

PO Box 2551 2257 West Broadway South Portland, ME 04106

1.800.370.3473 fax 207.879.0540

www.norrisinc.com

April 15, 2013

Seabee Electric Matt Wood 84 Pleasant Hill Rd Scarborough, ME 04074

Subject: Berlin City

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Dept. of Building Inspections City of Portland Maine

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Dear Matt,

As requested, I am writing to confirm the fire alarm system add for the above mentioned subject, was inspected and tested and at the time of inspection the system was found to be operational and to the best of our knowledge, met or exceeded all of the requirements as established by the plans and specifications for the project and all applicable local codes including NFPA 72.

It was a pleasure working with you on this project. Should you have any questions or need additional information please do not hesitate to contact me.

Sincerely,

Craig E. Elkanich Service Manager

FIRE ALARM AND EMERGENCY COMMUNICATION SYSTEM RECORD OF COMPLETION

To be completed by the system installation contractor at the time of system acceptance and approval. It shall be permitted to modify this form as needed to provide a more complete and/or clear record.

Insert N/A in all unused lines.

Attach additional sheets, data, or calculations as necessary to provide a complete record.

1.	PROPERTY INFORMATION				
	Name of property: Berlin City Mot	tors			
	Address: 191 Riverside Street, Po	rtland, Me.			
	Description of property: Car Deale	ərship			
	Occupancy type: Commercial				
	Name of property representative:				
	Address:				
	Phone:	Fax:		E-mail:	
	Authority having jurisdiction over th	is property: Po	ortland Fire departme	ent	
	Phone: 207-874-8576	Fax:		E-mail:	
2.	INSTALLATION, SERVICE, AN			FORMATION	
	Installation contractor for this equipr	nent: Seabee El	lectric		
	Address:				
	License or certification number:				
	Phone:	Fax:		E-mail:	
	Service organization for this equipme	ent: Norris Inc.			
	Address: P.O. Box 2251,2257 We	st Broadway, South	h Portland, Me. 0410	06	
	License or certification number:	MC60018908			
	Phone: 1-800-370-3473	Fax: 207-87	79-0540	E-mail: service@norrisinc.com	
	A contract for test and inspection in	accordance with N	IFPA standards is in	effect as of: Unkown	
	Contracted testing company: Unk	nown			
	Address:				
	Phone:	Fax:		E-mail:	
	Contract expires:	Contract number:		Frequency of routine inspections:	
•	DESCRIPTION OF SYSTEM O	D SERVICE			
ა.		KOLKVIOL			
	☐ Fire alarm system (nonvoice)			(FV/100)	
	☐ Fire alarm with in-building fire en	nergency voice ala	arm communication	system (EVACS)	
	☐ Mass notification system (MNS)		.		
	Combination system, with the fol			wilding amougancy communication system	
	Fire alarm EVACS	☐ MNS	∐ I wo-way, in-b	uilding, emergency communication system	
	Other (specify):			(4.72) up tô thị kh thịp thịc vị	

3. DESCRIPTION OF SYSTEM OR SERVICE (continued)

NFPA 72 edition: 2010	Additional description of system(s):
3.1 Control Unit Manufacturer: Notifier		Model number: AFP200
3.2 Mass Notification System	⊠ Th	is system does not incorporate an MNS
3.2.1 System Type:		
☐ In-building MNS—combination		
☐ In-building MNS—stand-alone	☐ Wide-area MNS ☐ Distributed recipies	nt MNS
Other (specify):		
3.2.2 System Features:		
☐ Combination fire alarm/MNS		de-area MNS to regional national reting interface
☐ Local operating console (LOC)	☐ Direct recipient MNS (DRMNS) ☐ Wi	de-area MNS to DRMNS interface
☐ Wide-area MNS to high-power spea	aker array (HPSA) interface 🔲 In-building MN	IS to wide-area MNS interface
Other (specify):		
3.3 System Documentation		
☑ An owner's manual, a copy of the n	nanufacturer's instructions, a written sequence of	f operation, and a copy of
the numbered record drawings are	stored on site. Location: Above Alarm Pa	nel
3.4 System Software	☐ This system does n	ot have alterable site-specific software
Operating system (executive) software	revision level: Verifier 200 v1_2	
Site-specific software revision date:	3-20-2013 Revision complet	ed by: Christopher Small
☐ A copy of the site-specific software	is stored on site. Location:	
3.5 Off-Premises Signal Transmission	on ☐ This system do	es not have off-premises transmission.
Name of organization receiving alarm	signals with phone numbers:	
Alarm: Protection One		Phone: 1-800-341-0107
Supervisory: Protection One		Phone: 1-800-341-0107
Trouble: Protection One		Phone: 1-800-341-0107
Entity to which alarms are retransmitted	ed: NA	Phone: NA
Method of retransmission: 411	digital Communicator	
If Chapter 26, specify the means of tra	nsmission from the protected premises to the su	pervising station:
If Chapter 27, specify the type of auxil	liary alarm system: 🔲 Local energy 🔲 Sho	unt Wired Wireless

