# HEALTH FACILITY CHECKLIST SECTION 1226 [OSHPD 3] CLINICS 

### 1226.6 PRIMARY CARE CLINICS


#### Abstract

Primary Care Clinics are Health Facilities licensed under Section 1200 of the California Health \& Safety Code that provide services limited to those listed in California Building Code Section 1226.6. Outpatient clinical services of a hospital providing services, licensed under Section 1250 of the California Health \& Safety Code, which are equivalent to a primary care clinic, shall also comply with California Building Code Section 1226.6 and be considered a primary care clinic. Primary care clinics are subject to the provisions of Section 1226 [OSHPD 3] CLINICS, of the California Building Code and all amendments to the California Building Standards Code (CBSC) under the banner [OSHPD 3]. OSHPD requirements apply to all facilities described above and are not dependent upon Occupancy Group designations.


While Examination Rooms are required in Primary Care Clinics, the provision of Treatment Rooms is optional and dependent upon the intended delivery of care. Examination Rooms are intended for diagnostic examinations, where Treatment Rooms are intended for clinical/interventional procedures and include appropriate size and finish requirements to accommodate treatment/procedures that do not require a restricted (sterile) environment but may use sterile instruments or equipment.

All new buildings and additions, alterations or repairs to existing buildings, and conversion of space to a clinic use within existing buildings, subject to Licensing and Certification, California Department of Public Health, shall comply with applicable provisions of the California Building Code (CBC), California Electrical Code (CEC), California Mechanical Code (CMC), California Plumbing Code (CPC), California Energy Code, California Green Building Standards Code and California Fire Code (Parts 2, 3, 4, 5, 6, 9, and 11 of Title 24). The enforcing agency for primary care clinics is the local building department.

## EFFECTIVE USE OF THE CHECKLIST

The following checklist is intended to be used in the plan review of applications for health care facilities located in California. The checklist summarizes and references the applicable requirements from the Office of Statewide Health Planning and Development (OSHPD) as adopted and amended to the California Building Standards Code. Applicants should verify compliance of the plans submitted for building permit with all referenced requirements from OSHPD when completing this checklist. The checklist should be completed by the project architect or engineer based on the design actually reflected in the plans at the time of completion of the checklist.

This checklist only references OSHPD requirements associated with primary care clinics. Please note that other jurisdictions, regulations and codes have additional requirements which are not included in this checklist, such as: other applicable provisions of the CBSC and amendments enforced by the local authority having jurisdiction; regulations enforced by the local health department; CEQA, local ordinances and conditions of approval enforced by the local planning department; requirements of the local fire department; requirements and design standards of the local public works department; and any other agency that may have jurisdictional authority over an aspect of the project. The applicant and design professional are encouraged to exercise appropriate due diligence that would be associated with embarking on any construction project.


## ARCHITECTURAL REQUIREMENTS

| 1226.6.1.2 | Treatment rooms (when provided) <br> Space requirements <br> 120 sf min clear floor area exclusive of <br> _ Fixed or wall-mounted cabinets, <br> built-in shelves; and |
| :---: | :---: |
| - Alcoves with a dimension of less |  |
| than 10', anterooms or vestibules |  |
| - 10' minimum clear dimension, clear of |  |
| cabinets, etc. |  |

1226.6.1.2

### 1224.4.4.1.2

11B-305.3

11B-306.2

11B-306. 3
Required fixtures
_Examination light
Work Counter
Cabinets \& medication storage
Handwashing Station w/ the following: * 30 " $\times 48^{\prime \prime}$ clear space centered on fixture w/ 19" min \& $25^{\prime \prime}$ max extension under the counter/fixture; * 9 " high toe clearance under counter/fixture; _19" min depth; - $25^{\prime \prime}$ min depth; *27" high knee space under counter/fixture;
_ 8" min depth @ 27" high; - 11 " min depth @ 9 " high, clearance reduction between $27^{\prime \prime}$ \& $9^{\prime \prime}$ at 1:6
Table1224.4.11 Treatment Room Interior Finishes 1224.4.11.4.1.1 __Smooth and easily cleanable ceiling without perforations or fissures
1224.4.11.3.3
1224.4.11.1
1224.4.10
1224.5.2

PLUMBING/MECHANICAL/ ELECTRICAL REQUIREMENTS

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Other OSHPD 3 requirements
Space above a ceiling may not be
CMC
407.4.1.4
utilized as an exhaust-air, or return-air plenum
Concealed building spaces/ independent construction within buildings may not be used as ducts or plenums
__ Flexible ducts may not exceed 10 feet
__ Use of CPVC is not permitted for building water supply piping OSHPD 3 disinfection procedures for potable water system is required
__ Secondary (redundant) water heater is required
_ Vent pipe termination $25^{\prime}$ min from any air intake or vent shaft

Electrical*:
_ General illumination: 50 fc@ $36^{\prime \prime}$ min

Metallic raceway or cable with metal sheath qualified as a ground conductor
Insulated copper grounding conductor GFCl at receptacles $<6^{\prime}$ from sink

CMC
602.3.1

CPC 604.1
CPC 609.9

CPC 613.2
CPC 906.2

## CEC

517.22(A)(1)/

IESNA
CEC
517.13(A)

CEC
517.13(B)

CEC
210.8(B)(5)

