



FREER MANUAL
Request for Excluded Work (HCAI-OSH-102)

Facility Details

Facility # _____ Facility Name _____

HCAI Building # BLD - _____ Building Name _____

Type of Facility Acute Psychiatric Hospital General Acute Care Hospital Skilled Nursing or Intermediate Care Facility
 Correctional Treatment Center Licensed Clinic

Proposed Work – Project Details

Excluded Work Category _____

Detailed Description

Contact

Provide contact information for the facility representative requesting Excluded Work

Name:		Title:	
Phone:		Email:	
Address			

Enclosures

Provide details on submittal attachments (include sheet numbers, manufacturers information, etc.):

Plans:	
Specs:	
Site/Floor Plan:	
Other:	



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Instructions for Excluded Work (HCAI-OSH-102)

Facility

- Enter the HCAI facility identification number.
- Enter the name of the facility as it appears on the facility license.
- Enter the HCAI building number and building name where the work is to be performed.
- Indicate the type of facility as it is licensed.

Proposed Work - Project Details

- Provide the excluded work category as per the FREER Manual.
- Provide detailed description of proposed work.

Contact

- Project contact information for the facility representative requesting Excluded Work

Enclosures

- Provide in each type of enclosure the sheet numbers, manufacturers specifications, etc.

Submission

- Submit this request for excluded work to the HCAI Compliance Officer assigned to your facility. The assigned Field Staff to your facility can be obtained at: <https://hcai.ca.gov/construction-finance/facility-detail/>.
- Enter your facility ID number or name of your facility to access the information for your facility.

For questions in [Northern California](#), contact:
Department of Health Care Access and Information
Office of Statewide Hospital Planning and Development
2020 West El Camino Avenue, Suite 800
Sacramento, CA 95833
(916) 440-8300 phone
(916) 274-0102 fax

For questions in [Southern California](#), contact:
Department of Health Care Access and Information
Office of Statewide Hospital Planning and Development
355 South Grand Avenue, Suite 1900
Los Angeles, CA 90071
(213) 897-0166 phone
(213) 217-8511 fax