October 31, 2017

Mr. Tyler Price, Administrator Ocala Health and Rehabilitation Center 1201 SE 24th Road Ocala, FL 34471

RE: Emergency Power Plan Letter of Satisfaction

Dear Mr. Price:

Thank you for providing your facility's Emergency Power Plan (EPP). After review of your submitted plan, I have found the plan satisfies the minimum criteria as required by Emergency Rules 58AER17-1 and 59AER17-1 as set forth by the Florida Department of Elder Affairs and Agency for Health Care Administration. Going forward, the Emergency Power Plan must be included in your annual CEMP submission as an annex/addendum. Your CEMP is due annually to this office.

If you have any questions or if I can be any assistance, please do not hesitate to contact me at #352-369-8100.

Sincerely,

BILLY WOODS, SHERIFF

· / V

James Preston Bowlin, Director

Support Services Bureau

Division of Emergency Management

cc: File

Emergency Power Plan Guidance Document

Emergency Rule 58AER17-1& 59AER17-1

Requested information from Marion County concerning the facility to include:

1. What is your facility type. (Nursing Home or Assisted Living)

Nursing Facility

2. Facility name

Ocala Health and Rehabilitation Center

3. Facility address, and phone number.

1201 Southeast 24th Road Ocala, FL 34471-6009

- 4. What areas of the facility do you plan to keep below 80 degrees.
 - a. Refer to attached floor plan (highlighted green area is the refuge area). (exhibit 4.a.1) and (exhibit 6.a.1)
- 5. What kind of equipment is being used to cool the facility.
 - a. HVAC units
 - b. Spot Coolers
- 6. What is the square footage of the cooled area.
 - a. Refer to attached floor plan and spread sheet for the map of the refuge area and the square footage of refuge area temperature controlled space. (exhibit 4.a.1) and (exhibit 6.a.1)
- 7. How many people (residents and staff) do you plan to locate in this cooled space/area. (Must meet national emergency shelter standards/state shelter guidelines and appropriate fire codes).
 - a. Refer to attached spread sheet for the square footage of refuge area temperature controlled space. (exhibit 6.a.1)

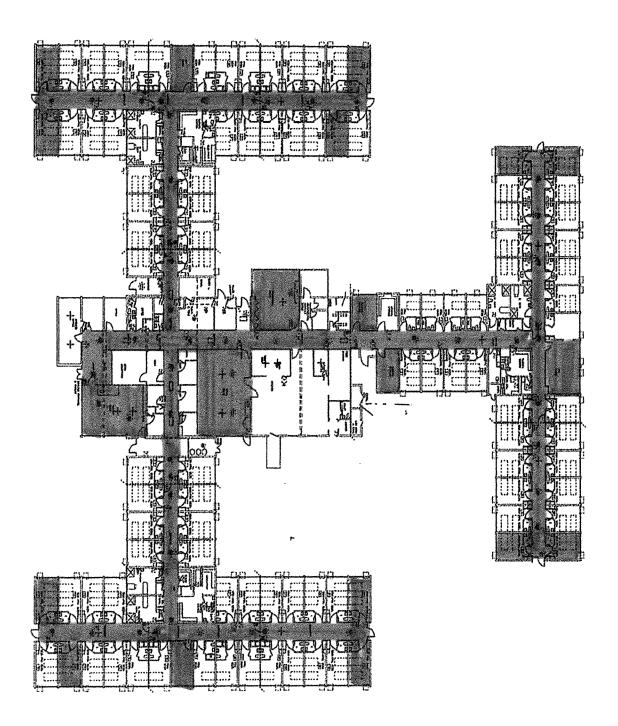
- 8. Please provide a statement for how you plan to move residents to this location.
 - a. If staff locate a Resident Care area that has not maintained a temperature of 80° F or less, the policy requires staff to coordinate with the DON (assignee) to relocate any residents within affected areas to refuge spaces (detailed in exhibit 4.a.1). Residents shall not be returned to any area of concern until the temperature has been brought to 80° F or less for a period of 2 consecutive hours.
- 9. Will there be beds available in the cooled area.
 - a. How Many: Currently every Resident has a bed in their rooms on site. The Administrator and the appropriate Nursing staff will evaluate on a case by case basis when the bed will be relocated to the refuge area.
 - b. Do you have these beds on site: Yes
- 10. Describe how you will ensure the facility does not exceed 80 degrees and how often it will be monitored.
 - a. When the facility is on generator power only, assigned staff will monitor temperatures in the facility with a temperature gauge, where occupied by residents (perform resident rooms first), every 60 minutes; the reading of said temperatures will be recorded.
- 11. Describe the fuel type you will need to operate the generator.
 - a. Diesel
- 12. How do you plan on storing 96 hours of fuel on-site.
 - a. The tank is a 1,700 gallon tank.
 - b. The duration of operating capability at full load (hours): 118.05 hours (exhibit 12.b.1)
- 13. Please provide a maintenance schedule for both the generator and HVAC system. (include mechanism for load testing and documentation of the test)
 - a. Cummins Power South is contracted to provide to Scheduled Maintenance Inspection each year. One of the inspections includes a Building Load Test (BLT) (exhibit 13.a.1)
 - b. Cummins Power South documentation of contracted inspection test. (exhibit 13.b.1)
 - c. HVAC PM schedule (Monthly, Quarterly, Semi-Annual and Annual Preventative Maintenance is conducted on all HVAC Units).
 - d. Generator PM schedule (Weekly and Monthly Inspections are conducted). The generator is run under building load at least once per month. (exhibit 13.d.1)