* Common requirements for all treatment rooms

|  | ARCHITECTURAL REQUIREMENTS | PLUMBING/MECHANICAL/ ELECTRICAL REQUIREMENTS |  |
| :---: | :---: | :---: | :---: |
| 1226.6 .2 1224.4 .4 .7 .3 1224.4 .10 | Support areas for exam/treatment rms General <br> _ $60^{\prime \prime} \mathrm{min}$ corridor if treatment rms incl or $44^{\prime \prime}$ min corridor if exam rms only <br> _ $8^{\prime} \overline{m i n}$ ceiling height | Mechanical: $\qquad$ Min 2 air changes/hr OSA $\qquad$ Min 4 air changes/hr total <br> (1) Filter bank 30\% | CMC <br> Table 4-A |
| 1226.6 .2 .1 $11 B-904.4$ 1226.4 .13 .1 | Administrative Center/ Nurse Station <br> _ <br> Counter space <br> __ 28" min, 34" max, high work surface $\qquad$ 36 " min wide $\times 34$ " max high assessable transaction top $\qquad$ Storage space $\qquad$ Access to handwashing fixture $\qquad$ Reception/charting/communication | Plumbing: $\qquad$ Handwashing fixture <br> Electrical: <br> _ Nurse Call master station <br> __ GFCI at receptacles $<6$ ' from sink | CPC <br> Table 4-2 $\begin{aligned} & \text { CBC Table } \\ & 1224.4 .6 .5 \\ & \text { CEC } \\ & 210.8(B)(5) \end{aligned}$ |
| 1226.6.2.2 1226.4.13.2.1 | Medication station <br> __ Directly accessible form Nurse Sta. <br> _ Counter w/ handwashing station <br> __ Prep sink <br> __ Lockable refrigerator <br> __ Locked storage for controlled Rx <br> Or | Plumbing: $\qquad$ Handwashing fixture, and $\qquad$ Separate prep sink <br> Mechanical: $\qquad$ Positive pressure $\qquad$ Min 2 air changes/hr OSA <br> _ Min 4 air changes/hr total $\qquad$ (1) Filter bank $30 \%$ | CPC <br> Table 4-2 <br> CMC <br> Table 4-A <br> Table 4-B |
| 1226.4.13.2.2 | __ Self-contained dispensing unit __ Located in the nurse station, or <br> _ Located in the clean utility room | Electrical: $\qquad$ Medication station illumination: 50 fc @ $36^{\prime \prime}$ min $\qquad$ GFCI at receptacles $<6$ ' from sink | $\begin{aligned} & \text { CEC } \\ & 517.22(\mathrm{~A})(1) / \\ & \text { IESNA } \\ & \text { CEC } \\ & 210.8(\mathrm{~B})(5) \end{aligned}$ |
| 1226.6.2.3 | Clean utility room <br> __ Counter w/ handwashing station <br> __ Clean \& sterile storage <br> Or $\qquad$ Clean holding room | Plumbing: <br> __ Handwashing fixture <br> Mechanical: <br> _ Positive pressure <br> __ Min 2 air changes/hr OSA <br> __ Min 6 air changes/hr total <br> __ Min 4 air changes if $100 \%$ OSA <br> _ (2) Filter bank $30 \%$ \& $90 \%$ | CPC <br> Table 4-2 <br> CMC <br> Table 4-A <br> Table 4-B |
| 1226.6 .2 .4 1226.4 .13 .4 | Soiled workroom <br> _ Counter w/ handwashing station <br> __ Flushing-rim clinical sink, or _ Utility sink <br> __ Covered soiled linen area <br> _ Covered waste storage area <br> Or <br> _ Soiled holding room <br> _ Covered soiled linen $\qquad$ Covered waste storage <br> __ Bed-pan washing at patient toilet | Plumbing: $\qquad$ Handwashing fixture $\qquad$ Clinical sink w/ bed-pan washing __Or utility sink <br> Mechanical: <br> __ Negative pressure $\qquad$ 100\% exhaust $\qquad$ Min 2 air changes/hr OSA $\qquad$ Min 10 air changes/hr total $\qquad$ Min 4 air changes if $100 \%$ OSA $\qquad$ (1) Filter bank 30\% | CPC <br> Table 4-2 <br> CMC <br> Table 4-A <br> Table 4-B |

## ARCHITECTURAL REQUIREMENTS

1226.6.3
1226.6.3.1 Patient toilet room(s)
__Shall be provided separate from public use and be located for access from patient care areas without passing through public accessible areas, or _ May serve outpatient waiting rooms in clinics with a maximum of three exam \&/or treatment rooms
_ Each toilet room shall include the following:
__ Fully accessible water closet _ Fully accessible lavatory

- $7^{\prime}$ min ceiling height
_ $5^{\prime \prime}$ min coved base for resilient floors
1226.6.3.2 Specimen and/or blood collection

When provided:
_ Space for a chair and work counter shall be provided for blood draw Handwashing station is required
__ Use of the patient toilet room is permitted for specimen collection _ Handwashing station is required - Lab pass-thru must be accessible

## PLUMBING/MECHANICAL/

 ELECTRICAL REQUIREMENTSPlumbing:
$\qquad$ Handwashing fixture located in patient toilet room, conventional spouts \& controls acceptable, aerators are not permitted _ Toilet may be equipped with bedpan washing device

| Mechanical: | CMC |
| :--- | :--- |
| _ Ventilation: $100 \%$ exhaust | Table 4-A | - _ 10 min air changes per hour

Nurse Call system:
__ Bath station w/in 12" of toilet

Mechanical:
__ No pressure requirement,
CPC
Table 4-2

Table 4-A

CBC Table
1224.4.6.5

CMC
Table 4-A
_ Min 2 air changes/hr OSA
_ Min 6 air changes/hr total __ Min 6 air changes if $100 \%$ OSA

Plumbing:
_ Handwashing fixture
1226.6.4 General support services
1226.6.4.1 Garbage / medical waste / trash
1226.4.9.2 __ Lockable room or screened enclosure
_ 25 sf minimum floor area
_ 4 foot minimum dimension
_ Concrete floor \& curb w/ drain to sewer
_ Steam/hot water \& cold water supplies

## Plumbing:

__ Steam/hot water \& cold water supplies

Mechanical, if interior room:
__Ventilation: 100\% exhaust
_ 10 min air changes per hour

Or
1226.4.9.3 _ Waste holding room
_ 25 sf minimum floor area
__ 4 foot minimum dimension