4. CIRCUITS AND PATHWAYS

4.1 Signaling Line Pathways			
4.1.1 Pathways Class Designations and	Survivability		
Pathways class: B (See NFPA 72, Sections 12.3 and 12.4)	Survivability level: 0	Quantity:	1
4.1.2 Pathways Utilizing Two or More	Media		
Quantity: 0	Description: NA		
4.1.3 Device Power Pathways			
\boxtimes No separate power pathways from the	signaling line pathway		
☐ Power pathways are separate but of the	same pathway classification as the signaling lin	e pathway	
☐ Power pathways are separate and diffe	rent classification from the signaling line pathwa	ıy	
4.1.4 Isolation Modules			
Quantity: 0			
4.2 Alarm Initiating Device Pathways			
4.2.1 Pathways Class Designations and	Survivability		
Pathways class: (See NFPA 72, Sections 12.3 and 12.4)	Survivability level:	Quantity:	0
4.2.2 Pathways Utilizing Two or More	Media		
Quantity: 0	Description:		
4.2.3 Device Power Pathways			
☐ No separate power pathways from the	initiating device pathway		
☐ Power pathways are separate but of the	e same pathway classification as the initiating de	vice pathway	
☐ Power pathways are separate and diffe	rent classification from the initiating device path	iway	
4.3 Non-Voice Audible System Pathwa	ys		
4.3.1 Pathways Class Designations and	Survivability		
Pathways class: B (See NFPA 72, Sections 12.3 and 12.4)	Survivability level: 0	Quantity:	1
4.3.2 Pathways Utilizing Two or More	Media		
Quantity: 0	Description:		
4.3.3 Device Power Pathways			
No separate power pathways from the ■	notification appliance pathway		
	e same pathway classification as the notification		ıway
☐ Power pathways are separate and diffe	rent classification from the notification applianc	e pathway	

5. ALARM INITIATING DEVICES

5.1 Manual Initiating Devices							
5.1.1 Manual Fire Alarm Boxes			☐ Thi:	s systen	n does not have r	nanual fire alarn	n boxes.
Type and number of devices: Addressable:	3	Conv	entional:		Coded:	Transmitter	:
Other (specify):							
5.1.2 Other Alarm Boxes				⊠ Thi	is system does no	ot have other ala	rm boxes.
Description:						m !!!	
Type and number of devices: Addressable:		Conv	entional:		Coded:	Transmitter	:
Other (specify):							
5.2 Automatic Initiating Devices							
5.2.1 Smoke Detectors				⊠ Th	is system does no	ot have smoke d	etectors.
Type and number of devices: Addressable:		Conv	entional:				
Other (specify):							
Type of coverage: ☐ Complete area ☐ Pa	rtial area	□И	onrequired pa	artial ar	ea		
Other (specify):					The let dente	- Acminotina	□ Deam
Type of smoke detector sensing technology:	☐ Ioniz	ation	∐ Photoele	ectric [_ Multicriteria	☐ Aspirating	☐ beam
Other (specify):				_	,	1 . 1 . 1	- - - - -
5.2.2 Duct Smoke Detectors			•	es not h	ave alarm-causii	ng duct smoke de	etectors.
Type and number of devices: Addressable:		Conv	entional:				
Other (specify):							
Type of coverage:		4!	□ Dhataal	aatria	☐ Aspirating	☐ Beam	
Type of smoke detector sensing technology:	☐ Ioniz	zation	Photoele		•	-	etectors
5.2.3 Radiant Energy (Flame) Detectors		0		is systei	m does not have	radiant energy d	etectors.
Type and number of devices: Addressable:		Conv	ventional:				
Other (specify):							
Type of coverage:				κ-	7 mt. i	es not have gos	detectors
5.2.4 Gas Detectors				12	g i nis system do	es not have gas	uctectors.
Type of detector(s):	0	. t <u>.</u> t .					
Number of devices: Addressable:	Conven	tionai:					
Type of coverage:				κ-	71 m) 1	hava basi	datastare
5.2.5 Heat Detectors			e t.	D	I his system ac	oes not have heat	detectors.
Type and number of devices: Addressable:	n at t		ventional:	d partia	larea □ Linea	ar 🗌 Spot	
Type of coverage.			Nonrequire	a partia Late-of-r		ompensated	
Type of heat detector sensing technology:	☐ Fixed	curbe	ature LIN		.50 🗀 !(110 0)	P	

