os	Dod	State of California – Health and Human Services Agency						
Offi	ce of Statewide Health F	Planning and Development						
Facil 400 R	ities Development Division Street. Suite 200, Sacramento, California	www.oshpd.ca.gov/fdd 95811-6213 Phone (916) 440-8300 Fax (916) 654-2973						
		TION FOR PREAPPROVAL RTIFICATION OF EQUIPMENT AND COMPONENTS						
	For Office Use Only							
	APPLICATION NO. OSP – 0097 – 10	Check whether application is: NEW X RENEWAL						
	007 - 0037 - 10							
1.0	Siemens Industry, Inc.	Mr. Scott E. May						
	Manufacturer	Manufacturer's Technical Representative						
	1320 C	ld Georgia Road, Roebuck, SC 23376						
		Mailing Address						
	204 505 4724	Soott May@ciamons.com						
	864-595-4721 Telephone	<u>Scott.May@siemens.com</u> <i>E-mail Address</i>						
	Dry Type Transform	ers Transformers						
2.0	Product Name	Product Type						
		Various, See Attached Tables						
	Product model No (Li	st all unique product identification numbers and/or serial numbers)						
	General Description: Dry type transf construction materials, enclosure typ more details. Products supplied und	ormer family. Includes a range of kVA ratings, mounting types, bes and potted or ventilated construction. See Attached tables for er OSP-0109-10.						
	Tobolski Watkins Engineerin	g, Inc. Dr. Matthew J. Tobolski, Ph.D., P.E.						
3.0	Applicant Company Name	Contact Person						
		3710 Ruffin Road, San Diego, CA 92123						
		Mailing Address						
	858-381-5843	mtobolski@tobolskiwatkins.com						
	Telephone	E-mail Address						
	eby agree to reimburse the Offi s incurred by the department fo	ce of Statewide Health Planning and Development for the actual review.						
	mill							
	Signiture of Applicant							
	Signature of Applicant							
	President and CEO	Tobolski Watkins Engineering, Inc						
	Title	Company Name						

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	s	/pd	"Equitable Healthcare Accessibility for Cal						
0	fice	of Statewide Health Planning of							
	Regi	stered Design Professional Preparing the Re	eport						
.0									
15	Tobolski Watkins Engineering, Inc.								
		Comp Dr. Matthew J Tobolski, Ph.D., P.E.	pany Name C72806						
14		Contact Name	California License Number						
			San Diego, CA 92123						
			ng Address						
		858-381-5843 Telephone	<u>mtobolski@tobolskiwatkins.com</u> E-mail Address						
	Calif	ornia Licensed Structural Engineer Review a	and Acceptance of the Report						
5.0									
B		Tobolski Watkins Engineering, Inc. Company Name							
		Derrick Watkins, S.E.	S5257						
		Contact Name	California License Number						
			, San Diego, CA 92123						
			ng Address						
		858-381-5843	dwatkins@tobolskiwatkins.com						
	Anol	Telephone	E-mail Address						
. 0	Anci	iorage Fre-Approvar							
		Anchorage is pre-approved under OPA-							
		(Separate application for anchorage pre-appr	oval is required)						
		2. Construction of the second state of the second state of the second state of the state of the state of the second state o							
	5 7								
	\boxtimes	Anchorage is not Pre-approved							
0		ification Method	100 FS 40 456						
0.		ification Method	ICC-ES AC-156						
70.		ification Method	ICC-ES AC-156						
70.		<i>fication Method</i> <i>Testing in accordance with:</i>	ICC-ES AC-156						
70.		<i>fication Method Testing in accordance with:</i>	ICC-ES AC-156						
0.		<i>fication Method Testing in accordance with: Analysis Experience data</i>							
' 0 .		<i>fication Method Testing in accordance with:</i>							
70.		<i>fication Method Testing in accordance with: Analysis Experience data</i>							
70.	Certi	<i>fication Method Testing in accordance with: Analysis Experience data</i>							
70.	Certi	<i>fication Method</i> Testing in accordance with:							
	Certi	ification Method Testing in accordance with: Analysis Experience data Combination of Testing, Analysis, and/or Exp ing Laboratory (if applicable)	erience Data (Please Specify):						
	Certi	ification Method Testing in accordance with: Image: Analysis Experience data Combination of Testing, Analysis, and/or Experience ing Laboratory (if applicable) Clark Dynamic Test Laboratory, Inc. Company Name	erience Data (Please Specify): J.R. Antenucci Contact Name						
	Certi	ification Method Testing in accordance with: Analysis Experience data Combination of Testing, Analysis, and/or Exp ing Laboratory (if applicable) Clark Dynamic Test Laboratory, Inc. Company Name 1801 Route 51 South, Build	erience Data (Please Specify): J.R. Antenucci						
	Certi	ification Method Testing in accordance with: Analysis Experience data Combination of Testing, Analysis, and/or Exp ing Laboratory (if applicable) Clark Dynamic Test Laboratory, Inc. Company Name 1801 Route 51 South, Build	ding 8, Jefferson Hills, PA 15025						
	Certi	ification Method Testing in accordance with: Analysis Experience data Combination of Testing, Analysis, and/or Exp ing Laboratory (if applicable) Clark Dynamic Test Laboratory, Inc. Company Name 1801 Route 51 South, Build	ding 8, Jefferson Hills, PA 15025						