- Convenient access to exterior
- $5^{\prime \prime} \mathrm{min}$ coved base for resilient floors
1226.6.4.2 Housekeeping room
1224.4.15


## Minimum floor area of 15 sf

_ Service sink or Floor receptor
Storage of supplies \& housekeeping equipment

## Mechanical:

__ Ventilation: 100\% exhaust _ 10 min air changes per hour

|  | ARCHITECTURAL REQUIREMENTS | PLUMBING/MECHANICAL/ <br> ELECTRICAL REQUIREMENTS |  |
| :---: | :---: | :---: | :---: |
| 1226.6.5 | Public and administrative areas |  |  |
| 1226.6.5.1.1 | Reception |  |  |
| 1226.4.16.1.1 | Reception/information counter or desk shall be provided <br> __ $28^{\prime \prime}$ min, $34^{\prime \prime}$ max, high work surface $\qquad$ $36^{\prime \prime}$ min wide $\times 34^{\prime \prime}$ max high accessible transaction top |  |  |
| 1226.5.1.2 | Outpatient waiting room | Mechanical: |  |
| 1224.4.5 | $\qquad$ Provide seating area and space for wheelchairs, and have public corridor access to, or provision of: $\qquad$ Public toilet(s) | _ N <br> Negative pressure $\qquad$ 100\% exhaust $\qquad$ Min 2 air changes/hr OSA $\qquad$ Min 10 air changes/hr total $\qquad$ Min 10 air changes /100\% OSA $\qquad$ (1) Filter bank 30\% | $\begin{aligned} & \text { CMC } \\ & \text { Table 4-A } \end{aligned}$ |
| CPC 412.3 | $\qquad$ Separate accessible men's and women's toilet rooms, Or |  | Table 4-B |
| Exception 2 1226.4.14.1 | $\begin{aligned} & \text { Single toilet shared by both } \\ & \text { sexes if occupant load is } 10 \text { or } \\ & \text { fewer, Or } \end{aligned}$ |  |  |
| Exception | $\qquad$ Served by patient toilet if clinic has 3 or fewer exam rooms |  |  |
| 11B. 602 | _ Accessible hi \& low drinking fountain <br> _ Telephone |  |  |
| 11B. 704 | - $30^{\prime \prime} \times 48^{\prime \prime}$ clear floor space - Reach range per 11B. 308 - $29^{\prime \prime}$ min cord length _ Volume control |  |  |
| 1226.6.5.2 | Administrative services |  |  |
| 1226.6.5.2.1 | Medical records storage <br> Provide a health record service that includes: <br> __ Accessible work area for sorting and recording paper or electronic media <br> _ Record storage area for paper or electronic media | _ No pressure requirement $\qquad$ Min 2 air changes/hr OSA $\qquad$ Min 4 air changes $/ \mathrm{hr}$ total $\qquad$ Min 2 air changes $/ 100 \%$ OSA $\qquad$ (1) Filter bank 30\% | Table 4-A <br> Table 4-B |
| 1226.6.5.2.2 | Equipment and supply storage <br> __ General storage for office supplies and equipment |  |  |
| 1226.6.6 | Support areas for staff |  |  |
| 1226.6.6.1 | Staff toilet room(s) - provide as follows: | Plumbing:$\qquad$ Handwashing fixture located in each staff toilet room, conventional spouts \& controls acceptable, aerators are not permitted | $\begin{aligned} & \text { CPC } \\ & \text { Table 4-2 } \end{aligned}$ |
| $\begin{aligned} & \text { CPC } \\ & 412.3 .1 \\ & \text { Table } 4-2 \end{aligned}$ | __ Male staff@1:1-15, and <br> __ Female staff @ 1:1-15, Or <br> __ Single toilet if less than 5 staff <br> _ Separate from patients \& visitors |  |  |
|  | Each toilet room shall contain: $\qquad$ Handwashing fixture, $\qquad$ _ Water closet, and <br> _ Be fully accessible | Mechanical: $\qquad$ Ventilation: 100\% exhaust _ 10 min air changes per hour | $\begin{aligned} & \text { CMC } \\ & \text { Table 4-A } \end{aligned}$ |

ADDITIONAL REQUIREMENTS FOR DENTAL SERVICES (when provided)
1226.6.1 Examination/Treatment area
1226.6.1.3 Dental exam and treatment areas
1226.6.1.3.1

## ARCHITECTURAL REQUIREMENTS

Space requirements - may be provided as a patient care station in an open treatment area
$\qquad$ 80 sf min clear floor area, exclusive of _ Fixed or wall-mounted cabinets, built-in shelves; and
_ Alcoves with a dimension of less than 8 , anterooms or vestibules
_ $8^{\prime}$ minimum clear dimension, clear of cabinets, etc.

11B-805.4.1
1226.6.1.3.1

11B-805.4.3
1226.6.1.
1226.6.1.3.3

11B-305.3

11B-306. 2

11B-306. 3
1224.4.11
\& Table
1224.4.11
1224.4.10
$\square$

* 36 " wide clear space along full length of one side of the exam chair and at the head of the chair up to the cuspidor on the opposing side
_ *Clear turning space within the room or open bay treatment area may be either: - 60" diameter circle; or
- "T" shape within a 60 " square w/ arms and base with $36^{\prime \prime}$ min width
Required fixtures
-Accommodation for written or electronic documentation
_Handwashing Station - may be shared by two treatment stations in an open operatory/treatment area w/following clearances: - * fixture w/ $19^{\prime \prime} \min \& 25^{\prime \prime}$ max extension under the counter/fixture; * 9 " high toe clearance under counter/fixture;
$-{ }^{19^{\prime \prime}}$ min depth;
${ }^{25^{\prime \prime}}$ min depth;
*27" high knee space under counter/fixture;
_ $8^{\prime \prime}$ min depth @ 27" high; _ $11^{\prime \prime}$ min depth @ 9 " high, clearance reduction between $27^{\prime \prime}$ \& $9^{\prime \prime}$ at 1:6
_ Pin perforated, fine fissured, or lightly textured ceiling; washable walls; carpet permissible upon agency approval
Ceiling height
_-_ $8^{\prime}$ minimum
__Ceiling height shall accommodate ceiling-mounted equipment \& fixtures
* See accessibility requirements

