

**OSHPD**



**EXPEDITED BUILDING  
PERMIT FOR  
INSTALLING A  
TEMPORARY  
GENERATOR**

**FOR SINGLE STORY  
WOOD OR LIGHT  
STEEL FRAME  
CONSTRUCTION  
SKILLED NURSING  
FACILITIES &  
INTERMEDIATE  
CARE FACILITIES  
(OSHPD 2 Buildings)**



**How – To Guide Series**

**A Companion  
Document to the  
OSHPD FREER  
Manual**

**September 01, 2021 Hardcopy Version**

## **EXPEDITED BUILDING PERMIT GUIDE FOR INSTALLING A TEMPORARY GENERATOR**

The Expedited Building Permit Guides are companion documents to the Office of Statewide Health Planning and Development (OSHPD) Field Review, Exempt, and Expedited Review (FREER) Manual and are intended as general reference guides and/or checklists to facilitate **repair, maintenance, minor renovation/remodeling, or installation of certain equipment** projects.

The Expedited Building Permit Guides are intended only for single-story Skilled Nursing Facilities (SNFs) and Intermediate-Care Facilities that are of wood frame construction or light steel frame construction and excluded from the definition of “Hospital Building” in the California Administrative Code (CAC) Article 2, Section 7-111.

This Expedited Building Permit Guide is made available for use at the discretion of the facility owner. OSHPD (Office) does not mandate the use of the Expedited Building Permit Guide for any condition. Use of project-specific design and construction documents prepared by a California licensed design professional in lieu of using the Expedited Building Permit Guide is always acceptable, and in some cases, may be required.

This Expedited Building Permit Guide gives no consideration to suitability for use in a specific application, compatibility with other building systems, appropriate use of materials or design, appearances, etc. The facility owner and/or his/her representative shall review all such qualities, features, and/or properties to ensure compliance with the California Building Standards Code and all applicable local codes and ordinances, appropriate integration with other building systems, and proper design for the project specific conditions and installation, etc. This shall include pre-assessment for existing damage that may need to be repaired and/or corrected.

While not mandatory, OSHPD recommends the facility have a California licensed architect or engineer, or a California licensed contractor assist in the review of the code compliance checklist herein below. In this manner, the facility will have a better understanding of the scope of work that may be required for a code compliant project prior to beginning the work.

### **The following regulations of the California Building Standards Code apply:**

*Before commencing construction or alteration of any health facility, the governing board or authority thereof shall submit an application for plan review to the Office, and shall obtain the written approval thereof by the Office describing the scope of work included and any special conditions under which approval is given (CAC, Section 7-113 (a)).*

*Construction or alteration of any health facility, governed under these regulations, performed without the benefit of review, permitting, and/or observation by the Office when review, permitting and/or observation is required, and without the exemption by the Office provided for in Section 7-127, shall be subject to*

*examination by the Office to assess relevant code compliance. Failure to obtain the necessary reviews and approvals prior to commencing construction will result in examination fees, in addition to application fees (CAC, Section 7-128).*

## TEMPORARY GENERATOR INSTALLATION

**The installation of a temporary generator requires a Building Permit** but may be exempt from the plan review process in accordance with Health and Safety Code (H&SC), Section 129875. Simple installation of a temporary generator in qualifying SNFs and ICFs may be exempt from plan review, if the following criteria are met:

- A point of connection has been previously installed to either supply the full building or to back up the permanent emergency generator.

This Expedited Building Permit Guide presents criteria in a checklist format for general assessment of the specific project conditions. Installation of a temporary generator without a permit is subject to an investigation fee, submittal of a project to the Office for plan review, demolition and/or rework of defective non-code complying work, etc. in accordance with the California Administrative Code, Title 24, Part 1, Section 7-128 “*Work Performed without a Permit*”.