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"Equitable Healthcare Accessibility for California" Office of Statewide Health Planning and Development Approval Parameters 9.0 Design in accordance with ASCE 7-05 Chapter 13: \mathbb{N} Yes No Design Basis of Equipment or Components $(F_p/W_p) = 0.72 S_{DS}$ S_{DS} (Spectral response acceleration at short period) = 2.0g or 1.6g as listed in Attachment Tables a_o (In-structure equipment or component amplification factor) =1.0 R_p (Equipment or component response modification factor) =2.5 $I_{\rm p}$ (Importance factor) = 1.5 z/h (Height factor ratio)=1.0 Equipment or Component fundamental period(s) =See OSP-0109-10 Building period limits (if any) = None Overall dimensions and weight (or range thereof) = See Attachment Tables Equipment or Components @ grade designed in accordance with ASCE 7-05 Chapter 15: 🗌 Yes 🔀 No Design Basis of Equipment or Components (V/W) = S_{DS} (Spectral response acceleration at short period) = S1 (Spectral response acceleration at 1 second period) = R (Response modification coefficient)=1.0 Ω_0 (System overstrength factor) =1.0 C_d (Deflection amplification factor) = 1.0 In (Importance factor) =1.5 Height to Center of Gravity above base = Equipment or Component fundamental period(s) = Sec Overall dimensions and weight (or range thereof) = No Yes Tank(s) designed in accordance with ASME BPVC, 2007: 10.0 List of attachments supporting the special seismic certification of equipment or components: Manufacturer's Catalog Drawings Test Report Others (Please Specify): Calculations 11.0 OSHPD Approval (For Office Use Only) 2/8/2011 December 31, 2016 Approval Expiration Date Signature & Date $S_{DS}(g) =$ See Section 9.0 z/h = 1.0 Chris Tokas, SHFR Special Seismic Certification Valid Up to Name & Title

Condition of Approval (if any):