PLUMBING/MECHANICAL/ ELECTRICAL REQUIREMENTS

Plumbing*:
_. Handwashing fixture located in exam room, convenient for use by staff entering \& leaving room One handwashing fixture may be shared by two treatment stations in an open operatory/treatment area Wrist/elbow blades are permitted
210.0 (1) a, i
__ ABS \& PVC drainage piping are not permitted
701.1-2(b)

Mechanical*:
__ Ventilation: No pressure requirement
_ Min 2 air changes/hr OSA
Min 6 air changes/hr total
_ (2) Filter banks $30 \%$ \& $90 \%$
Other OSHPD 3 requirements
_ Space above a ceiling may not be utilized as an exhaust-air, or return-air plenum
__ Concealed building spaces/ independent construction within buildings may not be used as ducts or plenums
$\qquad$ - Fl feet

CMC
__ Use of CPVC is not permitted for building water supply piping 602.3.1
_ OSHPD 3 disinfection procedures for potable water system is required
_ Secondary (redundant) water heater is required
_ Vent pipe termination $25^{\prime}$ min from any air intake or vent shaft

Electrical:
__General illumination: 100 fc @ $36^{\prime \prime}$ AFF

CEC
517.22(a)(1)

IIESNA

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## ARCHITECTURAL REQUIREMENTS

### 1226.6.1.3.2 Pediatric patients <br> At least one private consultation/ treatment room shall be provided when pediatric patients are treated

### 1226.6.1.3.4 Imaging

When imaging is provided the following is required:
_ Space for a dental panographic x-ray system and printer; and
1226.5.5.2 _ Shielding requirements; and
1224.18.1.1 —A Alcove requirements
1226.6.1.4 Oral surgery
__ When provided, treatment areas for procedures for which general anesthesia is used shall comply with the requirements in Section 1226.8

## Support areas for dental exam rooms

1226.6.2.5 Consultation room

Dental facilities must provide a consultation room for private conferences with patients.
1224.2 _ 70 sq. ft. minimum room with a door.

11B-306.2 - *60" maneuvering clearance inside
the room, perpendicular to the door
*18" min clearance beyond latch side of the door
__ *Clear turning space may be either:
_ 60" diameter circle; or

- "T" shape within a 60" square w/
arms and base with 36 " min width
1226.6.2.6 Sterilization facilities

|  | When sterilization facilities are provided the following is required: |
| :---: | :---: |
| 1226.6.2.6.1 | __Decontamination area: <br> _ Countertop (separated from clean countertop by 4 ' minimum); $\qquad$ Instrument washing sink (separated from clean area by 4' minimum or 4' min high screen; <br> __ * Accessible handwashing fixture separate from instrument sink; Storage for supplies |

1226.6.2.6.2 _ Clean work area:
__ Countertop (separated from clean countertop by 4' minimum);
__ Sterilization equipment, as required for service provided; * Accessible handwashing fixture (may share with decontamination)
$\qquad$ Storage for supplies

* See accessibility requirements


## PLUMBING/MECHANICAL/

 ELECTRICAL REQUIREMENTS*See common requirements for all dental exam rooms.

Mechanical:
__ Ventilation: No pressure requirement
_ Min 2 air changes/hr OSA _Min 6 air changes/hr total
_( $\overline{(2)}$ Filter banks 30\% \& 90\%
Mechanical:
_ Ventilation: Positive pressure
_ Min 12 air changes/hr OSA - Minimum 20 air changes/hr if mixed, with a minimum of 5 air changes/hr OSA
_ (2) Filter banks $30 \%$ \& $90 \%$
Mechanical:
__ Ventilation: Neutral pressure balance at corridor Min 2 air changes/hr OSA Min 6 air changes/hr total
_ (2) Filter banks 30\% \& 90\%
Electrical:
$\qquad$ General illumination: 15 fc @ floor

Mechanical - Decontamination:
_ Ventilation: Negative pressure _100\% exhaust
_ Min 2 air changes/hr OSA Min 4 air changes/hr total
_ (2) Filter banks $30 \%$ \& $90 \%$
Mechanical - Clean work area:
__ Ventilation: Positive pressure
__ Min 2 air changes/hr OSA

- Min 4 air changes/hr total
__(2) Filter banks $30 \%$ \& $90 \%$
Plumbing:
_ Instrument washing sink
-Handwashing fixture
Wrist/elbow blades are permitted ABS \& PVC drainage piping are not permitted

Electrical:
_ General illumination: 30 ft -candles @ 36 " min

CMC
Table 4-A

Table 4-B

CMC Table
4-A

CMC
Table 4-A

Table 4-B
CEC
517.22(A)(1)/

IESNA

## CMC

Table 4-A

Table 4-B
CMC
Table 4-A
Table 4-B
CPC
Table 4-2

CEC
517.22(A)(1)/

IESNA

## ARCHITECTURAL REQUIREMENTS

### 1226.6.2 Support areas for dental exam rooms

1226.6.2.7 Laboratory

Facilities for laboratory services shall be
provided in dental facilities or through a contract arrangement with a laboratory
service. When provided on site, the
following is required:
__Work area:
Work counter;
_ Laboratory sink;
— Tele/data service; and

- Electrical service

Handwashing Station w/ the following:
11B-305.3

11B-306.2

11B. 306.3

## PLUMBING/MECHANICAL/

 ELECTRICAL REQUIREMENTS
## Plumbing:

| _ Sink | CPC |
| :--- | :--- |
| _ Handwashing fixture located in the |  |
| laboratory, convenient for use by |  |
| staff entering \& leaving room |  |$\quad$| Table |
| :---: |
| _ Wrist/elbow blades are |
| permitted |$\quad 210.0$ (1) a, i

