



NC DEPARTMENT OF HEALTH AND HUMAN SERVICES

ROY COOPER • Governor
MANDY COHEN, MD, MPH • Secretary
MARK PAYNE • Director, Division of Health Service Regulation

VIA EMAIL ONLY

December 31, 2020

Ms. Brighid Huber
Brighid.Huber@atriumhealth.org

Exempt from Review – Replacement Equipment

Record #: 3455
Date of Request: December 15, 2020
Facility Name: Carolinas HealthCare System Imaging-Kannapolis
FID #: 061206
Business Name: Union Medical Services, LLC
Business #: 1915
Project Description: Replace existing CT scanner
County: Cabarrus

Dear Ms. Huber:

The Healthcare Planning and Certificate of Need Section, Division of Health Service Regulation (Agency), determined that the above referenced project is exempt from certificate of need review in accordance with G.S. 131E-184(a)(7). Therefore, you may proceed to acquire without a certificate of need the GE Revolution Apex CT scanner to replace the existing GE Optima 540 CT scanner. This determination is based on your representations that the existing unit will be removed from North Carolina and will not be used again in the State without first obtaining a certificate of need if one is required.

It should be noted that the Agency's position is based solely on the facts represented by you and that any change in facts as represented would require further consideration by this office and a separate determination. If you have any questions concerning this matter, please feel free to contact this office.

Sincerely,

[Handwritten signature of Misty L. Piekaar-McWilliams]

Misty L. Piekaar-McWilliams
Project Analyst

[Handwritten signature of Lisa Pittman]

Lisa Pittman
Assistant Chief, Certificate of Need

cc: Radiation Protection Section, DHSR
Construction Section, DHSR

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES • DIVISION OF HEALTH SERVICE REGULATION
HEALTHCARE PLANNING AND CERTIFICATE OF NEED SECTION

LOCATION: 809 Ruggles Drive, Edgerton Building, Raleigh, NC 27603
MAILING ADDRESS: 809 Ruggles Drive, 2704 Mail Service Center, Raleigh, NC 27699-2704
https://info.ncdhhs.gov/dhsr/ • TEL: 919-855-3873

December 14, 2020

Ms. Martha Frisone, Chief  
Healthcare Planning and Certificate of Need Section  
Division of Health Service Regulation  
809 Ruggles Drive  
Raleigh, NC 27603

RE: Exemption Request for Union Medical Services, LLC d/b/a Carolinas HealthCare System Imaging – Kannapolis to Replace its Existing CT Scanner

Dear Ms. Frisone:

Union Medical Services, LLC d/b/a Carolinas HealthCare System Imaging – Kannapolis (“CHSI-Kannapolis”) is planning to replace its existing CT scanner with new, technologically comparable equipment. CHSI-Kannapolis intends to purchase a GE Revolution Apex CT scanner (“Replacement Equipment”) to replace the GE Optima 540 CT Scanner (“Existing Equipment”) that is currently located in room 1033 at CHSI-Kannapolis. The Existing Equipment, which was acquired in 2013, is nearing the end of its useful life and is at increased risk for service interruptions due to downtime.

The Replacement Equipment will be housed in room 1033 at CHSI-Kannapolis. While the Replacement Equipment possesses some expanded capabilities due to technological improvements, it will be used to perform the same types of procedures as the Existing Equipment and will not be used to provide a new health service. A chart comparing the Existing Equipment and the Replacement Equipment is included in Attachment A along with supporting documentation. The Existing Equipment is currently in use and documentation provided in Attachment B indicates that 2,401 scans were performed from November 2019 to October 2020.

The purchase price of the Replacement CT Scanner is \$1,290,000 (\$1,200,000 CT Scanner + \$90,000 tax). The projected total capital cost of the project is \$1,691,000 and includes the cost to acquire, install, and make operational the Replacement Equipment. The projected total capital cost of the project also includes minor aesthetic renovations to the space that will house the CT scanner. Attachment C provides the quote for the Replacement Equipment. Please see Attachment D for a letter documenting that the Existing Equipment will be taken out of service and removed from North Carolina. The total capital cost worksheet is provided in Attachment E.

The North Carolina Certificate of Need statutes provide a definition of replacement equipment in N.C.G.S. 131E-176(22a). The definition requires the replacement equipment be comparable to the existing medical equipment and cost less than \$2,000,000 when installed. The statutes further

provide in 131E-184(a)(7) an exemption from Certificate of Need review for replacement equipment projects if prior notice is provided to the CON Section.

Based on the above facts, the proposed project is exempt from CON review and this letter serves as prior notification of our intent to proceed with this project. We would appreciate your written concurrence that this project is exempt from CON review. If you have any questions or require further information regarding this project, please contact me at 980-622-7049.

Sincerely,

A handwritten signature in cursive script that reads "Elizabeth V. Kirkman".

Elizabeth Kirkman, Assistant Vice President  
Atrium Health Strategic Services Group

Attachments

# Attachment A

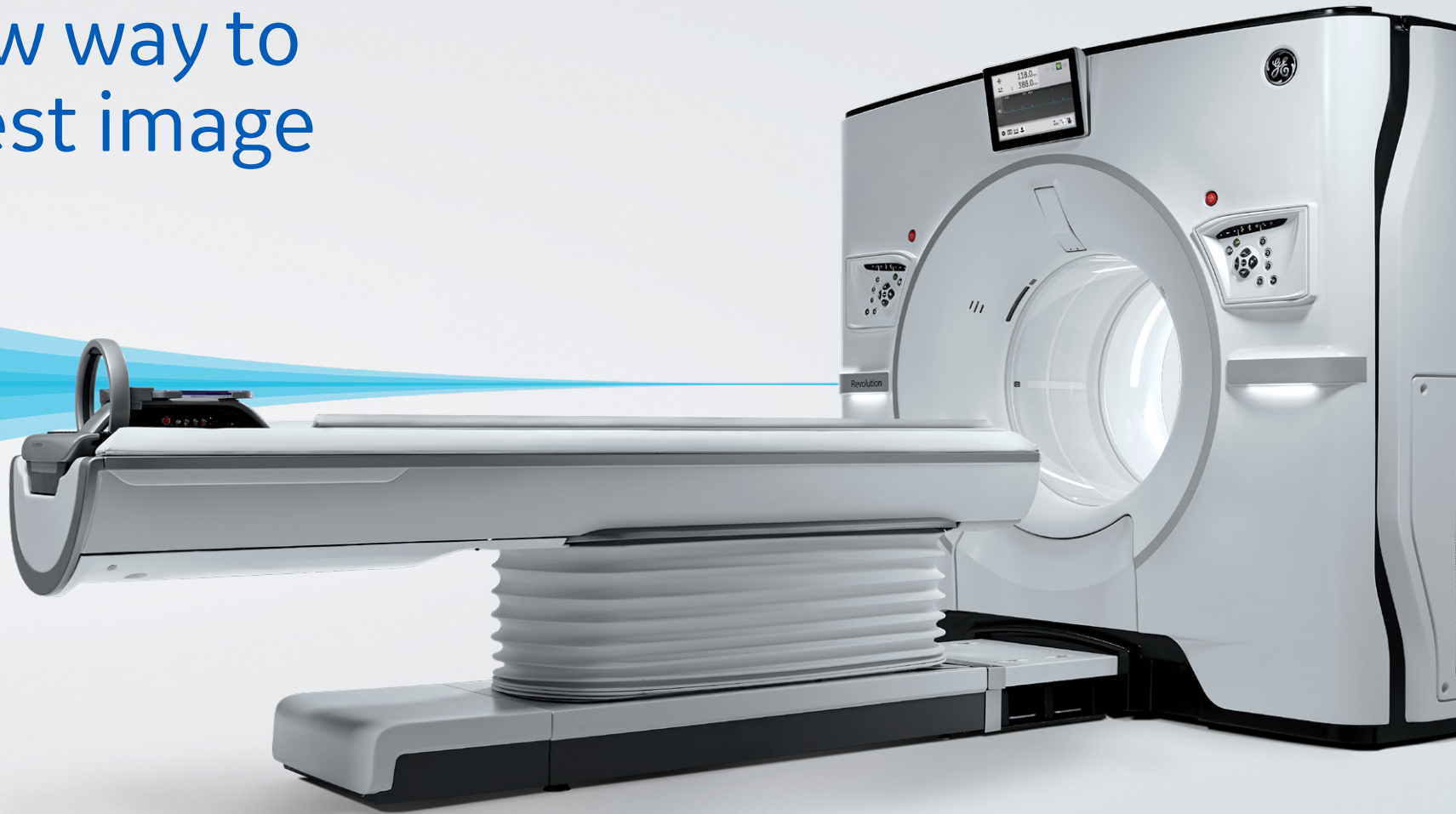
### EQUIPMENT COMPARISON – CHSI-Kannapolis CT Replacement

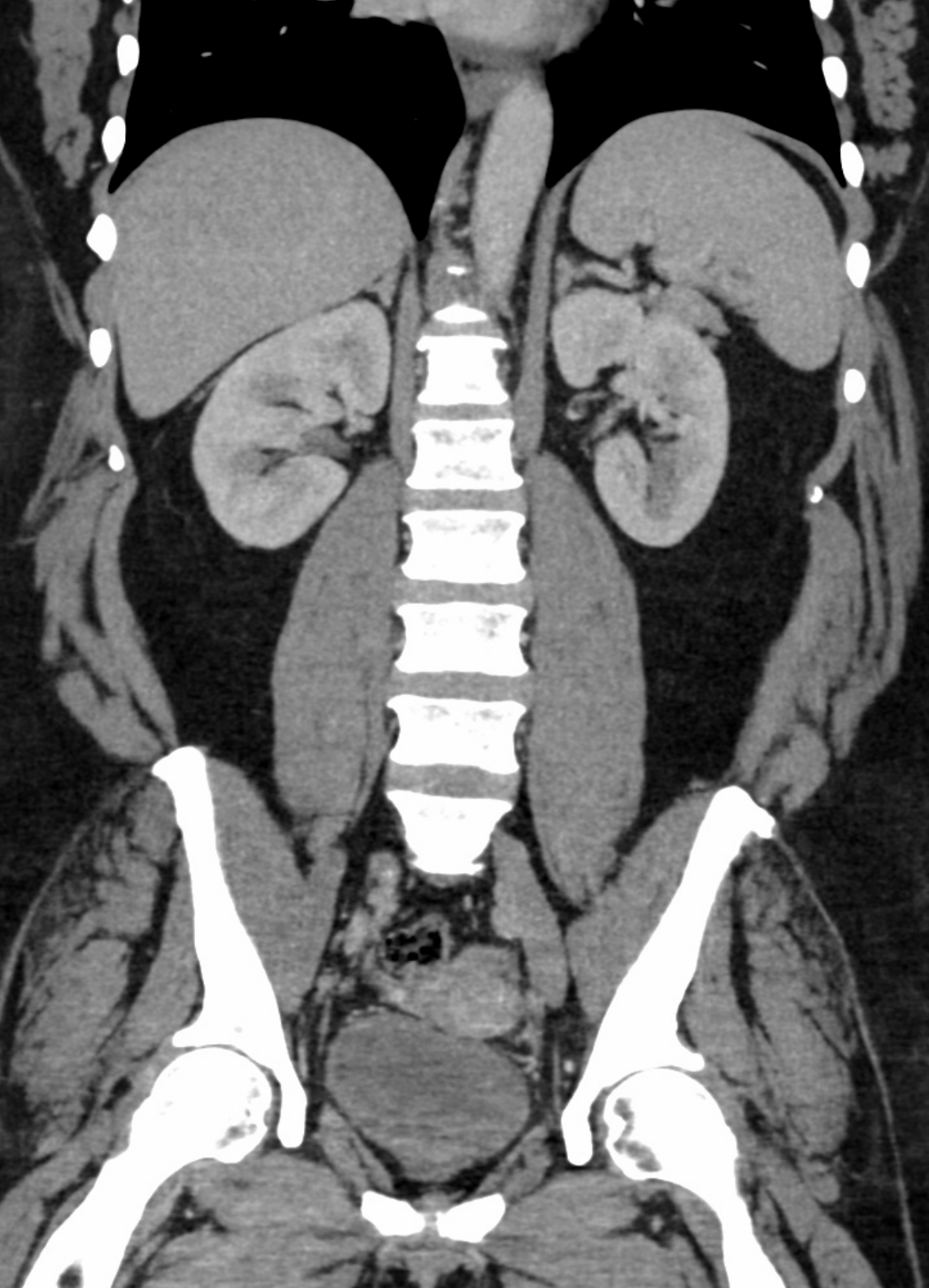
	Existing Equipment	Replacement Equipment
Type of Equipment (List each component)	CT Scanner	CT Scanner
Manufacturer of Equipment	GE	GE
Tesla Rating for MRIs	N/A	N/A
Model Number	Optima 540	Revolution Apex
Serial Number	340229 HM4 / 340245HM0	Not Available Until Installed
Provider's Method of Identifying Equipment	Internal Asset # / Serial #	Internal Asset # / Serial #
Specify if Mobile or Fixed	Fixed	Fixed
Mobile Trailer Serial Number/VIN #	N/A	N/A
Mobile Tractor Serial Number/VIN #	N/A	N/A
Date of Acquisition of Each Component	2013	2021
Does Provider Hold Title to Equipment or Have a Capital Lease?	Title	Title
Specify if Equipment Was/Is New or Used When Acquired	New	New
Total Capital Cost of Project (Including Construction, etc.)	\$7,661,838	\$1,691,000
Total Cost of Equipment	\$490,473	\$1,290,000
Fair Market Value of Equipment	\$176,580	\$1,290,000
Net Purchase Price of Equipment	\$313,893	\$1,290,000
Locations Where Operated	CHSI-Kannapolis, 1st Floor (Rm. 1033)	CHSI-Kannapolis, 1st Floor (Rm. 1033)
Number Days in Use/To Be Used in N.C. per Year	260	260
Percent of Change in Patient Charges (by procedure)	0%	0%
Percent of Change in Per Procedure Operating Expenses (by procedure)	0%	0%
Type of Procedures Currently Performed on Existing Equipment	All Primary CT Applications	N/A
Type of Procedures New Equipment is Capable of Performing	N/A	All Primary CT Applications



## Revolution Apex

The new way to  
your best image





# Image quality makes all the difference

Revolution Apex™ is a new ultra-premium CT system designed and engineered to provide you with the new way to your best image. Because of the inherently complex technological make-up of CT, every provider has their own “take” on how to reach the best image quality. This fragmentation across the industry can leave you with uncertainty on what CT is the most capable of elevating your clinical outcomes. With Revolution Apex, we’ve made the choice clear. By combining a powerful new imaging chain and TrueFidelity™ Images, created using Deep Learning Image Reconstruction, Revolution Apex is an incredibly **powerful platform** designed to provide you with **breakthrough image quality** and access to all that CT has to offer through **uncompromised solutions**.

# Revolution Apex



Temporal  
Spectral

Power  
+  
Deep Learning

Spatial  
Coverage

With great power  
comes great  
image quality

With Revolution CT, we solved one of the biggest challenges of CT technology with a platform that provided uncompromised access to all four core imaging attributes. It was the first time you could have a system that didn't force you to choose between temporal resolution, spectral imaging, spatial resolution and coverage. You could have them all. Revolution Apex builds off this "uncompromised" imaging approach with the Quantix™ 160 Tube and Deep Learning Image Reconstruction, which together, supercharge all four key CT imaging attributes to deliver great image quality.



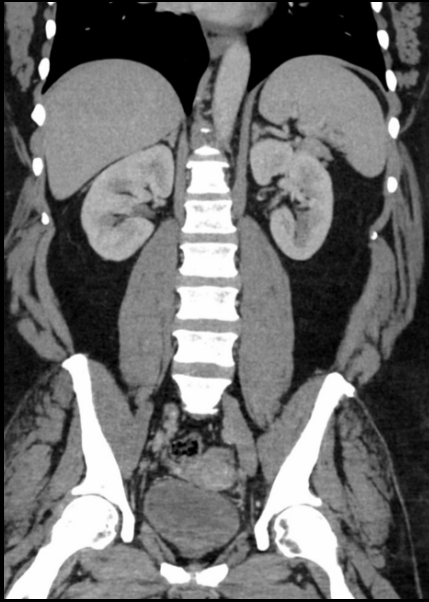


Elevate with Apex | Uncompromised clinical solutions

# The best image quality for every patient

The true testament of CT engineering is to make something work beyond the ideal patient under ideal circumstances. Revolution Apex accomplishes this with software and hardware that truly works together. The synchronization of technologies provides you with clinically impactful solutions to attain the best image quality not just for the ideal patient, but for every patient.

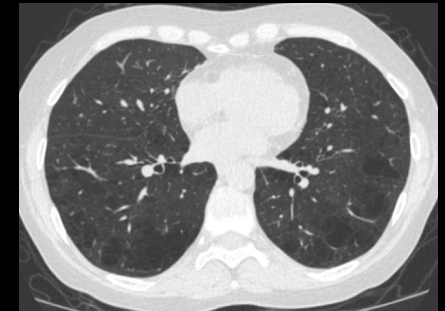
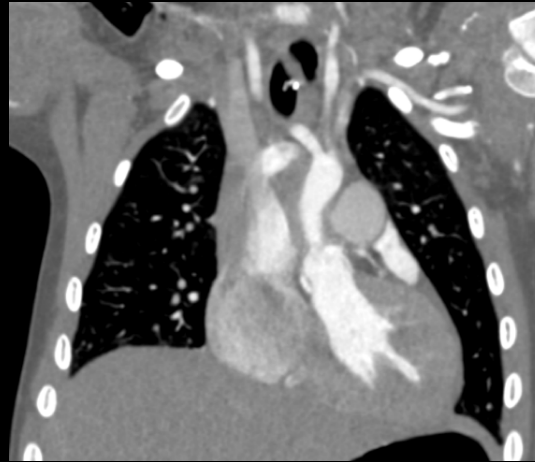
# Body



Uncompromised image quality.  
Even for morbidly-obese patients.



Pediatric imaging. Without sedation. With the lowest dose possible.



Ultrafast exam with ultra-low dose.  
In less than one second. With full  
50 cm FOV.



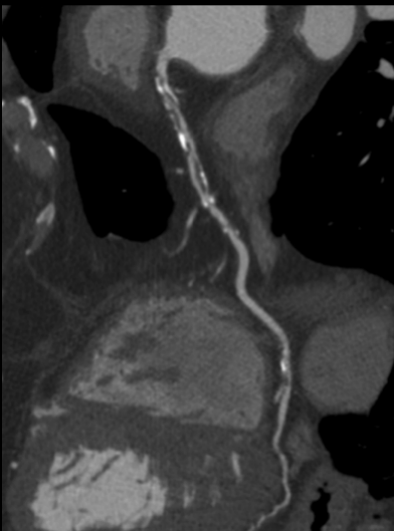
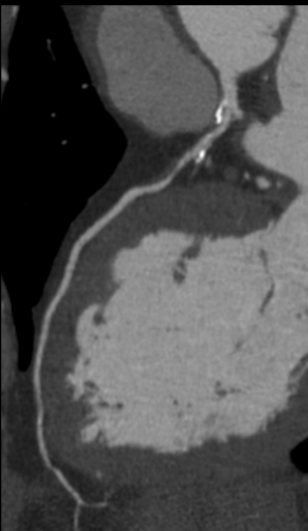
Without Smart MAR



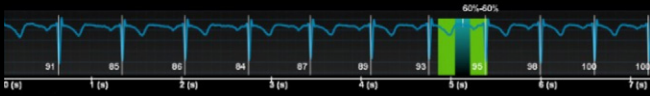
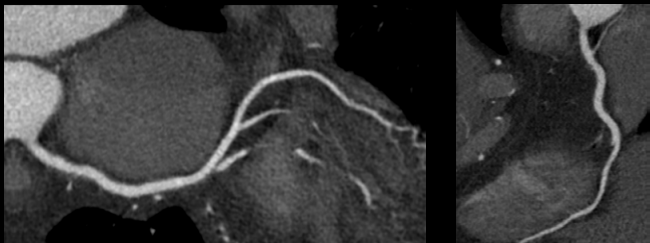
With Smart MAR

Metal artifact reduction. Both in single and dual energy.

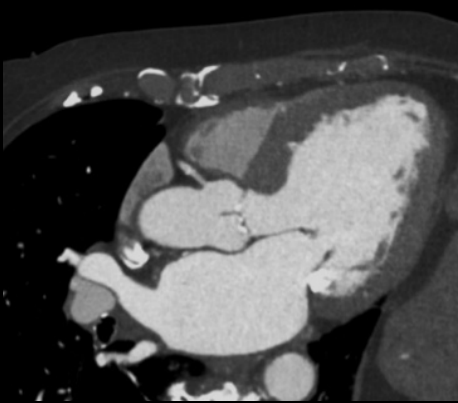
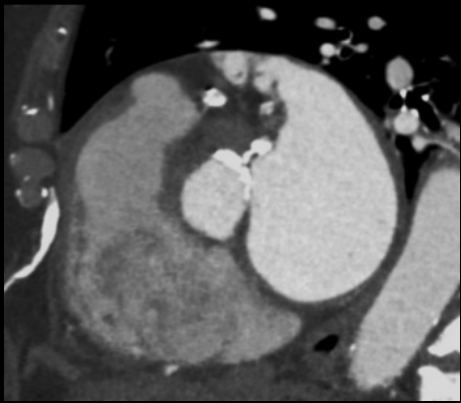
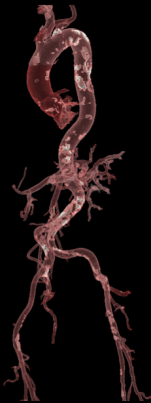
# Cardiac



High-resolution imaging. Even with heavily calcified coronaries, plaque and stents.

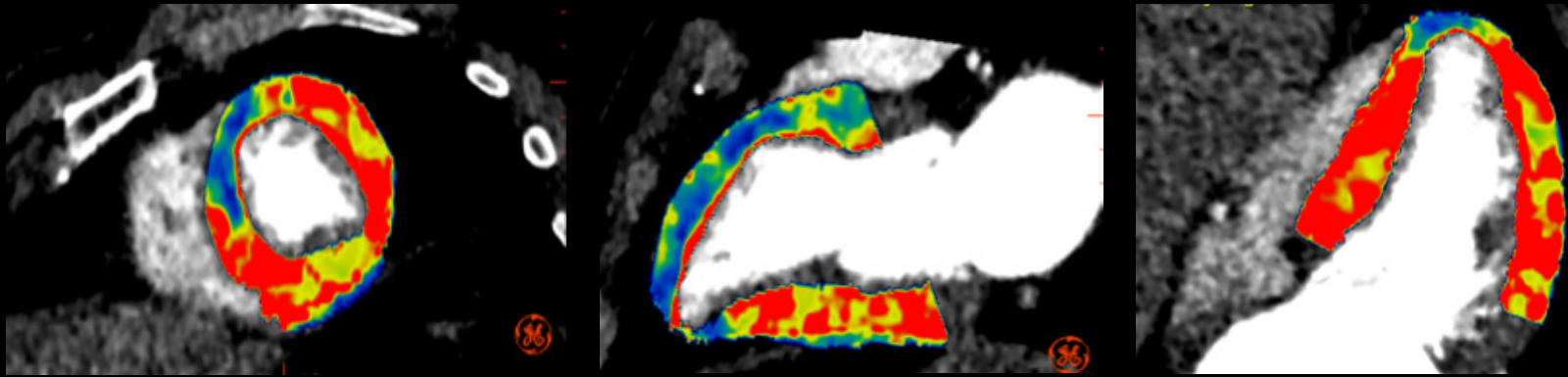


One-beat cardiac. At any heart rate. Even in atrial fibrillation. With low dose.



CTTAVI/TAVR planning. Single scan. Single injection. With low contrast volume.

# Cardiac



Dynamic whole-heart myocardial perfusion. Without shuttle. With low dose.

# Stroke

**1** **Non-contrast**  
Rule out hemorrhage

**2** **CTA**  
Evaluate carotids and COW

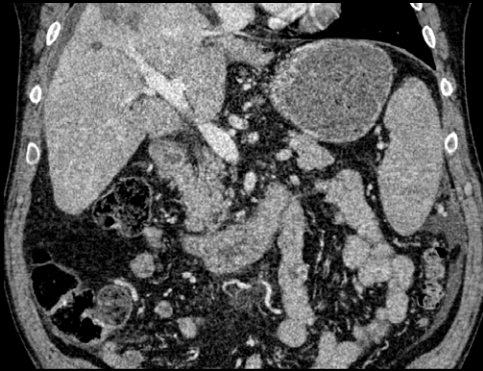
**3** **Multi-phase CTA**  
Evaluate collaterals

**4** **Brain perfusion**  
Evaluate cerebral blood flow and tissue perfusion

**5** **Tissue classification**

**<5 minutes**

Whole brain coverage for acute stroke workup. In less than five minutes.



0.625 mm FBP  
Filtered Back Projection  
1972 - 2008



0.625 mm ASiR-V 50%  
Iterative Reconstruction  
2008 - 2018



0.625 mm TrueFidelity  
TrueFidelity Images  
2018 - Future

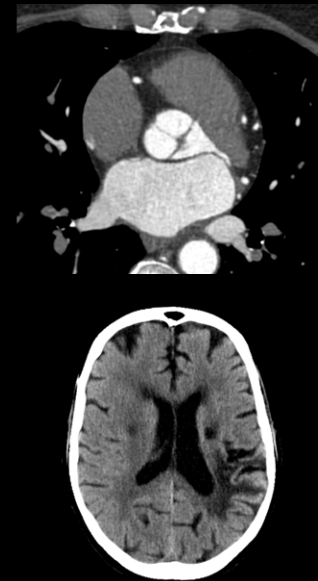
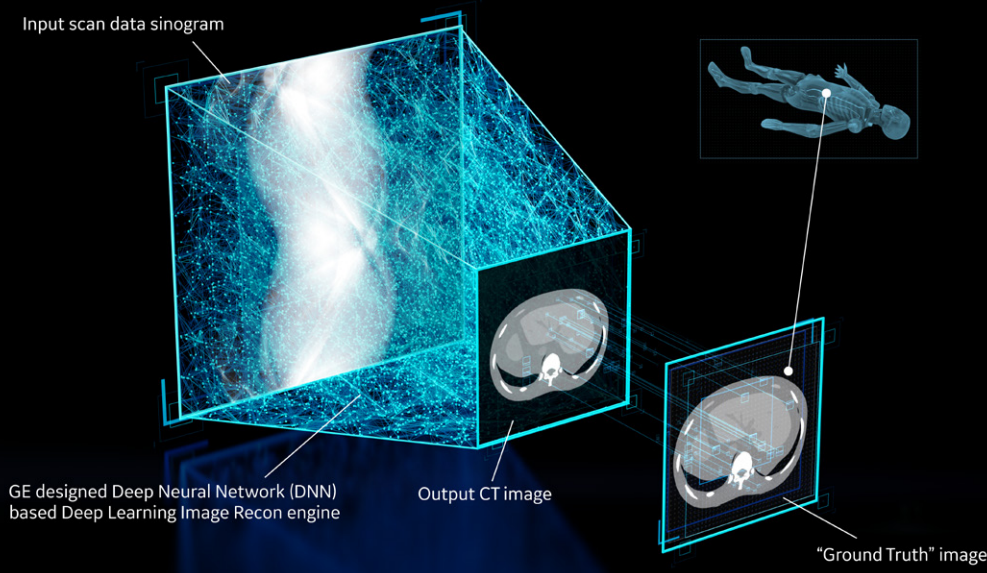
## Breakthrough image quality

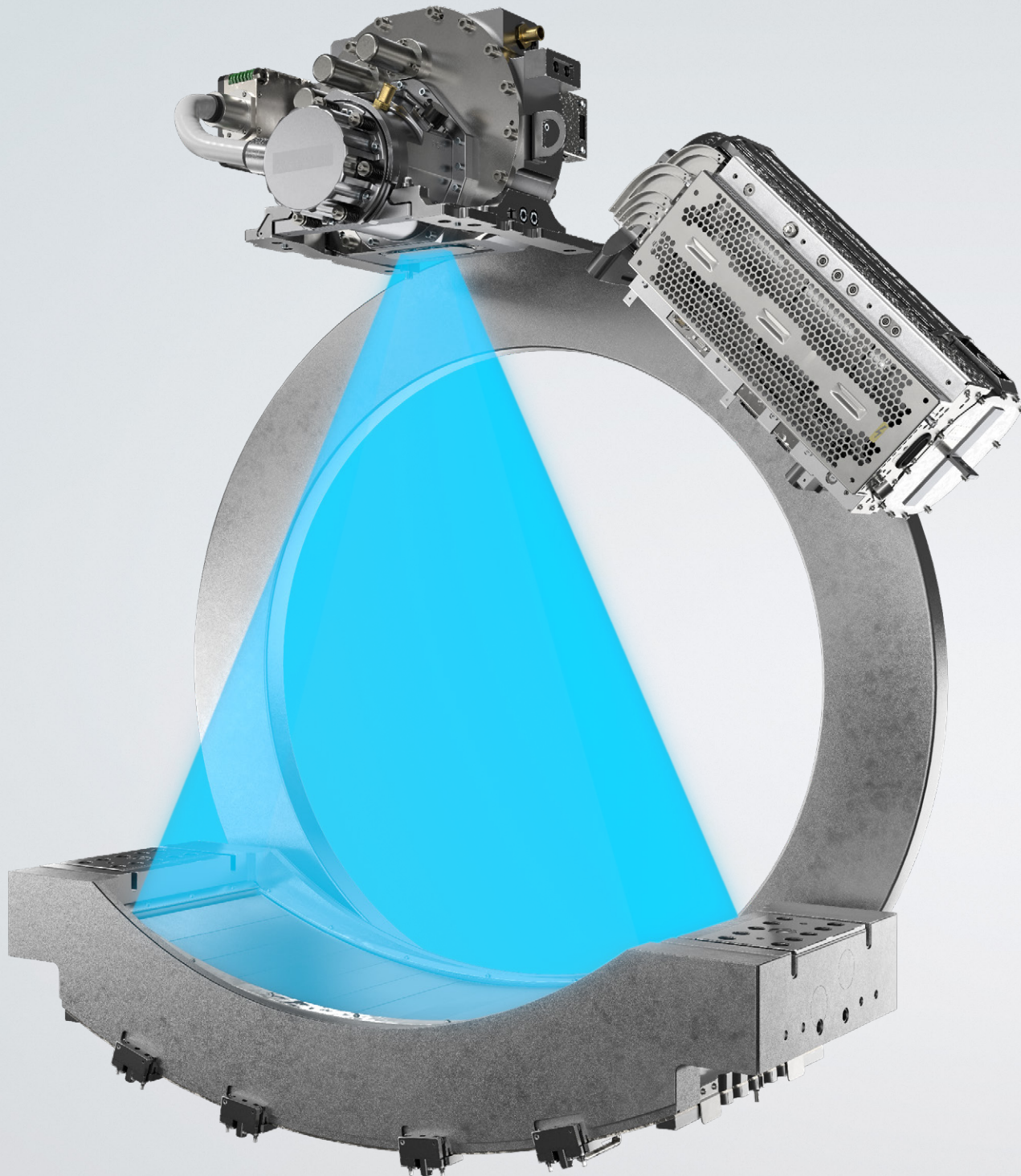
# A futuristic take on classic image reconstruction with TrueFidelity Images

For years, Filtered Back Projection (FBP) was the benchmark for image quality by which every CT image was held. To continue advancing patient care, we pioneered the second generation of image reconstruction back in 2008 when we helped set the standard for low-dose with an iterative reconstruction (IR) technology capable of lowering dose by up to 82 percent. Although we have continually made significant strides in dose, even with the most sophisticated Model Based IR technology, we know the image quality benchmark has continued to evolve. Radiologists are looking for an image texture with the classic, textbook quality look of the images they studied in medical school. To that end, we've introduced what we see as the future of image quality with the next generation of image reconstruction, TrueFidelity Images.

# Elevate every image to a powerful first impression

Generated by our Deep Learning Image Reconstruction, TrueFidelity Images are created using artificial intelligence to combine the low-dose of iterative reconstruction with the "classic-looking" image texture of FBP.