- 14. State the procedure on how your facility will refuel before and after an emergency.
 - a. The Weather Underground and/or NOAA is monitored every day and when a potential weather event is noted, the facility refuels. Once the event is completed, the facility refuels when warranted.
 - b. The facility has a fuel agreement with Clardy Oil. (exhibit 14.b.1)
- 15. Provide a training procedure to ensure staff is aware of how to operate the emergency power to the facility.
 - a. Maintenance staff is to be trained by Generator Manufacturer on the basic operations of the generator and the emergency power infrastructure by the Electrical Company who services building.
- 16. Describe how new staff will be trained on the emergency power plan.
 - a. Initial Emergency Power Plan training will be provided to all new and existing staff consistent with their expected roles.
 - b. The training will continue to be provided at least annually.
 - c. Training records will be maintained by the facility, and kept by the Staff Trainer (designee)
 - d. Demonstrate staff knowledge of emergency procedures by conducting drills, table top exercises and other methods.
- 17. Please attach a certified HVAC letter with a quote approving the tonnage required to cool the space indicated.
 - a. Mechanical Engineer's evaluation. (exhibit 17.a.1)
- 18. Please attach a certified electrician letter with a quote specifying generator capacity required to run HVAC system and fuel for 96 hours.
 - a. Electrical Engineer's evaluation. (exhibit 18.a.1) and (exhibit 18.a.2)
- 19. Please attach a construction implementation timeline.
 - a. N/A: The facility has an existing generator
- 20. Please provide documentation to show the generator for the facility has been installed and is operable.
 - a. Cummins Power South documentation of contracted inspection test. (exhibit 13.b.1)

- 21. Need fuel storage approval from the local Fire Marshall.
 - a. Refer to local Fire Marshall's approval letter. (exhibit 21.a.1)
- 22. Need electrical engineer to inspect and approve their power source plan for operating to avoid back feeding and creating danger to their residents, employees and linemen.
 - a. Refer to Engineer's letter of evaluation of back feeding. (exhibit 22.a.1)

Exhibit 4.a.1

Ocala Health and Rehabilitation Center



Ocala

Refuge Square Footage of A/C under EM Pwr	Sq Ft Gross
Therapy (x2)	1,494
Dinning Room	1,170
Day Rooms (x3)	1,220
Resident Rooms (x12)	2,160
Corridor	7,760
Beauty Shop/Lounge	436
	14,240

Square Footage of A/C for Census	Sq Footage 40 sq'/res.	Sq Footage 60 sq'/res.
Residents	180	180
Staff (Full Time in Arca)	24	24
Sq A per resident	40	60
	8,160	12,240

C.N.A (1 to 10) RN (1 to 30)

BTU Load of A/C under EM Pivr	BTU Load
Therapy (x2)	48,000
Dinning Room	60,000
Day Rooms (x3)	72,000
Resident Rooms (x12)	144,000
Corridor	180,000
Beauty Shop/Lounge	24,000
100 miles	528,000

Btu Load
Full Consus
180
350
65
550
98,750



Cummins Sales and Service 2200 Pinson Valley Parkway Birmingham, Alabama 35217 03-Oct-2017

Please accept this letter as evidence that this NHS facility is in compliance with the 98 hour run time requirement.