Electrical:
_General illumination: 30 ft -candles
@ $36^{\prime \prime}$ min
$\qquad$ Benches: $100 \mathrm{fc} @ 36$ AFF
_ Metallic raceway or cable with
metal sheath qualified as a ground conductor
Insulated copper grounding conductor
$\ldots$ GFCl at receptacles $<6^{\prime}$ from sink

CEC
517.22(A)(1)/

IESNA
CEC
517.13(A)

CEC
517.13(B)

## CEC

210.8(B)(5)
$\qquad$ Storage for supplies

* See accessibility requirements

November 28, 2017

Re: Request for Proposal - Contracting Services for General Contractor
Community Medical Centers
Normandy Village Medical Clinic Tenant Improvement

## ADDENDUM TWO

## Proposal Submission Timeline CHANGE:

No change

## Drawing / Documents Updates (Located in Sharefile):

1. Updated E2.3C, with changes clouded and marked with Delta 2
2. Mechanical Specifications - General Requirements
3. Plumbing Specifications
4. HVAC Specifications
5. Automatic Fire Sprinkler Specifications
6. Electrical Specifications
7. Revised Door Hardware Specification

## Clarifications:

1. REVISION TO ADDENDA 1 - Disregard clarification regarding the finish level. Please include a level 4 finish per the contract documents.
2. REVISION TO ADDENDA 1 - Nurse call station is designed and included in the project documents. Contractor to install.

## Questions / Answers:

1. Selections area, was this to be a P3 or T2 designation instead? On E2.2B there is a A 1 E light fixture called for in the Breakroom \#129, this fixture is not designated on the Fixture Schedule, what is it to be? ANSWER - The "A1E" is the same as "A1" except with emergency driver; the part number is HEW \#PT-24-L58/840-RA-EM/10W-DIMUNV.
2. There are exterior light fixtures shown on E2.4D south of Grid 2, but there are none shown on E2.3C, was the page cut off and the lights should continue? ANSWER - See attached updated Sheet E2.3C, showing continuation of exterior light fixtures.
3. It's been brought to my attention from one of my door suppliers that there are hardware groups missing for three (3) doors. They are: Door Mark 189.2Door Mark 201.1Door Mark 201.2 ANSWER- Door 189.2 is called out in the Revised Door Hardware Specification. Doors \& Door hardware for Doors 201.1 and 201.2 are supplied by folding partition wall manufacturer.
4. What Material is Door F - It states just flush with no call out for what it's made of? ANSWER - Refer to spec section 081429 Prefinished Flush Wood Doors, as noted on A8.1. Also, corrections to Doors 121, 123 \& 125: should be Type FG; and correction to Doors 203.1, 203.2, 204.1, 204.2, 204.3, 205.1, 205.2, 206.1, 206.2, 207.1, 207.1, 207.3: all should be PLAM face.

Note that PLAM face is a typical surface option for interior doors for healthcare facilities. Oregon Door includes plastic laminate as one of the factory finish surface options, as a more durable option to wood veneer.
5. The door schedule A8.1 and the specifications appear to be in conflict with the frame detail J/A8.3. The frame detail appears to be a "boilerplate" Timely frame and the specifications clearly describe a 16 gauge HM frame. Please clarify. ANSWER - HM 16 GA frame spec is for Doors 131.1 \& 131.2 only at CMU exterior wall. All interior door frames to be Timely Classic C-Series, pre-matched custom color, and as shown in detail J/A8.3. All pocket doors to be trimmed with Timely TA-8 series to match.
6. Are all ceiling heights not listed for Exam Rooms, Consult Rooms, Toilets, Staff Toilets, Patient Toilets, Offices, Breakroom, IT Room, Soiled/Clean Utility, Janitor, Lactation \& Storage to be $9^{\prime}-0^{\prime \prime}$ AFF? ANSWER - See note at bottom of sheet A9.1, noting all ceiling heights to be $9^{\prime}-0^{\prime \prime}$ AFF unless otherwise noted.
7. The two Toilet Rooms \#156 \& \#157 are listed to have $12^{\prime}$ ceilings, is this correct or should they be $9^{\prime}$ ? ANSWER - Yes, $12^{\prime}-0^{\prime \prime}$ is correct, to accommodate storefront height.
8. Are all Toilet Rooms (Staff \& Patient) to look the same as interior elevations shown on A10.2? ANSWER - Yes, elevations are typical for all toilet rooms.
9. Can you provide locations for where Corner Guards are to be installed? ANSWER - As noted on A10.1, CG1 to be installed on all hallway corners.
10. Please confirm that there are 20 Solatubes to be installed as shown on the Roof Plan A7.1, the Mechanical Roof Drawing shows 21 locations and the Reflected Ceiling Plan shows 19, but believe that's because a Mechanical Return is being shown in the location of \#20 in Hallway \#207 just outside Consult \#180. ANSWER - Twenty (20) solatubes is the correct number.
11. Door schedule shows no hardware groups assigned. Is there a project manual for section 0871 00? ANSWER - See specs for hardware groups, per Note 5 under Door General Notes on A8.1.
12. Plan A9.2 detail A calls out for $8^{\prime \prime}$ track for $6^{\prime \prime}$ ceiling joist using Simpson L30 clips and mid span bracing. Can we use $6^{\prime \prime}$ track screwed top/bottom in lieu of using detail A? This would eliminate the clip and mid span and save on cost. ANSWER - Yes.
13. Is blocking required as shown on Plan S1.1 detail 5? If so then what height because Plan S1.1 detail 6 shows blocking at ceiling height and is that required throughout? ANSWER - If the top of wall is within $12^{\prime \prime}$ of the ceiling, they can omit the blocking. The blocking detail is also to be used where you have known wall mounted features. You will also need it at the sheet rock edge if the sheet rock does not go up to the top plate as shown on your bracing detail.
14. If we can't get the framing bracing to the deck as shown on S1.1 detail 6, can we use detail below as an alternate? ANSWER - The corner brace can be used in lieu of one brace for each wall except the corner distance shall be 6 feet max., not 9 feet (the drawing was a bit fuzzy, couldn't read the text next to the dimension).