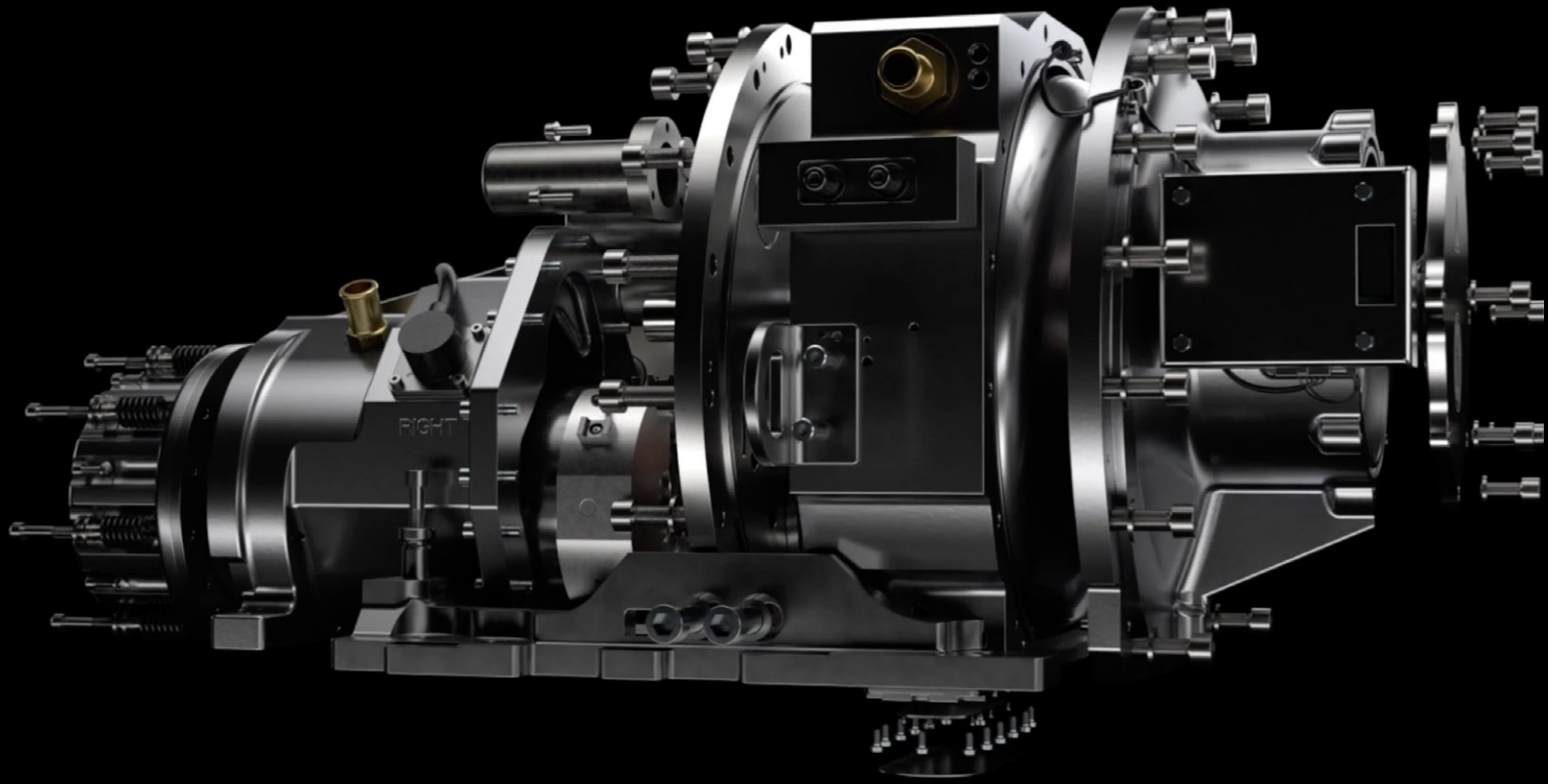




## Powerful platform

# A limitless platform for now and the future

Revolution Apex was engineered to take the “uncompromised” vision of the Revolution CT platform one step further. Not only does it give you access to the best in coverage, spatial resolution, temporal resolution and spectral imaging capabilities in one system, the power of the Quantix 160 Tube elevates each of these attributes to the next level of performance. The result is a platform with the limitless performance you need to achieve outstanding image quality for current and future patients.



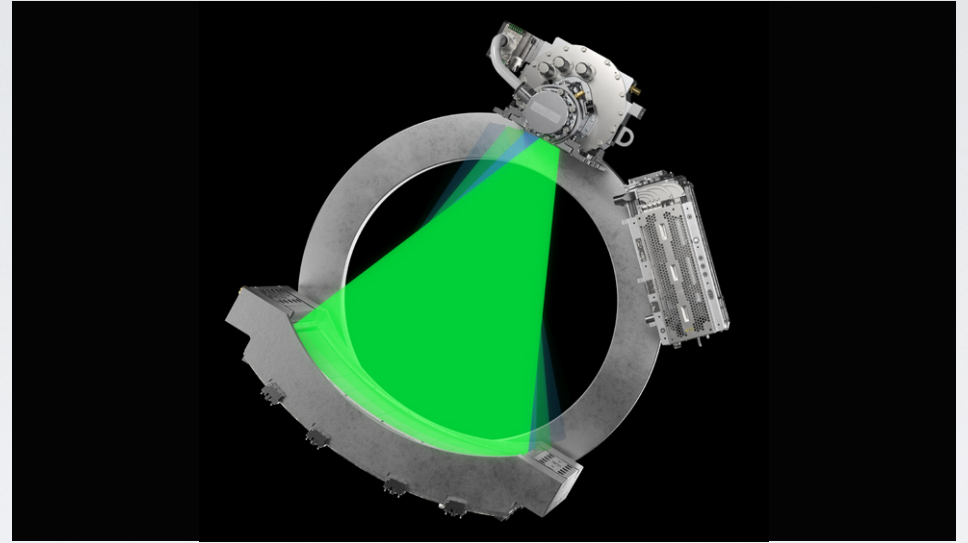
# Quantix 160 Tube. When power meets coverage.

The power of the newly engineered Quantix 160 Tube is the result of three key technological achievements. At its core is a liquid metal bearing construction optimally designed to withstand 75 G of force. It also includes a new flat emitter cathode design and a wide-view anode that together are capable of achieving 1300 mA with 16 cm of coverage. As the most powerful whole-organ coverage tube in the industry, it provides the resources necessary to improve every clinical outcome.





Spectral imaging.  
With speed.  
Even with  
larger patients.



The vision behind GSI Xstream has never wavered – a volume spectral imaging experience to help physicians diagnose disease with more confidence with a simplified workflow. Empowered by the Quantix 160 Tube, GSI Xstream on Revolution Apex takes that idea to the next level to enable spectral imaging on more challenging patients. See the bigger picture with volume spectral CT.



# Volume. Spectral. Simplified.

GSI Xtream extends to our Revolution Apex platform with its wide collimation and 50 cm FOV to deliver the only volume spectral CT. Enabled by ultrafast kV switching, you can scan more challenging patients and reduce the effects of motion. With a simplified workflow you can make part of your daily practice. From setup to post-processing, GSI Xtream is as intuitive as a single energy exam. These improvements, combined with native GSI reconstruction, deliver volume spectral CT workflow that's twice as fast. GSI Xtream helps you diagnose disease with more confidence, which could ultimately put patients on the right treatment path sooner.





# You lead the way

As a radiologist, patients and referring physicians alike look to you to provide them with the direction they need to determine the best course of care. Our goal is to provide you with every tool imaginable to lead the way regardless of what your specialty is or the types of patients you see. With a CT capable of delivering the best image quality for every patient, your leadership can reach even further. It not only provides you with greater confidence in your ability to serve the patients you already see today, but also gives you the tools you need to serve more patients with even greater clinical challenges going forward.



GE Healthcare is a leading provider of medical imaging, monitoring, biomanufacturing, and cell and gene therapy technologies. GE Healthcare enables precision health in diagnostics, therapeutics and monitoring through intelligent devices, data analytics, applications and services. With over 100 years of experience and leadership in the healthcare industry and more than 50,000 employees globally, GE Healthcare helps healthcare providers, researchers and life sciences companies in their mission to improve outcomes for patients around the world. Follow us on Facebook, LinkedIn, Twitter and The Pulse for latest news, or visit our website [www.gehealthcare.com](http://www.gehealthcare.com) for more information.

## Imagination at work

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Not available for sale in all regions.

JB66876XX

# Attachment B

<b>CHSI-Kannapolis CT Scanner Volume by Month</b>	
<b>Month</b>	<b>Volume</b>
Nov-19	228
Dec-19	214
Jan-20	255
Feb-20	222
Mar-20	205
Apr-20	30
May-20	75
Jun-20	173
Jul-20	242
Aug-20	262
Sep-20	240
Oct-20	255
<b>Total</b>	<b>2,401</b>

# Attachment C





November 5, 2020  
 Quote Number: **2006127742.10**  
 Customer ID: **20284**  
 Agreement Expiration Date: **2/3/2021**

Atrium Health  
 1000 Blythe Blvd  
 Charlotte, NC 28203-5812

This Agreement (as defined below) is by and between the Customer and the GE Healthcare business ("GE Healthcare"), each as identified below for the sale and purchase of the Products and/or Services identified in this Quotation, together with any applicable schedules referred to herein ("Quotation"). "Agreement" is this Quotation and either: (i) the Governing Agreement identified below; or (ii) if no Governing Agreement is identified, the GE Healthcare Terms and Conditions and Warranties that apply to the Products and/or Services identified in this Quotation. In the event of conflict, the Quotation supersedes.

GE Healthcare can withdraw this Quotation at any time before Customer: (i) signs and returns this Quotation or (ii) provides evidence of Quotation acceptance satisfactory to GE Healthcare ("Quotation Acceptance"). On Quotation Acceptance, this Agreement is the complete and final agreement of the parties relating to the Products and/or Services identified in this Quotation. There is no reliance on any terms other than those expressly stated or incorporated by reference in this Agreement and, except as permitted in this Agreement, no attempt to modify will be binding unless agreed to in writing by the parties. Modifications may result in additional fees and cannot be made without GE Healthcare's prior written consent.

Handwritten or electronic modifications on this Agreement (except an indication of the form of payment, Customer purchase order number and signatures on the signature blocks below) are void.

Governing Agreement:	CSS-GEHC MVA July 15 2011 a/k/a CSS-EQ-0031
Terms of Delivery	FOB Destination
Billing Terms	100% billing at Ship Completion (Fulfillment) / Delivery
Payment Terms	Net Due in 60 Days
Total Quote Net Selling Price	\$1,200,000.00
Sales and Use Tax Exemption	No Certificate on File

**IMPORTANT CUSTOMER ACTIONS:**

Please select your planned source of funds. Source of funds is assumed to be cash unless you choose another option. Once equipment has been shipped, source of funds changes cannot be allowed.

- Cash
- GE HFS Loan                       GE HFS Lease
- Other Financing Loan               Other Financing Lease              Provide Finance Company Name \_\_\_\_\_

The parties have caused this Agreement to be executed by their authorized representative as of the last signature date below.

Atrium Health

**Signature:** \_\_\_\_\_

**Print Name:** \_\_\_\_\_

**Title:** \_\_\_\_\_

**Date:** \_\_\_\_\_

\_\_\_\_\_

**Purchase Order Number, if applicable** \_\_\_\_\_

GE Precision Healthcare LLC, a GE Healthcare business

**Signature:** Herb Klann

**Title:** Imaging Account Manager

**Date:** November 5, 2020



November 5, 2020  
 Quote Number: **2006127742.10**  
 Customer ID: **20284**  
 Agreement Expiration Date: **2/3/2021**

**To Accept This Quotation**

Please sign and return this quotation together with your Purchase Order to:

**Name:** Herb Klann  
**Email** herb.klann@ge.com  
**Phone:** 724-504-8778  
**Fax:**

**Payment Instructions**

Please **remit** payment for invoices associated with this quotation to:

**GE Precision Healthcare LLC**  
**P.O. Box 96483**  
**Chicago, IL 60693**  
**FEIN: 83-0849145**

**Atrium Health**

**Addresses:**

**Bill To:** ATRIUM HEALTH

ATRIUM HEALTH, ACCOUNTS PAYABLE PO BOX 5379 PORTLAND, OR, 97228-5379

**Ship To:** ATRIUM HEALTH

1000 BLYTHE BLVD CHARLOTTE, NC, 28203-5812

**To Accept This Quotation**

- Please sign the quote and any included attachments (where requested).
- If requested, please indicate your form of payment.
- If you include a purchase order, please make sure it references the following information:
  - The correct Quote number and Version number above
  - The correct Remit To information as indicated in **“Payment Instructions”** above
  - Your correct SHIP TO and BILL TO site name and address
  - The correct Total Price as indicated above

Upon submission of a purchase order in response to this quotation, GE Healthcare requests the following to evidence agreement to contract terms: Signature page on quote filled out with signature and P.O. number \*\*\*\* OR\*\*\*\* Verbiage on the purchase order must state one of the following:

(i) Per the terms of Quotation # \_\_\_\_\_, (ii) Per the terms of GPO # \_\_\_\_\_; (iii) Per the terms of MPA# \_\_\_\_\_: or (iv) Per the terms of SAA # \_\_\_\_\_.

Include applicable quote/agreement number with the reference on the purchase order. In addition, Source of Funds (choice of Cash/Third Party Load or GE HFS Lease Loan or Third Party Lease through \_\_\_\_\_), must be indicated, which may be done on the Quote Signature Page (for signed quotes), or the Purchase Order (where quotes are not signed) or via a separate written source of funds statement (if provided by GE Healthcare).”

## Catalog Item Details

Line	Qty.	Catalog	
1	1.00	S7919AX	Revolution CT ES Digital – Cardiac Promotion

The Revolution CT ES Digital – Cardiac Promotion configuration is a premium CT scanner that brings the essence of Revolution CT experience into a scalable platform. Built upon ground-breaking and clinically proven Revolution CT hardware platform, it delivers HD image quality, fast volumetric scanning and lower dose with optimized contrast use. And it has scalability with its ability to be upgraded in-room to a 160mm detector coverage system, allowing you to grow its clinical capabilities with your needs.

The Revolution CT ES delivers industry leading technical specifications for a premium CT system, including:

- VHD reconstruction, 3D Collimator, and focal aligned detectors provide high-definition image quality, while overcoming the challenges of typical wide detector systems such as cone beam artifacts, HU uniformity, scatter and beam hardening artifacts.
- ASiR-V provides integrated advanced iterative reconstruction technology that reduces noise and reduces low-signal streak artifact at very low signal levels. This technology is designed to deliver reduced noise levels, improved low contrast detectability and may enable a reduction in dose for all clinical applications.

In clinical practice, the use of ASiR-V may reduce CT patient dose depending on the clinical task, patient size, anatomical location and clinical practice.

A consultation with a radiologist and a physicist should be made to determine the appropriate dose to obtain diagnostic image quality for the particular clinical task.

The Revolution CT ES Digital – Cardiac Promotion is sold as a Digital Model with Smart Subscription as part of the packaged solution. Smart Subscription is a new model from GE Healthcare that allows your CT to keep getting better by allowing you the ability to subscribe to different application packages ensuring that you always receive the latest technologies from GE Healthcare. Current offerings include software such as TrueFidelity, Smart MAR, SnapShot Freeze 2 and much more.

### Clinical Highlights

- High-Definition Imaging

The clinical needs for better image quality never stop. Visualizing the finest image details significantly enhances diagnostic confidence. Equipped with the 80 mm Gemstone Clarity Detector and the Performix® HDw tube, the Revolution CT ES achieves best-in-class 0.23 mm spatial resolution across all detector coverage, all FOV, all applications, even obese patients.

- Low Dose Lung Cancer Screening

Empowered by low dose high definition image chain and new low-dose CT lung cancer screening protocols, Revolution CT ES can deliver low dose, short scan times and sharp images for the detection of small lung nodules.

- Contrast Optimized Scanning

X-ray radiation and iodine hazards have become the major concerns associated with CT scan with contrast enhancement. Due to increased use of iodinated contrast media in diagnostic imaging and interventional procedures, Contrast-induced nephropathy has become a significant source of hospital morbidity and mortality. Equipped with the ASiR-V and Low kVp scanning, Revolution CT ES addresses these two challenges with one unique solution: achieving lower dose scan with optimized contrast usage.

- Fast Emergency & Trauma Imaging

The system allows for robust Triple RuleOut™ acquisition for all patients providing HD, motion free coronaries, PE & aortic dissection in a single exam covering the entire thorax. ECG gating and mA modulation along with flexible collimations enable low dose acquisition personalized to the patient.

80 mm helical mode combined with fast table speed of 300 mm/s allows for ultra-fast scanning, thus reducing the effect of breathing and other motion during the scan.

- Sedation-free Pediatric Scanning

Split second pediatric trauma acquisition of abdomen / pelvis is enabled by wide 80 mm z-coverage and fast table speed up to 300 mm/s, thus reducing the need for sedation and eliminating unnecessary repetition of scans in young children due to failed sedation, as is the case in 29% of conventional exams, shown in a large trial (British Journal of Anesthesia, 84 (6), 743-8 (2000)).

70kV scan mode allows for minimizing dose to pediatric patients while preserving excellent contrast to noise ratio and image quality.

- Cardiac Acquisition

The system includes Cardiac Acquisition software and the CTM-400 Cardiac Trigger Module to support 2-Beat Coronary CT and 1-Beat Structural Heart acquisitions.

Neurology (To achieve the full benefits described below, an AW workstation with dynamic and perfusion post processing tools may be required. Please consult with your GE sales representative)

The single energy metal artifact reduction solution for Revolution CT is Smart MAR. It uses an automated, three-stage projection-based process. Smart MAR is designed to reveal anatomic details obscured by metal artifacts by reducing photon starvation, beam hardening

and streak artifacts caused by metal in the body, such as hip implants, surgical clips, endovascular coils, and dental fillings. Smart MAR requires one single kV scan and can be enabled in secondary reconstructions, making the metal artifact reduction workflow fast and efficient.

- Smart Stroke, the stroke-dedicated hardware, software and post-processing solution on Revolution CT, can help physicians to reduce “CT scan-to-report” time and “door-to-treatment” time, thus to save more brain tissue of patient with stroke.
- Dual Energy Scanning  
Revolution CT ES features protocols which allow easy configuration of back to back axial or helical scans of the same anatomy at two different X-ray energies (kVp’s). To further improve registration accuracy patient immobilization may be utilized. The additionally acquired dual energy data can be post-processed on AW WS using Add/Sub function to gain additional clinical information.
- Dual Energy Scanning

#### Key Hardware Components

##### Gemstone Clarity Detector

The Gemstone Clarity detector features a unique focally aligned layout of the detector sub-modules and a 3D collimator (post patient) to minimize scatter artifacts, ensure HU uniformity & reduce beam hardening artifacts associated with wide coverage systems. Combined with VHD reconstruction technology, the system delivers excellent image quality at full 80 mm coverage. The Gemstone Clarity detector also features a revolutionary ultra-low capacitance photo diode with new ASIC technology that redefines electronic noise at the quantum limit to less than 3 photons @ 120 keV (3100 electrons). The detector includes acquisition electronics which allow 4x faster bandwidth and 3x faster trigger rate than previous generations and reduces electronic noise by 25% which may improve image quality and reduce artifacts in low signal conditions as may be encountered in large patients. 3D Collimator Scatter Reduction Technology reduces scatter to primary ratio by more than 50% (R Melnyk, J Boudry, X Liu, and M Adamak, “Anti-scatter grid evaluation for wide- cone CT,” Proc. of SPIE, Vol. 9033, 90332P1-7, 2014) and results in significant improvement in image quality and reduction in beam hardening and metal artifacts.

Gemstone Clarity detector specifications:

- Z-Coverage/360 degree rotation: 80 mm
- Number of slices: 256
- Number of detector rows: 128
- Number of detector elements: 106,496 cells with individual electronic/DAS channels
- Sampling rate: Up to 2,496 views per rotation (Up to 8914 Hz)
- Electronic noise: less than 3 photons noise (3100 electrons)
- Effective analog to digital conversion range >2,000,000:1
- Scintillator speed: 0.03us (100 times faster than GOS)
- Afterglow: 0.001% (4 times lower than GOS)
- Radiation damage: 0.03% (20 times less than GOS)
- Scatter to Primary Ratio: <10%
- Detection efficiency: 98% @ 120 kV

##### Performix HDw tube

The Performix HDw tube is a next generation anode-grounded, metal-ceramic x-ray tube. The tube enables improved spatial resolution via dynamic in-plane focal spot deflection and independent control of the focal spot size in both X and Z-axis which optimizes the focal spot to deliver consistent beam quality across the full 80 mm Z-axis coverage, making it one of the most innovative CT tubes offered today. The design is optimized for exams requiring a large number of scans without tube cooling. It is powered by an onboard high frequency generator capable of ultra-fast kVp switching. Due to the ultrashort exposure times associated with wide coverage scanning, traditional metrics related to tube cooling such as anode heat content & cooling rate lose their relevance. The GE Performix HDw tube includes a standard license that automatically enables the use of tube dependent advanced applications. The use of a third party X-ray tube will require an additional license for the activation of these features.

##### Ultra-fast kV Switching Generator

The new generator features 3x faster rise and fall times for kV switching compared to previous generator. This would allow for more time to be spent at the target energy levels and result in better energy separation between the datasets acquired at different kV levels using fast kV switching.

- Generator maximum peak power: 103 kW
- Tube current range: 10-740 mA with 5 mA increments
- Tube voltage: 70, 80, 100, 120, 140 kV. Automatically selected through kV Assist based on patient body habitus and examination type
- Max x-ray tube assembly heat content: 5.0 MJ (6.8 MHU)

- Max continuous heat dissipation: 3.0 kW
- Focal spot size according to IEC 60336/2005: 1.0 x 0.7mm, 1.6 x 1.2mm, 2.0x1.2mm

#### Gantry and Slipping

Revolution CT's gantry platform has been designed from the ground up to support the demands of today's scanning environment. Exclusive Whisper Drive system technology reduces audible noise during gantry rotation at 0.28s by more than 50% compared to a typical belt driven system thus improving patient comfort (audible gantry noise is measured at 69 dBA).

The contactless slipping transfers power and data to and from the rotating side of the gantry (slip ring) to the stationary side through contactless RF technology. This eliminates carbon dust due to brush wear- out in typical CT systems thereby increasing the reliability of the system. In addition, the gantry frame features redundant fail-safe mounts for all major components that is designed and tested to stringent standards to ensure safe and reliable operation even at fast rotation speeds.

- Aperture: 80 cm
- Focus-to- detector Distance: 109.7 cm
- Focus-to- isocenter Distance: 62.6 cm
- Scan FOV: 50 cm
- Rotation speeds: 0.28s, 0.35s, 0.5s, 0.6s, 0.7s, 0.8s, 0.9s, 1.0s per 360° acquisition
- Temporal resolution: 140ms cardiac temporal resolution without using SnapShot Freeze. 29ms effective temporal resolution using SnapShot Freeze. (As demonstrated in mathematical phantom testing)(Cardiac Acquisition software and AW workstation or server with CardIQ Xpress 2.0 required to process SnapShot Freeze data)
- Data chain bandwidth: 40 Gbps
- Table and gantry control panels: Define both internal and external scan planes to +/- 1 mm accuracy. Activated any time during exam (with tube stationary)
- Front and rear integrated gantry LCD Display: Display patient information, ECG data from the integrated ECG module (optional), built-in patient breathing lights and countdown timer, cardiac gating indicator light and patient information videos
- Flexible cable manage system with coordinated straps attached to the gantry sides to keep cables connected to the gantry away from the floor and to reduce clutter
- The system is shipped with the NG2000V Heavy Table which has the ability to support patient weights up to 675 lbs.

#### Operator Console

The Revolution CT scanner desktop allows simultaneous scanning, image reconstruction, display, processing and analysis, as well as networking and archival.

It features the new "Clarity Operator Environment" designed with your everyday needs in mind. The environment allows for more real time adaptive capabilities thus enabling dramatically improved timing with Smart Prep including automatically transitioning to acquisition in as quickly as 1 second when the set HU threshold is reached. The benefits provided by the new interface include:

- Smart prescription workflow automates scan set up by recommending scan parameters specific to the patient based on scout attenuation and ECG information, in the case of cardiac, to enable consistent image quality & dose performance across scans, irrespective of the technologist expertise level
- Seamless multi-tasking through ability to have multiple patient sessions open with one active patient for acquisition and the rest for post-acquisition tasks
- "Plan ahead" task list as part of scan setup automates repetitive tasks such as reconstructions, image transfer, image processing, etc. without requiring technologist intervention
- Ability to prospectively prescribe multi planar reconstructions for anatomies such as spine as part of the protocol, thus automating the workflow seamlessly
- Clear status visibility across all automated patient tasks without any interaction enables you to focus on the primary task at hand
- Manage your patient flow better with the ability to pre- pare scan prescription for the next patient while the current patient is getting off the table
- Quickly select scan protocols through global search, anatomical selection or user specific favorites in the new- ly designed protocol management system
- Facilitates protocol consistency by controlling access to changes and simplifying inputs required
- Integration with AW allows prescribing automatic image processing steps to be performed on the AW / AW Server post acquisition
- Better dose awareness through clearly visible real time projected dose indicator for the selected protocol

#### Operator console specifications

- Intel Xeon performance processor: 2.60GHz/8-Core CPU (or equivalent)
- Nvidia high performance GPU (or equivalent)
- 64 GB DDR3 unbuffered ECC (or equivalent)
- 24 inch dual monitors with screen resolution of 1920x1200
- Image data storage up to 700,000 uncompressed DICOM images (512x512)

- Scan data storage of 1 TB (up to 1500 scan files are supported)
- DVD-ROM (supports DVD-R, DVD-RW, DVD+R, DVD+RW, DVD+R DL, CD-R, CD- RW)
- USB 3.0 Port for External Hard Disk Drive Connectivity (scan data storage and image data storage are supported)
- Recon Server Xstream enables recon task parallelism and achieves up to 1.8x faster reconstruction throughput than Recon Server Pro
- Image reconstruction speed up to 65 fps with FBP and up to 25 fps with ASiR-V.

#### System Software

- Smart Flow

Simplified, automated scan prescriptions, personalized to the patient and easy-to-use reference protocols make the Revolution CT fast and efficient in patient set-up, prescription & scanning. The following features further help you streamline your workflow.

- Protocol Management System

Protocols can be copied, built and edited intuitively using the Protocol Management System.

- GE Reference Protocol: A set of predefined protocols for adult patients that cannot be modified but can be copied and used. These protocols are factory installed. They have been developed in collaboration with clinical partners to provide users with a convenient and clinical relevant starting point for tailoring your departmental protocols.
- Recently Scanned Protocols: A copy of the last 90 protocols reside exactly as they were used for review purposes only. These protocols can also be copied and used within into your departmental protocols.
- Anatomical Selector: Use the Anatomical Selector area to select a specific anatomical region to show only protocols related to that region.
- Favorites: A user can add to a list of favorite protocols commonly used by your site.

#### Clinical ID

Clinical ID is designed to streamline the clinical application specific workflow from protocol setup to reconstruction prioritization and automated reformatted views for timely diagnostic decisions.

#### AutoVoice™

Auto Voice provides recorded breathing instructions for the patient. Consistent breathing instructions assist with more precise timing during an exam. Auto Voice also provides a pre- message in the SmartPrep feature. The system also comes equipped with microphones at the console and gantry for communicating with the patient. The system has three, pre-recorded messages in ten selectable languages that cannot be deleted. You can also record up to 17 additional messages for each language. Default language options include: Chinese, English (Female) , English (Male), French, German, Italian, Korean, Japanese, Spanish (European), Spanish (Latin America).

#### Smart Patient Centering

The smart patient centering feature helps to detect suboptimal centering prior to the diagnostic scan. When scout is acquired, the system will assess patient centering. If the patient is off-centered greater than 2 cm, the system will display the table height location and an up or down arrow to indicate the elevation needed to reach that height.

#### SmartStart™

- Gantry-mounted start scan button and countdown display,
- Facilitates single-technologist operation by allowing start of scan at the gantry, with a visual reminder of time until X-ray initiation

#### SmartPrep™ with Dynamic Transition

Enables real-time monitoring of IV contrast and a user-selectable mode to dynamically transition to the diagnostic scan phase when a user entered Enhancement Threshold is reached in the Transition ROI.

#### Trauma Patient entry

Allows patient scans and image display/analysis without entering patient data before scanning.

#### Prospective Exam Split

Prospective Exam Split allows operator to specify how to split images from a scan into separate requested procedures/accession numbers in protocol management. This capability is especially useful in cases of full body trauma or for chest, abdomen and pelvis exams. Prospective Exam Split works with primary, secondary and reformatted images.

#### Smart DMPR

Smart DMPR can automatically generate reformatted views with prospectively set window width and window level and automatically transferring these image datasets to the designated PACS destination for fast review and diagnosis.

#### Digital Tilt

The system has preset protocols that can be selected prospectively, which allows images to be reconstructed at a specified tilt angle.

This capability, combined with organ dose modulation and tilted head holder accessory for the patient allows for reducing the dose to sensitive organs such as the eyes while also reducing dental artifacts.

#### Enhanced Xstream Injector (Requires a compatible Bayer or Nemoto Injector system)

The Enhanced Xstream Injector provides synchronization of the start of the scan and the start of the contrast injector using the start scan button on the Scan Control Interface or the gantry controls. The Enhanced Xstream Injector also allows setting of the contrast injector parameters within the CT scan protocol and creation of an Injector Report at End Exam of what was delivered by the injector. The system and injector are operated independently after the start scan button is pressed on the system.

#### System Software

##### Volume High Definition Reconstruction

The system features state of the art image reconstruction technology designed to mitigate cone beam artifacts associated with wide coverage systems. In addition, the algorithm preserves temporal uniformity and provides excellent image quality at full 80 mm coverage. It further reduces variation in iodinated contrast HU uniformity across the full 80 mm z-coverage, typically caused due to heel effect. In addition, Smart MAR technology utilizes material physics learnings from GSI incorporated in single energy acquisition. In conjunction with the 3D Collimator, this reduces beam hardening artifacts due to iron, bone, metal & other dense objects.

##### Iterative Reconstruction: ASiR-V

Integrated advanced iterative reconstruction technology (ASiR-V) reduces noise, even at very low signal levels. The ASiR-V algorithm focuses primarily on the modeling of the system noise statistics, objects, and physics and de-emphasizes the modeling of the system optics. The most time-consuming portion of the IR process is the modeling of the system optics. By excluding the most time-consuming component, system optics, and focusing on the other terms during the IR process, significant image quality improvement can be achieved without paying a large penalty in reconstruction speed. The advanced system noise model includes the modeling of the data acquisition system (photon noise and electronic noise) as well as noise characteristics of the reconstructed images. The photon noise model includes characterization of the photon statistics as it propagates through the imaging chain. The modeling of the reconstructed image noise includes characterization of the scanned object, using information obtained from extensive phantom and clinical data. This technology is designed to deliver reduced noise levels, improved low contrast detectability and may enable up to 82% reduction in dose when compared to FBP for all clinical applications.

#### Smart Dose technologies

##### Automatic Exposure Control (AEC)

AEC is a versatile and powerful tool designed to tailor the scanner's radiation output to each patient based on the patient's size, age, shape and attenuation and the user's requested level of image noise/quality criterion. AEC technology uses estimated patient attenuation values to adjust the mA dynamically in order to achieve the requested level of image noise/quality criterion.

##### 3D Dose Modulation Utilizing SmartmA

Volumetric knowledge prior to scanning allows you to personalize protocols and optimize dose for every patient, large and small. During the scan, real-time, 3D dose modulation helps deliver consistent image quality because it automatically accounts for the changing dimensions of your patient's anatomy. In addition, the system provides guidance to assist in centering the patient to maximize the benefit of mA modulation.

#### Organ Dose Modulation

Organ Dose Modulation (ODM) builds on the SmartmA feature to enable even further patient dose reduction. By reducing the mA exposure profile as a function of the X-ray tube angle, radiosensitive organs towards the anterior surface of the patient, such as the eyes, breasts and thorax, can benefit from enhanced dose reduction while the overall image noise is still maintained.

#### kV Assist

kV Assist makes it easy to select optimal kV settings for the patient being scanned. It recommends tube voltage and current to achieve the lowest dose while meeting desired image quality goals.

#### 70 kV Scanning

70 kVp scan mode enables low dose pediatric and small patient scans

#### ECG Modulated mA

For cardiac applications (optional), prospective ECG dose modulation automatically adjusts the mA to minimize the patient's exposure to X-rays – reducing mA, and thus dose, near the beginning and end of each prescribed phase range. Up to 3 phase ranges are selected within a heart cycle with different mA levels. The peak mA for the first phase range is automatically determined based on noise index set by the user. The user can also select the relative mA level for an optional second or third phase range, set as a percent of the mA

level of the first phase range. This provides clear images and allows you to reduce dose yet provides motion free, high quality images for functional and anatomical analysis within a heart cycle

**Color Coding for Kids**

Based on the Broselow-Luten Pediatric System, the Color Coding for Kids was developed to help operator to select the correct pediatric CT protocol. The system divides the protocols into nine color zones based on height and weight, and incrementally increases scan technique as the patient's size increases. This arrangement of protocols assists you in reducing the variations in pediatric protocol selection. If the patient weight is unavailable, a Broselow-Luten Tape can also be used to obtain the weight based on the length.

- DoseWatch Explore is an introductory dose management software application that provides you secure access, via any PC with internet access, to dose and protocol data from this system. An InSite connection to the system and completion of the registration process is required to use the DoseWatch Explore application. For US and Canadian Customers, this quotation includes access to the DoseWatch Explore application for a period of time concurrent with the system warranty.