Ocala Health and Rehabilitation 1201 SE 24th Road Ocala, FL 34471

The Ocala Facility has a 200kW Onan Model 200.0DGFC, Serial Number K060988826 generator with a 1700 gallon fuel tank. This unit will run *fully loaded* for 118.05 hours.

Please call or email with any questions. My contact information is below.

Best Regards,

Rusty Webb

rusty.webb@cummins.com

Power Generation Service Manager

205-841-0421 - Main

205-849-1133 - Desk

205-849-1939 - Fax

72



OCALA SERVICE CENTER 321 S. W. 52ND AVE MV# 56758 OCALA, FL 34474 Phone: 352-861-1122 **Cummins Power South**

PLANNED MAINTENANCE AGREEMENT

Customer Address	Customer	Contact	Ouote Informa	ation
NORTHPORT HEALTH SERVICES	Contact:	Brian Key 205 343-7318	Quote Date: Quote Expires:	10-MAR-16 10-JUN-16
931 FAIRFAX Tuscaloosa, AL 35406	Phone: Fax:	205 343-7516	Quote Num:	53237
,	Cust Id:	1068590	Quoted By: Quote Term:	Lydia K Moore 3 Year(s)
Site Information 1 OCALA HEALTH & REHAB	1201 SOUT	HEAST 24 RD	OCALA	
Site Unit Number Manufacture	r Mode	l Prod Model	Serial Num	ber Type
1 OCALA HEALTH ONAN	200.0D	GFC-577 200.0DGFC-5	77894 M K060988826	STDBY
Site Unit Number Service Ev	ent	Qty	Sell Price	Extended Price
OCALA BLT WITH F	ULL SERVI	CE 3	673.46	2,020.38
HEALTH INSPECTION	1	3	257.46	772.38

This renewal proposal covers two (2) service visits annually: one (1) Full Maintenance Service (includes CC2525 Oil Analysis) with 0.5-hr Building Load Test (BLT), and one (1) Maintenance Inspection. This proposal does not include replacement of batteries, air filters or coolant over two gallons. All services are to be performed during normal business hours, unless otherwise specified.

Load Bank Testing is to be quoted separately, and will only be performed upon customer request. Load Bank Testing is to be performed in conjunction with either the Full Service visit or the Inspection visit. Additional travel charges may be required for a stand-alone Load Bank event.

Please note: DFFQW Fuel Analysis is available that meets AHCA standards for an additional charge of \$402.

Services to be scheduled as follows: Full Service with BLT (0.5-hr) - April 2016; Inspection - October 2016.

This is a three (3) year proposal, running from 01 January 2016 through 31 December 2018, which will not be automatically renewed. The Agreement may be cancelled at any time by either party upon 30 days written notice to the other party. Preventive maintenance customers receive a 10% discount on all unscheduled repairs as well as a guaranteed four hour response time 24 hours a day.

Thank you, we appreciate your business! Please feel free to contact us with any questions or comments.

Kay Moore, PM Administrator (404) 765-5173 - Office / (404) 765-8568 - Fax lydia.moore@cummins.com

Standard Agreement Amount \$2,792.76
Taxes \$167.56
Proposal Total \$2,960.32



PLANNED MAINTENANCE AGREEMENT

Customer Address	Custome	r Contact	Ouote Inform	ation
NORTHPORT HEALTH SERVICES	Contact:	Brian Key	Quote Date:	10-MAR-16
931 FAIRFAX	Phone:	205 343-7318	Quote Expires:	10-JUN-16
Tuscaloosa, AL 35406	Fax:	205 343-0841	Quote Num:	53237
	Cust Id:	1068590	Quoted By:	Lydia K Moore
			Quoto Term:	3 Year(s)
Customer Approval		CUMMIN	S INC	
Signature: Bum (-		Signature:	ydia Kay Moore	Cognity signed by tydia fay Moore Discondigate fay Moore, a-Camerias Fower South own M. Administrator, seed-sydia moose population son, c-US DISCONDIGATED TO TO THE FASTER
Date: 3-24-2016		Date:		

This agreement incorporates the Planned Maintenance Terms and Conditions which follow.