The facility owner or his/her authorized agent should review this checklist with the **OSHPD Compliance Officer** to determine program eligibility, to assess the specific project conditions and determination of possible approaches to the application, review, permitting, and construction process prior to proceeding with work. Possible approaches include, but are not limited to:

**More than Minor Work** – Not covered under this Expedited Building Permit Guide is the installation of a temporary generator where modification, repair, or remedial work is necessary to bring a system that did not comply with the code at the time it was installed into compliance with current code and/or to ensure a safe condition. The facility must involve a licensed design professional (architect and/or electrical engineer dependent upon the scope and nature of the remedial work). If this work is of sufficiently limited scope, field review by the Compliance Officer can be used under this Expedited Building Permit Guide, however more involved work will require submittal as a standard project and reviewed by the Office by the Regional Architectural & Engineering Unit.

**Determination of Eligibility** – Determination of eligibility and appropriate permitting process is the responsibility of the OSHPD Regional Compliance Officer. Facilities are encouraged to work with their Compliance Officer prior to assuming eligibility or an approach to permitting.

**Inspections** – The approved Inspector of Record (IOR) must inspect the work prior to use. Interim inspection will be required when walls, ceilings or other construction materials will cover the finished work. Any deficiencies, identified through inspection, shall be corrected before use of the system is permitted. A “Certificate of Compliance” issued by the OSHPD Compliance Officer is required prior to use of the connection. Responsible parties shall file Verified Compliance Reports (CAC, Section 7-151) in accordance with the requirements of the Testing, Inspection and Observation (TIO) Program (CAC, Section 7-149).

**Manufacturer's Written Installation, Operating, and Maintenance Instructions –**

The installation shall comply with the manufacturer's written installation instructions. The installer (facility's maintenance staff/contractor) shall leave or submit to the Compliance Officer the manufacturer's installation, operating, and maintenance instructions in a location on the premises where they will be readily available for reference and guidance for the Inspector of Record (IOR), OSHPD staff, service personnel, and the owner or operator.

Electrical systems shall be installed in a manner that is in accordance with the California Electrical Code (CEC), applicable standards, and the manufacturer's installation instructions. (CEC 110.3)

## **New Project/Building Permit Application Requirements**

- Step 1.** Verify that the project is eligible for this program. Consultation with the OSHPD Compliance Officer is recommended.
- Step 2.** Use the eServices Portal online application process or download and print the Expedited Building Permit Guide and complete the **Installing a Temporary Generator Code Compliance Checklist** beginning on Page 6 of this Guide and complete the **Application for New Project/Building Permit** available at the OSHPD web site or eServices Portal. These documents may be filled-in manually or electronically.
- Step 3.** Prepare a plan/sketch showing the location(s) of where the temporary generator will be installed (a reduced copy of the building floor or site plan may be used for this purpose).
- Step 4.** If not using the online application, print one (1) complete set of the entire package (the Expedited Building Permit Guide with completed Checklist and Applications), sign and date (where required), and mail or deliver to:

***For construction in [Northern California](#), submit to:***

Office of Statewide Health Planning and Development  
Facilities Development Division  
2020 West El Camino Avenue, Suite 800  
Sacramento, CA 95833  
(916) 440-8300 phone  
(916) 274-0102 fax

***For construction in [Southern California](#), submit to:***

Office of Statewide Health Planning and Development  
Facilities Development Division  
355 South Grand Avenue, Suite 1900  
Los Angeles, CA 90071  
(213) 897-0166 phone  
(213) 217-8511 fax

**Upon issuance of the building permit for the project by OSHPD, you may submit a construction start letter and begin installation of the equipment.**

**The following questions based on your answer may have requirements. These requirements will be communicated to you by the OSHPD Regional Compliance Officer.**

### **INSTALLING A TEMPORARY GENERATOR CODE COMPLIANCE CHECKLIST**

*NOTE: The Compliance Officer will field verify compliance with this checklist and additional work may be required to bring the installation into code compliance if found to be deficient.*