**Smart Dose technologies**

- Smart Track: Advanced hardware and software for X-ray beam tracking minimizes patient dose.
- Smart Beam: Optimizes X-ray beam filtration independently for body, head, and cardiac applications.
- Soft Shutter: This capability reduces the over-beaming dose in helical scans by using an advanced reconstruction algorithm for helical scans that makes better use of acquired data through intelligent view weighting and back projection.
- Dose Check: Provides the user with tools to help them manage CT dose in clinical practice and is based on the standard XR-25-2010 published by The Association of Electrical and Medical Imaging Equipment Manufacturers Association (NEMA). Dose Check provides the following:
  - o Checking against a Notification Value if the estimated dose for the scan is above your site established value
  - o Checking against an Alert Value where the user needs specific authority to continue the scan at the current estimated dose without changing the scan parameters if the estimated dose exceeds the alert value
  - o The ability to define Alert Values for Adult and Pediatric with age threshold
  - o Audit Logging and Review capabilities
  - o Protocol Change Control capabilities provided by robust protocol management interface
- Dose Computation, Display & Reporting: CTDIvol (CTDI volume), DLP (Dose Length Product), and Dose Efficiency computation and display during scan prescription provide dose information to the operator. Dose Reporting saves the CTDIvol, DLP, and phantom type in a DICOM Structured Dose Report and a secondary screen capture. Series and cumulative exam values are saved. Saved values can be networked or archived.

**DICOM Interchange**

DICOM Interchange allows the saving of any image from the database, along with a PC viewer using Internet Explorer, to a CD-R or DVD-R without marking the exam/series or image as archived for exam transfer between stations that are not networked or pass along to referring physicians or patients. For detailed information, please reference DICOM conformance statement.

- DICOM Storage Service Class
- Service Class User (SCU) for image send
- Service Class Provider (SCP) for image receive
- Service Class User (SCU) for storage commitment
- DICOM Query/Retrieve Service Class
- DICOM Modality Worklist
- DICOM Modality Performed Procedure Step

**Image Networking**

Exams can be selected and moved between the Revolution CT and any imaging system supporting the DICOM protocol for network send, receive and pull/query. Image transfer time using DICOM protocols is > 16fps on a 1000baseT network.

Warranty: The published Company warranty in effect on the date of shipment shall apply. The Company reserves the right to make changes. All specifications are subject to change. Regulatory Compliance: This product is designed to comply with applicable standards under the Radiation Control for Health and Safety Act of 1968. Laser alignment devices contained within this product are appropriately labeled according to the requirements of the Center for Devices and Radiological Health.

This product complies with the performance standards of 21 CFR, sub-chapter J, and the applicable IEC 60601-1 series.

This product complies with NEMA Standard XR29-2013 / MITA Smart Dose Standard.

See the Pre-Installation manual for details of the siting requirements for GE Revolution CT.

Line	Qty.	Catalog	
2	1.00	B7919AE	Standard cable set for GEHC ultra-premium CT systems



Line	Qty.	Catalog	
3	1.00	B7918EN	English keyboard

Line	Qty.	Catalog	
4	1.00	B75062BE	Enhanced Xstream Integrated Injector Interface Kit - Class IV

Line	Qty.	Catalog	
5	1.00	B78552CA	CT Operator Console Desk

The Freedom workspace is an ergonomic working environment specifically designed for use with the GE Healthcare imaging systems. The sleek table design enables the efficient use of space while enhancing clinical workflow and technologist comfort.

The Freedom workspace provides a minimalist footprint to improve patient visibility and giving the user easier access to patients in the imaging suite.

It offers sit/stand and horizontal/vertical monitor flexibility. It can also help reduce noise and heat with remote location options of the console. The non-adjustable Freedom workspace version is 1300mm long x 895mm wide x 850mm height and weighs 55.8kg.

Line	Qty.	Catalog	
6	1.00	B7660B	Chair

Chair for CT scanner

Line	Qty.	Catalog	
7	1.00	B77292CA	CT Service Cabinet

Service cabinet for system accessories storage

Line	Qty.	Catalog	
8	1.00	B7864PZ	Eaton 14.4 KVA 3-Phase Partial System UPS for GE CT and PET/CT Scanners

Eaton's 14.4 KVA 3-Phase partial system UPS (Uninterruptible Power Supply) has been specifically configured to coordinate with compatible GE CT and PET/CT scanners.

The partial system UPS provides clean, reliable, constant voltage power to the scanner electronics. It helps protect the system's

sensitive electronic components from damaging power anomalies such as high frequency noise transients and over voltage and under voltage conditions.

Utilizing the Partial system UPS can help maintain user productivity and improve system reliability. It can also help to reduce service costs and prevent system downtime.

Specifications:

1. Rating: 14.4 KVA
2. Input voltage range: three phases; 102-132V/phase
3. Input frequency range: 45-65 Hertz
4. Input power factor: >95% typical
5. Output frequency: 50 or 60 Hertz, autosensing
6. Output regulation: <3% steady state for all conditions of line and load
7. Voltage distortion: <5% threshold
8. Overload capacity: 110% for 10 minutes; 125% for 1 minute; 149% for 5 seconds.
9. Efficiency: >90% typical
10. Battery backup time: >10 minutes typical
11. Battery recharge time: < 3 hours to 80% capacity typical
12. Operating temperature: 50°F - 104°F (10°C - 40°C)
13. Floor heat dissipation: 5122 BTU/hour typical @11.5 KVA
14. Humidity: 20-80% relative humidity, non-condensing
15. Audible noise (norm mode): <60 dBA @1 meter
16. Dimensions (H x W x D): 49 inches x 12 inches x 32 inches (1245 mm x 305 mm x 813 mm)
17. Weight: 620 lbs (277 kg)

NOTE: THE PARTIAL SYSTEM UPS HAS DIFFERENT INTERACTIONS WITH COMPATIBLE SCANNERS, BASED ON DIFFERENT SCANNER POWER ARCHITECTURE. REFER TO THE PARTIAL SYSTEM UPS PRODUCT DATA SHEET FOR DETAILS.

NOTE: ITEM IS NON-RETURNABLE AND NON-REFUNDABLE

NOTE: REMOVAL/DISPOSAL OF OLD UPS IS THE CUSTOMERS RESPONSIBILITY

NOTE: CONTACT GE SERVICE OR EATON FOR START-UP ASSISTANCE

Line	Qty.	Catalog	
9	1.00	B7900LC	Low Dose CT Lung Screening Option with Indication For Use

This option provides lung screening reference protocols that are tailored to the CT system, patient size (small, average large), and the most current recommendations from a wide range of professional medical and governmental organizations. Now, qualified GE Healthcare CT scanners with this option are formally indicated for, and can be confidently used by physicians for low dose CT lung cancer screening of identified high-risk patient populations. These protocols deliver low dose, short scan times, and clear and sharp images for the detection of small lung nodules. Early detection from an annual lung screening with low dose CT in high-risk individuals can prevent a substantial number of lung cancer-related deaths.

All new GE 64-slice and greater CT scanners, and virtually all of the 16-slice CT scanners that GE Healthcare sells are qualified for this screening option. This solution is also available to thousands of qualified GE CT scanners currently in use, increasing access to the quality scanners that satisfy both patient and physician needs. The new protocols, do include the choice for the user to be able to utilize GE Healthcare's industry-leading technologies such as ASiRTM, ASiR-VTM and VeoTM that are designed to reduce image noise, which is undesirable for physicians looking for small nodules.

This option contains two documents. Lung Cancer Screening Option Reference Protocol Guide, and the Lung Cancer Screening Option User Manual / Technical Reference Manual

i) The following GE Healthcare CT scanners are qualified to receive the new low dose CT Lung Cancer Screening Option: LightSpeed 16, BrightSpeed Elite, LightSpeed Pro16, Optima CT540, Discovery CT590 RT, Optima CT580, Optima CT580 W, Optima CT590 RT, LightSpeed Xtra, LightSpeed RT16, LightSpeed VCT, LightSpeed VCT XT, LightSpeed VCT XTe, LightSpeed VCT Select, Optima CT660, Revolution EVO, Discovery CT750 HD, Revolution HD, Revolution CT, Revolution Frontier.

ii) Moyer V. Screening for Lung Cancer: U.S. Preventive Services Task Force Recommendation Statement. Ann Intern Med.

2014;160:330-338.

<http://www.uspreventiveservicestaskforce.org/Page/Document/RecommendationStatementFinal/lung-cancer-screening>

Line	Qty.	Catalog	
10	1.00	E4502BG	UL Main Disconnect Panel 380-480V 50/60Hz 175A for CT Rev2.0

The MDP (Main Disconnect Panel) and UPS Control Panels serve as the main facility power disconnect source installed ahead of the Revolution CT system. On systems where the optional partial system UPS is included in the system, the panel provides NEC mandated UPS emergency power-off control function via a UPS control cable included with the UPS. The MDP saves time, installation labor, and valuable mounting space by consolidating the main circuit breaker, control power source and required indicator lights into a compact factory manufactured panel.

Applications For general installations of GE Revolution Apex™.

Designed for reliability and easy installation

- The MDP saves time, installation labor, and valuable mounting space by consolidating the main circuit breaker, the feeder overcurrent devices, magnetic contactors and UPS emergency power-off into one compact panel
- The system provides stock availability of otherwise special-order devices, saving time and installation costs
- Reduces installation time and cost by eliminating delays in obtaining individually enclosed components and by eliminating on site assembly
- UPS emergency power-off functions are included for future, partial system UPS addition
- Disconnects system power on first loss of incoming power, preventing damage to system components
- Provides a standardized platform for UPS or other future GE engineered modifications or upgrades

Built for investment protection

- UL, cUL listed
- Supplied with low voltage, cover mounted Push to Stop, Twist to Restore pushbutton and long life LED pilot lights
- Provides overcurrent and short circuit protection
- Suitable for use on systems with 25,000A of short circuit current. It is the installer's responsibility to verify that the available short circuit current is 25,000A or less for compliance to all electrical codes.
- An optional partial system UPS provides clean uninterrupted power to the system computer, maintaining system integrity during power loss while also providing a solution to power quality problems.
- Emergency-off disconnects power to both the PDU and optional partial system UPS output, per National Electric Code
- Main power disconnect operating handle can be padlocked in the Off position for servicing safety and OSHA lock out/tag out
- The door has provisions for padlocking
- Enclosure door is interlocked with On / Off disconnect handle to prevent unauthorized access if disconnect is in the On position
- Factory wired and tested
- Panel disconnect provides OSHA lockout / tag out provisions
- The main disconnect panel may be used as a stand-alone main disconnect, with the optional GE partial system UPS or with a GE full system UPS

Remote EPO (Emergency Power Off)

Includes two normally closed contact blocks attached to the back of the emergency off push button. Two are included with each MDP.

NOTES:

- Customer is responsible for arranging for installation with a qualified party
- ITEM IS NON-RETURNABLE AND NON-REFUNDABLE

Line	Qty.	Catalog	
11	1.00	R21013AC	Standard Service License

GE Healthcare has reclassified its service tools, diagnostics and documentation into various classes (please refer to the Service Licensing Notification statement at the beginning of this Quotation). The Standard License provides access to service tools used to perform basic

level service on the Equipment and is included at no charge for the warranty period.

Line	Qty.	Catalog	
12	1.00	W0301CT	TIP CT Scanner 1 Training Program

This training program is designed for customers purchasing a GEHC CT system to include Optima, EVO, or Cardiographe. GEHC will work with the designated Customer contact to agree upon a reasonable training schedule for a pre-defined group of core technologists that will leverage blended content delivery and may include a combination of onsite days and virtual offerings, to include TiP Virtual Assist, the GEHC Answerline, and available on-demand courses ("Virtual Inclusions"). This blended curriculum with multiple delivery platforms promotes learner retention and allows for an efficient and effective skill development.

This program may contain:

- Onsite training (generally 10 days)
  - Virtual Inclusions may include:
    - o Remote instructor-led training: Instructor leads a remote training session one-on-one or in a group, typically for 1 hour
    - o Answerline Support-Access to GEHC experts for clinical, non-emergency applications assistance via phone or by using the iLinq button on the imaging console
    - o Tip Virtual Assist-Direct interactive access to a GEHC expert for enhanced support.
    - o On Demand courses-On healthcare learning system. Self-paced courses and webinars (CE and non-CE).
- Onsite training days will be mutually agreed upon, but generally will not exceed 14 days. Onsite training will be provided from 8am-5pm local time Monday-Friday. Virtual Offerings are unlimited. This training program has a term of six (6) months commencing on Acceptance, where all onsite training must be scheduled and completed within six (6) months of Acceptance, and all Virtual Inclusions also expire at the end of such six (6) month period. Additional onsite days may be available for purchase separately. All GEHC "Training" terms and conditions apply. Given the unique nature of this program, if this program is purchased as part of a purchase under a Governing Agreement, including any Master Purchase Agreement, Group Purchasing Organization Agreement, or Strategic Alliance Agreement, this program shall take precedence over any conflicting training deliverables set forth therein.

**Total Quote Net Selling Price: \$1,200,000.00**

## GPO Agreement Reference Information

Customer:	Atrium Health
Contract Number:	CSS-GEHC MVA July 15 2011 a/k/a CSS-EQ-0031
Billing Terms:	100% billing at Ship Completion (Fulfillment) / Delivery
Payment Terms:	Net Due in 60 Days
Shipping Terms	FOB DESTINATION

Offer subject to the Terms and Conditions of the applicable Group Purchasing Agreements currently in effect between GE Healthcare and CSS-GEHC MVA July 15 2011 a/k/a CSS-EQ-0031

# Attachment D

November 5<sup>th</sup>, 2020

**Chris Hollar**

Manager, Capital Acquisitions  
Materials Resource Management  
Atrium Health  
Office: 704-512-7247

**RE: 2013 GE Optima 540 CT (SID = 704403NCRC)**

Dear Chris,

Thank you for allowing General Electric Healthcare (GEHC) the opportunity to earn your business. Atrium Health (AH) is a valued customer and we truly appreciate the partnership we share.

The purpose of this letter is to inform you that General Electric Healthcare will be responsible for removing your existing 2013 GE Optima 540 CT (SID = 704403NCRC) as part of your upcoming GE CT purchase and estimate the de-installation and removal will be completed at no additional charge to AH. AH will be responsible for the cost of any scan room construction, renovation, clearing the rig path, rigging costs, and opening the Lab room access panel. We will work closely with your facilities planning department to insure proper timing of the de-installation. The system will be de-installed, removed, and shipped by our GE team to our Goldseal business in Waukesha, WI. We understand and confirm that this unit may not be returned to the State of North Carolina without proper authorization from the North Carolina Certificate of Need (CON) section of DHSR.

Thank you again for the opportunity to earn your business. If you have any additional questions, feel free to call me at any time.

Sincerely,

-Herb

**Herb Klann**

Account Manager, GE Healthcare  
Diagnostic & Interventional Imaging

M 724-504-8778

[Herb.Klann@GE.com](mailto:Herb.Klann@GE.com)

# Attachment E



**PROPOSED TOTAL CAPITAL COST OF PROJECT**

**Project name:** CHSI Kannapolis CT Replacement  
**Provider/Company:** Atrium Health

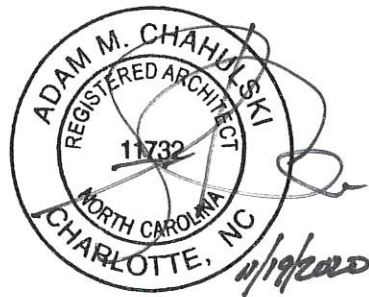
(1) Purchase price of land	\$0.00
(2) Closing costs	\$0.00
(3) Site Preparation	\$0.00
(4) Construction/Renovation Contract	\$335,000
(5) Landscaping	\$0.00
(6) Architect/Engineering Fees	\$50,000
(7) Medical Equipment	\$1,290,000.00
(8) Non Medical Equipment	\$0.00
(9) Furniture	\$0.00
(10) Consultant Fees (CON Fees, Legal Fees)	\$0.00
(11) Financing Costs	\$0.00
(12) Interest During Construction	\$0.00
(13) Other (IS, Security, Internal Allocation)	\$16,000.00
<b>(14) Total Capital Cost</b>	<b>\$1,691,000.00</b>

*I certify that, to the best of my knowledge, the above construction related costs of the proposed project named above are complete and correct.*

*[Handwritten Signature]*

(Signature of Licensed Architect or Engineer)

*11/19/2020*  
DATE



Sales taxes have been included in these equipment costs. However, because Atrium Health is entitled to a sales tax refund under N.C. Gen. Stat. § 105-164.14(b) and 105-467, the sales tax that Atrium Health initially incurs for this medical equipment purchase will be refunded to Atrium Health, and thus will reduce the capital costs that Atrium Health actually incurs for the equipment by **\$90,000**

**From:** [Flores, Disraeliza](#)  
**To:** [Waller, Martha K](#)  
**Subject:** FW: [External] Exemption Request for Union Medical Services, LLC d/b/a CHSI-Kannapolis to Replace Existing CT Scanner  
**Date:** Tuesday, December 15, 2020 9:37:51 AM  
**Attachments:** [2020 CHSI Kannapolis CT Replacement Exemption Request Final.pdf](#)

---

Disraeliza Flores  
Administrative Assistant  
Division of Health Service Regulation  
North Carolina Department of Health and Human Services

919-855-3872 office  
[disraeliza.flores@dhhs.nc.gov](mailto:disraeliza.flores@dhhs.nc.gov)

809 Ruggles Drive  
Raleigh NC, 27603

2704 Mail Service Center  
Raleigh, NC 27699-2704

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**From:** Huber, Brighid K <Brighid.Huber@atriumhealth.org>  
**Sent:** Monday, December 14, 2020 5:00 PM  
**To:** Piekaar, Misty L <Misty.Piekaar@dhhs.nc.gov>; Flores, Disraeliza <Disraeliza.Flores@dhhs.nc.gov>  
**Cc:** Kirkman, Elizabeth <Elizabeth.Kirkman@atriumhealth.org>  
**Subject:** [External] Exemption Request for Union Medical Services, LLC d/b/a CHSI-Kannapolis to Replace Existing CT Scanner

**CAUTION:** External email. Do not click links or open attachments unless you verify. Send all suspicious email as an attachment to [Report Spam](#).

Good afternoon,

Please find attached an exemption request submitted by Union Medical Services, LLC d/b/a Carolinas HealthCare System Imaging-Kannapolis ("CHSI-Kannapolis") to replace its existing CT scanner.

Thank you, and please let me know if you have any questions.

Best,

Brighid

**Brighid Knoll Huber, MHA, ATC**

*Strategic Services Group*

Mobile: 724-986-6214

**Atrium Health**

*Carolinas HealthCare System is Atrium Health*

2709 Water Ridge Parkway, Suite 200, Charlotte, NC 28217

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North Carolina Department of Health and Human Services  
Division of Health Service Regulation

Pat McCrory  
Governor

Aldona Z. Wos, M.D.  
Ambassador (Ret.)  
Secretary DHHS

Drexdal Pratt  
Division Director

August 22, 2013

Gary S. Qualls  
K&L Gates, LLP  
430 Davis Drive, Suite 400  
Morrisville, North Carolina 27560

**No Review**

Facility or Business: Southern Piedmont Imaging, LLC  
Project Description: Merger of Southern Piedmont Imaging, LLC with Union Medical Services, LLC  
County: Cabarrus  
FID #: 061206

Dear Mr. Qualls:

The Certificate of Need Section (CON Section) received your letter of August 15, 2013 regarding the above referenced proposal. Based on the CON law **in effect on the date of this response to your request**, the proposal described in your correspondence is not governed by, and therefore, does not currently require a certificate of need. However, please note that if the CON law is subsequently amended such that the above referenced proposal would require a certificate of need, this determination does not authorize you to proceed to develop the above referenced proposal when the new law becomes effective.

It should be noted that this determination is binding only for the facts represented by you. Consequently, if changes are made in the project or in the facts provided in your correspondence referenced above, a new determination as to whether a certificate of need is required would need to be made by the Certificate of Need Section. Changes in a project include, but are not limited to: (1) increases in the capital cost; (2) acquisition of medical equipment not included in the original cost estimate; (3) modifications in the design of the project; (4) change in location; and (5) any increase in the number of square feet to be constructed.



**Certificate of Need Section**

[www.ncdhhs.gov](http://www.ncdhhs.gov)

Telephone: 919-855-3873 • Fax: 919-733-8139

Location: Edgerton Building • 809 Ruggles Drive • Raleigh, NC 27603

Mailing Address: 2704 Mail Service Center • Raleigh, NC 27699-2704


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Gary S. Qualls  
August 22, 2013  
Page 2

Please contact the CON Section if you have any questions. Also, in all future correspondence you should reference the Facility I.D. # (FID) if the facility is licensed.

Sincerely,



Gloria C. Hale, Project Analyst



Craig R. Smith, Chief  
Certificate of Need Section

cc: Medical Facilities Planning Branch, DHR  
Acute and Home Care Licensure and Certification Section, DHR

Received by  
the CON Section  
Aug 15 2013

Gary S. Qualls  
D 919.466.1182  
F 919.516-2072  
gary.qualls@klgates.com

August 15, 2013

**Via Hand Delivery**

Mr. Craig R. Smith  
Chief, Certificate of Need Section  
Division of Health Service Regulation  
North Carolina Department of Health & Human  
Services  
809 Ruggles Drive  
Raleigh, NC 27603

Re: Corporate Reorganization of Diagnostic Center Under Development  
No Review Letter and Good Cause Transfer Request  
Southern Piedmont Imaging: Facility ID No. 061206

Dear Craig:

We represent The Charlotte-Mecklenburg Hospital Authority (“CMHA”), Union Medical Services, LLC, and Southern Piedmont Imaging, LLC. The purpose of this letter is to inform the North Carolina Department of Health and Human Services, Division of Health Service Regulation, Certificate of Need Section (the “Agency”) of the following corporate change: the merger of one limited liability company (Southern Piedmont Imaging, LLC), which is wholly-owned by CMHA and has two CON projects under development, with and into another limited liability company wholly-owned by CMHA (Union Medical Services, LLC).

The purpose of this proposal is to streamline the billing and other administrative functions of the one CMHA-controlled facility, Southern Piedmont Imaging, LLC, by merging it into one limited liability company wholly-owned by CMHA (Union Medical Services, LLC), and thereby enable more efficient operations. Union Medical Services, LLC is the owner and operator of Union West MRI, and CMHA became the sole member of Union Medical Services, LLC via the recent merger of Union Memorial Regional Medical Center, Inc. with and into CMHA.

As further explained below, we are requesting that the Agency: (1) confirm that this corporate change is not reviewable as a new institutional health service under the North Carolina Certificate of Need (“CON”) law; or (2) in the alternative, approve a good cause transfer of the two SPI CON Projects under development.

Craig R. Smith, Chief  
August 15, 2013  
Page 2

## I. THE PROPOSAL

Effective October 1, 2013, Southern Piedmont Imaging, LLC (“SPI”) will merge with and into Union Medical Services, LLC. SPI currently holds the following two CONs that are under development (hereafter “the SPI CON Projects”):

- Project ID No. F-7730-06 – Acquire a 64-slice CT scanner, X-ray unit, and digital mammography equipment and develop a diagnostic center/Cabarrus County
- Project ID No. F-7859-07 – Acquire a fixed MRI scanner and install it in the previously approved diagnostic center at the North Carolina Research Campus in Kannapolis/Cabarrus County.

See Exhibits A and B.

Currently, SPI is a wholly-owned subsidiary of CMHA. Therefore, because CMHA is the sole member of Union Medical Services, LLC, this merger does not change the ownership of SPI outside of CMHA wholly-controlled entities.

## II. NO REVIEW REQUEST

First, this type of proposed corporate reorganization and merger between or among wholly-controlled entities is not expressly addressed in N.C. Gen. Stat. § 131E-176(16). Pursuant to the maxim of statutory construction *expressio unius est exclusio alterius*, those transactions not included in N.C. Gen. Stat. § 131E-176(16) do not require a CON. See, e.g., In re Miller, 357 N.C. 316, 325, 584 S.E.2d 772, 780 (2003) (stating that “[u]nder the doctrine of *expressio unius est exclusio alterius*, when a statute lists the situations to which it applies, it implies the exclusion of situations not contained in the list”); see also Jackson v. A Woman’s Choice, Inc., 130 N.C. App. 590, 594, 503 S.E.2d 422, 425 (1998) (internal citations omitted) (“[W]here a statute is explicit on its face, the courts have no authority to impose restrictions that the statute does not expressly contain.”). Further, no capital expenditures are being incurred to accomplish this corporate change.

Second, to the extent that the holder of the CONs for the SPI CON Projects is changing, the identity of the holder is changing solely because of a corporate merger between two limited liability companies wholly-owned and wholly-controlled by CMHA. It is not the type of transaction that would trigger CON review. The merger of a wholly-owned subsidiary into another wholly-owned subsidiary does not change control or ownership

Craig R. Smith, Chief  
August 15, 2013  
Page 3

outside of the ultimate owner, CMHA. Rather, such a merger merely constitutes a corporate reorganization, as contemplated in 10A N.C.A.C. 14C.0502(b)(1).

## II. GOOD CAUSE TRANSFER

To the extent that the merger of SPI with and into Union Medical Services, LLC is considered to be a transfer of the SPI CON Projects or their CONs, we are requesting approval for a "good cause" transfer of these CONs under N.C. Gen. Stat. § 131E-189 and 10A N.C.A.C. 14C.0502. We believe that good cause for such transfers exists.

The purpose of this merger transaction is wholly unrelated to any of the pending CON projects, but is in conjunction with a larger corporate reorganization by merging one CMHA wholly-owned limited liability company, SPI, with and into another CMHA wholly-owned limited liability company, Union Medical Services, LLC. Moreover, Union Medical Services, LLC and CMHA will materially comply with the representations in the CON applications under development and the conditions placed on those projects under development. In all material respects, the operations and development of these projects will be the same as represented in the CON applications and in compliance with the issued CONs.

## III. CONCLUSION

Based upon the foregoing information, we hereby request that the Agency: (1) confirm that this corporate change is not reviewable as a new institutional health service under the CON law; or (2) in the alternative, approve a good cause transfer of the SPI CON Projects under development.

Thank you for your assistance in regard to this matter. Please let me know if you have any questions.

Sincerely,



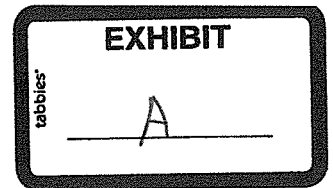
Gary S. Qualls



Craig R. Smith, Chief  
August 15, 2013  
Page 4

**Exhibits**

- A. CON for Project ID No. F-7730-06
- B. CON for Project ID No. F-7859-07



**North Carolina Department of Health and Human Services**  
**Division of Facility Services**  
**Certificate of Need Section**  
2704 Mail Service Center ■ Raleigh, North Carolina 27699-2704

Michael F. Easley, Governor  
Carmen Hooker Odom, Secretary

<http://facility-services.state.nc.us>

Lee Hoffman, Section Chief  
Phone: 919-855-3873  
Fax: 919-733-8139

May 10, 2007

Carol Lovin, Vice President  
Strategic Planning & Market Development  
Cabarrus Memorial Hospital  
920 Church Street, North  
Concord, NC 28025

RE: Transmittal of CON/ Project I.D.#F-7730-06/ Southern Piedmont Imaging, LLC/ Proposal to develop a diagnostic center and add mammography, CT scanner, ultrasound, dexascan, and x-ray imaging services/ Cabarrus County  
FID # 061206

Dear Ms. Lovin:

We are happy to transmit your certificate of need for the above referenced project. At this time, you should contact the Construction Section and the Licensure and Certification Section, regarding their procedures and requirements for the development of this project. The Certificate of Need Section will notify the other Sections that the certificate of need has been issued. However, please note that it is the responsibility of the holder of the certificate of need to contact these Sections concerning the next steps to follow in the development of the approved project.

Please be aware that pursuant to General Statute 131E-181(b), you are required to materially comply with the representations made in your application for a certificate of need, or with any conditions the department placed on the certificate of need. If you operate a service which materially differs from the representations made in your application for a certificate of need, or with any conditions the department placed on the certificate of need, including any increase in per diem reimbursement rates/charges, the department may bring remedial action against the holder of the certificate of need pursuant to General Statutes 131E-189 and 131E-190.

The holder of a certificate of need is obligated to submit progress reports to this Agency as required by 10A NCAC 14C .0209. The applicant shall notify the Agency of any variations from the schedule or the projected capital cost of the project. During the development of the project, the Agency may request any additional information pertinent to the project, including additional progress reports, to determine: 1) if the timetable specified on the certificate is being met; 2) if the amount of the capital expenditure obligated under the certificate has exceeded or can be expected to exceed the maximum amount under the certificate; 3) if the terms and conditions of the approval are being met; and 4) if the project is progressing as proposed in the application. The first progress report on this project is



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Ms. Lovin  
May 10, 2007  
Page 2

due September 1, 2007. Forms for the submittal of these reports are enclosed. Failure to submit any scheduled or requested progress report in a timely manner may result in the agency withdrawing the certificate pursuant to G.S.131E-189 (a). If after reviewing the status of the project, the Certificate of Need Section determines that the holder of the certificate is not meeting the timetable and is not making a good faith effort to meet it, the Agency may withdraw the certificate in accordance with G.S. 131E-189.

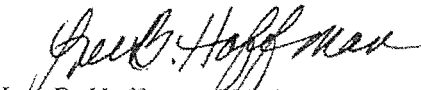
Moreover, please be advised that this Agency may assess a civil penalty not to exceed \$20,000 against any person who violates the terms of a certificate of need which has been issued each time the service provided is in violation of this provision (G.S. 131E-190(f)). If for some reason, the holder of a certificate of need determines it necessary to request an increase in a per diem charge or reimbursement rate over that which was stated in the application for the certificate of need, then the holder must first contact the Certificate of Need Section to obtain proper instructions for initiating such a request. The request for the increase will be considered by the department pursuant to G.S. 131E-181(b).

Please keep us informed of the progress in the development of this project. Please refer to the Project I.D.# and Facility I.D.# (FID) in all correspondence.

Sincerely,



Carol L. Hutchison, Project Analyst



Lee B. Hoffman, Chief  
Certificate of Need Section

CLH:LBH:ly  
Enclosures

cc: Medical Facilities Planning Section, DFS  
Construction Section, DFS  
Acute and Home Care Licensure and Certification Section, DFS

# STATE OF NORTH CAROLINA

Department of Health and Human Services

Division of Facility Services

## CERTIFICATE OF NEED

for

Project Identification Number #F-7730-06

FID# 061206

**ISSUED TO:** Southern Piedmont Imaging, LLC  
North Main Street  
Kannapolis, NC 28081

Pursuant to N.C. Gen. Stat. § 131E-175, et. seq., the North Carolina Department of Health and Human Services hereby authorizes the person or persons named above (the "certificate holder") to develop the certificate of need project identified above. The certificate holder shall develop the project in a manner consistent with the representations in the project application and with the conditions contained herein and shall make good faith efforts to meet the timetable contained herein. The certificate holder shall not exceed the maximum capital expenditure amount specified herein during the development of this project, except as provided by N.C. Gen. Stat. § 131E-176(16)e. The certificate holder shall not transfer or assign this certificate to any other person except as provided in N.C. Gen. Stat. § 131E-189(c). This certificate is valid only for the scope, physical location, and person(s) described herein. The Department may withdraw this certificate pursuant to N.C. Gen. Stat. § 131E-189 for any of the reasons provided in that law.

**SCOPE:** Acquire a 64-slice CT scanner, X-ray unit, and digital mammography equipment and develop a diagnostic center/ Cabarrus County

**CONDITIONS:** See Reverse Side

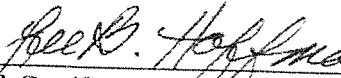
**PHYSICAL LOCATION:** Southern Piedmont Imaging, LLC  
North Main Street  
Kannapolis, NC 28081

**MAXIMUM CAPITAL EXPENDITURE:** \$7,661,838

**TIMETABLE:** See Reverse Side

**FIRST PROGRESS REPORT DUE:** September 1, 2007

This certificate is effective as of the 1<sup>st</sup> day of May, 2007

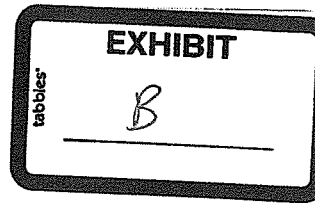
  
\_\_\_\_\_  
Chief, Certificate of Need Section  
Division of Facility Services

**CONDITIONS:**

1. Southern Piedmont Imaging, Inc. shall materially comply with all representations made in its certificate of need application.
2. Southern Piedmont Imaging, Inc. shall develop and operate no more than one diagnostic center to be located at North Main Street, Kannapolis in Cabarrus County.
3. Southern Piedmont Imaging, Inc. shall acquire no more than one new CT scanner, one new mammography unit, and one new x-ray unit and relocate from North East Medical Center one existing ultrasound machine and one existing bone densitometry machine.
4. Southern Piedmont Imaging, Inc. shall not acquire by purchase or lease, within one year after completion of this project, any equipment including replacement equipment, which costs or has a fair market value of \$10,000 or more that was not included in the capital expenditure in Section VIII.1 of the application.
5. Southern Piedmont Imaging, Inc. shall lease and upfit no more space than is color highlighted for the diagnostic center on the drawings in Exhibit 8 of the application.
6. Southern Piedmont Imaging, Inc. shall acknowledge acceptance of and agree to comply with all conditions stated herein to the Certificate of Need Section in writing prior to issuance of the certificate of need.

