling seismic bracings, test be used when approved by HCAI prior to testing.					
X Analysis						
Experience Data	03/24/2023					
Combination of Testing, Analysis, and/or Experience	e Data (Please Specify):					
PRIVIA	E CODE					
HCAI Approval	UILDING					
Date: 3/24/2023						
Name: Mohammad Aliaari	Title: Senior Structural Engineer					
Condition of Approval (if applicable):						



		EQUIPMENT ANCHORAGE & SEISMIC ENGINEERING The Department of Health Care Access and Information PREAPPROVAL OF MANUFACTURER'S CERTIFICATION OPM-0675 THIS PREAPPROVAL CONFORMS TO THE 2022 CALIFORNIA BUILDING CODE	5877 Pine Ave, Ste. 210 Chino Hills, CA. 91709 Phn: (909) 606-7622
		FACTURER: DEISTER ELECTRONICS USA MENT NAME: texCabinet - RETURN (SMALL) TCR50	Sheet: <u>1 of 6</u> Date: 3/9/23
G	ENE	RAL NOTES	
1.		IIS HCAI PREAPPROVAL OF MANUFACTURER'S CERTIFICATION (OPM) IS BASED ON THE 2022 CBC. THE DEMA ESIGN FORCES) FOR USE WITH THIS OPM SHALL BE BASED ON THE 2022 CBC	NDS
2.	ŤH	IIS DOCUMENT MAY ONLY BE USED WITH THE EXPRESS WRITTEN CONSENT OF THE MANUFACTURER LISTED ECIFIC PROJECT SITE AND INSTALLATION LOCATION. THIS DOCUMENT IS INVALID WITHOUT SUCH CONSENT	
3.	ΤH	IIS PREAPPROVAL CONFORMS TO THE 2022 CALIFORNIA BUILDING CODE WHERE SDS IS NOT GREATER THAN	
4.		RCES PER ASCE 7-16 SECTION 13.3.1, EQUATIONS 13.3-1, 13.3-2 & 13.3-3,	
	WH	HERE SDS = 2.30, a p = 1.0, Ip = 1.5, Rp = 1.5, <mark>z/h = 0 AT CONCRETE SLAB & z/h ≤</mark> 1 AT CONCRETE SLAB ON METAL	DECK.
		E FOLLOWING SHEETS FOR Ω.	
5.		IS PREAPPROVAL COVERS ONLY THE SUPPORTS AND ATTACHMENTS OF THE EQUIPMENT TO THE STRUCTU	
6. 7		L DESIGN FORCES SHOWN ON THE DRAWINGS ARE FACTORED LOADS THAT SHALL BE USED FOR STRENGT	
7. 8.		ONCRETE SLAB ON METAL DECK D <mark>ETAIL</mark> VALID FOR DEMANDS SHOWN AT ANY ELEVATION IN THE BUILDING. (ONCRETE SLAB DETAIL VALID FOR DEMANDS SHOWN AT OR BELOW GRADE. (i.e. z/h = 0)	(i.e. 2/ii <u>≤</u> 1)
0		ESPONSIBILITIES OF THE STRUCTURAL ENGINEER OF RECORD OF THE BUILDING	
9.		LOF UNGIDILITIES OF THE STRUCTURAL ENGINEER OF RECORD OF THE BUILDING	
		PROVIDE SUPPORTING STRUCTURE TO SUPPORT WEIGHTS AND FORCES SHOWN IN ADDITION TO ALL OT	HER LOADS.
	В.	VERIFY THAT THE INSTALLATION IS IN CONFORMANCE WITH THE 2022 CBC AND WITH THE DETAILS, MATERIAL AND GAGE OF THE UNIT WHERE ATTACHMENTS ARE MADE AGREE WITH THE INFORMATION SHO PREAPPROVAL DOCUMENTS.	WN ON THE
	C.	VERIFY THAT PROJECT SPECIFIC VALUES OF SDS & z/h RESULT IN SEISMIC FORCES (Eh, Ev) THAT DO NOT EXCEED THE VALUES ON THE DETAILS.	
	D.	VERIFY THAT THE CONCRETE SLAB TO WHICH THE EQUIPMENT IS ANCHORED MEETS THE REQUIREMENTS OF THE APPLICABLE ICC ESR REPORT AND THIS OPM.	
	E.	VERIFY THAT THE ANCHORS ARE AN ADEQUATE DISTANCE FROM ANY SLAB EDGES OR OPENINGS (SEE TYPICAL DETAIL ON SHEET 2).	HAN ROBE
	F.		No. 4197 EXP. 6-30-2024 A 3/9/23 FUCIVE OF CALLED

EQUIPMENT ANCHORAGE & SEISMIC ENGINEERING www.EquipmentAnchorage.com											
	D	EISTE	RE	LECTRON	NICS	USA		DES. U	I. ROBER	SON	SHEET
							JOB NO	11-221	8	Ζ	
		NOabii	161 -	TCR50			•	DATE	3/9/2	3	OF 6 SHEETS
10. EXP	ANSION AN	ICHORS:									
A.		MENT IS TO ORRESPONE		E WITH THE ANCHO REPORT.	ORS LISTED	BELOW A	ND INST	ALLED AS	DESCRIBED	I	
	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 TZ2	ESR-4266	2"	8"	16"	3.25" Over Flutes	30 FT-LE	B N/A
	1/4"	Normal Weight	3000	HIIti Kwik HUS-EZ	ESR-3027	1.92"	3"	6	6"	18 FT-LE	B N/A
	3/8"	Normal Weight	3000	Hilti Kwik Bolt TZ2	ESR-4266	2"	8"	14"	4"	30 FT-LE	3 1983 lb
В.	CONCRE SEE ADJ	TE SLAB ED	GES, 14" A	FOR UP TO A MAXIM WAY MINIMUM (i.e DDITIONAL MINIMUM	- CORNER).		OMA			► SP	2 " (MIN)
C.	 EDGE DISTANCES. C. TESTING AND SPECIAL INSPECTION OF EXPANSION ANCHORS SHALL BE PERFORMED BY AN APPROVED INDEPENDENT AGENCY EMPLOYED BY THE FACILITY OWNER PER CBC 1704A & 1910A.5 AND CAC 7-149. ALL REPORTS SHALL BE SENT TO THE INSPECTOR INTER OF RECORD, OWNER AND THE ARCHITECT OR ENGINEER IN RESPONSIBLE CHARGE. (i) AFTER AT LEAST 24 HOURS HAVE ELAPSED SINCE INSTALLATION, DIRECT PULL TENSION TEST OR TORQUE TEST AT LEAST 50% OF THE ANCHORS. 								BOLT SPACING		
	 (ii) ACCEPTANCE CRITERIA: DIRECT TENSION TEST: THE ANCHOR SHOULD HAVE NO OBSERVABLE MOVEMENT AT THE TEST LOAD. A PRACTICAL WAY TO DETERMINE OBSERVABLE MOVEMENT IS THAT THE WASHER BECOMES LOOSE. 										
				PPLICABLE TORQUE S: WEDGE TYPE : 1/			WITHIN				
	(iii) IF AN	IY ANCHOR F	FAILS, TES	ST ALL ANCHORS.							
D.				TEEL REINFORCING		TE SLAB					
E.	PROVIDE	FOR FULL T	HREAD E	NGAGEMENT OF NU	IT & WASHE	ર .					No. 4197 XP. 6-30-2024 3/9/23 PUCIVEN OF CALLED