		Compliance		
		Yes	No	NA
<b>PROJECT DESCRIPTION</b>				
1.	Is this project for a single-story skilled nursing or intermediate care facility building of wood-frame or light steel frame construction?	<input type="checkbox"/>	<input type="checkbox"/>	
2.	Is this project for the installation of a temporary generator?	<input type="checkbox"/>	<input type="checkbox"/>	
<b>GENERAL REQUIREMENTS</b>				
3.	Is there an existing generator inlet connection for the temporary generator that was installed under an OSHPD permit?	<input type="checkbox"/>	<input type="checkbox"/>	
4.	Are the requirements for the temporary generator posted at the point of connection to the building? The parameters include: 1. System voltage and configuration 2. Connection capacity 3. Minimum generator set rating (kW) 4. Phase rotation (3 phase connections only)	<input type="checkbox"/>	<input type="checkbox"/>	
5.	Does the temporary generator have sufficient fuel for 6 hours of operation at the posted generator set rating (CAN 2-108)?	<input type="checkbox"/>	<input type="checkbox"/>	
6.	A location for the temporary generator was determined at the time the building connection was installed. Does it continue to meet the following criteria? <ul style="list-style-type: none"> <li>• Is outdoors at grade level (NFPA 37, CBC 442)</li> <li>• Not less than 5 feet from openings in walls and not less than 5 feet from structures having combustible walls (NFPA 37 4.1.4.1)</li> <li>• Has an exhaust location that is at least 25 feet from any outside air intakes (CMC 407.2.1)</li> <li>• Has ready access by a fuel truck for refueling</li> <li>• Is accessible for maintenance, repair and firefighting (NFPA 27 4.1.1.1)</li> <li>• Is protected from damage, theft and tampering</li> <li>• Is out of the path of building egress, vehicle traffic and fire department access lanes</li> <li>• Has two dedicated circuits available to supply the battery charger and jacket water heater</li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>	

		Compliance		
		Yes	No	NA
7.	Will the work be performed by an electrical contractor licensed in the State of California?  <b>Note:</b> Workers' Compensation Insurance is required for all work.	<input type="checkbox"/>	<input type="checkbox"/>	
8.	Following approval by OSPHD, perform the work as specified in the attached documents.			



# Final Generator Installation Test Procedure

## Full Building Connection Option 1 (Single Breaker Docking Station)

1.	OSHPD Compliance Officer has been notified of the planned test.	<input type="checkbox"/>
2.	Install the temporary generator as specified in the "Installation of Temporary Generator" instructions.	<input type="checkbox"/>
3.	Verify the temporary generator voltage matches the building (Generator requirements are posted at the building point of connection)	<input type="checkbox"/>
4.	Verify the circuit breaker at the generator docking station is in the "OPEN" position.	<input type="checkbox"/>
5.	At the generator control panel, start the generator.	<input type="checkbox"/>
6.	Close the generator output breaker located at the temporary generator.	<input type="checkbox"/>
7.	Verify that the voltage of the service and temporary generator match. Additionally, for 3 phase installations only, verify the rotation of the service and temporary generator match.	<input type="checkbox"/>
8.	Open the service disconnect switch and remove the interlock key.	<input type="checkbox"/>
9.	Close the circuit breaker on the generator docking station using the interlock key.	<input type="checkbox"/>
10.	Verify the generator takes the building load and there are no generator malfunctions.	<input type="checkbox"/>
11.	Operate the building on the backup generator for 30 minutes. Verify there are no issues.	<input type="checkbox"/>
12.	Record the following at start, 15 minutes and 30 minutes:  Run Time Voltage Frequency Ampere Oil pressure Water temperature	<input type="checkbox"/>
13.	Open the circuit breaker on the generator docking station and remove the interlock key.	<input type="checkbox"/>
14.	Close the service disconnect switch using the interlock key.	<input type="checkbox"/>
15.	Verify normal power is restored to the building.	<input type="checkbox"/>

<b>16.</b> Allow the generator to run for 5 minutes for cooldown.	<input type="checkbox"/>
<b>17.</b> Shut down the temporary generator.	<input type="checkbox"/>