**TIMETABLE:**

Completion of final drawings and specifications -----	July 15, 2007
Contract Award (Notice to Proceed -----	December 1, 2007
50% Completion of construction -----	May 1, 2008
Completion of Construction -----	September 1, 2008
Occupancy/Offering of service -----	October 1, 2008



**North Carolina Department of Health and Human Services  
Division of Health Service Regulation  
Certificate of Need Section**

2704 Mail Service Center v Raleigh, North Carolina 27699-2704

Michael F. Easley, Governor  
Dempsey Benton, Secretary

[www.ncdhhs.gov/dhsr](http://www.ncdhhs.gov/dhsr)

Lee Hoffman, Section Chief  
Phone: 919-855-3873  
Fax: 919-733-8139

October 31, 2008

Carol Lovin, VP, RN, MN  
Southern Piedmont Imaging  
Strategic Planning & Market Development  
920 Church St., North  
Concord, NC 28025

RE: Transmittal of CON/ Project I.D. #F-7859-07/ Southern Piedmont Imaging, LLC/ Proposal to acquire a fixed MRI scanner and install in approved diagnostic center at the NC Research Campus in Kannapolis, NC/ Cabarrus County  
FID #061206

Dear Ms. Lovin:

We are happy to transmit your certificate of need for the above referenced project. At this time, you should contact the Construction Section and the Licensure and Certification Section, regarding their procedures and requirements for the development of this project. The Certificate of Need Section will notify the other Sections that the certificate of need has been issued. However, please note that it is the responsibility of the holder of the certificate of need to contact these Sections concerning the next steps to follow in the development of the approved project.

Please be aware that pursuant to General Statute 131E-181(b), you are required to materially comply with the representations made in your application for a certificate of need, or with any conditions the department placed on the certificate of need. If you operate a service which materially differs from the representations made in your application for a certificate of need, or with any conditions the department placed on the certificate of need, including any increase in per diem reimbursement rates/charges, the department may bring remedial action against the holder of the certificate of need pursuant to General Statutes 131E-189 and 131E-190.

The holder of a certificate of need is obligated to submit progress reports to this Agency as required by 10A NCAC 14C .0209. The applicant shall notify the Agency of any variations from the schedule or the projected capital cost of the project. During the development of the project, the Agency may request any additional information pertinent to the project, including additional progress reports, to determine: 1) if the timetable specified on the certificate is being met; 2) if the amount of the capital expenditure obligated under the certificate has exceeded or can be expected to exceed the maximum amount under the certificate; 3) if the terms and conditions of the approval are being met; and 4) if the project is progressing as proposed in the application. The first progress report on this project is due February 15, 2009. Forms for the submittal of these reports are enclosed.



Location: 701 Barbour Drive v Dorothea Dix Hospital Campus v Raleigh, N.C. 27603  
An Equal Opportunity / Affirmative Action Employer



Carol Lovin  
October 31, 2008  
Page 2

Failure to submit any scheduled or requested progress report in a timely manner may result in the agency withdrawing the certificate pursuant to G.S.131E-189 (a). If after reviewing the status of the project, the Certificate of Need Section determines that the holder of the certificate is not meeting the timetable and is not making a good faith effort to meet it, the Agency may withdraw the certificate in accordance with G.S. 131E-189.

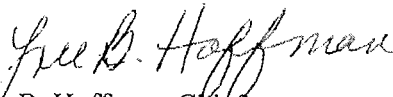
Moreover, please be advised that this Agency may assess a civil penalty not to exceed \$20,000 against any person who violates the terms of a certificate of need which has been issued each time the service provided is in violation of this provision (G.S. 131E-190(f)). If for some reason, the holder of a certificate of need determines it necessary to request an increase in a per diem charge or reimbursement rate over that which was stated in the application for the certificate of need, then the holder must first contact the Certificate of Need Section to obtain proper instructions for initiating such a request. The request for the increase will be considered by the department pursuant to G.S. 131E-181(b).

Please keep us informed of the progress in the development of this project. Please refer to the Project I.D.# and Facility I.D.# (FID) in all correspondence.

Sincerely,



Tanya S. Rupp, Project Analyst



Lee B. Hoffman, Chief  
Certificate of Need Section

TSR:LBH:se

Enclosures

cc: Medical Facilities Planning Section, DHSR

# STATE OF NORTH CAROLINA

*Department of Health and Human Services  
Division of Health Service Regulation*

## **CERTIFICATE OF NEED**

for

**Project Identification Number #F-7859-07  
FID #061206**

**ISSUED TO:** Southern Piedmont Imaging, LLC  
North Main Street  
Kannapolis, NC 28081

Pursuant to N.C. Gen. Stat. § 131E-175, et. seq., the North Carolina Department of Health and Human Services hereby authorizes the person or persons named above (the "certificate holder") to develop the certificate of need project identified above. The certificate holder shall develop the project in a manner consistent with the representations in the project application and with the conditions contained herein and shall make good faith efforts to meet the timetable contained herein. The certificate holder shall not exceed the maximum capital expenditure amount specified herein during the development of this project, except as provided by N.C. Gen. Stat. § 131E-176(16)e. The certificate holder shall not transfer or assign this certificate to any other person except as provided in N.C. Gen. Stat. § 131E-189(c). This certificate is valid only for the scope, physical location, and person(s) described herein. The Department may withdraw this certificate pursuant to N.C. Gen. Stat. § 131E-189 for any of the reasons provided in that law.

**SCOPE:** Acquire a fixed MRI scanner and install it in the previously approved diagnostic center at the North Carolina Research Campus in Kannapolis/ Cabarrus County

**CONDITIONS:** See Reverse Side


**PHYSICAL LOCATION:** Southern Piedmont Imaging  
North Main Street  
Kannapolis, NC 28081

**MAXIMUM CAPITAL EXPENDITURE:** \$ 2,091,794

**TIMETABLE:** See Reverse Side

**FIRST PROGRESS REPORT DUE:** February 15<sup>th</sup>, 2009.

This certificate is effective as of the 29<sup>th</sup> day of October, 2008

  
\_\_\_\_\_  
Chief, Certificate of Need Section  
Division of Health Service Regulation



**CONDITIONS:**

1. Southern Piedmont Imaging, LLC, shall materially comply with all representations made in its certificate of need application.
2. Southern Piedmont Imaging, LLC shall acquire no more than one fixed magnetic resonance imaging (MRI) scanner.
3. Southern Piedmont Imaging, LLC shall not acquire, as part of this project, any equipment that is not included in the project's proposed capital expenditure in Section VIII of the application or that would otherwise require a certificate of need.
4. Southern Piedmont Imaging, LLC shall obtain accreditation from the American College of Radiology for magnetic resonance imaging services within two years following operation of the fixed MRI scanner.
5. Southern Piedmont Imaging, LLC shall acknowledge acceptance of and agree to comply with all conditions stated herein to the Certificate of Need Section in writing prior to issuance of the certificate of need.

A letter acknowledging acceptance and compliance with all conditions stated in the conditional approval letter was received by the Certificate of Need Section on November 15, 2007.

**TIMETABLE:**

Approval of Final Drawings and Specifications by the Construction Section, DHSR	_____	March 1, 2009
50% Completion of Construction	_____	June 1, 2009
Occupancy/Offering of Service(s)	_____	October 1, 2009

**STATE OF NORTH CAROLINA**  
Department of Health and Human Services  
Division of Facility Services

**CERTIFICATE OF NEED**  
for  
**Project Identification Number #F-7730-06**  
**FID# 061206**

**ISSUED TO: Southern Piedmont Imaging, LLC**  
**North Main Street**  
**Kannapolis, NC 28081**

Pursuant to N.C. Gen. Stat. § 131E-175, et. seq., the North Carolina Department of Health and Human Services hereby authorizes the person or persons named above (the "certificate holder") to develop the certificate of need project identified above. The certificate holder shall develop the project in a manner consistent with the representations in the project application and with the conditions contained herein and shall make good faith efforts to meet the timetable contained herein. The certificate holder shall not exceed the maximum capital expenditure amount specified herein during the development of this project, except as provided by N.C. Gen. Stat. § 131E-176(16)e. The certificate holder shall not transfer or assign this certificate to any other person except as provided in N.C. Gen. Stat. § 131E-189(c). This certificate is valid only for the scope, physical location, and person(s) described herein. The Department may withdraw this certificate pursuant to N.C. Gen. Stat. § 131E-189 for any of the reasons provided in that law.

**SCOPE: Acquire a 64-slice CT scanner, X-ray unit, and digital mammography equipment and develop a diagnostic center/ Cabarrus County**

**CONDITIONS: See Reverse Side**

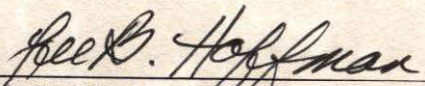
**PHYSICAL LOCATION: Southern Piedmont Imaging, LLC**  
**North Main Street**  
**Kannapolis, NC 28081**

**MAXIMUM CAPITAL EXPENDITURE: \$7,661,838**

**TIMETABLE: See Reverse Side**

**FIRST PROGRESS REPORT DUE: September 1, 2007**

This certificate is effective as of the 1<sup>st</sup> day of May, 2007

  
\_\_\_\_\_  
Chief, Certificate of Need Section  
Division of Facility Services

**CONDITIONS:**

1. Southern Piedmont Imaging, Inc. shall materially comply with all representations made in its certificate of need application.
2. Southern Piedmont Imaging, Inc. shall develop and operate no more than one diagnostic center to be located at North Main Street, Kannapolis in Cabarrus County.
3. Southern Piedmont Imaging, Inc. shall acquire no more than one new CT scanner, one new mammography unit, and one new x-ray unit and relocate from North East Medical Center one existing ultrasound machine and one existing bone densitometry machine.
4. Southern Piedmont Imaging, Inc. shall not acquire by purchase or lease, within one year after completion of this project, any equipment including replacement equipment, which costs or has a fair market value of \$10,000 or more that was not included in the capital expenditure in Section VIII.1 of the application.
5. Southern Piedmont Imaging, Inc. shall lease and upfit no more space than is color highlighted for the diagnostic center on the drawings in Exhibit 8 of the application.
6. Southern Piedmont Imaging, Inc. shall acknowledge acceptance of and agree to comply with all conditions stated herein to the Certificate of Need Section in writing prior to issuance of the certificate of need.

**TIMETABLE:**

Completion of final drawings and specifications -----	July 15, 2007
Contract Award (Notice to Proceed -----	December 1, 2007
50% Completion of construction -----	May 1, 2008
Completion of Construction -----	September 1, 2008
Occupancy/Offering of service -----	October 1, 2008



North Carolina Department of Health and Human Services  
Division of Health Service Regulation

Pat McCrory  
Governor

Aldona Z. Wos, M.D.  
Ambassador (Ret.)  
Secretary DHHS

Drexdal Pratt  
Division Director

August 6, 2014

Elizabeth Kirkman  
2709 Water Ridge Parkway, Suite 200  
Charlotte, NC 28217

**Development Complete**

Project I.D. #: F-7730-06  
Facility: Southern Piedmont Imaging, LLC  
Project Description: Acquire a 64-slice CT scanner, x-ray unit and digital mammography equipment and develop a diagnostic center. Relocate one ultrasound unit and one bone densitometry machine  
County: Cabarrus  
FID #: 061206

Dear Ms. Kirkman:

On May 1, 2007, this Department issued a Certificate of Need pursuant to Chapter 131E, Article 9 of the General Statutes of North Carolina for the above-captioned project. The Certificate of Need Section has hereby determined that the development of the above referenced project is now complete. It was completed and certified on February 10, 2014.

Please note that this determination does not absolve the holder of the certificate from materially complying with representations in the application concerning the operation of the facility. Nor does the determination of completeness absolve the holder of the certificate from complying with any applicable conditions still remaining on the certificate.

If you have any questions concerning this certificate of need, please feel free to contact me.

Please refer to the Project I.D. # and Facility I.D. # (FID) in all correspondence.

Sincerely,

Gloria C. Hale, Project Analyst  
Certificate of Need Section

cc: Medical Facilities Planning Branch, DHSR



**Certificate of Need Section**

[www.ncdhhs.gov](http://www.ncdhhs.gov)

Telephone: 919-855-3873 • Fax: 919-733-8139

Location: Edgerton Building • 809 Ruggles Drive • Raleigh, NC 27603

Mailing Address: 2704 Mail Service Center • Raleigh, NC 27699-2704

An Equal Opportunity/ Affirmative Action Employer





# Carolinan HealthCare System

*Edward J. Brown III*  
Chairman

*Michael C. Tarwater, FACHE*  
Chief Executive Officer

*Joseph G. Piemont*  
President & COO

July 1, 2014

Ms. Gloria Hale, Project Analyst  
Certificate of Need Section  
Division of Health Service Regulation  
N. C. Department of Human Resources  
809 Ruggles Dr.  
Raleigh, NC 27603

Dear Ms. Hale:

I have attached the final progress report with supporting documentation for the following project:

- F-7730-06 – Acquire a 64-slice CT scanner, Xray unit, and digital mammography equipment and develop a diagnostic center. Relocate one ultrasound unit and one bone densitometry machine.

Should you have any questions or need additional information, please do not hesitate to call me at 704.446.6553.

Sincerely,

Elisa Alfieri, Management Associate  
CHS Management Company

**CERTIFICATE OF NEED  
PROGRESS REPORT FORM**

County: Cabarrus Date of Progress Report: July 1, 2014  
Facility: Southern Piedmont Imaging, LLC Facility I.D. #: 061206  
Project I.D. #: F-7730-06 Effective Date of Certificate: May 1, 2007  
Project Description: Acquire a 64-slice CT scanner, X-ray unit and digital mammography equipment and develop a diagnostic center. Relocate one ultrasound unit and one bone densitometry machine.

**A. Status of the Project**

- 1) Describe in **detail** the steps taken to complete the project since the CON was issued or since the last progress report was submitted.

**This project is complete and being utilized. Final project accounting is complete and final documentation is provided with this report.**

- 2) Describe any of the previously approved changes which will impact this project:
- a. Cost Overruns and/or Changes of Scope (Include the Project I.D. numbers);
  - b. Material Compliance determinations; and
  - c. Declaratory Rulings
- 3) If the project is not going to be developed exactly as approved, describe all differences between the project as approved and the project as currently proposed. Such changes include, but are not limited to, changes in the:
- a. Site;
  - b. Design of the facility;
  - c. Number or type of beds to be developed;
  - d. Medical equipment to be acquired;
  - e. Proposed charges; and
  - f. Capital cost of the project.
- 4) Pursuant to G.S. 131E-181(d), the Certificate of Need (CON) Section cannot determine that a project is complete until "the health service or the health service facility for which the certificate of need was issued is licensed and certified and in material compliance with the representations made in the certificate of need application." To document that new or replacement facilities, new or additional beds or dialysis stations, new or replacement equipment or new services have been licensed and certified, provide copies of correspondence from the appropriate section within the Division of Health Service Regulation and the Centers for Medicare and Medicaid Services (CMS).

**See attached documentation from CMS.**

**B. Timetable**

1. Complete the following table. The first column **must** include the timetable dates found on the certificate of need. If the CON Section has authorized an extension of the timetable in writing, you may substitute the dates from that letter.

PROJECT MILESTONES	Projected completion date from certificate	Actual completion date	Proposed completion date*
	Month/day/year	Month/day/year	Month/day/year
Obtained funds for the project	5/1/07	04/25/11	
Final drawings and specifications sent to Construction, DHSR	10/15/07	1/14/13	10/01/12
Final drawings approved by Construction, DHSR			
Acquisition of land/facility			
Construction contract executed	12/1/07	03/11/13	01/07/13
25% completion of construction	2/1/08	04/22/13	03/01/13
50% completion of construction	5/1/08	06/07/13	04/01/13
75% completion of construction	7/1/08	07/12/13	05/01/13
Completion of construction	9/1/08	08/12/13	06/01/13
Ordering of medical equipment	3/1/08	07/07/13	02/14/13
Operation of medical equipment	10/1/08	09/16/13	07/15/13
Occupancy/offering of services	10/1/08	02/10/14	01/15/14
Licensure			
Certification			

*\*Proposed completion dates are contingent upon CON approval*

2. If the project is experiencing delays in development, explain in detail the reasons for the delay.

**C. Medical Equipment Projects** – If the project involves the acquisition of any of the following equipment: 1) major medical equipment as defined in NCGS §131E-176(14o); 2) the specific equipment listed in NCGS §131-176(16); or 3) equipment that creates a diagnostic center as defined in NCGS §131E-176(7a), provide the following information for each piece or unit of equipment: 1) manufacturer; 2) model; 3) serial number; and 4) date acquired.

**D. Capital Expenditure**

1. What is the total approved capital cost of the project indicated on the certificate of need? **\$7,661,838**
2. Complete the table on the following page.
  - a. Include all capital costs that have been paid to date as well as those that the applicant(s) are legally obligated to pay.
  - b. If you have not already done so, provide copies of all executed contracts, including architect and engineering services (as applicable) and all final purchase orders for medical equipment costing more than \$10,000 per unit.
  - c. If the project involves renovation or construction, provide copies of the Contractors Application for Payment [AIA G702] with Schedule of Values [AIA G703].

	Capital Expense Since Last Report	Total Cumulative Capital Expenditure
<b>Site Costs</b>		
Purchase price of land	_____	_____
Closing costs	_____	_____
Site Inspection and Survey	_____	_____
Legal fees	_____	_____
Site preparation costs	_____	_____
Other site costs (identify)	_____	_____
<b>Subtotal Site Costs</b>	_____	_____
<b>Construction Contract</b>		
Cost of materials	(\$22,431)*	\$1,072,143
Cost of Labor	_____	_____
Other (Specify)	_____	_____
<b>Subtotal Construction Contract</b>	<b>(\$22,431)*</b>	<b>\$1,072,143</b>
<b>Miscellaneous Costs</b>		
Building purchase	_____	_____
Fixed equipment purchase/lease	(\$240,139)**	\$675,308
Moveable equipment purchase/lease	\$247,914	\$330,859
Furniture	(\$8,950)*	\$91,510
Landscaping	_____	_____
Consultant fees	(\$28,821)*	\$237,243
Financing costs	_____	_____
Interest during construction	_____	_____
Other miscellaneous costs (Specify)	_____	_____
<b>Subtotal Miscellaneous Costs</b>	<b>(\$29,996)*</b>	<b>\$1,334,920</b>
<b>Total</b>	<b>(\$52,427)*</b>	<b>\$2,407,063</b>

\*Full commitment amount not expended during project

\*\* Correction of Fixed to Moveable due to previous mis-classification

3. What do you project to be the remaining capital expenditure required to complete the project? **\$0**
4. Will the total actual capital cost of the project exceed 115% of the approved capital expenditure on the certificate of need? If yes, explain the reasons for the difference.

**The total actual capital cost did not exceed 115% of \$7,661,838.**

E. **CERTIFICATION** – The undersigned hereby certifies that the responses to the questions in this progress report and the attached documents are correct to the best of his or her knowledge and belief. In addition, I acknowledge that incomplete progress report forms **will not** be accepted and **must** be resubmitted upon notification from a CON Project Analyst.

Signature: 

Name and Title

F. Del Murphy, Jr. Senior Vice President Planning & Development

Telephone Number

704-355-6060





**Palmetto GBA**  
PARTNERS IN EXCELLENCE.

A/B MAC Jurisdiction 11  
North Carolina, South Carolina,  
Virginia, West Virginia,  
Home Health and Hospice

April 14, 2014

Union Medical Services LLC  
Attn: Jane Lutz  
1705 East Blvd  
Charlotte NC 28203

DCN: 14010003000486/ 14049003000191

On April 3, 2014, an On-Site visit was completed at your Independent Diagnostic Testing Facility (IDTF), which is located at 201 Dale Earnhardt Blvd, Suite 100. After conducting the visit and reviewing all of the information that was provided, we find that no additional documentation is needed. The IDTF facility listed above has met the current CMS requirements to enroll in the Medicare program as an IDTF provider. Approval or denial of the IDTF application is not determined based on whether or not the supervising physician is employed by the IDTF.

By use of the IDTF's Medicare Provider Transaction Access Number (PTAN), which is provided in this letter, you are acknowledging that:

- You understand and will comply with Medicare regulations relating to IDTF billing;
- You agree and attest that all services performed and billed to Medicare have been rendered and supervised by qualified personnel as identified in the Federal Register (62) (211) published October 31, 1997;
- You will notify Palmetto GBA Medicare of additions and/or deletions to your supervisory and technical staff involved with the rendering of services to Medicare patients;
- You will take full responsibility for the quality of service rendered to Medicare patients under the care of your IDTF. For auditing purposes, you must maintain documentation of all services rendered and the qualified staff who rendered and supervised each service performed;
- You agree that only Union Medical Services LLC will bill and receive any fees or charges for the services that are rendered at the above named facility;
- You further understand that continual review will take place of the information you submitted for enrollment as an IDTF. If at any time this information is questioned, you will work with the carrier to resolve all questionable issues, while understanding that failure to cooperate fully may result in the termination of your Medicare PIN;
- As a reminder, any changes to your organizational structure must be reported to the Medicare carrier within 90 days of the effective date of the change. All changes must be submitted on the appropriate CMS application.

Post Office Box 100190  
Columbia, South Carolina 29202

[www.palmettogba.com](http://www.palmettogba.com)

  
A CMS-Contracted Medicare Administrative Contractor

Your IDTF PTAN is: Q455720001  
Your IDTF NPI is: 1699104844  
Your Supervising Physicians are: As listed on the application.  
Your Interpreting Physician is: As listed on the application.  
Your Non-physician personnel is: As listed on the application.  
Your effective date is: 02/01/2014  
You are a Participating Provider

The Provider Education Information Packet and the Medicare Physician Fee Schedule are available at our website at: [www.palmettogba.com](http://www.palmettogba.com). This information is available to help in understanding Medicare issues that can affect you and your Medicare patients.

If you choose to be a Non-Participating provider, there are limits on the charges that can be made to Medicare beneficiaries.

**Medicare Limiting Charges for Non-Participating Providers** – Under Public Law No 99-509, the Omnibus Budget Reconciliation Act, there continues to be limits on the charges to Medicare beneficiaries, which may be made by Non-Participating providers. If a Non-Participating provider violates these limits, he or she may be subject to sanctions such as exclusion from the Medicare program and/or payment of civil monetary penalties (\$2,000.00 per frequency).

### **Electronic Filers**

If you are an existing Medicare provider and currently submit claims electronically, or are new to the Medicare program and plan on filing claims electronically, please do not use the above referenced PIN until you or your clearinghouse has had contact with our EDI department. If you have questions about electronic claims submission, please contact our EDI department at (866) 749-4301.

If you have any questions, please contact our Provider Contact Center at (866) 830-3043.

Sincerely,

**Andy Smith**

Provider Enrollment Analyst  
Medicare Operations  
Division of Provider Enrollment

Post Office Box 100190  
Columbia, South Carolina 29202

[www.palmettogba.com](http://www.palmettogba.com)

  
UNITED STATES DEPARTMENT OF HEALTH & HUMAN SERVICES  
A CMS-Contracted Medicare Administrative Contractor

Union Medical Services, LLC (formerly Southern Piedmont Imaging, LLC)  
Development of a Diagnostic Center in Cabarrus County  
Project ID/FID: (F-7730-06/061206)

Final Document Table of Contents

Attachment A	DHSR Construction Section Approval
Attachment B	Certificate of Occupancy
Attachment C	Punch List
Attachment D	Sprinkler Certification
Attachment E	NFPA Fire Alarm System Certification
Attachment F	Electrical Grounding Report
Attachment G	CHS Medical Gas Certification
Attachment H	General Contractor's Final Certificate for Payment
Attachment I	AIA Documents
Attachment J	General Contractors Warranty
Attachment K	Fully Executed Certificate of Substantial Completion
Attachment L	Purchase Orders

**Attachment A**  
**DHSR Construction Section Approval**



**North Carolina Department of Health and Human Services  
Division of Health Service Regulation  
Construction Section**

2705 Mail Service Center • Raleigh, North Carolina 27699-2705  
<http://www.ncdhhs.gov/dhsr/>

Drexdal Pratt, Director

Beverly Eaves Perdue, Governor  
Albert A. Delia, Acting Secretary

Steven C. Lewis, Chief  
Phone: 919-855-3893  
Fax: 919-733-6592

December 4, 2012

Jack Chamblee, VP Facilities Management Group  
Carolina Health Care Systems  
P.O. Box 32861  
Charlotte, NC 28232

Re: Project No. HL-9394-LDB/VT  
FID No. 070667  
Carolinas Medical Center-Kannapolis  
Tenant Uplift for Diagnostic Imaging Center  
Kannapolis (Cabarrus County)

Dear Mr. Chamblee:

North Carolina Session Law 2009-487 (House Bill 1297) exempts most hospital outpatient services from being licensed when they are provided in buildings that are located more than thirty feet from the hospital, and are designated as a Business Occupancy under NFPA 101 2000 Edition. Due to this law, the Carolinas Medical Center-Kannapolis, Tenant Uplift for Diagnostic Imaging Center submitted October 8, 2012 is not required to be reviewed or inspected by the DHSR Construction Section. However, if the facility is to be expanded in the future, the Hospital may want to verify that this facility meets the requirements for Ambulatory Surgery Licensure. Your design fee will be refunded separately by mail.

If this clinic operates under the Hospital's Medicare/Medicaid provider number, the clinic will be subject to certification surveys and must meet the requirements of NFPA 101 2000 Edition Chapters 38 New Business Occupancies. Deficiencies found could impact the hospital's certification.

Sincerely,

Larry Beals  
Architect  
DHSR Construction Section  
[Larry.Beals@dhhs.nc.gov](mailto:Larry.Beals@dhhs.nc.gov)  
919-855-3898

cc: Design Strategies – Ron Boozer (via e-mail only)



Location: 1800 Umstead Drive ■ Dorothea Dix Hospital Campus ■ Raleigh, N.C. 27603  
An Equal Opportunity / Affirmative Action Employer



**Attachment B**  
**Certificate of Occupancy**



Planning and Development Department  
Construction Standards Division

**CERTIFICATE OF OCCUPANCY**

THIS IS TO CERTIFY THAT      MESSER CONSTRUCTION CO MESSER  
5158 FISHWICK DRIVE  
CINCINNATI, OH 45216

HAVING FILED FOR APPLICATION ON 03/08/2013  
FOR BUILDING PERMIT BU2013-00134  
FOR THE CHS NCRC MOB DIAGNOSTIC IMAGING CENTER  
COMMERCIAL UPFIT  
ON PROPERTY LOCATED AT 201 DALE EARNHARDT BLVD KANNAPOLIS 28081

THIS CERTIFICATE IS BASED ON THE STATED USE AND OCCUPANCY AND IS SUBJECT TO EQUITABLE ENFORCEMENT UNDER NORTH CAROLINA GENERAL STATUTE 153A-372. A CHANGE OF USE OR OCCUPANCY WILL REQUIRE THE ISSUANCE OF A NEW CERTIFICATE.

*Scott Devaux*

\_\_\_\_\_  
Scott Devaux

Cabarrus County Chief Inspector

**Attachment C**  
**Punch List**



Planning  
Architecture  
Interior Architecture  
Landscape Architecture  
Engineering

## DesignStrategies

October 11, 2013

CHS Facilities Management Group  
Carolinas Healthcare System  
4828 Airport Center Parkway  
Building E  
Charlotte, NC 28208

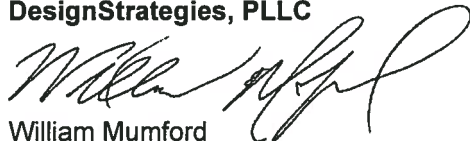
Attention: Mary Ellen George

Re: NCRC Diagnostic Imaging Center Counter-Punch List Acceptance  
OSR# 2293450  
DS# 0429.00

Dear Mary Ellen:

Design Strategies received confirmation from Messer Construction on October 9, 2013 that the counter-punch items outlined in the letter dated August 22, 2013 have been completed. The punch items have been completed to an acceptable manner.

Sincerely,  
**DesignStrategies, PLLC**



William Mumford

attachments: Messer Construction Counter-Punch Completion email

## William Mumford

---

**From:** Stamper, Tony <TStamper@messer.com>  
**Sent:** Wednesday, October 09, 2013 8:48 AM  
**To:** Lisa Yagla  
**Subject:** CHS NCRC Completed back punch pics  
**Attachments:** photo 1.PNG; photo 2.PNG; photo 3.PNG; photo 4.PNG; photo 5.PNG; IMG\_0119.jpeg;  
photo 1.PNG; photo 2.PNG; photo 3.PNG; photo 4.PNG

**Follow Up Flag:** Follow up  
**Flag Status:** Completed

Lisa -  
As I mentioned yesterday, I had our guy address the items we discussed yesterday (I attached pics of the items we corrected). Plus the lead glass was replaced in x-ray. One other item we didn't talk about is the RFC for the perforated raised access floor panels. They are ordered and I am tracking to completion. I also confirmed that the SS shelf in the soiled utility room is installed.

-----Original Message-----

**From:** Stamper, Tony  
**Sent:** Wednesday, October 09, 2013 8:06 AM  
**To:** Stamper, Tony  
**Subject:**

[<http://messer.widencdn.net/embed/image/9b930f127e1829c9e73a4a064b995206d6198576762f9840>]



Engineering Patient Care

June 26, 2014

William Mumford  
Design Strategies  
500 East Boulevard  
Charlotte, NC 28203

Re: CHS NCRC MOB – Imaging  
Caveo Project #12-2263

Dear William,

The original punch letter was sent by Kariann Hartson in August of 2013.

My records do not include any further observation documents.

To the best of my knowledge the project is complete and should be accepted by the owner.

Thank you,

  
Kline Kelly  
PE, Principal

Planning  
Architecture  
Interior Architecture  
Landscape Architecture  
Engineering

## DesignStrategies

August 22, 2013  
Via Electronic Mail

Messer Construction  
4201 Stuart Andrew Boulevard  
Suite B  
Charlotte, North Carolina 28217

Attention: Tony Stamper

Re: CHS NCRC Diagnostic Imaging Center  
OSR# 2293450  
DS# 0429.00  
Kannapolis, NC 28081

Dear Tony:

A secondary review of the above referenced project was held on August 20, 2013. The attached document contains an enumeration of items noted during our initial review. Items not highlighted in the attached document require completion or correction under terms of your Contract. Omission of any items required by your Contract from this list does not relieve your firm of the responsibility to complete all work in accordance with the Contract Documents including authorized changes thereto.

General Notes:

1. Final clean to be performed
2. Clean inside millwork
3. Caulk at hollow metal frames (walls and floors)
4. Caulk at exterior windows
5. Caulk at back splash and side splash to wall

**Attached: NCRC Diagnostic Imaging Counter Punch List**

Please advise when all noted items have been corrected.