South

Cummins Power South

ATTACHMENT	A				321 SV	/ 52nd Avenue, Oc	ala, Flor	ida 3	1474 352-861-1122	
DATE	Name and Address of the Owner, where the Owner, which the Owner, where the Owner, which the Owner, which the Owner, where the Owner, which the	0/17	UNIT DUS.		RO.#	PM 3802	ous			
CUSTOMER	Nort	hport	Health & Rehab			UNITID	Ocala	Ocala Health and Rehab		
CONTACT	<u> </u>	B Tuc					1201 5	E 24	Th. Rd.	
PHONE#	-	132-24					Ocale,	FI. 34	471	
entroperation of the second	7	TO T		UNIT	i c	PG	ENG.	ENG: Cummins		
MIN		-	18043	DGFC-577	8944		BCTA			
SIN	<u> </u>	1079		K0609888			21725409			
CPL/SPEC.#	В			N						
KWNAC				208 vac 2	00 kw				×	
UNIT HOURS				253						
SYSTEM	OΚ	SVC	CHECKIPRO	CEDURE		SYSTEM	OK	SVC	CHECKIPROCEDURE	
COOLING	×		WATER HOSES			ELECTRICAL	х		BATTERIES (LEVEL, CONDITION)	
OPERATING	×		RADIATOR / HEAT	r exchang	ER	ALTERNATOR '	х		VOLTAGE DROP (VDC): 9.7	
TEMP: 180	×		DRIVE BELTS			VOLTAGE: 14.5	х		CONNECTIONS (CLEAN, TIGHT)	
	х		FAN CONDITION				×		CHARGER OPERATION (VDC): 13.0	
	×		BLOCK HEATER	OPERATION			×		ENGINE WIRING	
	X		COOLANT LEVEL						TEST SAFETIES	
	X		COOLANT PROTE	CTION	-30				OVERSPEED OVERCRANK	
	×		DCA STRENGTH		3.2				LOW OP HIGH ENG TEMP	
	X		WATER PUMP						LO ENG TMP LOW COOLANT LVL.	
	X		CHANGE FILTER		E)			September 1 to 1 t	LO FUEL	
INTAKE/	X		VISUAL CHECK C			GENERATOR	×		VAC: 208	
EXHAUST	X		CRANKCASE BRE			CONTROLS	×		HERTZ: 60	
AMBIENT	х		TURBO OPERATI				×		WIRING (CONTROLS, ENG)	
TEMP: 94	X		INSPECT AIR CLE		***************************************		X		VISUAL CHECK: WINDINGS, DIODES	
	X		CHECK RAIN CAP				X		METERS: WORKING, ACCURATE	
PUPL SYSTEM	X		CHECK FOR LEAD			GENERAL			ROOM-CLEAN AND VENTILATED SWITCH: MAUTO GFF	
LEVEL: 7/8			FUEL TRANSFER			CONDITION	×		HOUR METER OPERATION	
	X		GOVERNOR OPE				X		UNIT CLEANLINESS, PAINT	
	×		DAY TANK-LEAK! DRAIN WATER SE				X		CUMMINS DECAL IN PLACE	
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LOGBOOK DOCUMENTATION

Ocala Health & Rehab Center - Ocala, FL 34471-6078 Emergency Power Generator: 30 minute load test Marked done on-time by Julius Tucker on September 27, 2017.



Steps:

The Maintenance Supervisor should test the emergency generator weekly. If the facility has a power outage, that causes the emergency power system to operate for the required time period, the use of the generator may be logged as a weekly test.