## Final Generator Installation Test Procedure

### Full Building Connection Option 2 (Dual Breaker MTS)

1.	OSHPD Compliance Officer has been notified of the planned test.	<input type="checkbox"/>
2.	Install the temporary generator as specified in the "Installation of Temporary Generator" instructions.	<input type="checkbox"/>
3.	Verify the temporary generator voltage matches the building (Generator requirements are posted at the building point of connection)	<input type="checkbox"/>
4.	Open the GENERATOR circuit breaker on the Manual Transfer Switch (MTS)	<input type="checkbox"/>
5.	Verify the UTILITY circuit breaker on the MTS is closed	<input type="checkbox"/>
6.	Start the generator set by using the generator control panel.	<input type="checkbox"/>
7.	Close the disconnect switch / circuit breaker at the temporary generator	<input type="checkbox"/>
8.	At the MTS, verify that the voltage of the normal source and temporary generator match. Additionally, for 3 phase installations only, verify the rotation of the normal source and temporary generator match.	<input type="checkbox"/>
9.	Open the UTILITY circuit breaker on the MTS.	<input type="checkbox"/>
10.	Close the GENERATOR circuit breaker on the MTS	<input type="checkbox"/>
11.	Verify generator takes the building load and there are no generator malfunctions	<input type="checkbox"/>
12.	Operate the building on the temporary generator for 30 minutes. Verify there are no issues.	<input type="checkbox"/>
13.	Record the following at start, 15 minutes and 30 minutes:  Run Time Voltage Frequency Amperes Oil pressure Water temperature	<input type="checkbox"/>
14.	Open the GENERATOR circuit breaker on the MTS	<input type="checkbox"/>
15.	Close the UTILITY circuit breaker on the MTS.	<input type="checkbox"/>
16.	Verify normal power is restored to the building.	<input type="checkbox"/>

<b>17.</b> Allow the generator to run for 5 minutes for cooldown..	<input type="checkbox"/>
<b>18.</b> Shut down the temporary generator.	<input type="checkbox"/>

# Final Generator Installation Test Procedure

## Emergency Generator Backup

1. OSHPD Compliance Officer has been notified of the planned test.	<input type="checkbox"/>
2. Install the temporary generator as specified in the "Installation of Temporary Generator" instructions.	<input type="checkbox"/>
3. Verify the temporary generator voltage matches the building (Generator requirements are posted at the building point of connection)	<input type="checkbox"/>
4. Open the TEMPORARY circuit breaker on the Manual Transfer Switch (MTS)	<input type="checkbox"/>
5. Open the PERMANENT circuit breaker on the MTS.	<input type="checkbox"/>
6. Start the temporary generator set by using the generator control panel.	<input type="checkbox"/>
7. Close the disconnect switch / circuit breaker at the temporary generator	<input type="checkbox"/>
8. At the ATS, verify that the voltage of the normal source and temporary generator match. Additionally, for 3 phase installations only, verify the rotation of the normal source and temporary generator match.	<input type="checkbox"/>
9. Open the disconnect switch / circuit breaker at the temporary generator.	<input type="checkbox"/>
10. Stop the temporary generator at the temporary generator control panel. Place temporary generator in AUTO position.	<input type="checkbox"/>
11. Let engine cool for 30 minutes.	<input type="checkbox"/>
12. Close the TEMPORARY circuit breaker on the MTS.	<input type="checkbox"/>
13. Open the breaker that supplies the normal feeder of the ATS. The temporary generator should start.	<input type="checkbox"/>
14. Record the following parameters from the time normal power is removed:  Time delay – loss of power to cranking start Time delay - Cranking time Time delay - Loss of power to generator is at operating speed Time delay - Loss of power to ATS transfer (must be < 10 seconds) Time delay - Loss of power until generator is stable	<input type="checkbox"/>
15. Operate the building on the temporary generator for 30 minutes. Verify there are no issues.	<input type="checkbox"/>

<p><b>16.</b> Record the following at start, 15 minutes and 30 minutes:</p> <p>Run Time Voltage Frequency Ampere Oil pressure Water temperature</p>	
<p><b>17.</b> Close the breaker that supplies the normal feeder of the ATS.</p>	<input type="checkbox"/>
<p><b>18.</b> Verify the ATS retransfers to normal power. Record time for time to retransfer. (must be &gt; 5 minutes).</p>	<input type="checkbox"/>
<p><b>19.</b> Verify normal power is restored to the emergency loads in the building</p>	<input type="checkbox"/>
<p><b>20.</b> Verify that the temporary generator shuts down after cooldown. Record cooldown time (time from retransfer to shutdown).</p>	<input type="checkbox"/>
<p><b>21.</b> Leave generator in automatic mode and secure the control box.</p>	<input type="checkbox"/>

