

355 South Grand Avenue, Suite 1900 Los Angeles, CA 90071



Testing, Inspection, and Observation Program

2019 California Building Standards Code - OSHPD 1

This program is prepared and submitted for an OSHPD 1 project. OSHPD 1 projects include all construction and remodel projects for: general acute care hospitals, acute psychiatric hospitals, and general acute care hospitals providing only acute medical rehabilitation center services (2019 CBC 1224.1).

| SECTIO | ON A | PROJECT INFORMATION | | | | | |
|-------------------------------------|------------------------|--|------------------------------|---------------|--|--|--|
| Facility #: | Fac | cility Name: | | Project#: | | | |
| 17282 | Arrowhead Re | gional Medical Center | | S222348-36-00 | | | |
| Street Address: | 400 N. Pepper Avenue | | | | | | |
| City: | Colton | County: | San Bernardino | | | | |
| Record Name | e (Scope of Project): | Mobile SPD Trailer | | | | | |
| Abbreviations: CAC: California A | Administrative Code | AAMA: American Architectura | al Manufacturers Association | on | | | |
| CBC: California E | Building Code | NFPA: National Fire Protection Association | | | | | |
| CEC: California E | Electrical Code | FM: FM Approval Standards | | | | | |
| CMC: California N | Mechanical Code | DPOR: Design Professional of Record | | | | | |
| CPC: California Plumbing Code | | | | | | | |
| | | | | | | | |
| Testing | g, Inspection, and Obs | servation Sta | ges | | | | |

Stage No. **Stage Name** Stage Scope / Description

DESIGN PROFESSIONAL OF RECORD RESPONSIBILITY

The administration of the work of construction, including this TIO, shall be under the responsible charge of an architect and structural engineer. When a structural engineer is not substantially involved, the architect shall be solely responsible. Where neither structural nor architectural elements are substantially involved, a mechanical or electrical engineer registered in the branch of engineering most applicable to the project may be in responsible charge. (CAC 7-141(a))

Note: HCAI plan review staff must provide verification that the TIO program has been "Reviewed" prior to plan approval to confirm the applicability of the tests and inspections identified in the TIO program for work scope, building systems, and the construction materials shown in the design drawings. Field staff will issue subsequent "TIO Program Approval".

The "TIO Program Approval" from HCAI field staff must be obtained and included with the notice of start of construction required by CAC Section 7-137(a)4) and 7-145(a)5.A)

Construction shall not commence until the health facility has obtained from HCAI "TIO Program Approval". (CAC Section 7-135(a)3)



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| | | | | NOTE: Approved agencies, individuals, and all changes to the TIO program shall be identified, evaluated by the DPOR and approved by HCAI prior to proceeding with the related work. | | | | | | |
|------|---|---------------------------------------|---|--|---|---|---|--|--|--|
| | Facility #: Facility Name: | | | Project #: | | | | | | |
| | 17282 Arrowhead Regional Medical Center | | S222348-36-00 | | | | | | | |
| | | | | | "X" or provide AA information: | | | | | |
| | # xəpul | Stage 1 Required (Select with "X") | TESTS | Samples of Test & Inspection Reports Included | OPAA No. and Expiration Date | Responsible Approved Agency And/Or Individual And/Or Individual | (Initial/Date) HCAVFDD Use (Initial/Date) | | | |
| STRI | UCTU | | TESTS | 1 ~ = 1 | | | | | | |
| | oncre | | | | | | | | | |
| | B-C1 | х | Concrete CBC 1705A.3, 1903A.6 & 1910A.1; ACI-318 1.9.1 & 26.4 Cementitious materials | | | TBD | | | | |
| | B-C14 | х | Post-installed anchors CBC 1910A.5 Installation verification test (includes adhesive, shot pins and mechanical anchors) | | | TBD | | | | |
| ELEC | TRIC | AL T | ESTS | | TOTAL DESIGNATION OF THE PARTY | | A. C. | | | |
| | B-E1 | Х | Ground Fault Protection of Equipment CEC 230.95(C) & 517.17(D) | | | TBD | | | | |
| | B-E6 | х | Essential Electrical System Coordination Study CEC 517.31(G) & 700.32 | | | TBD | | | | |
| | B-E14 | Х | Insulation Testing CEC 110.7, 2018 NFPA 99 617,4.1.2.2 | | | TBD | | | | |
| R. | B-E16 | X | Temporary Installation Grounding CEC 590 6 | | | TBD () | | | | |
| 4 | B-E22 | Χ | Polarity Test | | | TBD} Called 4/25/23 | | | | |
| PLUI | | IG TE | STS | · · · | | النار المالية | | | | |
| | B-P4 | X | Existing sewers and drains CPC 102.4.1, 105.3, 105.3.2, & 712.0 Tested for conformance with requirements for new work | | | TBD | | | | |
| | B-P5 | X | Water supply system CPC 105.3, 105.3.2, & 609.4 Pressure tested prior to covering or concealment | | | TBD | | | | |
| | B-P6 | × | Plumbing, drainage, and venting systems CPC 105.3, 105.3.2, & 712.0 Water or air tested prior to use, covering or concealment. No air test for plastic piping. | | | TBD | | | | |
| | B-P7 | ^ | Building sewer CPC 105.3, 105.3.2, 712.0 & 723.0 Water or air tested prior to use, covering or concealment. No air test for plastic piping. | | | TBD | | | | |
| 1 | B-P14 | X | Backflow prevention devices and assemblies CPC 603.2 & 603.4.2 Assembly tested | | | TBD 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | | | | |
| IRE | PRO | TECT | ION AND LIFE SAFETY SYSTEMS | processing the same of the sam | | | | | | |
| | B-FP1 | Х | Fire Alarm CFC 901.5 & CFC 907.7 NFPA 72-2016 §14.4 Acceptance and Reacceptance Testing | | | TBD | | | | |