5.	ALARM INITIATING DEVICES (continued)				
	5.2.6 Addressable Monitoring Modules Number of devices:		☑ This system	does not have m	onitoring modules.
	5.2.7 Waterflow Alarm Devices		This system does	not have water	flow alarm devices.
	Type and number of devices: Addressable:	Conventional:	Cod	ed:	Γransmitter:
	5.2.8 Alarm Verification		This system does	s not incorporate	alarm verification.
	Number of devices subject to alarm verification:		Alarm verificat	ion set for:	seconds
	5.2.9 Presignal			tem does not inc	orporate pre-signal.
	Number of devices subject to presignal:		·		
	Describe presignal functions:				
	5.2.10 Positive Alarm Sequence (PAS)			Γhis system does	s not incorporate PAS.
	Describe PAS:				
	5.2.11 Other Initiating Devices		☐ This system	does not have of	ther initiating devices.
	Describe:		_ ,		
	Describe.				
6.	SUPERVISORY SIGNAL-INITIATING DEVICE				
	6.1 Sprinkler System Supervisory Devices	🛚 Thi	is system does no		supervisory devices.
	Type and number of devices: Addressable:	Conventional:	Coo	led:	Transmitter:
	Other (specify):				
	6.2 Fire Pump Description and Supervisory Device	es	☑ This	system does no	t have a fire pump.
	Type fire pump: ☐ Electric pump ☐ Engine	;			
	Type and number of devices: Addressable:	Conventional:	Coo	ded:	Transmitter:
	Other (specify):				
	6.2.1 Fire Pump Functions Supervised				=
	☐ Power ☐ Running ☐ Phase reversal ☐ Selected	or switch not in	auto 🗌 Engine	or control panel	trouble Low fuel
	Other (specify):				
	6.3 Duct Smoke Detectors (DSDs)		stem does not ha	ve DSDs causin	g supervisory signals.
	Type and number of devices: Addressable:	Conventional	:		
	Other (specify):				
	Type of coverage:				
	Type of smoke detector sensing technology:				Beam
	6.4 Other Supervisory Devices		This system do	es not have other	supervisory devices.
	Describe:				

5.

7.	MONITORED SYSTEMS				
	7.1 Engine-Driven Generator				does not have a generator.
	7.1.1 Generator Functions Superc	vised Generator runnir	ng 🗌 Selector	switch not in auto	☐ Low fuel
	☐ Other (specify):				
	7.2 Special Hazard Suppression S	ystems	⊠ This sy	stem does not monito	or special hazard systems.
	Description of special hazard system	n(s):			
	7.3 Other Monitoring Systems			This system does no	t monitor other systems.
	Description of special hazard system	n(s):			
8.	ANNUNCIATORS			☐ This system doe	s not have annunciators.
	8.1 Location and Description of A	nnunciators			
	Location 1: Main Entrance Vestil	oule			
	Location 2:				
	Location 3:				
9.	ALARM NOTIFICATION APP	LIANCES			
	9.1 In-Building Fire Emergency \	Voice Alarm Communi	cation System		s not have an EVACS.
	Number of single voice alarm chann			ıltiple voice alarm ch	annels:
	Number of speakers:		Number of sp	eaker circuits:	
	Location of amplification and sound	d-processing equipment:			
	Location of paging microphone stat	cions:			•
	Location 1:				
	Location 2:				
	Location 3:				
	9.2 Nonvoice Notification Applia	nces	☐ This system do	es not have nonvoice	notification appliances.
	Horns: With v	visible: 5	Bells:	With vis	ible:
	Chimes: With v	risible:			
	Visible only: 2 Other	(describe):			
	9.3 Notification Appliance Power	Extender Panels	☐ Th	nis system does not ha	we power extender panels.
	Quantity: 2				
	Locations: Beside FACP in Election	rical room			