# Temporary Generator DE- Installation Test Procedure

## Emergency Generator Backup

1.	Open the TEMPORARY circuit breaker on the Manual Transfer Switch (MTS)	<input type="checkbox"/>
2.	Close the PERMANENT circuit breaker on the MTS.	<input type="checkbox"/>
3.	Close the disconnect switch / circuit breaker at the permanent generator.	<input type="checkbox"/>
4.	Disconnect all temporary cables between the temporary generator and MTS.	<input type="checkbox"/>
5.	Place permanent generator in AUTO position.	<input type="checkbox"/>
6.	Open the breaker that supplies the normal feeder of the ATS. The permanent generator should start.	<input type="checkbox"/>
7.	Record the following parameters from the time normal power is removed:  Time delay – loss of power to cranking start Time delay – Cranking time Time delay – Loss of power to generator is at operating speed Time delay – Loss of power to ATS transfer (must be < 10 seconds) Time delay – Loss of power until generator is stable	
8.	Operate the building on the permanent generator for 30 minutes. Verify there are no issues.	<input type="checkbox"/>
9.	Record the following at start, 15 minutes and 30 minutes:  Run Time Voltage Frequency Ampere Oil pressure Water temperature	
8.	Close the breaker that supplies the normal feeder of the ATS.	<input type="checkbox"/>
9.	Verify the ATS retransfers to normal power. Record time for time to retransfer. (must be > 5 minutes).	<input type="checkbox"/>
10.	Verify normal power is restored to the emergency loads in the building	<input type="checkbox"/>
11.	Verify that the temporary generator shuts down after cooldown. Record cooldown time (time from retransfer to shutdown).	<input type="checkbox"/>
12.	Leave permanent generator in automatic mode and secure the MTS control panel.	<input type="checkbox"/>





## Installation of Temporary Generator

		Compliance		
		Yes	No	NA
1.	The temporary generator tires are blocked.	<input type="checkbox"/>	<input type="checkbox"/>	
2.	The temporary generator is protected from physical damage and tampering by fencing and/or k-rails.	<input type="checkbox"/>	<input type="checkbox"/>	
3.	If the generator will be in place for more than 30 days, it is anchored and braced in accordance with the detail S-2.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.	The generator output breaker is in the "OPEN" position.	<input type="checkbox"/>	<input type="checkbox"/>	
5.	The cables to be installed are of a type identified in CEC Table 400-4 for hard or extra-hard usage. CEC 590.4(B) One commonly used type is 4/0 CAMLOCK TYPE W Cables. <b>Note:</b> Diesel locomotive (DLO) cable is commonly proposed for use as temporary conductors. Note that DLO is not a CEC recognized designation. Only cables meeting the above requirements are acceptable	<input type="checkbox"/>	<input type="checkbox"/>	
6.	The cables are installed such that they are protected, supported, not installed directly on the floor or ground, and are not in physical contact with each other. (CEC 590.4(H), (J)).	<input type="checkbox"/>	<input type="checkbox"/>	
7.	The temporary generator's battery charger and jacket/battery heater are connected to the outlets previously identified.	<input type="checkbox"/>	<input type="checkbox"/>	
8.	Where the generator is needed to start upon loss of the utility, the ATS start contacts are connected to the temporary generator. (This is needed only when backing up the permanent generator)	<input type="checkbox"/>	<input type="checkbox"/>	
9.	Where the generator is backing up the permanent emergency generator, the remote annunciator is installed in the building. (NFPA 110 5.6.6)	<input type="checkbox"/>	<input type="checkbox"/>	
10.	Where the generator is backing up the permanent emergency generator and the generator is a separately derived system, the two ground rods are connected to the ground bus of the temporary generator.	<input type="checkbox"/>	<input type="checkbox"/>	
11.	The work will be performed by an electrical contractor licensed in the State of California.	<input type="checkbox"/>	<input type="checkbox"/>	

**Testing, Inspection and Observation Program**  
2019 California Building Standards Code – OSHPD 2

*This program is prepared and submitted for an OSHPD 2 projects. OSHPD 2 projects are limited to construction and remodel projects for, skilled nursing facilities and/or intermediate-care facilities of Type V, wood or light steel-frame construction.*