Sincerely,

**DesignStrategies, PLLC**



Adam Dailey

cc: CHS – Mary Ellen George  
DS – Lisa Yagla

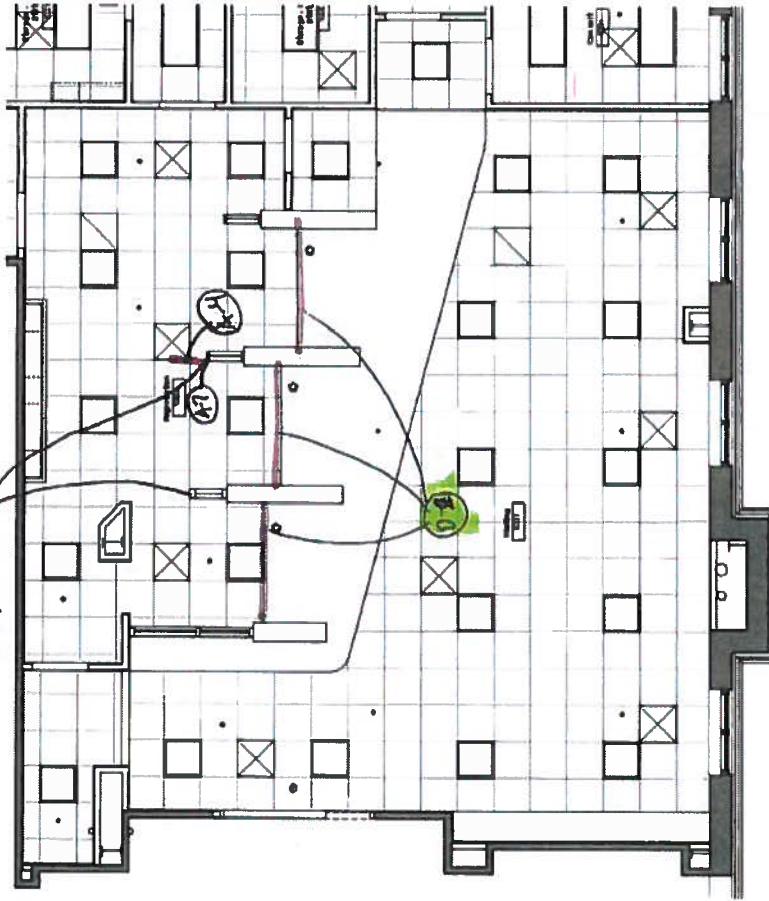
**DesignStrategies, LLC**, 500 East Blvd. Charlotte, North Carolina 28203 / 704.344.8540 / 704.344.8544



**General Notes:**

1. Final Clean to be performed
2. Clean inside millwork
3. Caulk at hollow metal frames (walls and floors)
4. Caulk at exterior windows
5. Caulk at back splash and side splash to wall

FINISH GYP 02  
WALL, SEE PHOTO



**LEGEND**

A-1	Replace damaged ACT	H-1	Adjust door
A-2	Remove paint from grid	H-2	Add smoke seal at door gap
A-3	Repair large/inconsistent gap between grid and partition	H-3	Repair door damage
A-4	Repair bent bee	H-4	Repair frame damage
A-5	Repair/large lens on light	H-5	Remove tape from label
A-6	Repair large gap between grid pieces	H-6	Add caulk at frame
A-7	Repair/mirror grid at corner	H-7	Patch nail heads at view window
B-1	Add closet rod	H-8	Repair damage to integral blind
B-2	Add lock	H-9	Add floor stop
B-3	Add closers	H-10	Complete install of view window
B-4	Repair damage	H-11	Integral blinds missing
B-5	Repair/mirror/add caulk	I-1	Replace uneven tiles
B-6	Repair misalignment with gyp bd	I-2	Replace sharp edges at shampoo niche
B-7	Adjust door alignments	I-3	Add caulk in corners
B-8	Remove paint from millwork	I-4	Floor and wall tile misaligned creating large grout joint/gap
B-9	Splash guard inconsistent finish on each side	I-5	Replace caulk to match grout
B-10	Remove all shims from millwork	I-6	Caulk at threshold
B-11	Shelves not flush with wall	I-7	Raise transition strip to align with top surfaces of tiles - eliminate valley
C-1	Repair damaged gyp bd	I-8	Add connect color grout
C-2	Gyp overcoat at floor	I-9	Repair cracked tile
D-1	Touch-up paint at wall	I-10	Remove substance/clean grout
D-2	Touch-up paint at soffit	J-1	Relocate seat cover dispenser to match dwg's.
D-3	Touch-up paint at frame	J-2	Add vertical grab bar
D-4	Touch-up paint at ceiling	J-3	Center light fixture
D-5	Touch-up paint between frame and corner	J-4	Straighten/center mirror
D-6	Touch-up paint between frames	K-1	Install window blinds
D-7	Remove paint from object	K-2	Add caulk at ext. window
D-8	Paint gyp bd. at exposed end	L-1	Provide final cleaning
E-1	Repair/replace damaged wall covering	M-1	Adjust/straighten/lead screws to outlet
E-2	Add wall covering	M-2	Adjust outlet to be flush
E-3	Repair/rework wall covering seam	M-3	Water connection missing
E-4	Unacceptable patch/repair		
E-5	Repair bubble		
E-6	Remove marks		
F-1	Repair damaged base		
F-2	Complete base install		
G-1	Repair damaged floor tile		
G-2	Replace tile/roo large of gap between tiles		
G-3	Re-glue base		

CHS NCRB MOB DIAGNOSTIC IMAGING CENTER NOTES:  
OSR# 2293450

REV #2

DesignStrategies

DATE 8/9/15

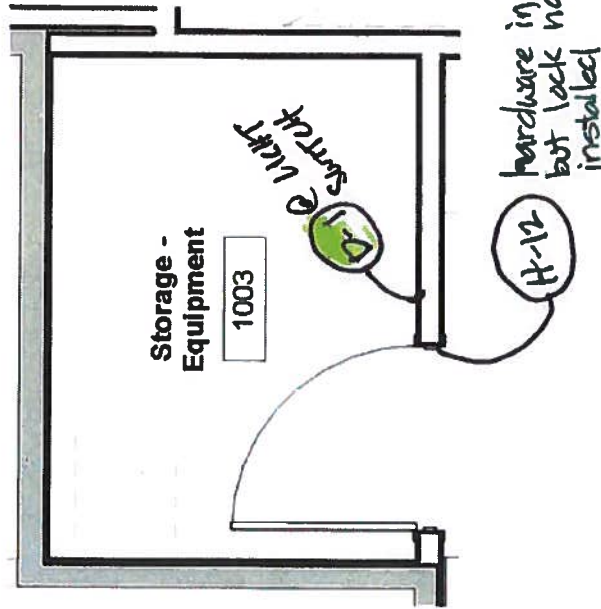
PUNCH LIST

8/20/15

WORKING  
1001

**General Notes:**

1. Final Clean to be performed
2. Clean inside millwork
3. Caulk at hollow metal frames (walls and floors)
4. Caulk at exterior windows and side splash to wall



**LEGEND**

A-1	Replace damaged ACT	H-1	Adjust door
A-2	Remove paint from grid	H-2	Add smoke seal at door gap
A-3	Repair large/inconsistent gap between grid and partition	H-3	Repair door damage
A-4	Repair bent tee	H-4	Repair frame damage
A-5	Repair/add lens on light	H-5	Remove tape from label
A-6	Repair large gap between grid pieces	H-6	Add caulk at frame
A-7	Repair/miller grid at corner	H-7	Patch nail heads at view window
B-1	Add closet rod	H-8	Repair damage to integral blind
B-2	Add lock	H-9	Add floor stop
B-3	Add closers	H-10	Complete install of view window
B-4	Repair damage	H-11	Integral blinds missing
B-5	Repair/replace/add caulk	I-1	Replace uneven tiles
B-6	Repair misalignment with gyp bd	I-2	Replace sharp edges at shampoo niche
B-7	Adjust door alignments	I-3	Add caulk in corners
B-8	Remove paint from millwork	I-4	Floor and wall tile misaligned creating large grout joint/gap
B-9	Splash guard inconsistent finish on each side	I-5	Replace caulk to match grout
B-10	Remove oil stains from millwork	I-6	Caulk at threshold
B-11	Shelves not flush with wall	I-7	Raise transition strip to align with top surfaces of tiles- eliminate valley
C-1	Repair damaged gyp bd	I-8	Add correct color grout
C-2	Gyp overcut at J-box	I-9	Repair cracked tile
D-1	Touch-up paint at wall	I-10	Remove substance/clean grout
D-2	Touch-up paint at soffit	J-1	Relocate seat cover dispenser to match dwgs.
D-3	Touch-up paint at frame	J-2	Add vertical grab bar
D-4	Touch-up paint at ceiling	J-3	Center light fixture
D-5	Touch-up paint between frame and corner	J-4	Straighten/center mirror
D-6	Touch-up paint between frames	K-1	Install window blinds
D-7	Remove paint from object	K-2	Add caulk at ext. window
D-8	Paint gyp. bd. at exposed end	L-1	Provide final cleaning
E-1	Repair/replace damaged wall covering	M-1	Adjust/straighten/add screws to outlet
E-2	Add wall covering	M-2	Adjust outlet to be flush
E-3	Repair/rework wall covering seam	M-3	Water connection missing
E-4	Unacceptable patch/repair		
E-5	Repair bubble		
E-6	Remove marks		
F-1	Repair damaged base		
F-2	Complete base install		
G-1	Repair damaged floor tile		
G-2	Replace tile/too large of gap between tiles		
G-3	Re-glue base		

H-12 INSTALL DOOR HARDWARE

**NOTES:**

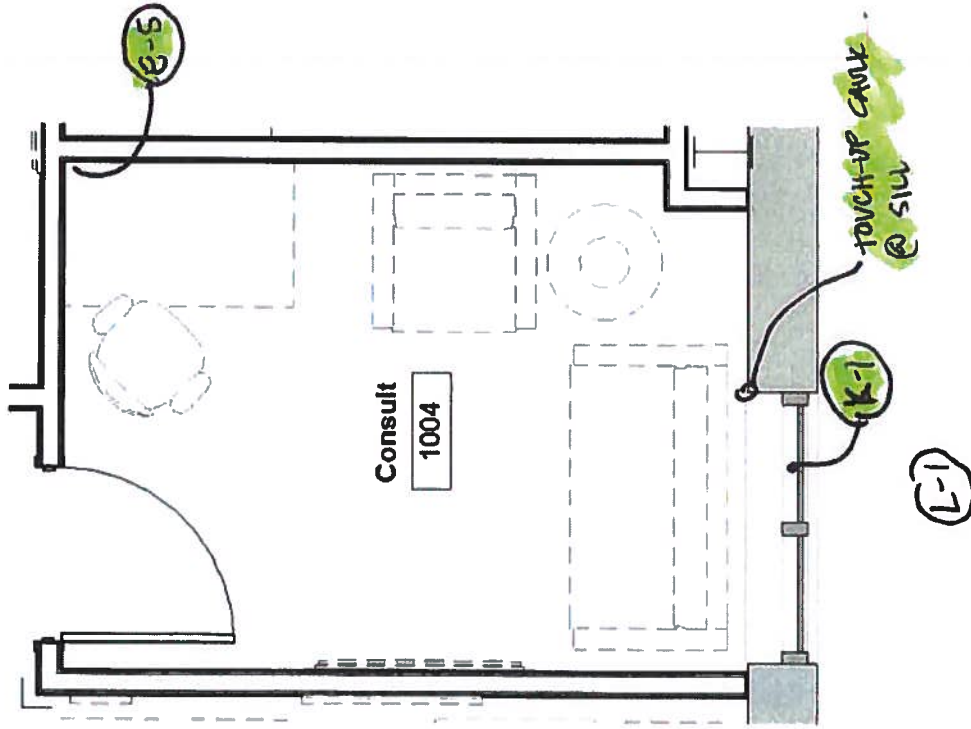
CHS NCRC MOB  
DIAGNOSTIC IMAGING CENTER  
OSR# 2293450

DesignStrategies  
REV #2 8/20/13

PUNCH LIST DATE 8/9/13

**General Notes:**

1. Final Clean to be performed
2. Clean inside millwork
3. Caulk at hollow metal frames (walls and floors)
4. Caulk at exterior windows
5. Caulk at back splash and side splash to wall



**LEGEND**

A-1	Replace damaged ACT	H-1	Adjust door
A-2	Remove paint from grid	H-2	Add smoke seal at door gap
A-3	Repair large/inconsistent gap between grid and partition	H-3	Repair door damage
A-4	Repair bent tee	H-4	Repair frame damage
A-5	Repair/add lens on light	H-5	Remove tape from label
A-6	Repair large gap between grid pieces	H-6	Add caulk at frame
A-7	Repair/miter grid at corner	H-7	Patch nail heads at view window
B-1	Add closet rod	H-8	Repair damage to integral blind
B-2	Add lock	H-9	Add floor stop
B-3	Add closers	H-10	Complete install of view window
B-4	Repair damage	H-11	Integral blinds missing
B-5	Repair/replace/add caulk	I-1	Replace uneven tiles
B-6	Repair misalignment with gyp bd	I-2	Replace sharp edges at shampoo niche
B-7	Adjust door alignments	I-3	Add caulk in corners
B-8	Remove paint from millwork	I-4	Floor and wall tile misaligned creating large grout joint/gap
B-9	Splash guard inconsistent finish on each side	I-5	Replace caulk to match grout
B-10	Remove all shims from millwork	I-6	Caulk at threshold
B-11	Shelves not flush with wall	I-7	Raise transition step to align with top surfaces of tiles- eliminate valley
C-1	Repair damaged gyp bd	I-8	Add correct color grout
C-2	Gyp overcut at J-box	I-9	Repair cracked tile
D-1	Touch-up paint at wall	I-10	Remove substance/clean grout
D-2	Touch-up paint at soffit	J-1	Relocate seal cover dispenser to match chgts.
D-3	Touch-up paint at frame	J-2	Add vertical grab bar
D-4	Touch-up paint at ceiling	J-3	Center light fixture
D-5	Touch-up paint between frame and corner	J-4	Straighten/center mirror
D-6	Touch-up paint between frames	K-1	Install window blinds
D-7	Remove paint from object	K-2	Add caulk at ext. window
D-8	Paint gyp bd. at exposed end	L-1	Provide final cleaning
E-1	Repair/replace damaged wall covering	M-1	Adjust/straighten/add screws to outlet
E-2	Add wall covering	M-2	Adjust outlet to be flush
E-3	Repair/rework wall covering seam	M-3	Water connection missing
E-4	Unacceptable patch/repair		
E-5	Repair bubble		
E-6	Remove marks		
F-1	Repair damaged base		
F-2	Complete base install		
G-1	Repair damaged floor tile		
G-2	Replace tile/foot large or gap between tiles		
G-3	Re-glue base		

~~H-13~~ ~~Replace window~~

**NOTES:**

**CHS NCRC MOB  
DIAGNOSTIC IMAGING CENTER**  
OSR# 2293450  
**DesignStrategies**

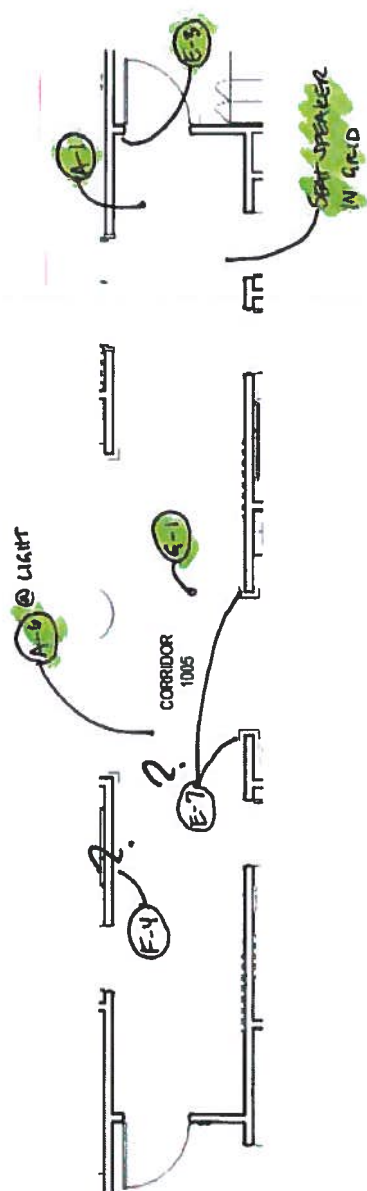
REV #2: 8/20/13

PUNCH LIST	DATE
	8/9/13



**General Notes:**

1. Final Clean to be performed
2. Clean inside millwork
3. Caulk at hollow metal frames (walls and floors)
4. Caulk at exterior windows
5. Caulk at back splash and side splash to wall



**LEGEND**

A-1	Replace damaged ACT	H-1	Adjust door
A-2	Remove paint from grid	H-2	Add smoke seal at door gap
A-3	Repair large/inconsistent gap between grid and partition	H-3	Repair door damage
A-4	Repair bent tie	H-4	Repair frame damage
A-5	Repair/add lens on light	H-5	Remove tape from label
A-6	Repair large gap between grid pieces	H-6	Add caulk at frame
A-7	Repair/mixer grid at corner	H-7	Patch nail heads at view window
B-1	Add closet rod	H-8	Repair damage to integral blind
B-2	Add lock	H-9	Add floor stop
B-3	Add closers	H-10	Complete install of view window
B-4	Repair damage	H-11	Integral blinds missing
B-5	Repair/replace/add caulk	I-1	Replace uneven tiles
B-6	Repair misalignment with gyp bd	I-2	Replace sharp edges at shampoo niche
B-7	Adjust door alignments	I-3	Add caulk in corners
B-8	Remove paint from millwork	I-4	Floor and wall tile misaligned creating large groud joint/gap
B-9	Splash guard inconsistent finish on each side	I-5	Replace caulk to match groud
B-10	Remove all shims from millwork	I-6	Caulk at threshold
B-11	Shelves not flush with wall	I-7	Raise transition strip to align with top surfaces of tiles- eliminate valley
C-1	Repair damaged gyp bd	I-8	Add correct color groud
C-2	Gyp overcut at J-box	I-9	Repair cracked tile
D-1	Touch-up paint at wall	I-10	Remove substance/clean groud
D-2	Touch-up paint at frame	J-1	Relocate seat cover dispenser to match dwggs
D-3	Touch-up paint at ceiling	J-2	Add vertical grab bar
D-4	Touch-up paint between frames and corner	J-3	Center light fixture
D-5	Touch-up paint between frames	J-4	Straighten/center mirror
D-6	Touch-up paint between frames	K-1	Install window blinds
D-7	Remove paint from object	K-2	Add caulk at ext. window
D-8	Paint gyp. bd at exposed end	L-1	Provide final cleaning
E-1	Repair/replace damaged wall covering	M-1	Adjust/straighten/add screws to outlet
E-2	Add wall covering	M-2	Adjust outlet to be flush
E-3	Repair/rework wall covering seam	M-3	Water connection missing
E-4	Unacceptable patch/repair	E-7 TRIM VMC	
E-5	Repair bubble	F-4 NARY BASE	
E-6	Remove marks		
F-1	Repair damaged base		
F-2	Complete base install		
G-1	Repair damaged floor tile		
G-2	Replace tile/too large of gap between tiles		
G-3	Re-glue base		

CHS NCRC MOB DIAGNOSTIC IMAGING CENTER

CSR# 2283460

DesignStrategies

NOTES:

REV #2 8/20/13

PUNCH LIST

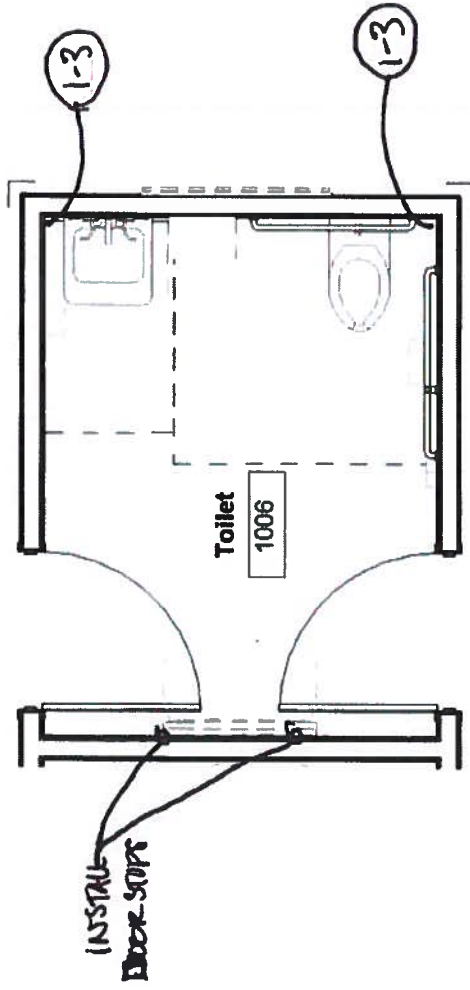
DATE

8/9/13

0021006  
1005

**General Notes:**

1. Final Clean to be performed
2. Clean inside millwork
3. Caulk at hollow metal frames (walls and floors)
4. Caulk at exterior windows and side splash to wall



**LEGEND**

A-1	Replace damaged ACT	H-1	Adjust door
A-2	Remove paint from grid	H-2	Add smoke seal at door gap
A-3	Repair large/inconsistent gap between grid and partition	H-3	Repair door damage
A-4	Repair bent tee	H-4	Repair frame damage
A-5	Repair/add lens on light	H-5	Remove tape from label
A-6	Repair large gap between grid pieces	H-6	Add caulk at frame
A-7	Repair/replace grid at corner	H-7	Patch nail heads at view window
B-1	Add closet rod	H-8	Repair damage to integral blind
B-2	Add lock	H-9	Add floor stop
B-3	Add closers	H-10	Complete install of view window
B-4	Repair damage	H-11	Integral blinds missing
B-5	Repair/replace/add caulk	I-1	Replace uneven tiles
B-6	Repair misalignment with gyp bd	I-2	Replace sharp edges at shampoo niche
B-7	Adjust door alignments	I-3	Add caulk in corners
B-8	Remove paint from millwork	I-4	Floor and wall tile mis-aligned creating large grout joint/gap
B-9	Splash guard inconsistent finish on each side	I-5	Replace caulk to match grout
B-10	Remove all shims from millwork	I-6	Caulk at threshold
B-11	Shelves not flush with wall	I-7	Raise transition strip to align with top surfaces of tiles- eliminate valley
C-1	Repair damaged gyp bd	I-8	Add color grout
C-2	Gyp overcut at J-box	I-9	Repair cracked tile
D-1	Touch-up paint at wall	I-10	Remove substance/clean grout
D-2	Touch-up paint at soffit	J-1	Relocate seat cover dispenser to match chugs
D-3	Touch-up paint at ceiling	J-2	Add vertical grab bar
D-4	Touch-up paint at ceiling	J-3	Center light fixture
D-5	Touch-up paint between frame and corner	J-4	Straighten/center mirror
D-6	Touch-up paint between frames	K-1	Install window blinds
D-7	Remove paint from object	K-2	Add caulk at ext. window
D-8	Paint gyp. bd. at exposed end	L-1	Provide final cleaning
E-1	Repair/replace damaged wall covering	M-1	Adjust/straighten/add screws to outlet
E-2	Add wall covering	M-2	Adjust outlet to be flush
E-3	Repair/replace wall covering seam	M-3	Water connection missing
E-4	Unacceptable patch/repair		
E-5	Repair bubble		
E-6	Remove marks		
F-1	Repair damaged base		
F-2	Complete base install		
G-1	Repair damaged floor tile		
G-2	Replace tile too large of gap between tiles		
G-3	Re-glue base		

**NOTES:**

**CHS NCRC MOB  
DIAGNOSTIC IMAGING CENTER**  
OSR# 2293450

REV #2 8/20/13

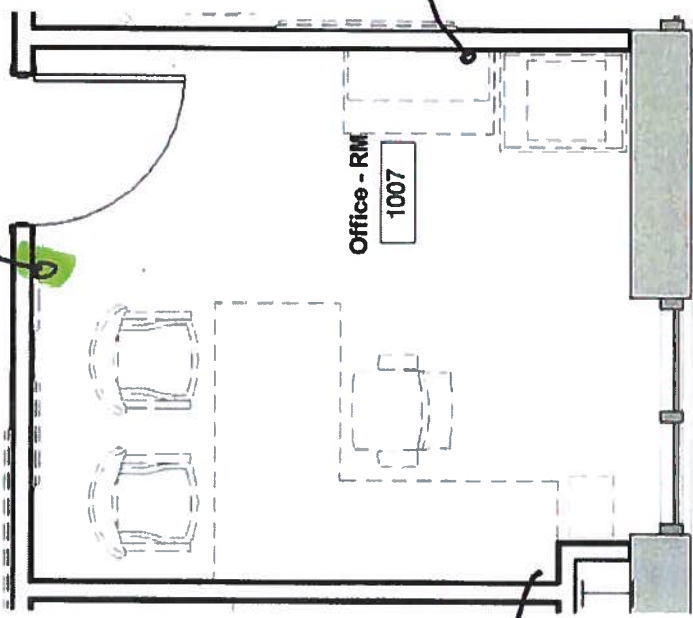
**DesignStrategies**

**PUNCH LIST**      **DATE** 8/9/13

- General Notes:
1. Final Clean to be performed
  2. Clean inside millwork
  3. Caulk at hollow metal frames (walls and floors)
  4. Caulk at exterior windows
  5. Caulk at back splash and side splash to wall

REPAIR SEAM @ BASE

REPAIR HOLE IN GRID



Office - RM  
1007

(L-1)

(E-3)  
(E-5)

**LEGEND**

A-1	Replace damaged ACT	H-1	Adjust door
A-2	Remove paint from grid	H-2	Add smoke seal at door gap
A-3	Repair large/inconsistent partition	H-3	Repair door damage
A-4	Repair bent tee	H-4	Repair frame damage
A-5	Repair/add lens on light	H-5	Remove tape from label
A-6	Repair large gap between grid pieces	H-6	Add caulk at frame
A-7	Repair/mix grid at corner	H-7	Patch nail heads at view window
B-1	Add closet rod	H-8	Repair damage to integral blind
B-2	Add lock	H-9	Add floor stop
B-3	Add obscures	H-10	Complete install of view window
B-4	Repair damage	H-11	Integral blinds retising
B-5	Repair/replace/add caulk	I-1	Replace uneven tiles
B-6	Repair misalignment with gyp bd	I-2	Replace sharp edges at shampoo niche
B-7	Adjust door alignments	I-3	Add caulk in corners
B-8	Remove paint from millwork	I-4	Floor and wall tile misaligned creating large grot joint/gap
B-9	Splash guard inconsistent finish on each side	I-5	Replace caulk to match grot
B-10	Remove all stems from millwork	I-6	Caulk at threshold
B-11	Shelves not flush with wall	I-7	Raise transition strip to align with top surfaces of tiles- eliminate valley
C-1	Repair damaged gyp bd	I-8	Add correct color grot
C-2	Gyp overcut at h-box	I-9	Repair cracked tile
D-1	Touch-up paint at wall	I-10	Remove substance/clean grot
D-2	Touch-up paint at soffit	J-1	Relocate seal cover dispenser to match chgs.
D-3	Touch-up paint at frame	J-2	Add vertical grab bar
D-4	Touch-up paint at ceiling	J-3	Center light fixture
D-5	Touch-up paint between frames and corner	J-4	Straighten/center mirror
D-6	Touch-up paint between frames	K-1	Install window blinds
D-7	Remove paint from object	K-2	Add caulk at ext. window
D-8	Paint gyp bd. at exposed end	L-1	Provide final cleaning
E-1	Repair/replace damaged wall covering	M-1	Adjust/straighten/add screws to outlet
E-2	Add wall covering	M-2	Adjust outlet to be flush
E-3	Repair/rework wall covering seam	M-3	Water connection missing
E-4	Unacceptable patch/repair		
E-5	Repair bubble		
E-6	Remove marks		
F-1	Repair damaged base		
F-2	Complete base install		
G-1	Repair damaged floor tile		
G-2	Replace tile/too large of gap between tiles		
G-3	Re-glue base		

**NOTES:**

**CHS NCRC MOB  
DIAGNOSTIC IMAGING CENTER**  
OSR# 2293450

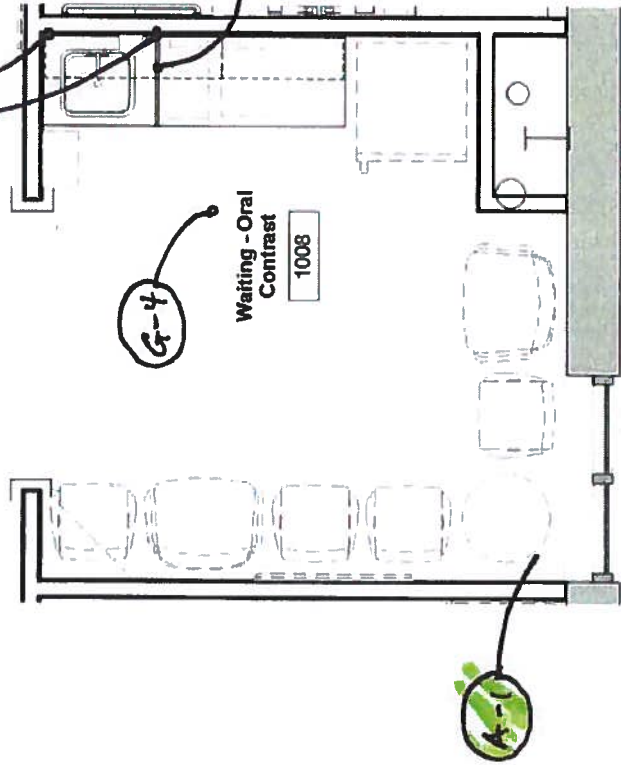
REV #2 8/20/13

**DesignStrategies**

<b>PUNCH LIST</b>	<b>DATE</b>
	8/9/13

**General Notes:**

1. Final Clean to be performed
2. Clean inside millwork
3. Caulk at hollow metal frames (walls and floors)
4. Caulk at exterior windows and side splash to wall



**LEGEND**

A-1	Replace damaged ACT	H-1	Adjust door
A-2	Remove paint from grid	H-2	Add smoke seal at door gap
A-3	Repair large/inconsistent gap between grid and partition	H-3	Repair door damage
A-4	Repair bent tee	H-4	Repair frame damage
A-5	Repair/add lens on light	H-5	Remove label from label
A-6	Repair large gap between grid pieces	H-6	Add caulk at frame
A-7	Repair/mix grid at corner	H-7	Patch nail heads at view window
B-1	Add closer rod	H-8	Repair damage to integral blind
B-2	Add lock	H-9	Add floor stop
B-3	Add closers	H-10	Complete install of view window
B-4	Repair damage	H-11	Integral blinds missing
B-5	Repair/replace/add caulk	I-1	Replace uneven tiles
B-6	Repair/misalignment with gyp bd	I-2	Replace sharp edges at shampoo niche
B-7	Adjust door alignments	I-3	Add caulk in corners
B-8	Remove paint from millwork	I-4	Floor and wall tile misaligned creating large grout joint/gap
B-9	Splash guard inconsistent finish on each side	I-5	Replace caulk to match grout
B-10	Remove all shims from millwork	I-6	Caulk at threshold
B-11	Shelves not flush with wall	I-7	Raise transition strip to align with top surfaces of tiles - eliminate valley
C-1	Repair damaged gyp bd	I-8	Add correct color grout
C-2	Gyp overcut at J-box	I-9	Repair cracked tile
D-1	Touch-up paint at wall	I-10	Remove substance/clean grout
D-2	Touch-up paint at soffit	J-1	Relocate seat cover dispenser to match bays
D-3	Touch-up paint at frame	J-2	Add vertical grab bar
D-4	Touch-up paint at ceiling	J-3	Center light fixture
D-5	Touch-up paint between frame and corner	J-4	Straighten/center mirror
D-6	Touch-up paint between frames	K-1	Install window blinds
D-7	Remove paint from object	K-2	Add caulk at ext. window
D-8	Paint gyp. bd. at exposed end	L-1	Provide final cleaning
E-1	Repair/replace damaged wall covering	M-1	Adjust/straighten/add screws to outlet
E-2	Add wall covering	M-2	Adjust outlet to be flush
E-3	Repair/rework wall covering seam	M-3	Water connection missing
E-4	Unacceptable patch/repair		
E-5	Repair bubble		
E-6	Remove marks		
F-1	Repair damaged base		
F-2	Complete base install		
G-1	Repair damaged floor tile		
G-2	Replace tile/foot large of gap between tiles		
G-3	Re-glue base		

G-4 REMOVE SCUFF ON FLOOR

**NOTES:**

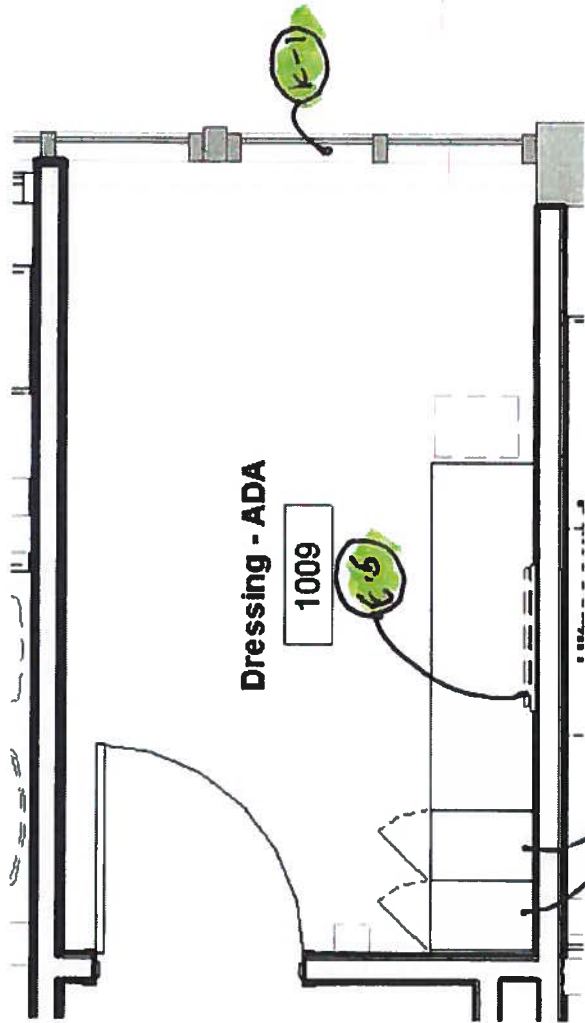
CHS NCRC MOB  
DIAGNOSTIC IMAGING CENTER  
OSR# 2293450

DesignStrategies  
REV# 2 8/20/13

PUNCH LIST DATE 8/9/13

**General Notes:**

1. Final Clean to be performed
2. Clean inside millwork
3. Caulk at hollow metal frames (walls and floors)
4. Caulk at exterior windows
5. Caulk at back splash and side splash to wall