With respect to the PG\&E work to be coordinated, do you have drawings that they are providing or the electrical engineer is providing for the extent of the site work and location of the new pad transformer? ANSWER - Refer to Single Line Diagram on E5.1 and associated notes regarding the installation of new conduits to the existing transformer on Knickbocker Dr. GC to install new conduits to existing transformer.

November 30, 2017

## Re: Request for Proposal - Contracting Services for General Contractor <br> Community Medical Centers <br> Normandy Village Medical Clinic Tenant Improvement

## ADDENDUM THREE

## Proposal Submission Timeline CHANGE:

No change

## Drawing / Documents Updates (Located in Sharefile):

1. Roof pictures
2. Updated contract documents (AIA - 2017)
3. Graffiti Resistant Coatings Specifications

## Clarifications:

1. Owner will carry on allowance if a moisture barrier is required over the existing concrete floor prior to flooring installation.

## Questions / Answers:

1. There is a T 3 listed in Finish Schedule for Room 101 ENTRY VESTIBULE, however the Finish Selections on A10.1 (attached) does not list this product. Please clarify what this tile is. ANSWER - T3 tile is no longer included in this project. Entry 102 wall finishes to be P1/P4/RR1/WC1
2. A few of questions regarding the TPO roofing tear-off and replacement:
a. Is the "Danfold" insulfoam insulation only to provide crickets for water drainage? Or is it providing insulation for the Building Envelope? ANSWER Given that there is already an insulated roof, please disregard the reference to Danfold. Use EverGaurdTPO, mechanically attached TPO (or equal) with the Polylso roof insulation for use as the underlayment.
b. If it is intended to provide insulation for the building envelope, what R -value should we figure? R30? R38? ANSWER - GC to replace existing batt insulation at underside of roof deck as necessary. Insulation to match existing.

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c. If this building envelope has been moved to the topside of the roof diaphragm, should we remove to old batt insulation that's existing in the wood roof structure cavities? ANSWER - Existing roof insulation to remain - repair as necessary.
d. Do you have a specification for the Danfold Insulfoam insulation? What is it? Is it similar to poly-Isocyanurate (rigid board) or is it spray-applied? ANSWER - see 2.1 above.
e. How high should we figure the parapets? Google Earth was of little or no help and we didn't go up on the roof. ANSWER - we can provide roof access, please schedule. Pictures of the roof have been uploaded to Sharefile but it is the GC's responsibility to verify existing conditions.
f. Is there any details for this work? ANSWER - no
3. A2.2 ARCH detail exterior wall schedule calls for $R-19$ Fiberglass batt at perimeter $35 / 8$ metal furred walls. R-19 batts are made to go in a 6 inch wall. The highest R-value available for these walls are R-15 High Density. ANSWER - R-15 acceptable.
4. Is there a detail for the Solatubes. ANSWER - utilize manufacturer's standard installation guidelines.
5. Can an alternate PLAM finish selection be given? Our door supplier has said he has gone to two of the biggest manufacturers and neither will even give him a bid on the PLAM doors because of the high probability that the finish will chip/peel. The high gloss finish is not recommended because it will not hold up. ANSWER - Matte finish to be provided.
6. Are the knock-down frames shown for interior doors to be applied for the pocket doors as well? ANSWER -
7. Are we responsible to replace the broken curbs? ANSWER - yes.
8. What are the requirements for the card reader system on the exterior fence? ANSWER CMC will contract directly for this scope of work.
9. Is there a detail for the back concrete area? ANSWER -
10. I cannot locate detail 1.03/A2.2 ANSWER - Not used.
11. Are the brackets being provided for the TV's? ANSWER - no just blocking in wall.
12. Are we painting the exterior of the rear of the building? ANSWER - No
13. Are we painting as noted on page A3.1? ANSWER - Yes beams and soffit
14. I wanted to clarify that the only roof patch that will be needed is items affected by our scope of work. Is this correct? ANSWER - yes and where existing HVAC were removed.
15. Section 099623 Graffiti Resistant Coatings is listed in the spec manual cover index, but the section is missing from the manual, please clarify if anti-graffiti is required and provide missing section. ANSWER - Spec Section attached
16. Item 1 on ADD 1 states to give an alternate for roofing. Has the existing roof material been tested? Can we have more info on the roofing insulation? Size, type and R Value. ANSWER - see answer 2 above.
17. Are we providing the projector screen on page A9.1? If so, please specify. ANSWER No.

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## ADDENDUM FOUR

## Proposal Submission Timeline CHANGE:

No change

## Drawing / Documents Updates (Located in Sharefile):

1. Addendum 4-A10-1 Finishes Clarification dated 12-5-2017
2. Addendum 4-AR4.1 Roof Flashing Clarification dated 12-5-2017
3. Addendum 4 - AR4.2 South Elevation Clarification dated 12-5-2017

## Clarifications:

None

## Questions / Answers:

1. Is there a flashing detail for the connection 4/S4? ANSWER - See attached detail on Addendum Drawing AD4.1.
2. Section 072100-1 mentions foil face insulation at roof deck and exterior walls. Is this correct? ANSWER - Foil faced insulation at underside of new roof only. Unfaced insulation at all exterior walls.
3. Currently there is standard unfaced insulation at the roof deck on most of the area.