SECTION A		PROJECT INFORMATION	
Facility #:	Facility Name:	Project #:	Sub #:
Street Address:			
City:	County:		
Record Name (Scope of Project):	Temporary Generator Installation		
Abbreviations:			
CAC: California Administrative Code	AAMA: American Architectural Manufacturers Association		
CBC: California Building Code	NFPA: National Fire Protection Association		
CEC: California Electrical Code	FM: FM Approval Standards		
CMC: California Mechanical Code	DPOR: Design Professional of Record		
			<b>Version: R03.7.2</b>

**Testing, Inspection and Observation Program**  
2019 California Building Standards Code – OSHPD 2

<b>SECTION B</b>		NOTE: Approved agencies, individuals, and all changes to the TIO program shall be identified, evaluated by the DPOR and approved by OSHPD prior to proceeding with the related work.				
Facility #:	Facility Name:	Project #:	Sub #:			
<b>DURING CONSTRUCTION DOCUMENT</b>		<b>DURING CONSTRUCTION</b>				
Index #	REQUIRED (Select)	<b>TESTS</b>		RESPONSIBLE APPROVED AGENCY AND/OR INDIVIDUAL	COMPLIANCE VERIFICATION BY IOR (Initial/Date)	OSHPD/FDD USE (Initial/Date)
<b>ELECTRICAL TESTS</b>						
B-E20	X	Final Test Procedure				CO:

**Testing, Inspection and Observation Program**  
2019 California Building Standards Code – OSHPD 2

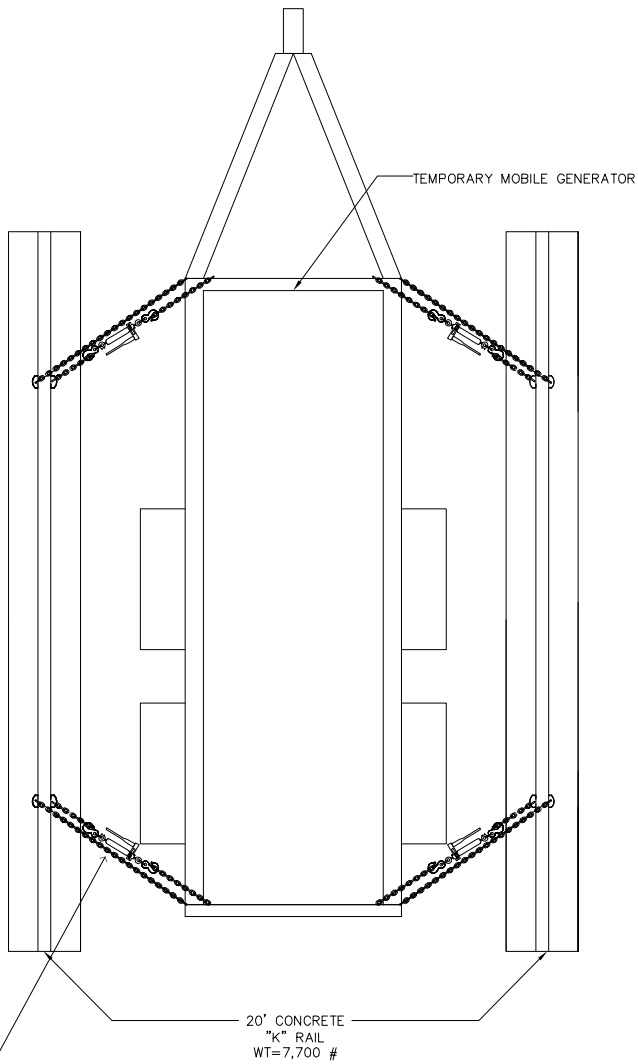
SECTION F		CONSTRUCTION VERIFICATION											
Facility #:	Facility Name:							Project #:			Sub #:		
<b>VERIFIED CONSTRUCTION INSPECTION AND OBSERVATION REPORTING</b>													
REFERENCE NUMBER	PROJECT MILESTONE OR INTERVAL	VERIFIED COMPLIANCE REPORT REQUIRED AS INDICATED (Form OSH-FD-123) (See "PERSONAL KNOWLEDGE" as defined in California Administrative Code, Section 7-151)										FOR OSHPD USE ONLY	
		GEOR	AOR	SEOR	MEOR	EEOR	CONT	IOR	SP INSP	TEST LAB	OSHPD FDD		
	<b>Substantial Compliance</b> (Remodel, Renovations, Maintenance projects, Equipment Replacement)												
	<b>Certificate of Occupancy</b> (New Buildings, Additions, Changes in Occupancy)												
	<b>Construction Final</b>						X	X					
<b>ABBREVIATIONS:</b>		GEOR - Geotechnical Engineer of Record			AOR - Architect of Record			SEOR - Structural Engineer of Record					
		MEOR - Mechanical Engineer of Record			EEOR - Electrical Engineer of Record			CONT O/B - Contractor or Owner/Builder					
		SP. INSP - Special Inspector			IOR - Inspector of Record			Test Lab – Engr. For the approved agency					