10	. MASS NOTIFICATION CONTROLS, APPLIANCES,	AND CIRCUITS	ve an MNS.
	10.1 MNS Local Operating Consoles		
	Location 1:		
	Location 2:		
	Location 3:		
	10.2 High-Power Speaker Arrays		
	Number of HPSA speaker initiation zones:		
	Location 1:		
	Location 2:		
	Location 3:		
	10.3 Mass Notification Devices		
	Combination fire alarm/MNS visible appliances:	MNS-only visible appliances:	
	Textual signs: Other (describe):		
	Supervision class:		
	10.3.1 Special Hazard Notification		
	$\hfill\square$ This system does not have special suppression predischarge	notification.	
	☐ MNS systems DO NOT override notification appliances req predischarge notification.	uired to provide special suppression	
11	. TWO-WAY EMERGENCY COMMUNICATION SYS	TEMS	
	11.1 Telephone System	☐ This system does not have a two-way telephore	ne system.
	Number of telephone jacks installed:	Number of warden stations installed:	
	Number of telephone handsets stored on site:		
	Type of telephone system installed: \square Electrically powered	☐ Sound powered	
	11.2 Two-Way Radio Communications Enhancement System	em	
	☐ This system does not have a two-way radio communications	s enhancement system.	
	Percentage of area covered by two-way radio service: Critical	areas: % General building areas:	%
	Amplification component locations:		
	Inbound signal strength: dBm O	utbound signal strength:	dBm
	Donor antenna isolation is: dB above	the signal booster gain	
	Radio frequencies covered:		
	Radio system monitor panel location:		

11. TWO-WAY EMERGENCY COMMUNICATION SYSTEMS (continued)

	11.3 Area of Refuge (Area of Rescue Assistance) E	mergency Communications Systems	
	☐ This system does not have an area of refuge (area of	of rescue assistance) emergency communic	cations system.
	Number of stations: Location of	f central control point:	
	Days and hours when central control point is attended		
	Location of alternate control point:		
	Days and hours when alternate control point is attended	ed:	
	11.4 Elevator Emergency Communications System	18	
	☐ This system does not have an elevator emergency of	communications system.	
	Number of elevators with stations:	Location of central control point:	
	Days and hours when central control point is attended	:	
	Location of alternate control point:		
	Days and hours when alternate control point is attended	ed:	
	11.5 Other Two-Way Communication Systems		
	Describe:		
12	. CONTROL FUNCTIONS		
	This system activates the following control fuctions:		
	☐ Hold-open door releasing devices ☐ Smoke m	nanagement HVAC shutdown	☐ F/S dampers
	☐ Door unlocking ☐ Elevator recall ☐ Fu	el source shutdown Extinguishing	agent release
	☐ Elevator shunt trip ☐ Mass notification system	m override of fire alarm notification applia	nces
	Other (specify):		
	12.1 Addressable Control Modules		not have control modules.
	Number of devices:		
	Other (specify):		
13	. SYSTEM POWER		
	13.1 Control Unit		
	13.1.1 Primary Power		
	Input voltage of control panel: 120VAC	Control panel amps:	
	Overcurrent protection: Type: Circuit breaker	Amps: 20	
	Location (of primary supply panel board): Electric	al Room Near FACP	
	Disconnecting means location: L1-37		
	13.1.2 Engine-Driven Generator	☑ This syst	em does not have a generator.
	Location of generator:		
	Location of fuel storage:	Type of fuel:	

13. SYSTEM POWER (continued)

13.1.3 Uninterruptible Pov	ver System		This system does not have a UPS.
Equipment powered by a UP	S system:		
Location of UPS system:			
Calculated capacity of UPS b	patteries to drive the sys	tem components connected to it:	
In standby mode (hours):		In alarm mode (minutes):	
13.1.4 Batteries			
Location:	Type:	Nominal voltage:	Amp/hour rating:
Calculated capacity of batter	ies to drive the system:		
In standby mode (hours):		In alarm mode (minutes):	
☐ Batteries are marked with	date of manufacture	☐ Battery calculations are attached	
13.2 In-Building Fire Emer	rgency Voice Alarm Co	ommunication System or Mass Notifi	cation System
☐ This system does not have	e an EVACS or MNS sy	rstem.	
13.2.1 Primary Power			
Input voltage of EVACS or N	MNS panel:	EVACS or MNS par	nel amps:
Overcurrent protection: T	ype:	Amps:	
Location (of primary supply	panel board):		
Disconnecting means locatio	n:		
13.2.2 Engine-Driven Gene	erator	☑ This	system does not have a generator.
Location of generator:			
Location of fuel storage:		Type of fuel:	
13.2.3 Uninterruptible Pow	ver System		This system does not have a UPS.
Equipment powered by a UP	S system:		
Location of UPS system:			
Calculated capacity of UPS b	oatteries to drive the syst	tem components connected to it:	
In standby mode (hours):		In alarm mode (minutes):	
13.2.4 Batteries			
Location:	Type:	Nominal voltage:	Amp/hour rating:
Calculated capacity of batter	ies to drive the system:		
In standby mode (hours):		In alarm mode (minutes):	
☐ Batteries are marked with	date of manufacture	☐ Battery calculations are attached	