**LEGEND**

A-1	Replace damaged ACT	H-1	Adjust door
A-2	Remove paint from grid	H-2	Add smoke seal at door gap
A-3	Repair large/inconsistent gap between grid and partition	H-3	Repair door damage
A-4	Repair bent tee	H-4	Repair frame damage
A-5	Repair/add lens on light	H-5	Remove lapse from label
A-6	Repair large gap between grid pieces	H-6	Add caulk at frame
A-7	Repair/mirror grid at corner	H-7	Patch nail heads at view window
B-1	Add closet rod	H-8	Repair damage to integral blind
B-2	Add lock	H-9	Add floor stop
B-3	Add closers	H-10	Complete install of view window
B-4	Repair damage	H-11	Integral blinds missing
B-5	Repair/replace/add caulk	I-1	Replace uneven tiles
B-6	Repair misalignment with gyp bd	I-2	Replace sharp edges at shampoo niche
B-7	Adjust door alignments	I-3	Add caulk in corners
B-8	Remove paint from millwork	I-4	Floor and wall tile mis-aligned creating large grout joint/gap
B-9	Splash guard inconsistent finish on each side	I-5	Replace caulk to match grout
B-10	Remove all shims from millwork	I-6	Caulk at threshold
B-11	Shelves not flush with wall	I-7	Raise transition strip to align with top surfaces of tiles - eliminate valley
C-1	Repair damaged gyp bd	I-8	Add correct color grout
C-2	Gyp overcut at J-box	I-9	Repair cracked tile
D-1	Touch-up paint at wall	I-10	Remove substances/clean grout
D-2	Touch-up paint at soffit	J-1	Relocate seat cover dispenser to match steps
D-3	Touch-up paint at frame	J-2	Add vertical grab bar
D-4	Touch-up paint at ceiling	J-3	Center light fixture
D-5	Touch-up paint between frame and corner	J-4	Straighten/center mirror
D-6	Touch-up paint between frames	K-1	Install window blinds <del>SHAKE</del>
D-7	Remove paint from object	K-2	Add caulk at ext. window
D-8	Paint gyp. bd. at exposed end	L-1	Provide final cleaning
E-1	Repair/replace damaged wall covering	M-1	Adjust/straighten/add screws to outlet
E-2	Add wall covering	M-2	Adjust outlet to be flush
E-3	Repair/rework wall covering seam	M-3	Water connection missing
E-4	Unacceptable patch/repair		
E-5	Repair bubble		
E-6	Remove marks		
F-1	Repair damaged base		
F-2	Complete base install		
G-1	Repair damaged floor tile		
G-2	Replace tile/floor large of gap between tiles		
G-3	Re-glue base		

**NOTES:**

**CHS NCRC MOB DIAGNOSTIC IMAGING CENTER**  
 OSR# 2293450

REV #2 8/20/13

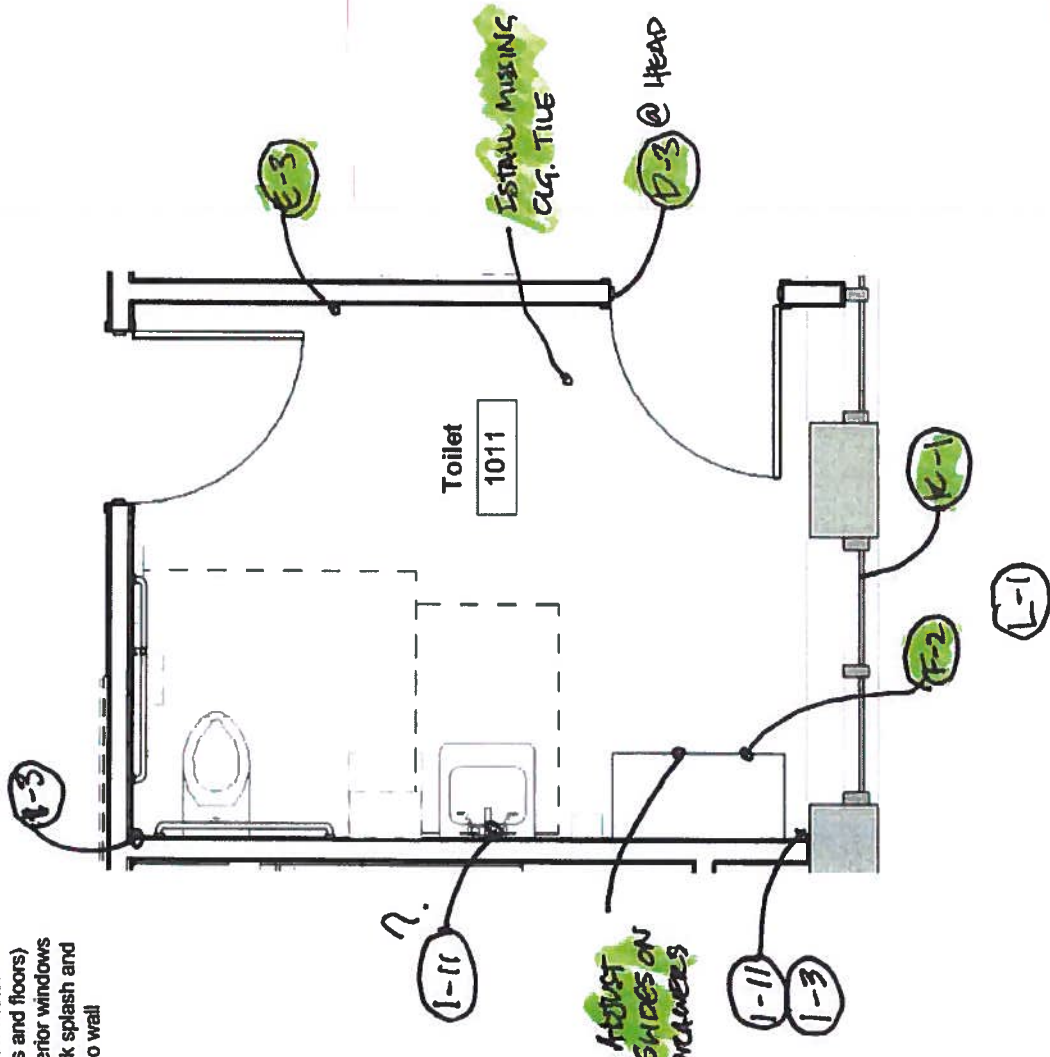
**DesignStrategies**

PUNCH LIST DATE 8/9/13



**General Notes:**

1. Final Clean to be performed
2. Clean inside millwork
3. Caulk at hollow metal frames (walls and floors)
4. Caulk at exterior windows
5. Caulk at back splash and side splash to wall



**LEGEND**

A-1	Replace damaged ACT	H-1	Adjust door
A-2	Remove paint from grid	H-2	Add smoke seal at door gap
A-3	Repair large/inconsistent gap between grid and partition	H-3	Repair door damage
A-4	Repair bent tee	H-4	Repair frame damage
A-5	Repair/add lens on light	H-5	Remove tape from label
A-6	Repair large gap between grid pieces	H-6	Add caulk at frame
A-7	Repair/miter grid at corner	H-7	Patch nail heads at view window
B-1	Add closet rod	H-8	Repair damage to integral blind
B-2	Add lock	H-9	Add floor stop
B-3	Add closers	H-10	Complete install of view window
B-4	Repair damage	H-11	Integral blinds missing
B-5	Repair/replace/add caulk	I-1	Replace uneven tiles
B-6	Repair misalignment with gyp bd	I-2	Replace sharp edges at shampoo niche
B-7	Adjust door alignments	I-3	Add caulk in corners
B-8	Remove paint from millwork	I-4	Floor and wall tile misaligned creating large groud joint/gap
B-9	Splash guard inconsistent finish on each side	I-5	Replace caulk to match groud
B-10	Remove all ahims from millwork	I-6	Caulk at threshold
B-11	Shelves not flush with wall	I-7	Raise transition strip to align with top surfaces of tiles- eliminate valley
C-1	Repair damaged gyp bd	I-8	Add correct color groud
C-2	Gyp overcut at j-box	I-9	Repair cracked tile
D-1	Touch-up paint at wall	I-10	Remove substance/clean groud
D-2	Touch-up paint at soffit	J-1	Relocate seat cover dispenser to match dwgs.
D-3	Touch-up paint at frame	J-2	Add vertical grab bar
D-4	Touch-up paint at ceiling	J-3	Center light fixture
D-5	Touch-up paint between frame and corner	K-1	Install window blinds
D-6	Touch-up paint between frames	K-2	Add caulk at ext. window
D-7	Remove paint from object	L-1	Provide final clearing
D-8	Paint gyp. bd. at exposed end	M-1	Adjust/straighten/add screws to outlet
E-1	Repair/replace damaged wall covering	M-2	Adjust outlet to be flush
E-2	Add wall covering	M-3	Water connection missing
E-3	Repair/rework wall covering seam		
E-4	Unacceptable patch/repair		
E-5	Repair bubble		
E-6	Remove marks		
F-1	Repair damaged base		
F-2	Complete base install		
G-1	Repair damaged floor tile		
G-2	Replace tile/oo large of gap between tiles		
G-3	Re-glue base		

**1-11 REPLACE DAMAGED TILE**

NOTES: \* VERIFY HARDWARE SET LOCKS + EMERGENCY ACCESS.

CHS NCRC MOB DIAGNOSTIC IMAGING CENTER  
OSR# 2293450

REV# 2 8/20/13

**DesignStrategies**

PUNCH LIST DATE 8/9/13

**General Notes:**

1. Final Clean to be performed
2. Clean inside millwork
3. Caulk at hollow metal frames (walls and floors)
4. Caulk at exterior windows
5. Caulk at back splash and side splash to wall

(E-7)?

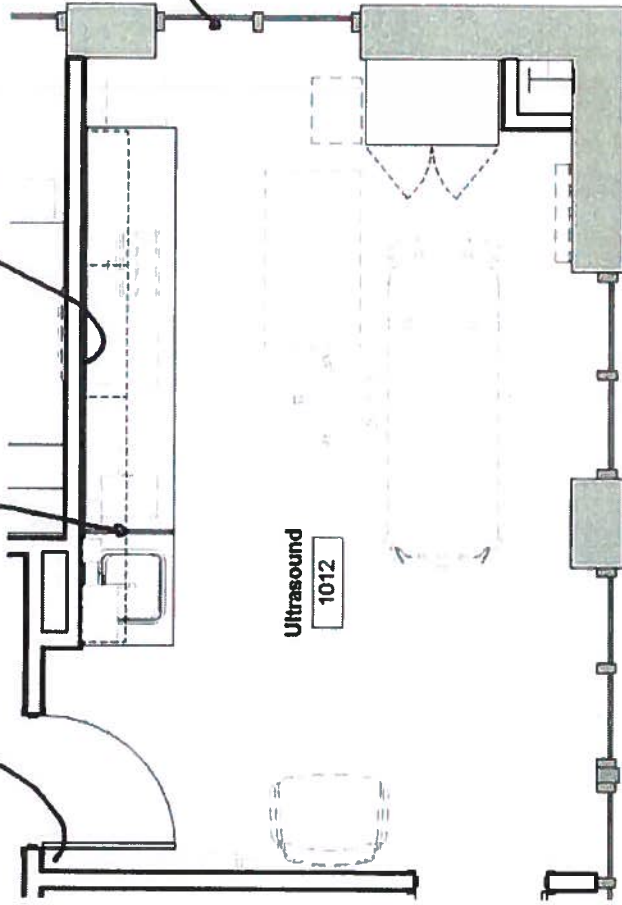
INSTALL 12" SPASH GUARD not caulked

(E-1)

ADJUST SHADE

Ultrasound 1012

(L-1)



**LEGEND**

A-1	Replace damaged ACT	H-1	Adjust door
A-2	Remove paint from grid	H-2	Add smoke seal at door gap
A-3	Repair large/inconsistent gap between grid and partition	H-3	Repair door damage
A-4	Repair bent tee	H-4	Repair frame damage
A-5	Repair/replace lens on light	H-5	Remove lapse from label
A-6	Repair large gap between grid pieces	H-6	Add caulk at frame
A-7	Repair/replace grid at corner	H-7	Patch nail heads at view window
B-1	Add closer rod	H-8	Repair damage to integral blind
B-2	Add lock	H-9	Add floor stop
B-3	Add closes	H-10	Complete install of view window
B-4	Repair damage	H-11	Integral blinds missing
B-5	Repair/replace/add caulk	I-1	Replace uneven tiles
B-6	Repair misalignment with gyp bd	I-2	Replace sharp edges at shampoo niche
B-7	Adjust door alignments	I-3	Add caulk in corners
B-8	Remove paint from millwork	I-4	Floor and wall tile misaligned creating large grout joint/gap
B-9	Splash guard inconsistent finish on each side	I-5	Replace caulk to match grout
B-10	Remove all shims from millwork	I-6	Caulk at threshold
B-11	Shelves not flush with wall	I-7	Raise transition strip to align with top surfaces of tiles- eliminate valley
C-1	Repair damaged gyp bd	I-8	Add correct color grout
C-2	Gyp overcut at j-box	I-9	Repair cracked tile
D-1	Touch-up paint at wall	I-10	Remove substance/clean grout
D-2	Touch-up paint at soffit	J-1	Relocate seat cover dispenser to match chgs.
D-3	Touch-up paint at frame	J-2	Add vertical grab bar
D-4	Touch-up paint at ceiling	J-3	Center light fixture
D-5	Touch-up paint between frame and corner	J-4	Straighten/center mirror
D-6	Touch-up paint between frames	K-1	Install window blinds
D-7	Remove paint from object	K-2	Add caulk at ext. window
D-8	Paint gyp. bd. at exposed end	L-1	Provide final cleaning
E-1	Repair/replace damaged wall covering	M-1	Adjust/straighten/add screws to outlet
E-2	Add wall covering	M-2	Adjust outlet to be flush
E-3	Repair/rework wall covering seam	M-3	Water connection missing
E-4	Unacceptable patch/repair		
E-5	Repair bubble		
E-6	Remove marks		
F-1	Repair damaged base		
F-2	Complete base install		
G-1	Repair damaged floor tile		
G-2	Replace tile/too large of gap between tiles		
G-3	Re-glue base		

E-7 TRIM VMC

**NOTES:**

**CHS NCRC MOB DIAGNOSTIC IMAGING CENTER**  
 OSR# 2293450

REV#2 8/20/13

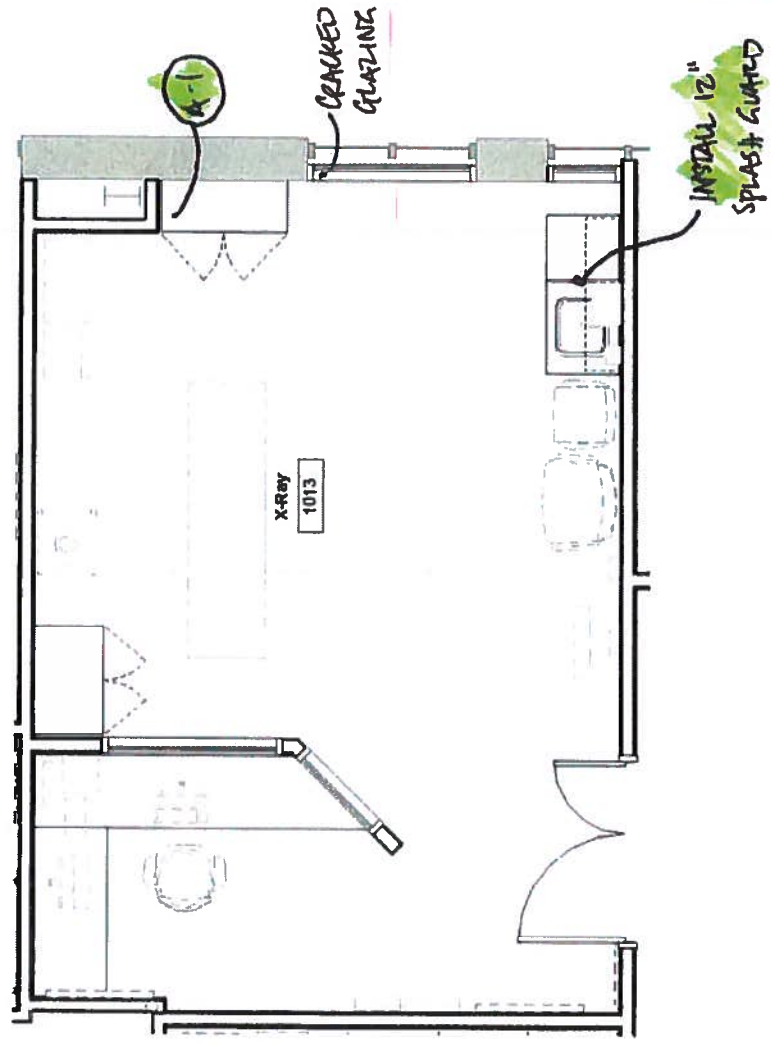
**DesignStrategies**

**PUNCH LIST**      DATE 8/9/13



**General Notes:**

1. Final Clean to be performed
2. Clean inside millwork
3. Caulk at hollow metal frames (walls and floors)
4. Caulk at exterior windows and side splash to wall



**LEGEND**

A-1	Replace damaged ACT	H-1	Adjust door
A-2	Remove paint from grid	H-2	Add smoke seal at door gap
A-3	Repair large/inconsistent gap between grid and partition	H-3	Repair door damage
A-4	Repair bent tee	H-4	Repair frame damage
A-5	Repair/add lens on light	H-5	Remove tape from label
A-6	Repair large gap between grid pieces	H-6	Add caulk at frame
A-7	Repair/mix grid at corner	H-7	Patch nail heads at view window
B-1	Add closer rod	H-8	Repair damage to integral blind
B-2	Add lock	H-9	Add floor stop
B-3	Add closers	H-10	Complete install of view window
B-4	Repair damage	H-11	Integral blinds missing
B-5	Repair/replace/add caulk	I-1	Replace uneven tiles
B-6	Repair misalignment with gyp bd	I-2	Replace sharp edges at shampoo niche
B-7	Adjust door alignments	I-3	Add caulk in corners
B-8	Remove paint from millwork	I-4	Floor and wall tile misaligned creating large grout joint/gap
B-9	Splash guard inconsistent finish on each side	I-5	Replace caulk to match grout
B-10	Remove all shims from millwork	I-6	Caulk at threshold
B-11	Shelves not flush with wall	I-7	Raise transition strip to align with top surfaces of tiles- eliminate valley
C-1	Repair damaged gyp bd	I-8	Add correct color grout
C-2	Gyp overcut at j-box	I-9	Repair cracked tile
D-1	Touch-up paint at wall	I-10	Remove substance/clean grout
D-2	Touch-up paint at soffit	J-1	Relocate seal cover dispenser to match dwgs
D-3	Touch-up paint at frame	J-2	Add vertical grab bar
D-4	Touch-up paint at ceiling	J-3	Center light fixture
D-5	Touch-up paint between frame and corner	J-4	Straighten/center mirror
D-6	Touch-up paint between frames	K-1	Install window blinds
D-7	Remove paint from object	K-2	Add caulk at ext. window
D-8	Paint gyp bd. at exposed end	L-1	Provide final cleaning
E-1	Repair/replace damaged wall covering	M-1	Adjust/straighten/add screws to outlet
E-2	Add wall covering	M-2	Adjust outlet to be flush
E-3	Repair/rework wall covering seam	M-3	Water connection missing
E-4	Unacceptable patch/repair		
E-5	Repair bubble		
E-6	Remove marks		
F-1	Repair damaged base		
F-2	Complete base install		
G-1	Repair damaged floor tile		
G-2	Replace tile/too large or gap between tiles		
G-3	Re-glue base		

**NOTES:**

**CHS NCRC MOB  
DIAGNOSTIC IMAGING CENTER**  
OSR# 2293450

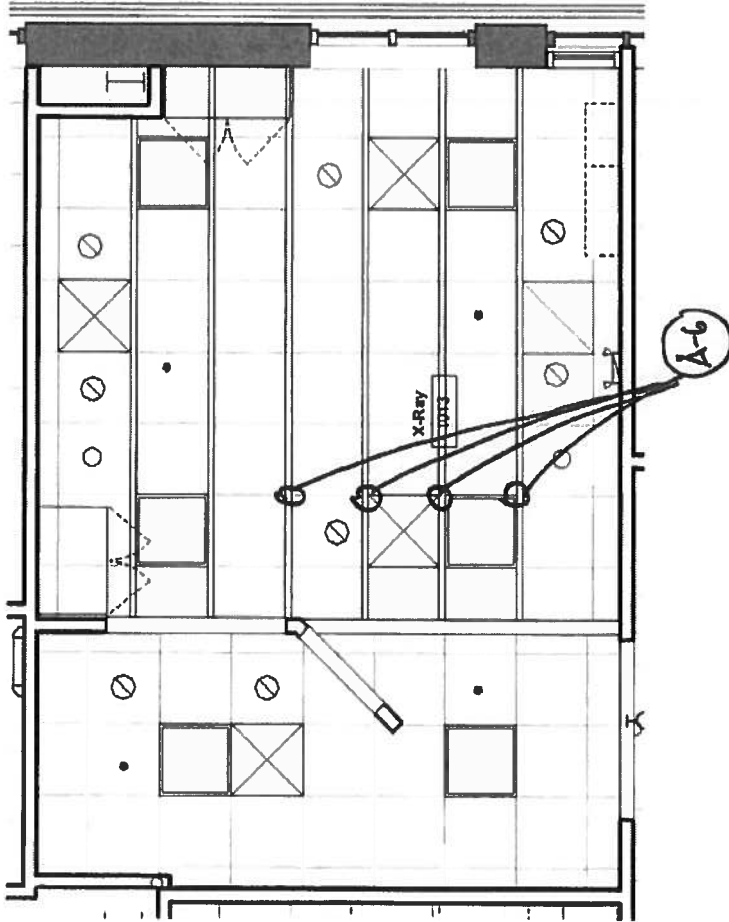
REV#2 8/20/13

**DesignStrategies**

**PUNCH LIST**      DATE 8/9/13

**General Notes:**

1. Final Clean to be performed
2. Clean inside millwork
3. Caulk at hollow metal frames (walls and floors)
4. Caulk at exterior windows
5. Caulk at back splash and side splash to wall



**LEGEND**

A-1	Replace damaged ACT
A-2	Remove paint from grid
A-3	Repair large/inconsistent gap between grid and partition
A-4	Repair bent tee
A-5	Repair/add lens on light
A-6	Repair large gap between grid pieces
A-7	Repair/misr. grid at corner
B-1	Add closet rod
B-2	Add lock
B-3	Add covers
B-4	Repair damage
B-5	Repair/replace/add caulk
B-6	Repair misalignment with gyp bd
B-7	Adjust door alignments
B-8	Remove paint from millwork
B-9	Splash guard inconsistent finish on each side
B-10	Remove all sitems from millwork
B-11	Shelves not flush with wall
C-1	Repair damaged gyp bd
C-2	Gyp overcut at j-box
D-1	Touch-up paint at wall
D-2	Touch-up paint at soffit
D-3	Touch-up paint at frame
D-4	Touch-up paint at ceiling
D-5	Touch-up paint between frame and corner
D-6	Touch-up paint between frames
D-7	Remove paint from object
D-8	Paint gyp. bd. at exposed end
E-1	Repair/replace damaged wall covering
E-2	Add wall covering
E-3	Repair/rework wall covering seam
E-4	Unacceptable patch/repair
E-5	Repair bubble
E-6	Remove marks
F-1	Repair damaged base
F-2	Complete base instal
G-1	Repair damaged floor tile
G-2	Replace tile/roo large of gap between tiles
G-3	Re-glue base
H-1	Adjust door
H-2	Add smoke seal at door gap
H-3	Repair door damage
H-4	Repair frame damage
H-5	Remove tape from label
H-6	Add caulk at frame
H-7	Patch nail heads at view window
H-8	Repair damage to integral blind
H-9	Add floor stop
H-10	Complete instal of view window
H-11	Integral blinds missing
I-1	Replace uneven tiles
I-2	Replace sharp edges at shampoo niche
I-3	Add caulk in corners
I-4	Floor and wall tile mis-aligned creating large groud joint/gap
I-5	Replace caulk to match groud
I-6	Caulk at threshold
I-7	Raise transition strip to align with top surfaces of tiles- eliminate valley
I-8	Add correct color groud
I-9	Repair cracked tile
I-10	Remove substance/clean groud
J-1	Relocate seat cover dispenser to match chgs.
J-2	Add vertical grab bar
J-3	Center light fixture
J-4	Straighten/center mirror
K-1	Install window blinds
K-2	Add caulk at ext. window
L-1	Provide final cleaning
M-1	Adjust/straighten/add screws to outlet
M-2	Adjust outlet to be flush
M-3	Water connection missing

**NOTES:**

**CHS NCRC MOB  
DIAGNOSTIC IMAGING CENTER**

OSR# 2293450

**DesignStrategies**

REV #2 8/20/13

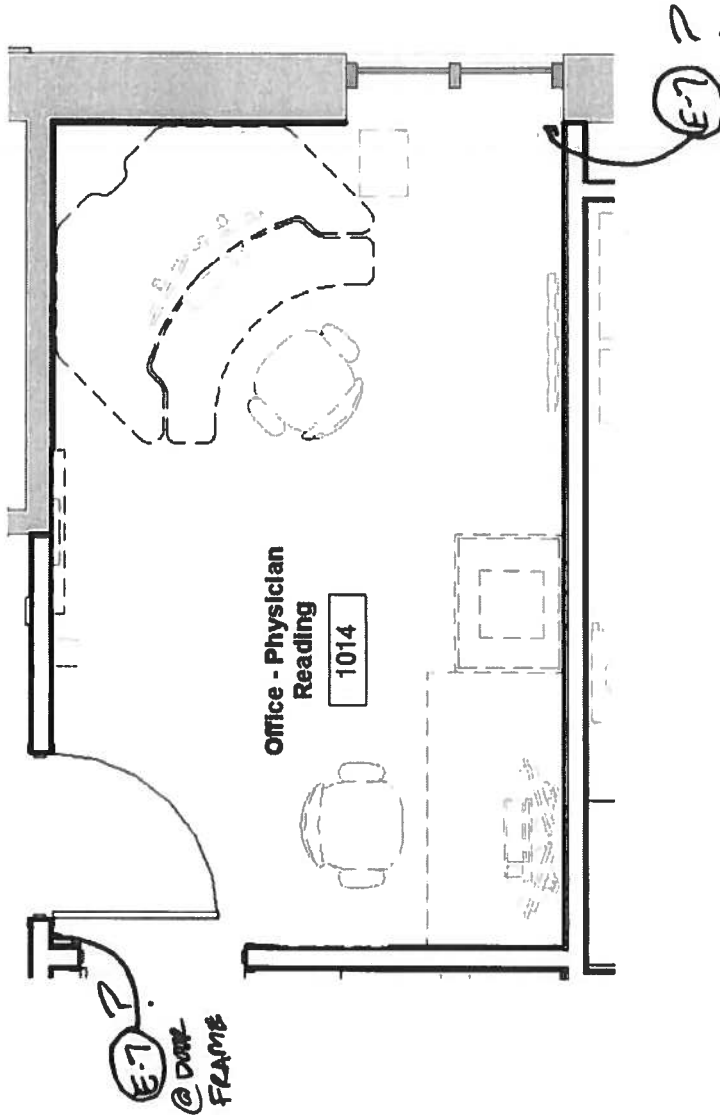
**PUNCH LIST**

**DATE**

8/9/13

**General Notes:**

1. Final Clean to be performed
2. Clean inside millwork
3. Caulk at hollow metal frames (walls and floors)
4. Caulk at exterior windows and side splash to wall



**LEGEND**

A-1	Replace damaged ACT	H-1	Adjust door
A-2	Remove paint from grid	H-2	Add smoke seal at door gap
A-3	Repair large/inconsistent gap between grid and partition	H-3	Repair door damage
A-4	Repair bent tee	H-4	Remove tape from label
A-5	Repair/add lens on light	H-5	Add caulk at frame
A-6	Repair large gap between grid pieces	H-6	Patch nail heads at view window
A-7	Repair/mitter grid at corner	H-8	Repair damage to integral blind
B-1	Add closest rod	H-9	Add floor stop
B-2	Add lock	H-10	Complete install of view window
B-3	Add closers	H-11	Integral blinds missing
B-4	Repair damage	I-1	Replace uneven tiles
B-5	Repair/replace/add caulk	I-2	Replace sharp edges at shampoo niche
B-6	Repair misalignment with gyp bd	I-3	Add caulk in corners
B-7	Adjust door alignments	I-4	Floor and wall tile mis-aligned creating large groyt joint/gap
B-8	Remove paint from millwork	I-5	Replace caulk to match groyt
B-9	Splash guard inconsistent finish on each side	I-6	Caulk at threshold
B-10	Remove all shims from millwork	I-7	Raise transition strip to align with top surfaces of tiles- eliminate valley
B-11	Shelves not flush with wall	I-8	Add correct color groyt
C-1	Repair damaged gyp bd	I-9	Repair cracked tile
C-2	Gyp overcut at J-box	I-10	Remove substance/clean groyt
D-1	Touch-up paint at wall	J-1	Relocate seat cover dispenser to match dwgs.
D-2	Touch-up paint at soffit	J-2	Add vertical grab bar
D-3	Touch-up paint at frame	J-3	Center light fixture
D-4	Touch-up paint at ceiling	J-4	Straighten/center mirror
D-5	Touch-up paint between frame and corner	K-1	Install window blinds
D-6	Touch-up paint between frames	K-2	Add caulk at ext. window
D-7	Remove paint from object	L-1	Provide final cleaning
D-8	Paint gyp. bd. at exposed end	M-1	Adjust/straighten/add screws to outlet
E-1	Repair/replace damaged wall covering	M-2	Adjust outlet to be flush
E-2	Add wall covering	M-3	Water connection missing
E-3	Repair/rework wall covering seam		
E-4	Unacceptable patch/repair		
E-5	Repair bubble		
E-6	Remove marks		
F-1	Repair damaged base		
F-2	Complete base install		
G-1	Repair damaged floor tile		
G-2	Replace tile/too large of gap between tiles		
G-3	Re-glue base		

E-7 TRIM VWC

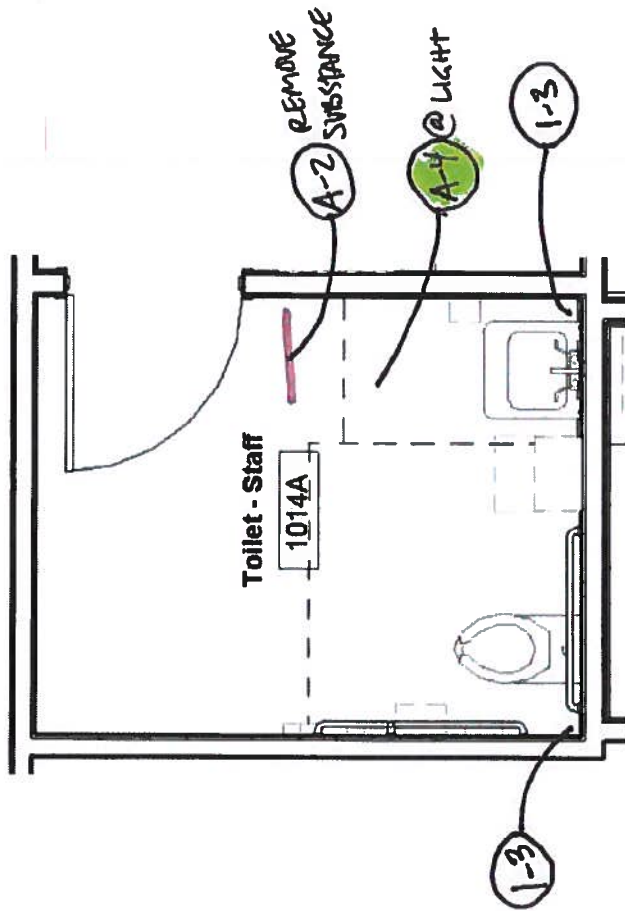
CHS NCRC MOB  
DIAGNOSTIC IMAGING CENTER  
OSR# 2293450  
DesignStrategies

NOTES:  
REV #2 8/20/13

PUNCH LIST DATE 8/9/13

**General Notes:**

1. Final Clean to be performed
2. Clean inside millwork
3. Caulk at hollow metal frames (walls and floors)
4. Caulk at exterior windows
5. Caulk at back splash and side splash to wall