- Should the normal supply of power be disrupted to the facility, the emergency generator should automatically activate within ten seconds of the loss of normal power.
- · Systems connected to the emergency generator include, at a minimum:
 - · Emergency lighting
 - Fire alarm system
 - · Fuel Storage Tank
 - Exit signs
 - · Life support systems
 - · Emergency communication system
- · The Maintenance Supervisor should test the generator each week.

Serial #	Building	Location	Make & Model	Description
L76019826	6 <mark>Main</mark> Building	Sa Center Exit(Gen Room)	Cummins/Onan DSGAE- 1202827	Emergency Power Generator
Date:				9/27/2017
Generator	/fuel storage	tank general condition:		Satisfactory
(Fuel: sup	ply, oil, belts,	battery, starting, etc., ar	nd automatic transfer within	10 seconds for load operation)
Did gener	ator transfer v	within 10 seconds?:		Yes
** Was ge	nerator test u	nder load for 30 minutes	s?:	Yes
Start time:	(Meter Read	ling):		7:00 AM
Stop time:	(Meter Read	ing):		7:30 AM
Was emer	gency lighting	g and electrical system o	checked during load test?:	Yes
Line 1				
Amps:				28
Volts:				205
Line 2				
Amps:				28
Volts:				205

Line 3	
Amps:	18
Volts:	210
Test conducted by::	jt
Comments:	oil full / 40 psi
Test under load for 1.5 hours annually. Date, if completed this month::	

Serial # Bull	ding	Location	Make & Model	Description
060988826 <mark>Main</mark> Build		So. Outside Neir Maint Shop Inside Blkwalk Enclousre	Cummins/Onan D 1202827	SGAE- Emergency Power Generator
Date:		¢ ·	9/	26/2017
Generator/fuel st	orage t	ank general condition:	Sa	atisfactory
(Fuel: supply, oil,	belts,	battery, starting, etc., and autom	atic transfer within 10	seconds for load operation)
Did generator tra	insfer w	rithin 10 seconds?:	Ye	es
** Was generator	r test u	nder load for 30 minutes?:	Ye	es
Start time: (Mete	r Read	ing):	8:	30 AM
Stop time: (Meter	r Readi	ng):	9:	00 AM
Was emergency	lighting	and electrical system checked	during load test?: Ye	es
Line 1				
Amps:			40	08
Volts:			20	08
Line 2				
Amps:			40	08
Volts:			20	08
Line 3				
Amps:			39	96
√olts:			20	08
Test conducted b	y::		bri	ian jacobs
Comments:				full / 52 psi polant full / 187 degrees
Test under load f	or 1.5-t	nours annually. Date, if complete	d this month::	

CLARDY OIL

FUELS LUBES P.O. Box 849 Ocala, Florida 34478 Ph. (352) 622-7161

August 25, 2017

Marsha Lay Environmental Services Director Ocala Health and Rehabilitation Center 1201 SE 24th Rd Ocala, FL 34471

Re: Emergency Generator Fuel Supply

Dear Ms. Lay:

Clardy Oil Company is pleased to provide delivery services of bulk #2 Diesel Fuel for your emergency generators. Be advised that in times of potential electrical power disruptions, such as impending strikes by hurricanes, Clardy Oil Company prepares to provide emergency delivery services by maximizing storage of products, and requesting our drivers to remain on standby. Further, we have emergency generator capability at our bulk fuel facility. We remain committed to meet emergency generator fuel requirements of our customers, subject to safety considerations and supply availability.

Whenever you go to full time use of your emergency generators, you should assess your fuel status, determine your fuel consumption rate, and estimate the approximate fueling point needed in the future. Your proper assessment and communication with us, is essential for us to provide timely refueling service. We can be reached on a 24 hour basis by using the emergency option upon calling our main phone number listed above. We will contact you for follow up and action.

Be assured that Clardy Oil Company remains committed to meeting your emergency generator fuel requirements. However, our ability to meet your needs depends upon the availability of fuel from our suppliers.

Sincerely,

Clardy Olf Company

∄ohn S. Clárdy, Jr.

President :

Via Fax: 352-732-8137



Serving Tampa Bay & Florida 34 Years and Still Growing!!