13. SYSTEM POWER (continued)	
13.3 Notification Appliance Power Extender Panels	☐ This system does not have power extender panels.
13.3.1 Primary Power	
Input voltage of power extender panel(s): 120VAC	Power extender panel amps: 8
Overcurrent protection: Type: Circuit Breaker	Amps: 20
Location (of primary supply panel board): In Electrical Room N	lear FACP
Disconnecting means location: L1-37	
13.3.2 Engine-Driven Generator	☑ This system does not have a generator.
Location of generator:	
Location of fuel storage:	Type of fuel:
13.3.3 Uninterruptible Power System	☑ This system does not have a UPS.
Equipment powered by a UPS system:	
Location of UPS system:	
Calculated capacity of UPS batteries to drive the system component	nts connected to it:
In standby mode (hours):	alarm mode (minutes):
13.3.4 Batteries	
Location: in FCPS Type: Lead Acid No	ominal voltage: 12VDC Amp/hour rating: 7
Calculated capacity of batteries to drive the system:	
In standby mode (hours):	alarm mode (minutes):
☐ Batteries are marked with date of manufacture ☐ Battery	calculations are attached
14. RECORD OF SYSTEM INSTALLATION	
Fill out after all installation is complete and wiring has been check branching, but before confucting operational acceptance tests.	ked for opens, shorts, ground faults, and improper
This is a: New system Modification to an existing sys	stem Permit number:
The system has been installed in accordance with the following re	equirements: (Note any or all that apply.)
☑ <i>NFPA 72</i> , Edition: 2010	
☑ NFPA 70, National Electrical Code, Article 760, Edition:	
Manufacturer's published instructions	
Other (specify):	
System deviations from referenced NFPA standards:	
Signed: Printed name:	Date:
Organization: Seabee Electric Title:	Phone:

16. CERTIFICATIONS AND APPROVALS (continued)

16.4 Property or Owner Representative:

This system, as specified herein, will be monitored according to all NFPA standards cited herein.

Signed: Printed name: Date:
Organization: Title: Phone:

16.5 Authority Having Jurisdiction:

I have witnessed a satisfactory acceptance test of this system and find it to be installed and operating properly in accordance with its approved plans and specifications, with its approved sequence of operations, and with all NFPA standards cited herein.

Signed: Printed name: Date:
Organization: Title: Phone:

JP Schwartz

From:

John Nolan [jnolan@titanmech.com]

Sent:

Friday, April 19, 2013 10:49 AM

To:

JP Schwartz

Cc:

'Bob Letellier'

Subject:

Berlin City TSL Exhaust Letter

Attachments: 2009 IMC Repair Garage.pdf; im4512_20130419_111312.pdf

JP,

Attached is our letter confirming that the exhaust system installed on the TSL project meets the 2009 International Mechanical Code that was in force in the City of Portland during the time of initial project permitting. Additionally, I have included a scan of the page from the code booklet.

Please review and feel free to call with any questions.

Thanks,

John

<<...>>

John Nolan, P.E.

Titan Mechanical, Inc

232 Riverside Industrial Parkway

Portland, Maine 04103

207 878-5223 p

207 878-5235 f

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Dept. of Building Inspections City of Portland Maine



Titan Mechanical, Inc.