**LEGEND**

A-1	Replace damaged ACT	H-1	Adjust door
A-2	Remove paint from grid	H-2	Add smoke seal at door gap
A-3	Repair large/inconsistent gap between grid and partition	H-3	Repair floor damage
A-4	Repair bent tee	H-4	Repair frame damage
A-5	Repair/add lens on light	H-5	Remove laps from label
A-6	Repair large gap between grid pieces	H-6	Add caulk at frame
A-7	Repair/miter grid at corner	H-7	Patch nail heads at view window
B-1	Add closet rod	H-8	Repair damage to integral blind
B-2	Add lock	H-9	Add floor stop
B-3	Add closers	H-10	Complete install of view window
B-4	Repair damage	H-11	Integral blinds missing
B-5	Repair/replace/add caulk	I-1	Replace uneven tiles
B-6	Repair misalignment with gyp bd	I-2	Replace sharp edges at shampoo niche
B-7	Adjust door alignments	I-3	Add caulk in corners
B-8	Remove paint from millwork	I-4	Floor and wall tile misaligned creating large grout joint/gap
B-9	Splash guard inconsistent finish on each side	I-5	Replace caulk to match grout
B-10	Remove all shims from millwork	I-6	Caulk at threshold
B-11	Shelves not flush with wall	I-7	Raise transition strip to align with top surfaces of tiles- eliminate valley
C-1	Repair damaged gyp bd	I-8	Add correct color grout
C-2	Gyp overcut at j-box	I-9	Repair cracked tile
D-1	Touch-up paint at well	I-10	Remove substance/clean grout
D-2	Touch-up paint at soffit	J-1	Relocate seat cover dispenser to match org. bar
D-3	Touch-up paint at frame	J-2	Add vertical grab bar
D-4	Touch-up paint at ceiling	J-3	Center light fixture
D-5	Touch-up paint between frame and corner	J-4	Straighten/center mirror
D-6	Touch-up paint between frames	K-1	Install window blinds
D-7	Remove paint from object	K-2	Add caulk at ext. window
D-8	Paint gyp. bd. at exposed end	L-1	Provide final cleaning
E-1	Repair/replace damaged wall covering	M-1	Adjust/straighten/add screws to outlet
E-2	Add wall covering	M-2	Adjust outlet to be flush
E-3	Repair/rework wall covering seam	M-3	Water connection missing
E-4	Unacceptable patch/repair		
E-5	Repair bubble		
E-6	Remove marks		
F-1	Repair damaged base		
F-2	Complete base install		
G-1	Repair damaged floor tile		
G-2	Replace tile/too large of gap between tiles		
G-3	Re-glue base		

**CHS NCRC MOB  
DIAGNOSTIC IMAGING CENTER**  
OSR# 2293450

**DesignStrategies**

**PUNCH LIST**

**DATE**

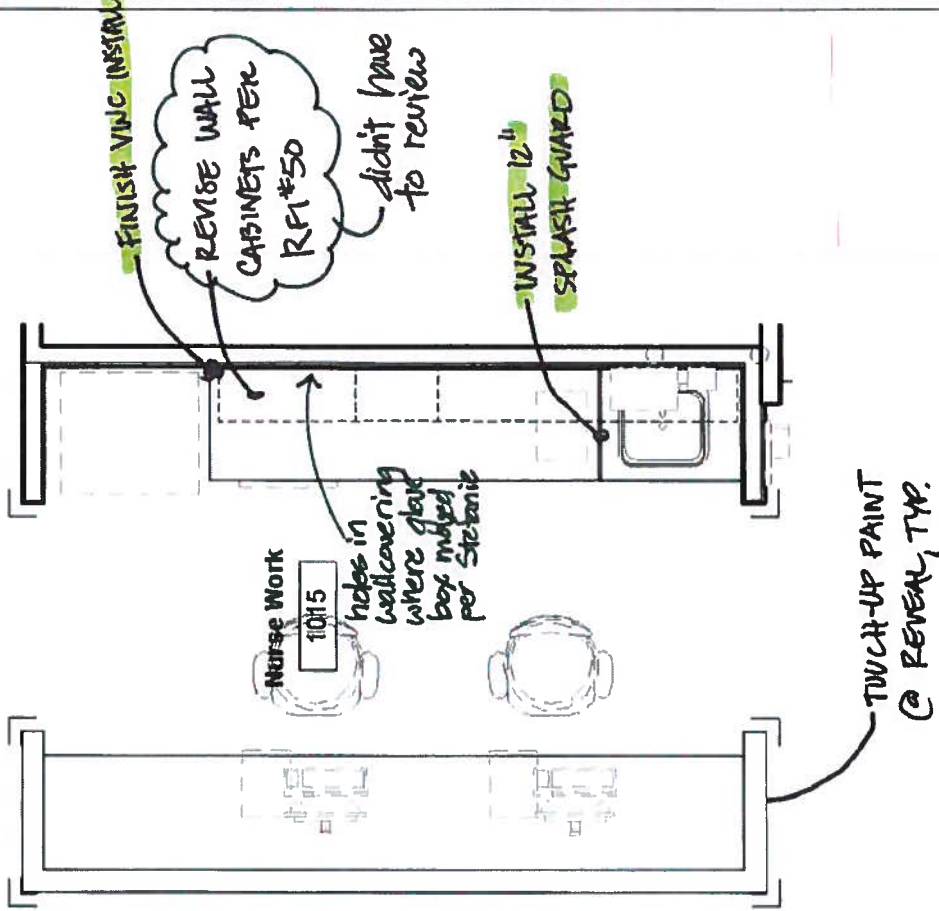
09/13

**NOTES:**

08/20/13

**General Notes:**

1. Final Clean to be performed
2. Clean inside millwork
3. Caulk at hollow metal frames (walls and floors)
4. Caulk at exterior windows
5. Caulk at back splash and side splash to wall



**LEGEND**

A-1	Replace damaged ACT	H-1	Adjust door
A-2	Remove paint from grid	H-2	Add smoke seal at door gap
A-3	Repair large/inconsistent gap between grid and partition	H-3	Repair door damage
A-4	Repair bent tee	H-4	Repair frame damage
A-5	Repair/add lens on light grid pieces	H-5	Remove tape from label
A-6	Repair large gap between grid pieces	H-6	Add caulk at frame
A-7	Repair/miter grid at corner	H-7	Patch nail heads at view window
B-1	Add closet rod	H-8	Repair damage to integral blind
B-2	Add lock	H-9	Add floor stop
B-3	Add closers	H-10	Complete install of view window
B-4	Repair damage	H-11	Integral blinds missing
B-5	Repair/replace/add caulk	I-1	Replace uneven tiles
B-6	Repair misalignment with gyp bd	I-2	Replace sharp edges at shampoo niche
B-7	Adjust door alignments	I-3	Add caulk in corners
B-8	Remove paint from millwork	I-4	Floor and wall tile mis-aligned creating large grout joint/gap
B-9	Splash guard inconsistent finish on each side	I-5	Replace caulk to match grout
B-10	Remove all shims from millwork	I-6	Caulk at threshold
B-11	Shelves not flush with wall	I-7	Raise transition strip to align with top surfaces of tiles- eliminate valley
C-1	Repair damaged gyp bd	I-8	Add correct color grout
C-2	Gyp overcut at J-box	I-9	Repair cracked tile
D-1	Touch-up paint at wall	I-10	Remove substance/clean grout
D-2	Touch-up paint at soffit	J-1	Relocate seat cover dispenser to match dwgs.
D-3	Touch-up paint at frame	J-2	Add vertical grab bar
D-4	Touch-up paint between frame and corner	J-3	Center light fixture
D-5	Touch-up paint at ceiling	J-4	Straighten/center mirror
D-6	Touch-up paint between frames	K-1	Install window blinds
D-7	Remove paint from object	K-2	Add caulk at ext. window
D-8	Paint gyp. bd. at exposed end	L-1	Provide final cleaning
E-1	Repair/replace damaged wall covering	M-1	Adjust/straighten/add screws to outlet
E-2	Add wall covering	M-2	Adjust outlet to be flush
E-3	Repair/rework wall covering seam	M-3	Water connection missing
E-4	Unacceptable patch/repair		
E-5	Repair bubble		
E-6	Remove marks		
F-1	Repair damaged base		
F-2	Complete base install		
G-1	Repair damaged floor tile		
G-2	Replace tile/too large of gap between tiles		
G-3	Re-glue base		

**NOTES:**

CHS NCRC MOB  
 DIAGNOSTIC IMAGING CENTER  
 OSR# 2293450  
**DesignStrategies**

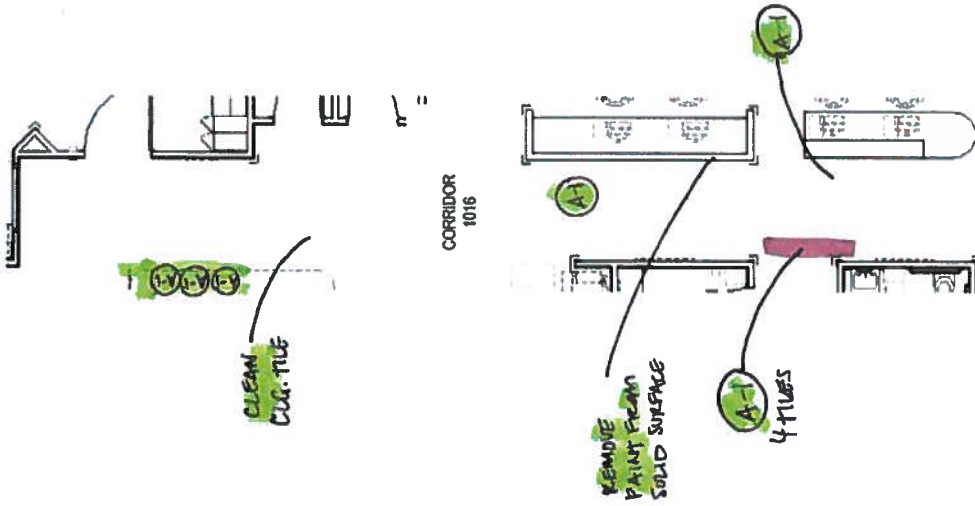
REV # 2 8/20/13

PUNCH LIST DATE 8/9/13

TOUCH-UP PAINT @ REVEAL, TYP.

**General Note:**

1. Final Clean to be performed
2. Clean inside millwork
3. Caulk at hollow metal frames (walls and floors)
4. Caulk at exterior windows
5. Caulk at back splash and side splash to wall



**LEGEND**

A-1	Replace damaged ACT	H-1	Adjust door
A-2	Remove paint from grid	H-2	Add smoke seal at door
A-3	Repair large/inconsistent gap between grid and partition	H-3	Repair door damage
A-4	Repair bent tee	H-4	Repair frame damage
A-5	Repair/add lens on light	H-5	Remove tape from label
A-6	Repair large gap between grid pieces	H-6	Add caulk at frame
A-7	Repair/miler grid at corner	H-7	Patch nail heads at view window
B-1	Add closet rod	H-8	Repair damage to integral blind
B-2	Add lock	H-9	Add floor stop
B-3	Add covers	H-10	Complete install of view window
B-4	Repair damage	H-11	Integral blinds missing
B-5	Repair/replace/add caulk	I-1	Replace uneven tiles
B-6	Repair misalignment with gyp bd	I-2	Replace sharp edges at shampoo niche
B-7	Adjust door alignments	I-3	Add caulk in corners
B-8	Remove paint from millwork	I-4	Floor and wall tile misaligned creating large groud joint/gap
B-9	Scrub guard inconsistent finish on each side	I-5	Replace caulk to match groud
B-10	Remove all stims from millwork	I-6	Caulk at threshold
B-11	Shelves not flush with wall	I-7	Raise transition strip to align with top surfaces of tiles- eliminate valley
C-1	Repair damaged gyp bd	I-8	Add correct color groud
C-2	Gyp overcoat at J-box	I-9	Repair cracked tile
D-1	Touch-up paint at wall	I-10	Remove substance/clean groud
D-2	Touch-up paint at soffit	J-1	Relocate seat cover dispenser to match chgys.
D-3	Touch-up paint at ceiling	J-2	Add vertical grab bar
D-4	Touch-up paint at ceiling frame and corner	J-3	Center light fixture
D-5	Touch-up paint between frames	J-4	Straighten/center mirror
D-6	Touch-up paint between frames	K-1	Install window blinds
D-7	Remove paint from object	K-2	Add caulk at ext. window
D-8	Paint gyp. bd. at exposed end	L-1	Provide final cleaning
E-1	Repair/replace damaged wall covering	M-1	Adjust/straighten/add screws to outlet
E-2	Add wall covering	M-2	Adjust outlet to be flush
E-3	Repair/rework wall covering seam	M-3	Water connection missing
E-4	Unacceptable patch/repair		
E-5	Repair bubble		
E-6	Remove marks		
F-1	Repair damaged base		
F-2	Complete base install		
G-1	Repair damaged floor tile		
G-2	Replace tile/roo large of gap between tiles		
G-3	Re-glue base		

**CHS NCRC MOB DIAGNOSTIC IMAGING CENTER NOTES:**  
 CSR# 223450

**DesignStrategies**

REV #2 8/20/13

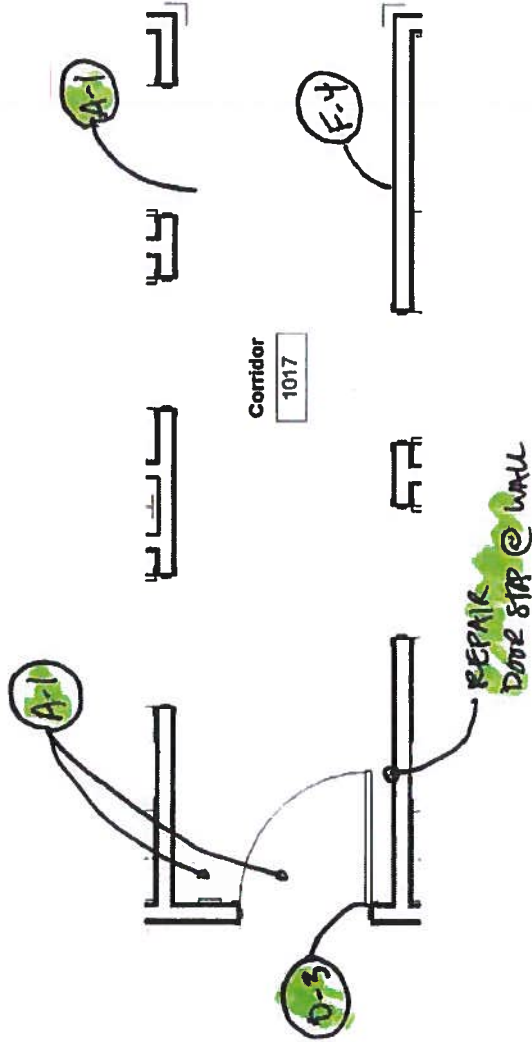
DATE 8/19/13

PUNCH LIST

CORRIDOR  
1016

**General Notes:**

1. Final Clean to be performed
2. Clean inside millwork
3. Caulk at hollow metal frames (walls and floors)
4. Caulk at exterior windows
5. Caulk at back splash and side splash to wall



**LEGEND**

A-1	Replace damaged ACT	H-1	Adjust door
A-2	Remove paint from grid	H-2	Add smoke seal at door gap
A-3	Repair large/inconsistent gap between grid and partition	H-3	Repair door damage
A-4	Repair bent lee	H-4	Repair frame damage
A-5	Repair/add lens on light	H-5	Remove tape from label
A-6	Repair large gap between grid pieces	H-6	Add caulk at frame
A-7	Repair/miter grid at corner	H-7	Patch nail heads at view window
B-1	Add closet rod	H-8	Repair damage to integral blind
B-2	Add lock	H-9	Add floor stop
B-3	Add closers	H-10	Complete install of view window
B-4	Repair damage	H-11	Integral blinds missing
B-5	Repair/replace/add caulk	I-1	Replace uneven tiles
B-6	Repair misalignment with gyp bd	I-2	Replace sharp edges at shampoo niche
B-7	Adjust door alignments	I-3	Add caulk in corners
B-8	Remove paint from millwork	I-4	Floor and wall tile mis-aligned creating large grout joint/gap
B-9	Splash guard inconsistent finish on each side	I-5	Replace caulk to match grout
B-10	Remove all shims from millwork	I-6	Caulk at threshold
B-11	Shelves not flush with wall	I-7	Raise transition strip to align with top surfaces of tiles- eliminate valley
C-1	Repair damaged gyp bd	I-8	Add correct color grout
C-2	Gyp overcut at J-box	I-9	Repair cracked tile
D-1	Touch-up paint at wall	I-10	Remove substance/clean grout
D-2	Touch-up paint at soffit	J-1	Relocate seat cover dispenser to match dwgs.
D-3	Touch-up paint at frame	J-2	Add vertical grab bar
D-4	Touch-up paint at ceiling	J-3	Center light fixture
D-5	Touch-up paint between frame and corner	J-4	Straighten/center mirror
D-6	Touch-up paint between frames	K-1	Install window blinds
D-7	Remove paint from object	K-2	Add caulk at ext. window
D-8	Paint gyp. bd. at exposed end	L-1	Provide final cleaning
E-1	Repair/replace damaged wall covering	M-1	Adjust/straighten/add screws to outlet
E-2	Add wall covering	M-2	Adjust outlet to be flush
E-3	Repair/rework wall covering seam	M-3	Water connection missing
E-4	Unacceptable patch/repair		
E-5	Repair bubble		
E-6	Remove marks		
F-1	Repair damaged base		
F-2	Complete base install		
G-1	Repair damaged floor tile		
G-2	Replace tile/foot large of gap between tiles		
G-3	Re-glue base		

F-4 WAVY BASE

**NOTES:**

CHS NCRC MOB  
DIAGNOSTIC IMAGING CENTER  
OSR# 2293450

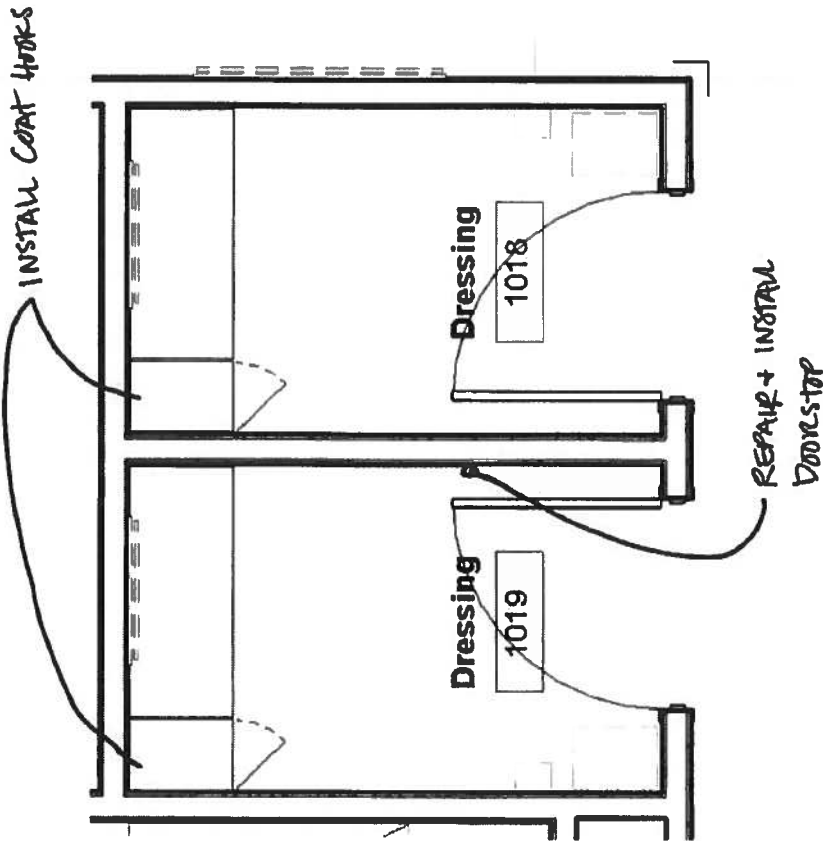
REX #2 8/20/13

DesignStrategies

PUNCH LIST DATE 8/9/13

**General Notes:**

1. Final Clean to be performed
2. Clean inside millwork
3. Caulk at hollow metal frames (walls and floors)
4. Caulk at exterior windows and side splash to wall



**LEGEND**

A-1	Replace damaged ACT	H-1	Adjust door
A-2	Remove paint from grid	H-2	Add smoke seal at door gap
A-3	Repair large/inconsistent gap between grid and partition	H-3	Repair door damage
A-4	Repair bent lee	H-4	Repair frame damage
A-5	Repair/add lens on light	H-5	Remove tape from label
A-6	Repair large gap between grid pieces	H-6	Add caulk at frame
A-7	Repair/miter grid at corner	H-7	Patch nail heads at view window
B-1	Add closet rod	H-8	Repair damage to integral blind
B-2	Add lock	H-9	Add floor stop
B-3	Add closers	H-10	Complete install of view window
B-4	Repair damage	H-11	Integral blinds missing
B-5	Repair/replace/add caulk	I-1	Replace uneven tiles
B-6	Repair misalignment with gyp bd	I-2	Replace sharp edges at shampoo niche
B-7	Adjust door alignments	I-3	Add caulk in corners
B-8	Remove paint from millwork	I-4	Floor and wall tile misaligned creating large grout joint/gap
B-9	Splash guard inconsistent finish on each side	I-5	Replace caulk to match grout
B-10	Remove all shims from millwork	I-6	Caulk at threshold
B-11	Shelves not flush with wall	I-7	Raise transition strip to align with top surfaces of tiles- eliminate valley
C-1	Repair damaged gyp bd	I-8	Add correct color grout
C-2	Gyp overcut at J-box	I-9	Repair cracked tile
D-1	Touch-up paint at wall	I-10	Remove substance/clean grout
D-2	Touch-up paint at soffit	J-1	Relocate seal cover dispenser to match divgs.
D-3	Touch-up paint at frame	J-2	Add vertical grab bar
D-4	Touch-up paint at ceiling	J-3	Center light fixture
D-5	Touch-up paint between frame and corner	J-4	Straighten/center mirror
D-6	Touch-up paint between frames	K-1	Install window blinds
D-7	Remove paint from object	K-2	Add caulk at ext. window
D-8	Paint gyp. bd. at exposed end	L-1	Provide final cleaning
E-1	Repair/replace damaged wall covering	M-1	Adjust/straighten/acid screws to outlet
E-2	Add wall covering	M-2	Adjust outlet to be flush
E-3	Repair/rework wall covering seam	M-3	Water connection missing
E-4	Unacceptable patch/repair		
E-5	Repair bubble		
E-6	Remove marks		
F-1	Repair damaged base		
F-2	Complete base install		
G-1	Repair damaged floor tile		
G-2	Replace tile too large of gap between tiles		
G-3	Re-glue base		

**NOTES:**

**CHS NCRC MOB  
DIAGNOSTIC IMAGING CENTER**

OSR# 2293450

REV #2 8/20/13

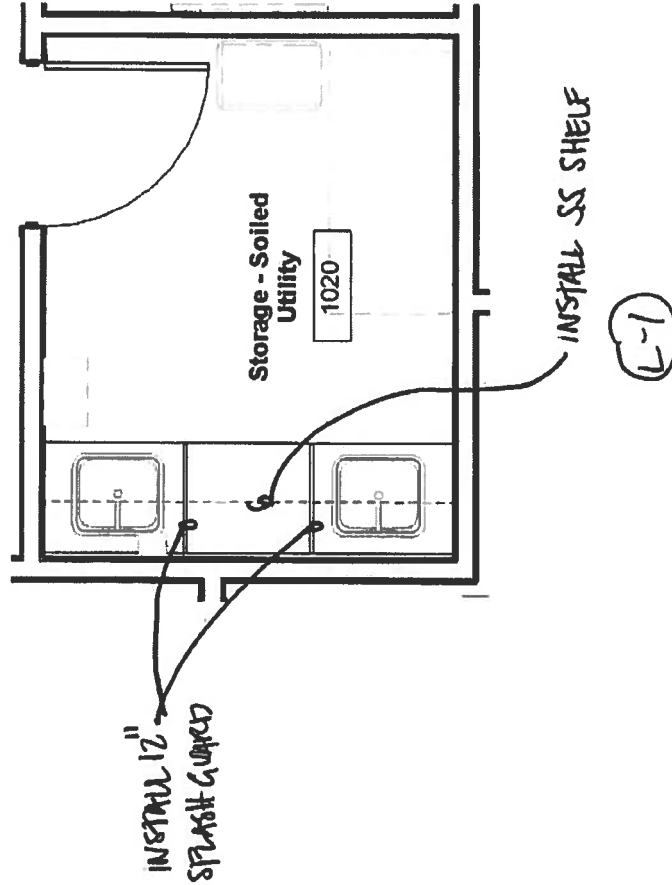
**DesignStrategies**

**PUNCH LIST**      DATE 8/9/13



**General Notes:**

1. Final Clean to be performed
2. Clean inside millwork
3. Caulk at hollow metal frames (walls and floors)
4. Caulk at exterior windows
5. Caulk at back splash and side splash to wall



**LEGEND**

A-1	Replace damaged ACT	H-1	Adjust door
A-2	Remove paint from grid	H-2	Add smoke seal at door gap
A-3	Repair large/inconsistent gap between grid and partition	H-3	Repair door damage
A-4	Repair bent tee	H-4	Repair frame damage
A-5	Repair/add lens on light	H-5	Remove tape from label
A-6	Repair large gap between grid pieces	H-6	Add caulk at frame
A-7	Repair/replace grid at corner	H-7	Patch nail heads at view window
B-1	Add chase rod	H-8	Repair damage to integral blind
B-2	Add lock	H-9	Add floor stop
B-3	Add closers	H-10	Complete install of view window
B-4	Repair damage	H-11	Integral blinds missing
B-5	Repair/replace/add caulk	I-1	Replace uneven tiles
B-6	Repair misalignment with gyp bd	I-2	Replace sharp edges at shampoo niche
B-7	Adjust door alignments	I-3	Floor and wall tile mis-aligned creating large gyp joint/gap
B-8	Remove paint from millwork	I-4	Replace caulk to match gyp joint/gap
B-9	Splash guard inconsistent finish on each side	I-5	Caulk at threshold
B-10	Remove all shims from millwork	I-6	Raise transition strip to align with top surfaces of tiles- eliminate valley
B-11	Shelves not flush with wall	I-7	Add correct color grout
C-1	Repair damaged gyp bd	I-8	Repair cracked tile
C-2	Gyp overcut at j-box	I-9	Remove substance/clean grout
D-1	Touch-up paint at wall	J-1	Recreate seal cover dispenser to match dwgs.
D-2	Touch-up paint at soffit	J-2	Add vertical grab bar
D-3	Touch-up paint at frame	J-3	Center light fixture
D-4	Touch-up paint at ceiling	J-4	Straighten/center mirror
D-5	Touch-up paint between frame and corner	K-1	Install window blinds
D-6	Touch-up paint between frames	K-2	Add caulk at ext. window
D-7	Remove paint from object	L-1	Provide final cleaning
D-8	Paint gyp bd. at exposed end	M-1	Adjust/straighten/add screws to outlet
E-1	Repair/replace damaged wall covering	M-2	Adjust outlet to be flush
E-2	Add wall covering	M-3	Water connection missing
E-3	Repair/replace wall covering seam		
E-4	Unacceptable patch/repair		
E-5	Repair bubble		
E-6	Remove marks		
F-1	Repair damaged base		
F-2	Complete base install		
G-1	Repair damaged floor tile		
G-2	Replace tile/roo large of gap between tiles		
G-3	Re-glue base		

**NOTES:**

**CHS NCRC MOB  
DIAGNOSTIC IMAGING CENTER**

OSR# 2293450

**DesignStrategies**

REV #2 8/20/13

PUNCH LIST

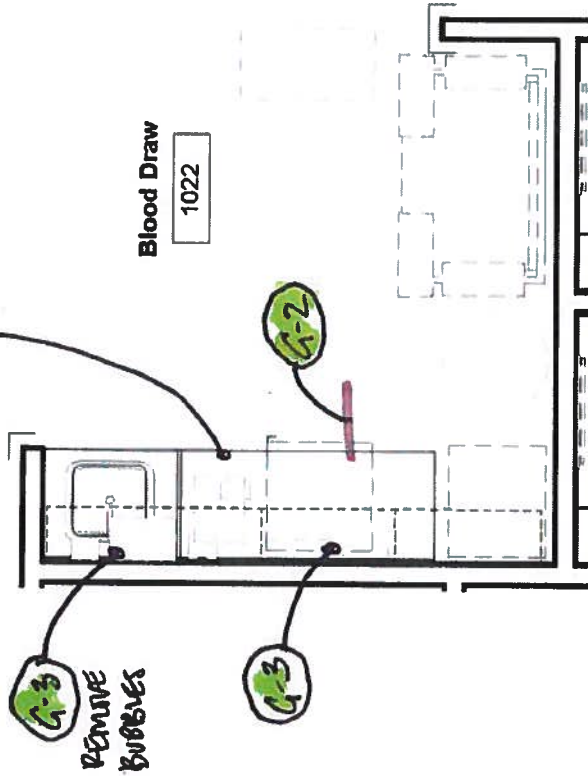
DATE

09/13

**General Notes:**

1. Final Clean to be performed
2. Clean inside millwork
3. Caulk at hollow metal frames (walls and floors)
4. Caulk at exterior windows and side splash to wall

ADJUST SLIDE @ PULL OUT TRASH FOR EASY PULL



**LEGEND**

A-1	Replace damaged A.C.T.	H-1	Adjust door
A-2	Remove paint from grid	H-2	Add smoke seal at door gap
A-3	Repair large/inconsistent gap between grid and partition	H-3	Repair door damage
A-4	Repair bent toe	H-4	Repair frame damage
A-5	Repair/add lens on light	H-5	Remove tape from label
A-6	Repair large gap between grid pieces	H-6	Add caulk at frame
A-7	Repair/mixer grid at corner	H-7	Patch nail heads at view window
B-1	Add closet rod	H-8	Repair damage to integral blind
B-2	Add lock	H-9	Add floor stop
B-3	Add cossen	H-10	Complete install of view window
B-4	Repair damage	H-11	Integral blinds missing
B-5	Repair/replace/add caulk	I-1	Replace uneven tiles
B-6	Repair misalignment with gyp bd	I-2	Replace sharp edges at shampoo niche
B-7	Adjust door alignments	I-3	Add caulk in corners
B-8	Remove paint from millwork	I-4	Floor and wall tile mis-aligned creating large grout joint/gap
B-9	Splash guard inconsistent finish on each side	I-5	Replace caulk to match grout
B-10	Remove all shims from millwork	I-6	Caulk at threshold
B-11	Shelves not flush with wall	I-7	Raise transition strip to align with top surfaces of tiles- eliminate valley
C-1	Repair damaged gyp bd	I-8	Add correct color grout
C-2	Gyp overcut at J-box	I-9	Repair cracked tile
D-1	Touch-up paint at wall	I-10	Remove substance/clean grout
D-2	Touch-up paint at soffit	J-1	Relocate seat cover dispenser to match dwgs
D-3	Touch-up paint at frame	J-2	Add vertical grab bar
D-4	Touch-up paint at ceiling	J-3	Center light fixture
D-5	Touch-up paint between frame and corner	J-4	Straighten/center mirror
D-6	Touch-up paint between frames	K-1	Install window blinds
D-7	Remove paint from object	K-2	Add caulk at ext. window
D-8	Paint gyp bd. at exposed end	L-1	Provide final cleaning
E-1	Repair/replace damaged wall covering	M-1	Adjust/straighten/add screws to outlet
E-2	Add wall covering	M-2	Adjust outlet to be flush
E-3	Repair/rework wall covering seam	M-3	Weater connection missing
E-4	Unacceptable patch/repair		
E-5	Repair bubble		
E-6	Remove marks		
F-1	Repair damaged base		
F-2	Complete base install		
G-1	Repair damaged floor tile		
G-2	Replace tile/floor large of gap between tiles		
G-3	Re-glue base		

**NOTES:**

**CHS NCRC MOB  
DIAGNOSTIC IMAGING CENTER**

OSR# 2293450

**DesignStrategies**

REV #2 8/10/13

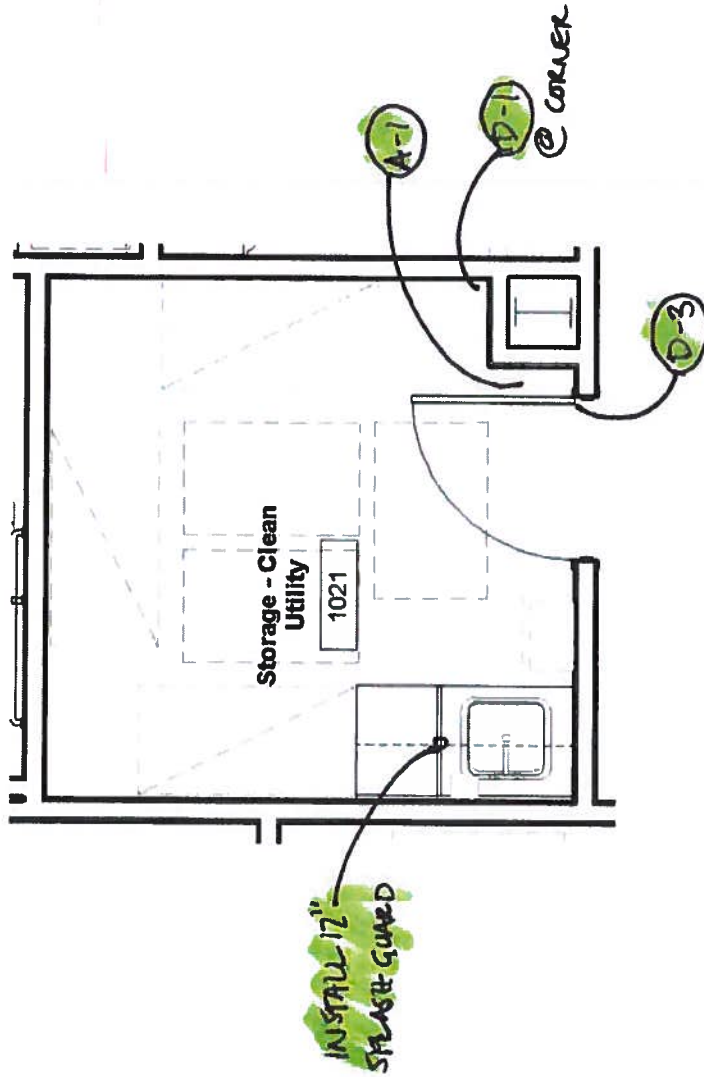
**PUNCH LIST**

**DATE**

8/9/13

**General Notes:**

1. Final Clean to be performed
2. Clean inside millwork
3. Caulk at hollow metal frames (walls and floors)
4. Caulk at exterior windows and side splash to wall