October 19, 2017

Barry Sawyer NHS Management 931 Fairfax Park Tuscaloosa, Alabama 35406

RE: EMERGENCY MANAGEMENT PLAN - HVAC COOLING CAPACITY

LOCATION: OCALA HEALTH & REHAB CENTER
1201 SE 24th RD, OCALA, FL 34471

CGM's Mechanical Engineer who is familiar with these facilities has reviewed cooling capacity requirements for emergency management plan at the aforementioned location. Please see our findings below demonstrating that the existing cooling units connected to emergency power adequately satisfies the requirements set forth by National and State Refuge Area Standards.

Please see below for refuge area calculations and corresponding BTU load requirement.

- Square Footage calculation of Refuge Area:
 - o 1,494 SF = Therapy Room (x2)
 - o 1,170 SF = Dining Room
 - o 1,220 SF = Day Rooms (x3)
 - \circ 2.160 = Resident Rooms (x12)
 - o 436 = Beauty Shop & Lounge
 - \circ 7.760 SF = Corridor
 - o 14,240 SF = Total Refuge Area → 35-Tons of Cooling req'd @ 400 SF/Ton
- BTU Load of Resident & Staff personnel in Refuge Area per ASHRAE Table 1:
 - o For 180 Residents & 65 Staff and per ASHRAE:
 - 63,000 Resident BTU @ 350 BTU per sedentary person per ASHRAE
 Table 1
 - 35.750 Staff BTU @ 550 BTU per active staff member per ASHRAE
 - 98,750 = Total BTU Requirement → 8-Tons of Cooling rea'd
- Total Supplied Cooling by existing equipment connected to emergency power for Respective Areas:
 - \circ 48,000 BTU = Therapy Room (x2)
 - o 60,000 BTU = Dining Room
 - o 72,000 BTU = Day Rooms (x3)
 - o 180,000 BTU = Resident Rooms (x12)
 - 24,000 BTU = Beauty Shop & Lounge

AIR CONDITIONING AND HEATING 1015 E. M. L. King Blvd., Tampa FL 33603 (813) 247-2665

- o 180,000 BTU = Corridor
- o 528,000 BTU = Total BTU → 44-Tons of Cooling existing
- 43-Tons Req'd < 44-Tons Existing OK

Thank you for trusting CGM Services, Inc. with your HVAC needs.

Sincerely,

Michael A Budin, PE Commercial Sales & Design 813-817-0536 mobile 813-247-2665 office mbudin@cgmservices.com ANTHONY

No. 72969

No. 72969

STATE OF

FLORIDA

OFFICIAL STATE

STATE OF STATE

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P.O. Box 1300 Deland, Fl. 32721 (386) 734-7356 FAX: 734-4281 FICE-STAFFORDUSA NET

FLORIDA ELECTRIC WORKS ~ STAFFORD TECHNOLOGY GROUP

NORTHPORT HEALTH SERVICES OF FLORIDA, LLC d/b/a Ocala Health and Rehabilitation Center OCALA, FL

FACILITY HVAC ELECTRICAL BACKUP REPORT

PREPARED 17 OCTOBER 2017

EXECUTIVE SUMMARY: This report has been prepared by Leslie S "Les" Coggins, P.E., to review the facility and verify the existing electrical backup system capability at the Ocala Health and Rehabilitation Center specifically related to the refuge areas specified by the facility management. Mr. Coggins has provided electrical engineering services at this facility over many years and is extensively familiar with its design and operation.

REFUGE AREAS WITH HVAC ON AUTOMATIC GENERATOR BACKUP:

- 1. Therapy Rooms (2 ea)
- 2. Dining Room
- 3. Day Rooms (3 ca)
- 4. Resident Rooms (12 ea)
- 5. Corridors
- 6. Beauty Shop / Lounge

The HVAC units serving the areas specified above are connected to the automatic generator backup system supporting this facility.