Design Build Engineering · Mechanical Contracting · Service

Sept of Building Inspections

232 Riverside Industrial Parkway · Portland, ME 04103 · Ph 207.878.5223 · Fax 207.878.5235 P.O. Box 103 · Newport, ME 04953 · Ph 207.368.2503 · Fax 207.368.2395

April 19, 2013

Allied / Cook Construction P.O. Box 1396 Portland, Maine 04104 Attn: JP Schwartz

Re: Berlin City Toyota Scion Lexus

Dear JP,

I am writing this letter to confirm that the minimum exhaust flow rate required for repair garages was met and installed per the 2009 International Mechanical Code that was in force during the time this project was in the permitting phase with the City of Portland

The requirement per this code is 0.75 cfm/ft^2 . As calculated, the occupiable floor area of this repair garage is approximately 235' x 45' = 10,575 ft². At the code rating of $0.75 \text{ cfm/ft}^2 = 7,930 \text{ cfm}$ required. The designed and installed exhaust fan is 8,850 cfm @ 0.3" static.

Below is an excerpt from the code book. I have also scanned copy of the full code book page under separate cover.

TABLE 403.3—continued MINIMUM VENTILATION RATES

OCCUPANCY CLASSIFICATION	PEOPLE OUTDOOR AIRFLOW RATE IN BREATHING ZONE CFM/PERSON	AREA OUTDOOR AIRFLOW RATE IN BREATHING ZONE R _s CFM/FT ^{2 a}	DEFAULT OCCUPANT DENSITY #/1000 FT ^{2 a}	EXHAUST AIRFLOW RATE CPM/FT ^{2a}
Storage Repair garages, enclosed parking garages ^{h,d} Warehouses		0.06		0.75

Please feel free to contact me with any questions or concerns.

Sincerely,

John P. Nolan, P.E.

Joh Pa

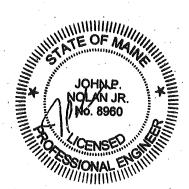


TABLE 403.3—continued MINIMUM VENTILATION RATES

OCCUPANCY CLASSIFICATION	PEOPLE OUTDOOR AIRFLOW RATE IN BREATHING ZONE CFM/PERSON	AREA OUTDOOR AIRFLOW RATE IN BREATHING ZONE R _a CFM/FT ^{2 a}	DEFAULT OCCUPANT DENSITY #/1000 FT ^{2 a}	EXHAUST AIRFLOW RATE CFM/FT ^{2 a}
Storage				, /-
Repair garages, enclosed parking garages ^{b,d} Warehouses		0.06		0.75
Theaters				
Auditoriums (see education)	Reported.		*********	
Lobbies	5	0.06	150	-
Stages, studios	10	0.06	70	<u></u>
Ticket booths	~ 5	0.06	60	- Angelesian
Transportation				
Platforms	7.5	0.06	100	
Transportation waiting	7.5	0.06	100	· POMINGS
Workrooms			`	3,000
Bank vaults/safe deposit	5	0.06	5	
Darkrooms				1.0
Copy, printing rooms	5	0.06	4 ′	0.5
Meat processing ^c	15		10	,
Pharmacy (prep. area)	5	0.18	10	<u></u>
Photo studios	5	0.12	10	
Computer (without printing)	5	0.06	4	

For SI: 1 cubic foot per minute = $0.0004719 \, \text{m}^3/\text{s}$, 1 ton = $908 \, \text{kg}$, 1 cubic foot per minute per square foot = $0.00508 \, \text{m}^3/(\text{s} \cdot \text{m}^2)$, C = [(F) -32]/1.8, 1 square foot = $0.0929 \, \text{m}^2$.

- a. Based upon net occupiable floor area.
- b. Mechanical exhaust required and the recirculation of air from such spaces is prohibited (see Section 403.2.1, Item 3).
- c. Spaces unheated or maintained below 50°F are not covered by these requirements unless the occupancy is continuous.
- d. Ventilation systems in enclosed parking garages shall comply with Section 404.
- e. Rates are per water closet or urinal. The higher rate shall be provided where periods of heavy use are expected to occur, such as toilets in theaters, schools and sports facilities. The lower rate shall be permitted where periods of heavy use are not expected.
- f. Rates are per room unless otherwise indicated. The higher rate shall be provided where the exhaust system is designed to operate intermittently. The lower rate shall be permitted where the exhaust system is designed to operate continuously during normal hours of use.
- g. Mechanical exhaust is required and recirculation is prohibited except that recirculation shall be permitted where the resulting supply airstream consists of not more than 10 percent air recirculated from these spaces (see Section 403.2.1, Items 2 and 4).
- h. For nail salons, the required exhaust shall include ventilation tables or other systems that capture the contaminants and odors at their source and are capable of exhausting a minimum of 50 cfm per station.