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|------|---|------------------------------------|---|---|--------------------------------------|--|---|--------------------------------|--|--|--|
| | Facil | lity #: | Facility Name: | Project #: | | | | | | | |
| | 17282 Arrowhead Regional Medical Center | | S222348-36-00 | | | | | | | | |
| | | | | | n "X" or provide PAA information: | | | | | | |
| | # xəpul | Stage 1 Required (Select with "X") | ON-SITE SPECIAL INSPECTIONS | Samples of test & inspection reports included | OPAA No. and Expiration Date | RESPONSIBLE APPROVED AGENCY AND/OR INDIVIDUAL (IDENTIFY SPECIAL INSPECTOR) | COMPLIANCE VERIFICATION BY IOR (Initial/Date) | HCAI/FDD USE (Initial/Date) | | | |
| STR | UCTL | JRAL | SPECIAL INSPECTIONS | | | | | | | | |
| C | oncre | te | | | | | | | | | |
| | C-C1 | Х | Concrete CBC 1705A.3; ACI-318 26.5.2 & 26.13 Placement of concrete | | | ТВО | | | | | |
| | c-c3 | Х | Concrete CBC 1705A.3; ACI-318 26.4 Mix Design | | | тво | | | | | |
| | C-C5 | Х | Concrete CBC 1705A.3 CIP & Post-installed anchors | | | TBD | | | | | |
| s | teel | | | | | | | | | | |
| | C-S2 | Х | Steel CBC 1705A.2.5 & 1705A.12.1 Shop and field welding | | | TBD | | | | | |
| V | Vood | | | | | | | | | | |
| | C-W4 | Х | Wood CBC 1705A.11.1 & 1705A.12.2 Nailing, screw attachment, bolting, anchoring, field gluing operations and other fastening | | | TBD | | | | | |
| ELEC | CTRIC | AL II | ISPECTIONS | | | | | | | | |
| | C-E1 | Х | Available Fault and Short-Circuit Current Field Marking CEC 110:16(B), 110.24(A), 620.51(D)(1), 700.5(E) | | | TBD | | | | | |



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Testing, Inspection, and Observation Program

| SECTION | SECTION F | | | | TRI | JCT | ION | I VE | RIF | ICA | TIO | N |
|---------------------|--|---------------------|----------|--|-----------|------------|----------------|---------|-----------|--|-----------|--------------|
| Facility #: | Facili | Facility Name: | | | | Project #: | | | | | | |
| 17282 | Arrowhead Regio | onal Medical Center | | | | | \$222348-36-00 | | | | | |
| | VERIFIED CONSTRUCTION INS | SPECTIO | N AND | OBSERV | ATION | REPORT | ING | | | | | |
| REFERENCE NUMBER | (2) | | | VERIFIED COMPLIANCE REPORT REC (Form OSH-FD-12 (See "PERSONAL KNOWLEDGE" as defined in Section 7-151) | | | | | | 23) n California Administrative Code, | | |
| | | GEOR | AOR | SEOR | MEOR | EEOR | CONT | IOR | SP | TEST LAB | | HCAI/FDD USE |
| | Clear all plan review Outstanding Items List (OIL) Items | | | | | | | | | | | |
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| | Installation of temporary equipment | | | | | | | | | | | |
| | Removal of temporary equipment | | | | | | | | | | | |
| | Substantial Compliance (Remodel, Renovations, Maintenance projects, Equipment Replacement) | | | | | | | | | | | |
| | Certificate of Occupancy (New Buildings, Additions, Changes in Occupancy) | | | | | | | | | | | |
| | Construction Final | | Х | × | х | х | х | х | | | | |
| ABBREVIATIONS: | GEOR - Geotechnical Engineer of Record | | AOR - A | Architect | of Recor | d | | SEOR - | Structur | al Engin | eer of Re | cord |
| | MEOR - Mechanical Engineer of Record | | EEOR - | Electrica | al Engine | er of Re | cord | CONT | O/B - Coi | ntractor o | or Owner | /Builder |
| * | SP. INSP - Special Inspector | | IOR - In | spector | of Recor | b | | Test La | b – Engr | . For the | approve | d agency |