**Testing, Inspection and Observation Program**  
2019 California Building Standards Code – OSHPD 2

<b>SECTION H</b>	<b>PLAN REVIEW APPROVAL</b>		
Facility #:	Facility Name:	Project #:	Sub #:
<p><b>NOTE:</b> When a structural engineer has been delegated responsibility for a portion of this project his or her signature is also required. For testing, Inspection and Observation Program Instructions visit: <a href="https://oshpd.ca.gov/construction-finance/resources/forms-applications-reminder-lists/#TIO">https://oshpd.ca.gov/construction-finance/resources/forms-applications-reminder-lists/#TIO</a></p>			
<b>Submitted By</b>			
<p>I have reviewed the approved construction documents for this project and all tests and special inspections required by Code are marked as "required" on this form.</p>			
Architect/Engineer of Record (Print Name)		Architect/Engineer of Record (Signature)	Date
Structural Engineer of Record (Print Name)		Structural Engineer of Record (Signature)	Date
<b>FOR OSHPD USE</b>			
<b>OSHPD Plan Approval:</b>			
		<input type="checkbox"/> <b>APPROVED</b> <input type="checkbox"/> <b>APPROVED WITH COMMENTS</b> <input type="checkbox"/> <b>DENIED</b>	
		<div style="display: flex; justify-content: space-around;"> <div style="border-top: 1px solid black; width: 40%; text-align: center;">Signature</div> <div style="border-top: 1px solid black; width: 40%; text-align: center;">Date</div> </div>	
<p><b>Comments</b> (If AC or D is checked the following comments shall be resolved by the designer prior to proceeding with the related construction):</p>			