						Table 1	
Manufacturer: Sie	emens Industry, In Type Transforme ruction Summary:	ers				Table 1 Certification uct Matrix TWEL Project No.: 2010-0119	-CO-001
Certified Options Summ Copper or aluminum wi	ndings						
Certified Mounting Sun Wall mounting only. Building Code: IBC 200		<i>S</i> _{DS} = 2.0g		Z,	/h = 1.0	<i>I_p</i> = 1.5	
Model Line	Model	Second	imension (i Width		Weight (lb)	Notes	UUT
	1.5 kVA	5.3	6.7	12.5	32		
	2 kVA	5.3	6.7	12.5	40	Original OSP Reference OSP-0109-10 Group 1 and 2	
	3 kVA	7.2	7.6	14.6	68		
	5 kVA	7.2	7.6	14.6	104		-
Group A	7.5 kVA	8.6	10.6	16.1	126		
	10 kVA	8.6	10.6	16.1	185		
	15 kVA		13.7	21.1	245		
	25 kVA	10.1	13.7	21.1	385		
				1			
					1		
							-

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						Table 2	
	TT		•				
			Spe	cial Se	eismic	Certification	
SELECT A	VV		Ce	ertifie	d Prod	uct Matrix	
TOBOLSKI V	NGINEERING					TWEI Project No.: 2010-0119	-CO-001
Manufacturer: Sier	mens Industry, In	IC.					
Model Line: Dry	Type Transform	ers					
Certified Product Constru		-					
NEMA 3R Enclosure. Enca	apsulated core. The	ree Phase.					
Certified Options Summa							
Copper or aluminum win	dings						
Certified Mounting Sum	nary:						
Floor mounting only.							
Building Code: IBC 2009	/CBC 2010	<i>S_{DS}</i> = 2.0g		z,	/h = 1.0	<i>I_p</i> = 1.5	
Model Line	Model		imension (i	1	Weight	Notes	UUT
Woder Eine		Depth	Width	Height	(lb)	2- William	
Crown P	30 45	12.8	25.3 25.3	37.0 37.0	1,062 1,182	Original OSP Reference OSP-0109-10	
Group B	75	12.8	25.3	37.0	1,320	Group 3	

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Table 3

TWEI Project No.: 2010-0119-CO-001

Special Seismic Certification Certified Product Matrix

Manufacturer: Siemens Industry, Inc.

Model Line: Dry Type Transformers

Certified Product Construction Summary:

NEMA 1 or 3R Enclosure. Ventilated. Single or Three Phase.

Certified Options Summary:

Copper or aluminum windings

Certified Mounting Summary:

Floor mounting only.

Building Code: IBC 2009/CBC 2010		S _{DS} = 1.6g		z/h = 1.0		$I_p = 1.5$	
Model Line	Model	Dimension (in)		in)	Weight	Notes	UUT
Woder Line	woder	Depth	Width	Height	(lb)	Notes	001
	1 kVA	12.0	13.0	18.0	59		
	2 kVA	12.0	13.0	18.0	78		
	3 kVA	12.0	13.0	18.0	101		
	5 kVA	12.0	13.0	18.0	104	Original OSP Reference OSP-0109-10 Group 4 and 5	
	6 kVA	12.0	13.0	18.0	144		
	7.5 kVA	14.0	15.0	24.0	155		
	9 kVA	14.0	17.0	21.0	199		
	10 kVA	14.0	15.0	24.0	188		
	12 kVA	14.0	17.0	21.0	243		
	15 kVA	16.0	19.0	27.0	250		
	25 kVA	17.0	17.0	29.0	298		
	30 kVA	17.0	22.0	25.0	350		
Group C	37.5 kVA	20.0	18.0	31.0	451		
	45 kVA	18.5	25.0	28.0	500		
	50 kVA	22.0	20.0	32.0	538		
	75 kVA	22.0	25.0	34.0	740		
	100 kVA	22.0	24.0	36.0	844		
	112.5 kVA	23.0	29.0	38.0	930		
	150 kVA	26.0	33.0	42.0	1,210		
	167 kVA	35.0	30.0	46.0	1,148		
	225 kVA	30.0	35.0	46.0	1,500		
	300 kVA	30.0	35.0	52.0	2,125		
	500 kVA	33.0	48.0	60.0	3,090		
	750 kVA	39.0	56.0	66.0	4,800		
	1,000 kVA	44.0	64.0	71.0	5,500		

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