Leslie S "Les" Coggins/PVE.
State of Florida PE13278 / 70 CT ZO1



P.O. Box 1300 AND, FL 32721 (386) 734-7356 FAX: 734-4281

FLORIDA ELECTRIC WORKS ~ STAFFORD TECHNOLOGY GROUP

NORTHPORT HEALTH SERVICES OF FLORIDA, LLC d/b/a Ocala Health and Rehabilitation Center OCALA, FL

FACILITY ELECTRICAL BACKUP REPORT

PREPARED 10 OCTOBER 2017

EXECUTIVE SUMMARY: This report has been prepared by Leslie S "Les" Coggins, P.E., to review the facility and provide an overview of the existing electrical backup system capability at the Ocala Health and Rehabilitation Center. Mr. Coggins has provided electrical engineering services at this facility over many years and is extensively familiar with its design and operation. The emergency backup system is capable of automatically providing electrical power to a considerable amount of the vital infrastructure equipment (i.e. major HVAC equipment) to keep residents and staff safe and comfortable during extended power outages (i.e. up to 96 hours).

SYSTEM ELECTRICAL LOAD: Based on several past years of billing documentation from the utility company this facility experienced a peak summer electrical load of 281KVA in July 2017. It experienced a peak winter load of 341KVA in February 2017. Using a 25% power factor I would assume a 273KW peak load. Based on a 341KVA peak load the peak amperage would be about 944 Amps.

ELECTRICAL BACKUP SYSTEM: The electrical backup system primary components are a 200KW Onan Model 200.0DGFC generator and a 1600Amp ATS (transfer switch) interconnected with the main service. Automatic load management maintains the electrical load to a level within the generator load rating.

BACKUP CONNECTED LOAD: The electrical backup system is connected to most of the facility, which includes major HVAC units. Therefore, all HVAC capability in the common / refuge areas of the halls, nurse stations and other areas is available to work normally.

BACKUP ELECTRICAL SYSTEM OPERATING TIME CONSTRAINTS: The 200KW generator is provided with fuel by a 1700 gallon tank. According to the Onan specifications this system can operate fully loaded from a full tank for 118.05 hours.

SYSTEM PHYSICAL PROTECTION: The fully-enclosed generator is mounted on the fuel tank and installed in a hurricane-rated concrete block compound. It is therefore protected from wind-born debris and wind-driven rain to a considerable extent.

EXPERIENCE: Numerous outages have been experienced at this facility in the years since the generator was installed. It has performed as designed and expected each time.

eslie S "Les" Coggins, P.E.

State of Florida PE13278



OCALA FIRE

RESCUE

Braid K. Clark, Fire Chief.

"Dedicated to Serving The Citizens of Ocala Since 1885"

Date:

October 19, 2017

Facility:

Ocala Health & Rehab

Ph: (352) 732-2449

Attention:

Tyler Price

Reference:

Emergency Generator Fuel Storage

To whom it may concern,

After review of the fuel storage location for the emergency generator at Ocala Health & Rehab Center, I have found the location to be acceptable to the 5th edition of the Florida Fire Prevention Code. Please let me know if you have any questions or concerns.

Respectfully,

Capt. Brian Cribbs Ocala Fire Rescue



P.O. Box 1300 AND, FL 32721 (386) 734-7356 FAX: 734-4281 OFFICE@STAFFORDUSA.NET

FLORIDA ELECTRIC WORKS ~ STAFFORD TECHNOLOGY GROUP

NORTHPORT HEALTH SERVICES OF FLORIDA, LLC d/b/a Ocala Health and Rehabilitation Center OCALA, FL

FACILITY POWER SOURCE PLAN REPORT

PREPARED 18 OCTOBER 2017

EXECUTIVE SUMMARY: This report has been prepared by Leslie S "Les" Coggins, P.E., to inspect the facility and verify the existing electrical backup system configuration. Mr. Coggins has provided electrical engineering services at this facility over many years and is extensively familiar with its design and operation. The existing system is code-compliant and eliminates the backfeeding of power to the utility line side. There is no danger to residents, employees, or utility company personnel when the system is operated as designed and intended.

FACILITY AUTOMATIC POWER BACKUP SYSTEM: This system uses UL-Approved Automatic Transfer Switches to safely switch between NORMAL (utility) power and EMERGENCY (generator) power. There is no connection possible between the power supplied by the generator and the utility company incoming service.

Leslic S "Les" Coggins, Phy.
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