**Testing, Inspection and Observation Program**  
2019 California Building Standards Code – OSHPD 2

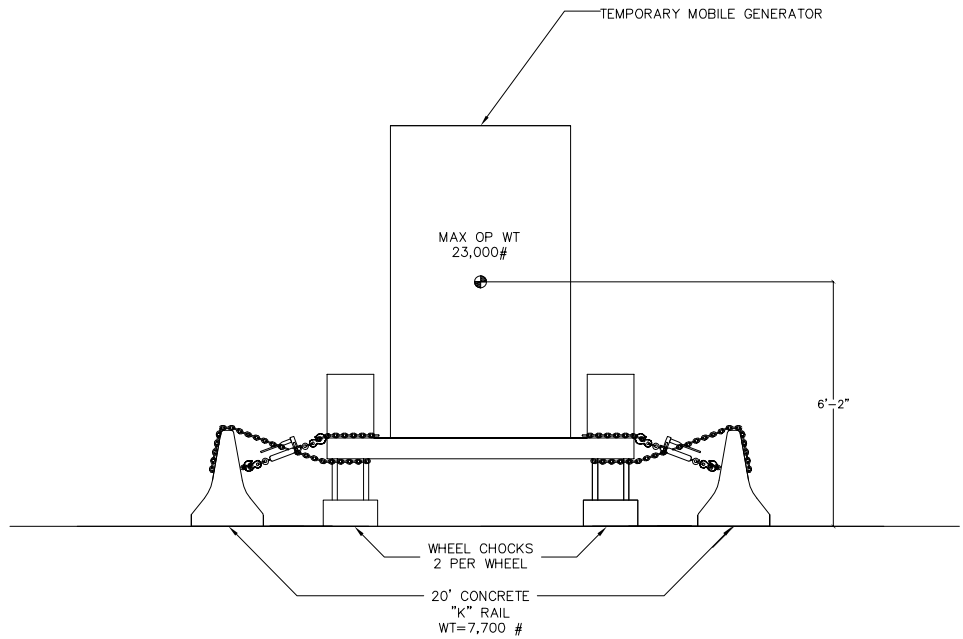
<b>SECTION I</b>	<b>BUILDING PERMIT APPROVAL</b>		
Facility #:	Facility Name:	Project #:	Sub #:
<p><b>NOTE: For testing, Inspection and Observation Program Instructions visit: <a href="http://www.oshpd.ca.gov">www.oshpd.ca.gov</a></b></p> <p>This program has been prepared and submitted for an OSHPD 1R, 2 and 5 projects. OSHPD 1R, 2 and 5 projects are limited to construction and remodel projects for nonconforming hospital buildings removed from acute-care, skilled nursing facilities and/or intermediate-care facilities of single-story, Type V, wood or light steel-frame construction.</p> <p><b>Samples of Test and Inspection Reports are: (NOT required for test performed by laboratories approved through OPAA Program)</b></p> <p><i>Testing agency qualification for approval or approval of testing agencies shall be through OSHPDs OPAA program.</i></p> <p><input type="checkbox"/> <b>OPAA PROGRAM</b> (Provide copy of OPAA program approval for OPAA approved laboratories and testing agencies) .</p> <p><input type="checkbox"/> <i>The qualifications, certifications, experience and independence of the approved agencies and individuals named on this form have been evaluated and accepted by the undersigned in accordance with CAC Section 7-141, 7-144 &amp; 7-149; CBC 1703A.1.1 &amp; 1704A.2.1; and ISO 17025 Section 4.1.4 as applicable. Approved agencies and individuals named for structural tests and special inspections have been evaluated and accepted by the structural engineer delegated responsibility for the design and administration of construction of the structural aspects (when such delegation has been made).</i></p> <p><input type="checkbox"/> <i>Samples of Test and Inspection reports to be provided following determination of the responsible firm(s) or individuals. Samples shall be submitted to and approved by the Office prior to proceeding with the work that requires test or special inspections.</i></p> <p><input type="checkbox"/> <i>Samples attached.</i></p> <p><input type="checkbox"/> <i>Not applicable. Project has no required test or special inspections.</i></p> <p>All test and special inspection reports shall be submitted to the IOR, hospital owner, architect in responsible charge, and the structural engineer by the testing agency per CAC 7-149(a) within seven (7) calendar days of the test or special inspection.</p> <p>Verified compliance reports shall be signed by the individual who performed the special inspection(s) as outlined in CAC 7-151 (c).</p> <p>All reports shall clearly state whether the tests or special inspections were performed in accordance with the OSHPD stamped approved documents and whether the results indicate compliance with those documents per CAC 7-149 (a). All IORs performing special inspections shall hold the appropriate certification and equipment and shall obtain approval from OSHPD prior to perform such work.</p>			
Architect/Engineer of Record (Print Name)	Professional License #	Architect/Engineer of Record (Signature)	Date
<b>FOR OSHPD USE</b>			
<b>OSHPD TI&amp;O Program Approval:</b>			
	Signature	Date	<div style="display: flex; justify-content: space-around; align-items: center;"> <div style="text-align: center;"> <input type="checkbox"/> <b>APPROVED</b> </div> <div style="text-align: center;"> <input type="checkbox"/> <b>APPROVED WITH COMMENTS</b> </div> <div style="text-align: center;"> <input type="checkbox"/> <b>DENIED</b> </div> </div>
<p><b>Comments</b> (If Approved with comments or Denied is checked the following comments shall be resolved by the designer prior to proceeding with the related construction):</p>			



STEEL CHAIN W/ LOAD BINDER.  
MIN WORKING LOAD LIMIT 12,000#.

LOOP THROUGH K-RAIL LIFTING HOLE  
AND GENERATOR TIE-DOWN.  
TYPICAL OF 4.

**PLAN VIEW**



**REAR ELEVATION**

**GENERATOR RESTRAINT**

DATE	REVISION
8/6/21	CHECK

NO:  
**S-2**