ANSWER - GC to replace existing batt insulation at underside of roof deck as necessary. See also response to Addendum 2, Question 2b.
4. What is the intention for lights on the soffit on the exterior of the building? The plans say to frame in and finish abandoned lights. Is this correct? If so there is no detail on what you want this to look like. ANSWER - Yes, existing exterior lights installed between beams to be abandoned. Ref. to electrical. Remove (e) lens and infill with $3 / /^{\prime \prime}$ rough sawn plywood. Paint to match beam color.
5. For the exterior front soffit work, any patching and repair work is referring to plywood work and painting not providing stucco or a new finish? ANSWER - Patch and repair all existing exterior surfaces. Extent of work shown on attached drawing AR4.2.
6. Are the beams at the soffit also to be framed with plywood and painted, or a new finish to match the soffit? ANSWER - See response to question 4 above.
7. All stucco work to the front façade, are we to match the existing color or is a new color to be applied/painted? ANSWER - New colors for exterior. See attached exterior elevation on Addendum Drawing AR4.2 showing extent of work and location of new paint colors.
8. A clarification regarding toilet room signage: There are a total of twelve (12) toilet rooms in this project. There are eight (8) that have signage (see attached sheet T2.2). There are four (4) toilet rooms $(113,133,134, \& 190)$ that do not have signage assigned to them. Is this an oversight or are the plans correct? ANSWER - All toilet rooms to have signage. See toilet room 107 for typical signage requirements, applicable to all 12 toilet rooms.
9. A clarification regarding signage at Reception 161 \& Reception 162: What is the size and thickness of these letter? ANSWER - See note 10.13 on sheet A11.2. Signage on wall behind reception desks to be supplied and installed by owner.
10. We received a specification section in Addendum \#3 for Anti-Graffiti Coatings. However the drawings do not show the extent of what requires coverage. Typically what we've seen in the past is CMU, thin brick, and plaster finishes requiring this finish to only $10^{\prime} 0$ above the finished adjacent surface. Due to the height of the Entry Soffits on the South Elevation is $9^{\prime} 0$ high on the CMU (only) acceptable? Is $10^{\prime} 0$ high on the CMU at the East and North Elevations acceptable? And finally, do you even want it on the rear of the building? ANSWER - Anti-graffiti coatings to be applied to new CMU only, to a max. height of $10^{\prime}-0^{\prime \prime}$.
11. All curbs on the site are broken. Please clarify which ones we are responsible to restore on the site plan. If we are replacing the curbs, please provide a detail to build them. Currently they are surface placed. ANSWER - GC to carry an allowance of $\$ 15,000$ for the removal and replacement of concrete curbs and gutters.
12. Please clarify answer 1 on addendum \#3 regarding the location of wallcovering and rub strips. It is unclear where these go as the hallway is a somewhat undefined area. ANSWER - See attached Sheet A10.1 highlighting where wallcovering is to be located, and where rub strips are to be located. Also, to clarify, corner guards to be $48^{\prime \prime}$ high, not full height.
13. Where are we applying the graffiti resistant coatings? Is it only on the new CMU we install? ANSWER - Yes, only on new CMIU. See also response to Question 10 above.
14. Is there a structural detail for the new landing for the new rear entrance for the concrete? It is unclear the thickness and if there is any base rock underneath the area. ANSWER - Landing to match concrete flatwork at Staff Outdoor Patio. Ref. Structural Sheet S3 for details. Ref. Civil Sheet C2.2 Grading Plan, which shows elevations and extent of concrete flatwork at rear entrance landing.

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15. Are we responsible to install the owner provided T.V.'s and brackets? ANSWER - Yes, per note 10.07 .
16. Item 1 on addendum 1 states to give an alternate for roofing. Has the existing roof material been tested for asbestos? ANSWER - Roof has not been testing for asbestos. For bidding purposes, assume no remediation necessary.
17. How are the resin panels attached to the casework on detail A/A11.5? Do they have they have a frame? Please provide a detail. ANSWER - No frame. Panel is buried $4^{\prime \prime}$ within millwork, and mechanically fastened below, concealed from view. Panel is 1 " thick and self-supported.
18. Is there a flashing detail for the connection $4 / \mathrm{S} 4$ where the new roof structure meets the existing CMU? ANSWER - See response to Question 1 above.
19. Can a detail be provided for the roof replacement assembly? ANSWER - Match existing.
20. What is the intention for the existing lights on the soffit on the exterior of the building? The plans say to frame in and finish abandoned lights. Is this correct? If so there is no detail on what you want this to look like. ANSWER - See response to Question 4 above.
21. Can we be provided a detail for the connections for the operable partition framing and cabinet support framing on page S2? It mentions add post and beams but there are no details on how to do this with the metal stud framed walls. ANSWER - See detail N/A8.3 for operable partition header. Furr walls around posts as required. Furring to protrude into Rm 176, 147, 116 \& 108.
22. Please define where the $\$ 20,000$ floor prep scope starts. Is this from the existing conditions or are we to include additional money to grind down smooth the entire slab? ANSWER - The $\$ 20,000$ allowance is for grinding, smoothing and prepping the entire floor.

## END OF ADDENDUM

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## ADDENDUM FIVE

## Proposal Submission Timeline CHANGE:

No change

## Drawing / Documents Updates (Located in Sharefile):

1. Addendum 5 - AR5.1 Structural Supplemental Details (Ref. S2) dated 12-07-17
2. Addendum 5 - AR5.2 Finishes Clarification rev1 dated 12-07-17
3. Addendum 5-MidMark Cut Sheets