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| SECTION H | Н | CAI REVIEWED | |
|---|---|---|--------------------|
| Facility #: | Facility Name: | Project #: | |
| 17282 | Arrowhead Regional Medical Center | S222348-36-00 | |
| NOTE: When a str | ructural engineer has been delegated responsibility | for a portion of this project his or her signature is als | so required. |
| Submitted By: | | | |
| I have reviewed the approve "required" on this form. | ed construction documents for this project and | d all tests and special inspections required by | Code are marked as |
| David W. Clarke | | Allallo | 12/28/2022 |
| Architect/Engineer of Record (Print | Name) | Architect/Engineer of Record (Signature) | Date |
| Dhawal Agarwal | | Janual : | 12/28/2022 |
| Structural Engineer of Record (Prin | at Name) | Structural Engineer of Record (Signature) | Date |
| | FOR HCAI | USE | |
| TIO Program Reviewed by HCAI | Department of Health Coffice of Statewide Hospital | 12:00:15 PM 8-36-00 | |

Note: HCAL plan review staff must provide verification that the TIO program has beeen "Reviewed" prior to plan approval to confirm the applicability of the tests and inspections identified in the TIO program for work scope, building systems, and the construction materials shown in the design drawings. Field staff will issue subsequent "TIO Program Approval".



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| | 2019 California Building Stand | lards Code - OSHPD 1 | |
|---|---|---|---|
| SECTION I | TIO PR | OGRAM APPROVAL | |
| Facility #: | Facility Name: | Project #: | |
| 17282 | Arrowhead Regional Medical Center | S222348-36- | 00 |
| | nd submitted for an OSHPD 1 project. OSHI cute psychiatric hospitals, and general acut services (2019 CB | te care hospitals providing only acute me | |
| Samples of Test and Insp | pection Reports are NOT required for tests p | performed by laboratories approved thro | igh OPAA Program |
| All test and special inspection rep testing agency per CAC 7-149(a). | ports shall be submitted to the IOR, hospital ow | vner, architect in responsible charge, and the | e structural engineer by the |
| All reports shall clearly state when whether the results indicate comp | be signed by the individual who performed the ther the tests or special inspections were perfo pliance with those documents per CAC 7-149 (a shall obtain approval from the design professio | ormed in accordance with the HCAI stamped (a). All IORs performing special inspections s | approved documents and shall hold the appropriate |
| NOTE: This Test, Inspection, and | d Observation Report shall be approved by HC | Al field personnel prior to start of construction | າກ. |
| David W. Clarke | C21219 | Januallo_ | 12/28/2022 |
| Architect/Engineer of Record (Print Na | ame) Professional License # | Architect/Engineer of Record (Signature) | Date |
| | FOR HCAI FIELD S | STAFF USE | |
| | | | |
| confirm the applicability of t construction materials show | f must provide verification that the TIO paths the tests and inspections identified in the firm in the design drawings. HCAI Field s | ne TIO program for work scope, build staff will issue subsequent "TIO Prog | ling systems, and the ram Approval". |



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| 2019 California B | uilding Stan | dards Code - OSHF | PD 1 |
|--|--------------|-------------------|------|
| Fire sprinkler CFC 901.5 & NFPA 13-2016 Chapter 25 Acceptance testing – Underground piping | | TBD | |
| | | | |
| | | | |



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| SECT | TON J | SUMMARY OF CHANGES TO THE TIO PROGRAM NOTE: Note all changes shall be approved as amended construction documents per CAC 7- 153, or "concurred with" as non-material alterations per CAC 7-153(b), by HCAI prior to proceeding with the related work. | | | | | | | | |
|--------------------|---|--|--|-----------------------------|---|--|--|--|--|--|
| Facility #: | Facili | Project #: | | | | | | | | |
| 17282 | Arrowhead Regi | onal Medical Center | | S222348 | 348-36-00 | | | | | |
| | TESTING, INSPECTION, AND OBSERVATION BY THE ARCHITECT OF RECORD / E | | | ES | W. Car | | | | | |
| A signa | ture below indicates that the DPOR has verified the acagencies/testing labora | ceptance statements in Sectional controls and special inspectors | | ble to any approved | HCAI FDD CONCURRENCE (Initial/date) | | | | | |
| REVISION NUMBER | SYNOPSIS OF CHANGE | Architect/Engineer of Record Signature (Initial/date) | Structural Engineer of Record Signature (Initial/date) | DATE of Effective Change | | | | | | |
| 1 | Added B-E22 & B-P14 | all 4/25/2 | 3 | 4/25/2023 | | | | | | |
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