## Clarifications:

1. None

## Questions / Answers:

1. Are the Rub Rails to be placed on all walls throughout Hallways 203/204/205/206/207? ANSWER - Yes. See also responses to Question \#12 Addendum 4.
2. In the Main Corridor 202, do the Rub Rails return into the side corridors to the doors with side lites? ANSWER - Yes. See also responses to Question \#12 Addendum 4.
3. Are Corner Guards to be placed on all corners in every Hallway, Entry and side corridors? Locations are not indicated on the plans. ANSWER - Yes. See also responses to Question \#12 Addendum 4.
4. Are Corner Guards required on any of the corners in the Breakroom, Pharmacy, Work Areas \& Meeting? ANSWER - No, only in public circulation areas. See also responses to Question \#12 Addendum 4.
5. Are the Wall Coverings and Wainscot Areas to be full wall height in all locations shown? ANSWER - Wall coverings to be full height at all locations shown on A10.1. Wainscot height at toilet rooms to be $7^{\prime}-2^{\prime \prime}$ as shown on A10.2, typical at all toilet rooms. Walls with rub rail to be installed as shown on Elevation 11/A10.2, which is typical

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configuration for all hallways / public circulation spaces. For typical exam room, see Elevations 6-9/A10.2 showing wainscot height.
6. For Overhead Coiling Doors \#109 and \#194.2 the schedule calls for both doors to be aluminum, however, the specs call for \#109 to be Stainless Steel and \#194.2 to be Galvanized Steel. Which is to be followed, schedule or specs? ANSWER - Specs.
7. Is it required to use Detail 4 on S1.1 for all non-bearing wall door headers? ANSWER Yes.
8. Is PG\&E work being coordinated by CMC? When is new service scheduled to be installed at the site? ANSWER - PG\&E service being coordinated by CMC. See also Single Line Diagram on E5.1 showing extent of work to be performed by GC. PG\&E Engineering expected end of December.
9. Answer \#2 (Addendum 4) is a little confusing. Is the intent to remove all roof insulation and replace with foil faced in the case of installing a new roof? In the last addendum we were told to reuse the existing? ANSWER - Response to Q\#2 (Addendum 4) pertains to the roof of the addition only. Any replacement of the existing roof insulation is to match existing, as stated in response to Q\#2b Addendum 3.
10. In response to \#5 (Addendum 4). Is the expectation for the wood and plaster to be like new condition? Or do we do standard paint prep and paint the surfaces? ANSWER Standard paint prep and paint the surfaces.
11. Please provide a complete roof assembly detail so the roofers will know how to bid the new roof. We cannot match the existing as the new roof is TPO and the old is a built up roof. ANSWER - We are simply asking that that the old built up roofing material be removed. This will expose the plywood. On top of the plywood were asking that a TPO roof be installed. The specifications previously given show an underlayment under the mechanically attached TPO roofing. Not sure what else we can provide for you.
12. Please provide details for the connection for the post to concrete and post to beam connections for the operable partition support framing and cabinet support framing mentioned on page S2. ANSWER - See attached document AR5.1 showing typical details for post / beam connections.
13. The Mechanical schedule calls out a Direct Drive inline fan, but the specs call for belt drive, which is correct? ANSWER - Use the fan on the schedule.
14. The Mechanical schedule call out a B model ceiling exhaust fan, but the specs call for an acoustically lined housing which would be A model, which is correct? ANSWER - Use the $B$ model fan on the schedule.
15. Please clarify the requirements to "mount all fans so that they are completely isolated from the building" ANSWER - All equipment is to be mounted per the drawings.
16. There is a fire damper and fire/smoke damper section in the specs, however, none are listed on the plans, please advise how to proceed. ANSWER - There are not any FSD on the project.
17. Finish Plan \& Schedule Discrepancy: Side Entry 196 shown as SV2, but listed as SV3, which is correct? ANSWER - SV2. See also response to Question \#23 below.

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18. Finish Plan \& Schedule Discrepancy: All Consults, Offices, Meeting, Manager's Office and Storage \#114 shown as C4, but listed as C5. No C5 exists in legend, are all rooms to be C4? ANSWER - C4. No C5 in project. See also response to Question \#23 below.
19. Finish Plan \& Schedule Discrepancy: Lactation 136 shows as SV3, but listed as C5, which is correct? ANSWER - SV3. See also response to Question \#23 below.
20. What is desired Warranty for Alternate "New Roof" material pricing? ANSWER - $\mathbf{2 0}$ years on the roof.
21. Confirm that all existing roofing to be removed and fire protection board to be placed on top of existing plywood prior to reroof with new material for Alternate? ANSWER Replacement roof to match existing fire rating.
22. What type of frames are to be installed with the pocket doors? Detail is preferred, please advise. ANSWER - Timely Pocket Door Trim Kit, TA-8, to match other Timely frames. Refer to response to Question \#5 Addendum 2. Acceptable pocket door substitute is Western Integrated Material Pocket Door Frames.
23. The finish schedule and finish legend/plan do not match. In this case which one is correct? If the schedule is correct which carpet is C5? C5 is not shown on the legend. ANSWER - Finish legend/plan is correct. See attached document AR5.2 (updated A10.1 with corrections).
24. In the Mechanical Work - General Requirements spec section 3.13 A1 is all water piping to be insulated on the project? ANSWER - Hot water and hot water return only.
25. If all or any piping is to be insulated, does it need to be insulated by a licensed insulation contractor as noted, or will our mechanical/plumbing contractors be able to insulate their own piping? ANSWER - Contractors can insulate their own work.
26. Can I get a copy of the cut sheets for the MidMark cabinets? ANSWER - Ciut sheets in Sharefile
a. Pre- Installation guide:
http://www.midmark.com/docs/librariesprovider6/pdfs/003-2811-
00.pdf?sfvrsn=ffd3bc05 6
b. Installation guide:
http://www.midmark.com/docs/librariesprovider6/pdfs/003-2809-
00.pdf?sfvrsn=ebd3bc05 6
27. Do you have any details/dimensions of the sun shades for the outriggers and fins? ANSWER -Sun Shade: Kawneer Storefront Integral Sunshade: Versoliel Outrigger System/ 30" deep/ width of window frame
28. And please clarify the North Entrance is Coiling Door on exterior not a sunshade. ANSWER - Yes.

## END OF ADDENDUM




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[^0]:    * Common requirements for all dental exam and treatment rooms