**LEGEND**

A-1	Replace damaged ACT	H-1	Adjust door
A-2	Remove paint from grid	H-2	Add smoke seal at door gap
A-3	Repair large/inconsistent gap between grid and partition	H-3	Repair door damage
A-4	Repair bent tee	H-4	Repair frame damage
A-5	Repair/add lens on light	H-5	Remove tape from label
A-6	Repair large gap between grid pieces	H-6	Add caulk at frame
A-7	Repair/replace grid at corner	H-7	Patch nail heads at view window
B-1	Add closet rod	H-8	Repair damage to integral blind
B-2	Add lock	H-9	Add floor stop
B-3	Add closers	H-10	Complete install of view window
B-4	Repair damage	H-11	Integral blinds missing
B-5	Repair/replace/add caulk	I-1	Replace uneven tiles
B-6	Repair misalignment with gyp bd	I-2	Replace sharp edges at shampoo niche
B-7	Adjust door alignments	I-3	Add caulk in corners
B-8	Remove paint from millwork	I-4	Floor and wall tile misaligned creating large gap
B-9	Splash guard inconsistent finish on each side	I-5	Replace caulk to match grout
B-10	Remove all shims from millwork	I-6	Caulk at threshold
B-11	Shelves not flush with wall	I-7	Raise transition strip to align with top surfaces of tiles- eliminate valley
C-1	Repair damaged gyp bd	I-8	Add correct color grout
C-2	Gyp overcoat at J-box	I-9	Repair cracked tile
D-1	Touch-up paint at wall	I-10	Remove substance/clean grout
D-2	Touch-up paint at soffit	J-1	Relocate seat cover dispenser to match dwgs.
D-3	Touch-up paint at frame	J-2	Add vertical grab bar
D-4	Touch-up paint at ceiling	J-3	Center light fixture
D-5	Touch-up paint between frame and corner	J-4	Straighten/center mirror
D-6	Touch-up paint between frames	K-1	Install window blinds
D-7	Remove paint from object	K-2	Add caulk at ext. window
D-8	Paint gyp bd at exposed end	L-1	Provide final cleaning
E-1	Repair/replace damaged wall covering	M-1	Adjust/straighten/add screws to outlet
E-2	Add wall covering	M-2	Adjust outlet to be flush
E-3	Repair/rework wall covering seam	M-3	Water connection missing
E-4	Unacceptable patch/repair		
E-5	Repair bubble		
E-6	Remove marks		
F-1	Repair damaged base		
F-2	Complete base install		
G-1	Repair damaged floor tile		
G-2	Replace tile/floor large of gap between tiles		
G-3	Re-glue base		

**NOTES:**

**CHS NCRG MOB  
DIAGNOSTIC IMAGING CENTER**

OSR# 2293450

**DesignStrategies**

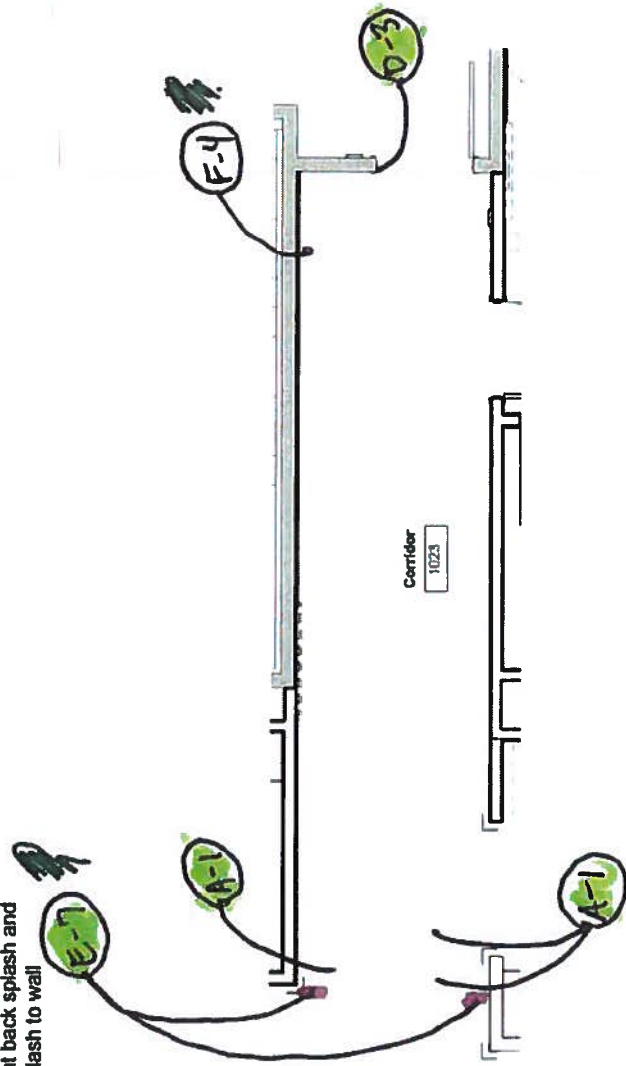
REV #2 8/20/13

**PUNCH LIST**

**DATE**

8/9/13

- General Notes:
1. Final Clean to be performed
  2. Clean inside millwork
  3. Caulk at hollow metal frames (walls and floors)
  4. Caulk at exterior windows and side splash to wall



**LEGEND**

A-1	Replace damaged ACT	H-1	Adjust door
A-2	Remove paint from grid	H-2	Add smoke seal at door gap
A-3	Repair large/inconsistent gap between grid and partition	H-3	Repair door damage
A-4	Repair bent leg	H-4	Repair frame damage
A-5	Repair/add lens on light	H-5	Remove tape from label
A-6	Repair large gap between grid pieces	H-6	Add caulk at frame
A-7	Repair/replace grid at corner	H-7	Patch nail heads at view window
B-1	Add closet rod	H-8	Repair damage to integral blind
B-2	Add lock	H-9	Add floor stop
B-3	Add closers	H-10	Complete install of view window
B-4	Repair damage	H-11	Integral blinds missing
B-5	Repair/replace/add caulk	I-1	Replace uneven tiles
B-6	Repair misalignment with gyp. bd	I-2	Replace sharp edges at shampoo niche
B-7	Adjust door alignments	I-3	Add caulk in corners
B-8	Remove paint from millwork	I-4	Floor and wall tile misaligned creating large grout joint/gap
B-9	Splash guard inconsistent finish on each side	I-5	Replace caulk to match grout
B-10	Remove all shims from millwork	I-6	Caulk at threshold
B-11	Shelves not flush with wall	I-7	Raise transition strip to align with top surfaces of tiles- eliminate valley
C-1	Repair damaged gyp bd overcut at j-box	I-8	Add corner color grout
D-1	Touch-up paint at wall	I-9	Repair cracked tile
D-2	Touch-up paint at soffit	I-10	Remove substance/clean grout
D-3	Touch-up paint at frame	J-1	Relocate seat cover dispenser to match always
D-4	Touch-up paint at ceiling	J-2	Add vertical grab bar
D-5	Touch-up paint between frame and corner	J-3	Center light fixture
D-6	Touch-up paint between frames	J-4	Straighten/center mirror
D-7	Remove paint from object	K-1	Install window blinds
D-8	Paint gyp. bd. at exposed end	K-2	Add caulk at ext. window
E-1	Repair/replace damaged wall covering	L-1	Provide final cleaning
E-2	Add wall covering	M-1	Adjust/straighten/add screws to outlet
E-3	Repair/rework wall covering seam	M-2	Adjust outlet to be flush
E-4	Unacceptable patch repair	M-3	Water connection missing
E-5	Repair bubble		
E-6	Remove marks		
F-1	Repair damaged base		
F-2	Complete base install		
G-1	Repair damaged floor tile		
G-2	Replace tile/too large of gap between tiles		
G-3	Re-glue base		

E-7 TRIM VWC  
F-4 WANY BASE

**NOTES:**

**CHS NCRC MOB  
DIAGNOSTIC IMAGING CENTER**

OSR# 2293450

REV #2 8/20/13

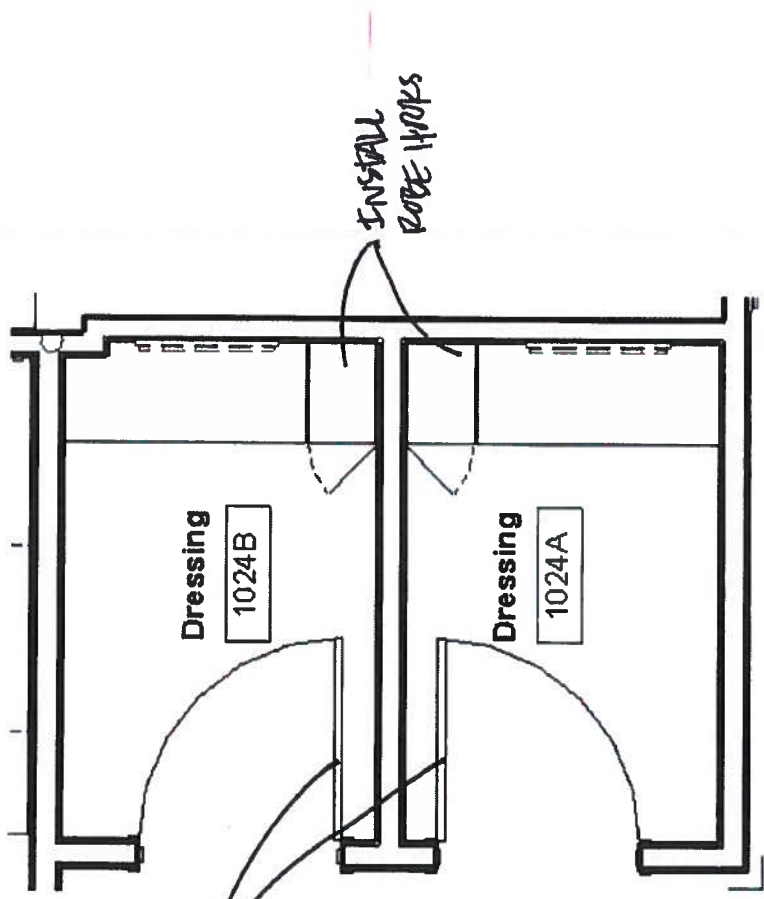
**DesignStrategies**

**PUNCH LIST**

**DATE**

8/9/13

- General Notes:
1. Final Clean to be performed
  2. Clean inside millwork
  3. Caulk at hollow metal frames (walls and floors)
  4. Caulk at exterior windows and side splash to wall



**LEGEND**

A-1	Replace damaged ACT	H-1	Adjust door
A-2	Remove paint from grid	H-2	Add smoke seal at door gap
A-3	Repair large/inconsistent gap between grid and partition	H-3	Repair door damage
A-4	Repair bent tee	H-4	Repair frame damage
A-5	Repair/add lens on light	H-5	Remove tape from label
A-6	Repair large gap between grid pieces	H-6	Add caulk at frame
A-7	Repair/mix grid at corner	H-7	Patch nail heads at view window
B-1	Add closet rod	H-8	Repair damage to integrat blind
B-2	Add lock	H-9	Add floor stop
B-3	Add closers	H-10	Complete install of view window
B-4	Repair damage	H-11	Integrat blinds missing
B-5	Repair/replace/add caulk	I-1	Replace uneven tiles
B-6	Repair misalignment with gyp bd	I-2	Replace sharp edges at shampoo niche
B-7	Adjust door alignments	I-3	Add caulk in corners
B-8	Remove paint from millwork	I-4	Floor and wall tile mis-aligned creating large groud joint/gap
B-9	Splash guard inconsistent finish on each side	I-5	Replace caulk to match groud
B-10	Remove all shims from millwork	I-6	Caulk at threshold
B-11	Shelves not flush with wall	I-7	Raise transition strip to align with top surfaces of tiles- eliminata valley
C-1	Repair damaged gyp bd	I-8	Add correct color groud
C-2	Gyp overcut at J-box	I-9	Repair cracked tile
D-1	Touch-up paint at wall	I-10	Remove substance/clean groud
D-2	Touch-up paint at soffit	J-1	Relocate seat cover dispenser to match dwgs.
D-3	Touch-up paint at frame	J-2	Add vertical grab bar
D-4	Touch-up paint at ceiling	J-3	Center light fixture
D-5	Touch-up paint between frame and corner	J-4	Straighten/center mirror
D-6	Touch-up paint between frames	K-1	Install window blinds
D-7	Remove paint from object	K-2	Add caulk at ext. window
D-8	Paint gyp bd. at exposed-end	L-1	Provide final cleaning
E-1	Repair/replace damaged wall covering	M-1	Adjust/straighten/add screws to outlet
E-2	Add wall covering	M-2	Adjust outlet to be flush
E-3	Repair/rework wall covering seam	M-3	Water connection missing
E-4	Unacceptable patch/repair		
E-5	Repair bubble		
E-6	Remove marks		
F-1	Repair damaged base		
F-2	Complete base install		
G-1	Repair damaged floor tile		
G-2	Replace tile/too large of gap between tiles		
G-3	Re-glue base		

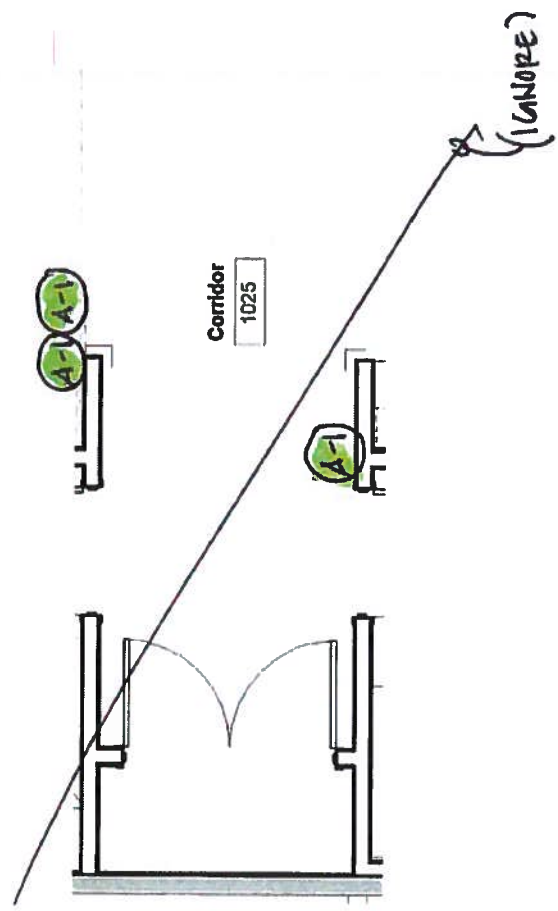
CHS NCRC MOB  
 DIAGNOSTIC IMAGING CENTER  
 OSR# 2293450  
 DesignStrategies

NOTES:  
 REV #2 8/20/13

PUNCH LIST      DATE 8/9/13

**General Notes:**

1. Final Clean to be performed
2. Clean inside millwork
3. Caulk at hollow metal frames (walls and floors)
4. Caulk at exterior windows and
5. Caulk at back splash and side splash to wall



**LEGEND**

A-1	Replace damaged ACT
A-2	Remove paint from grid
A-3	Repair larger/inconsistent gap between grid and partition
A-4	Repair bent tee
A-5	Repair/add lens on light
A-6	Repair large gap between grid pieces
A-7	Repair/miter grid at corner
B-1	Add closet rod
B-2	Add lock
B-3	Add closers
B-4	Repair damage
B-5	Repair/replace/add caulk
B-6	Repair misalignment with gyp bd
B-7	Adjust door alignments
B-8	Remove paint from millwork
B-9	Splash guard inconsistent finish on each side
B-10	Remove all shims from millwork
B-11	Shelves not flush with wall
C-1	Repair damaged gyp bd
C-2	Gyp overcut at j-box
D-1	Touch-up paint at wall
D-2	Touch-up paint at soffit
D-3	Touch-up paint at frame
D-4	Touch-up paint at ceiling
D-5	Touch-up paint between frame and corner
D-6	Touch-up paint between frames
D-7	Remove paint from object
D-8	Paint gyp bd. at exposed end
E-1	Repair/replace damaged wall covering
E-2	Add wall covering
E-3	Repair/rework wall covering seam
E-4	Unacceptable patch/repair
E-5	Repair bubble
E-6	Remove marks
F-1	Repair damaged base
F-2	Complete base install
G-1	Repair damaged floor tile
G-2	Replace tile/too large of gap between tiles
G-3	Re-glue base
H-1	Adjust door
H-2	Add smoke seal at door gap
H-3	Repair door damage
H-4	Repair frame damage
H-5	Remove tape from label
H-6	Add caulk at frame
H-7	Patch nail heads at view window
H-8	Repair damage to integral blind
H-9	Add floor stop
H-10	Complete install of view window
H-11	Integral blinds missing
I-1	Replace uneven tiles
I-2	Replace sharp edges at shampoo niche
I-3	Add caulk in corners
I-4	Floor and wall tile misaligned creating large grout joint/gap
I-5	Replace caulk to match grout
I-6	Caulk at threshold
I-7	Raise transition strip to align with top surfaces of tiles- eliminate valley
I-8	Add correct color grout
I-9	Repair cracked tile
I-10	Remove substance/clean grout
J-1	Relocate seat cover dispenser to match dwg's
J-2	Add vertical grab bar
J-3	Center light fixture
J-4	Straighten/center mirror
K-1	Install window blinds
K-2	Add caulk at ext. window
L-1	Provide final cleaning
M-1	Adjust/straighten/add screws to outlet
M-2	Adjust outlet to be flush
M-3	Water connection missing

**NOTES:**

**CHS NCRC MOB  
DIAGNOSTIC IMAGING CENTER**  
OSR# 2293450

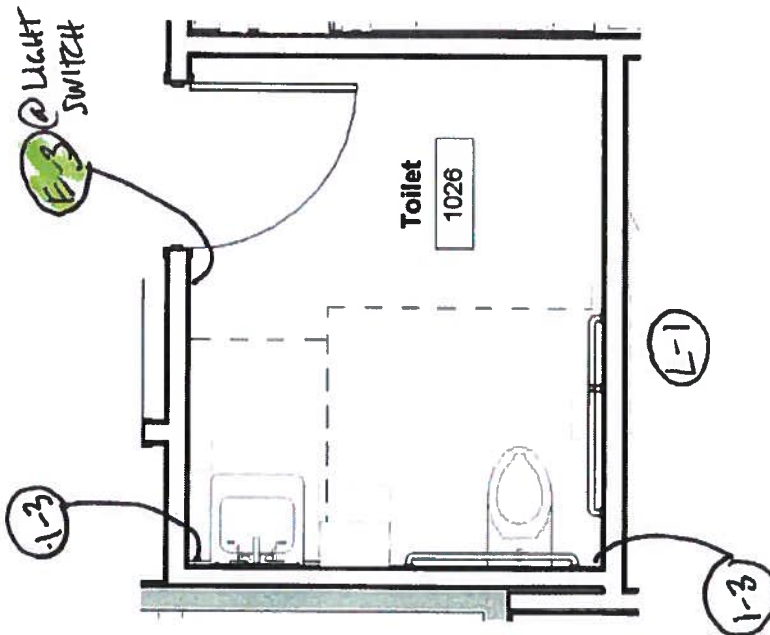
REV #2 8/20/13

**DesignStrategies**

**PUNCH LIST**      DATE 8/9/13

**General Notes:**

1. Final Clean to be performed
2. Clean inside millwork
3. Caulk at hollow metal frames (walls and floors)
4. Caulk at exterior windows and
5. Caulk at back splash and side splash to wall



**LEGEND**

A-1	Replace damaged ACT	H-1	Adjust door
A-2	Remove paint from grid	H-2	Add smoke seal at door gap
A-3	Repair large/inconsistent gap between grid and partition	H-3	Repair door damage
A-4	Repair bent tee	H-4	Repair frame damage
A-5	Repair/add lens on light	H-5	Remove tape from label
A-6	Repair large gap between grid pieces	H-6	Add caulk at frame
A-7	Repair/meter grid at corner	H-7	Patch nail heads at view window
B-1	Add closet rod	H-8	Repair damage to integral blind
B-2	Add lock	H-9	Add floor stop
B-3	Add closers	H-10	Complete install of view window
B-4	Repair damage	H-11	Integral blinds missing
B-5	Repair/replace/add caulk	I-1	Replace uneven tiles
B-6	Repair misalignment with gyp. bd	I-2	Replace sharp edges at shampoo niche
B-7	Adjust door alignments	I-3	Add caulk in corners
B-8	Remove paint from millwork	I-4	Floor and wall tile misaligned creating large grout joint/gap
B-9	Splash guard inconsistent finish on each side	I-5	Replace caulk to match grout
B-10	Remove all stains from millwork	I-6	Caulk at threshold
B-11	Shelves not flush with wall	I-7	Raise transition strip to align with top surfaces of tiles- eliminate valley
C-1	Repair damaged gyp bd	I-8	Add corner color grout
C-2	Gyp overcut at J-box	I-9	Repair cracked tile
D-1	Touch-up paint at wall	I-10	Remove substance/clean grout
D-2	Touch-up paint at soffit	J-1	Relocate seat cover dispenser to match dwg's
D-3	Touch-up paint at frame	J-2	Add vertical grab bar
D-4	Touch-up paint at ceiling	J-3	Center light fixture
D-5	Touch-up paint between frame and corner	J-4	Straighten/center mirror
D-6	Touch-up paint between frames	K-1	Install window blinds
D-7	Remove paint from object	K-2	Add caulk at ext. window
D-8	Paint gyp. bd. at exposed end	L-1	Provide final cleaning
E-1	Repair/replace damaged wall covering	M-1	Adjust/straighten/add screws to outlet
E-2	Add wall covering	M-2	Adjust outlet to be flush
E-3	Repair/rework wall covering seam	M-3	Water connection missing
E-4	Unacceptable patch/repair		
E-5	Repair bubble		
E-6	Remove marks		
F-1	Repair damaged base		
F-2	Complete base install		
G-1	Repair damaged floor tile		
G-2	Replace tile/too large of gap between tiles		
G-3	Re-glue base		

**NOTES:**

**CHS NCRC MOB  
DIAGNOSTIC IMAGING CENTER**

OSR# 2293450

**DesignStrategies**

REV #2 8/20/13

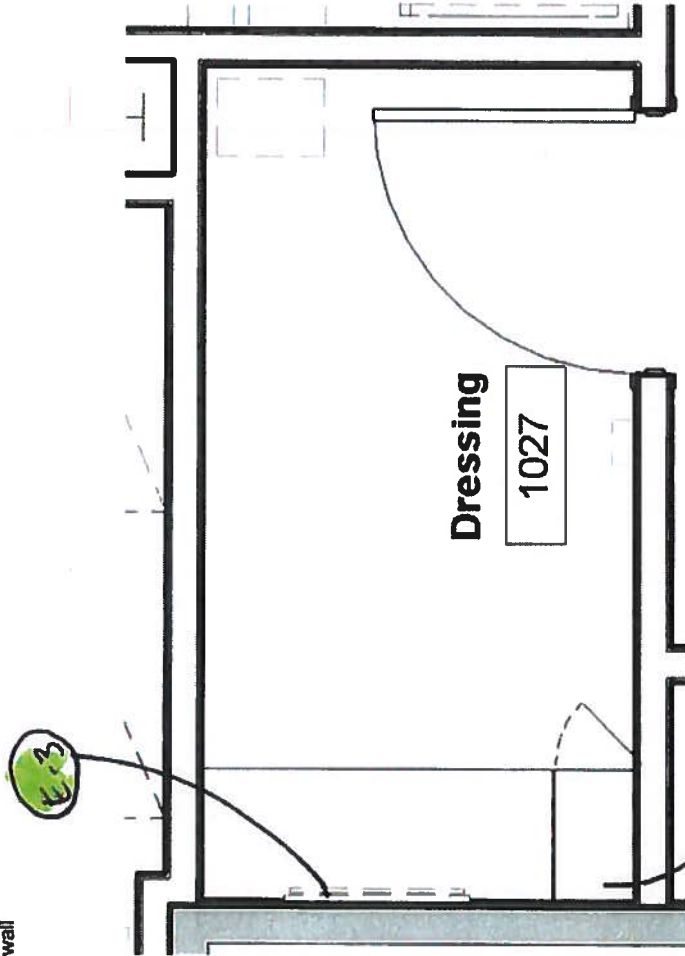
**PUNCH LIST**

**DATE**

8/9/13

**General Notes:**

1. Final Clean to be performed
2. Clean inside millwork
3. Caulk at hollow metal frames (walls and floors)
4. Caulk at exterior windows and side splash to wall



**LEGEND**

A-1	Replace damaged ACT	H-1	Adjust door
A-2	Remove paint from grid	H-2	Add smoke seal at door gap
A-3	Repair large/inconsistent gap between grid and partition	H-3	Repair door damage
A-4	Repair bent tee	H-4	Repair frame damage
A-5	Repair/add lens on light	H-5	Remove tape from label
A-6	Repair large gap between grid pieces	H-6	Add caulk at frame
A-7	Repair/miler grid at corner	H-7	Patch nail heads at view window
B-1	Add closet rod	H-8	Repair damage to integral blind
B-2	Add lock	H-9	Add floor stop
B-3	Add closers	H-10	Complete install of view window
B-4	Repair damage	H-11	Integral blinds missing
B-5	Repair/replace/add caulk	I-1	Replace uneven tiles
B-6	Repair misalignment with gyp bd	I-2	Replace sharp edges at shampoo niche
B-7	Adjust door alignments	I-3	Add caulk in corners
B-8	Remove paint from millwork	I-4	Floor and wall tile misaligned creating large grout joint/gap
B-9	Splash guard inconsistent finish on each side	I-5	Replace caulk to match grout
B-10	Remove all shims from millwork	I-6	Caulk at threshold
B-11	Shelves not flush with wall	I-7	Raise transition strip to align with top surfaces of tiles- eliminate valley
C-1	Repair damaged gyp bd	I-8	Add correct color grout
C-2	Gyp overcut at j-box	I-9	Repair cracked tile
D-1	Touch-up paint at wall	I-10	Remove substance/clean grout
D-2	Touch-up paint at soffit	J-1	Relocate seat cover dispenser to match dwgs
D-3	Touch-up paint at frame	J-2	Add vertical grab bar
D-4	Touch-up paint at ceiling	J-3	Center light fixture
D-5	Touch-up paint between frame and corner	J-4	Straighten/center mirror
D-6	Touch-up paint between frames	K-1	Install window blinds
D-7	Remove paint from object	K-2	Add caulk at ext. window
D-8	Paint gyp. bd. at exposed end	L-1	Provide final cleaning
E-1	Repair/replace damaged wall covering	M-1	Adjust/straighten/add screws to outlet
E-2	Add wall covering	M-2	Adjust outlet to be flush
E-3	Repair/rework wall covering seam	M-3	Water connection missing
E-4	Unacceptable patchy repair		
E-5	Repair bubble		
E-6	Remove marks		
F-1	Repair damaged base		
F-2	Complete base install		
G-1	Repair damaged floor tile		
G-2	Replace tile/too large of gap between tiles		
G-3	Re-glue base		

**NOTES:**

**CHS NCRC MOB  
DIAGNOSTIC IMAGING CENTER**  
OSR# 2293450

REV #2 8/29/13

**DesignStrategies**

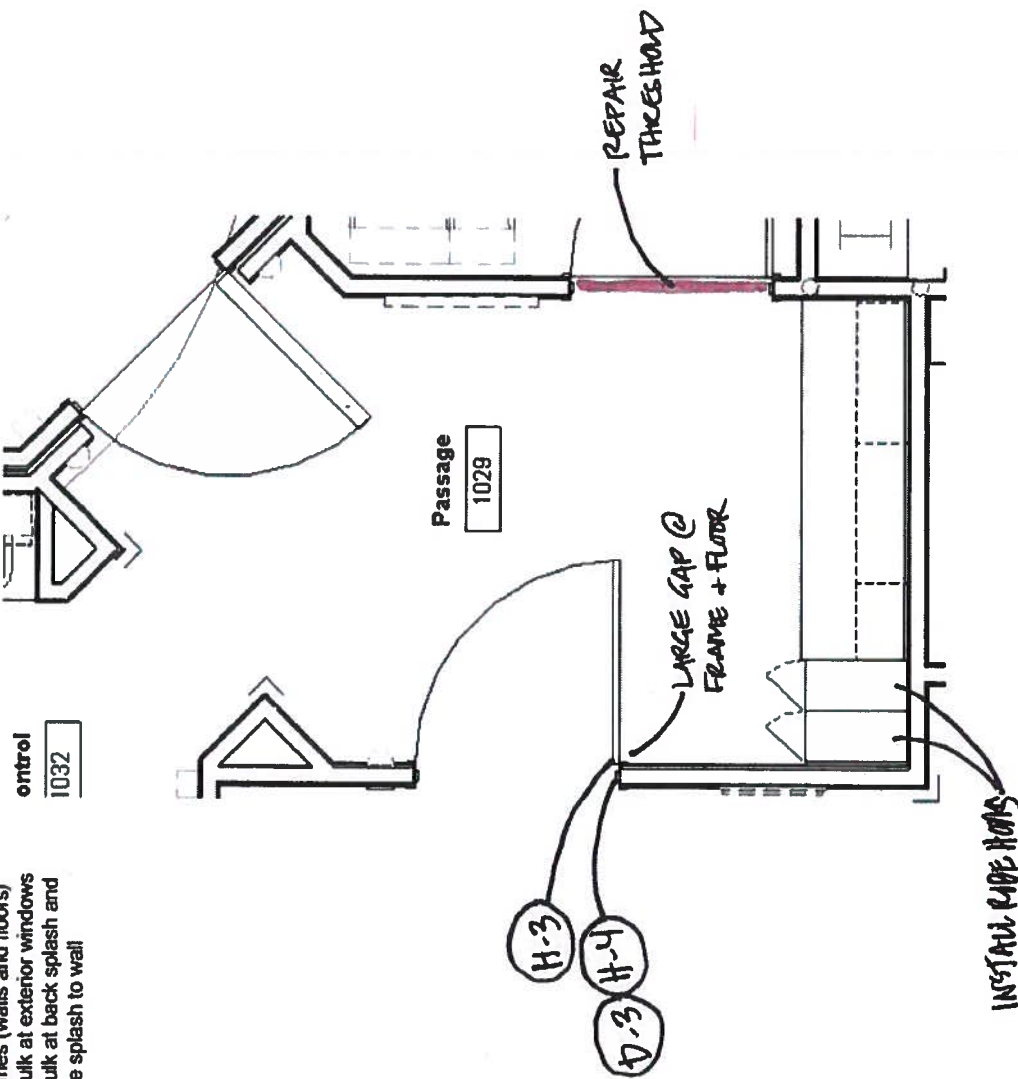
**PUNCH LIST**      DATE 8/9/13



**General Notes:**

1. Final Clean to be performed
2. Clean inside millwork
3. Caulk at hollow metal frames (walls and floors)
4. Caulk at exterior windows and
5. Caulk at back splash and side splash to wall

ontrol  
1032



**LEGEND**

A-1	Replace damaged ACT	H-1	Adjust door
A-2	Remove paint from grid	H-2	Add smoke seal at door gap
A-3	Repair large/inconsistent gap between grid and partition	H-3	Repair door damage
A-4	Repair bent tee	H-4	Repair frame damage
A-5	Repair/add lens on light	H-5	Remove tape from label
A-6	Repair large gap between grid pieces	H-6	Add caulk at frame
A-7	Repair/replace grid at corner	H-7	Patch nail heads at view window
B-1	Add closet rod	H-8	Repair damage to integral blind
B-2	Add lock	H-9	Add floor stop
B-3	Add closers	H-10	Complete install of view window
B-4	Repair damage	H-11	Integral blinds missing
B-5	Repair/replace/add caulk	I-1	Replace uneven tiles
B-6	Repair misalignment with gyp bd	I-2	Replace sharp edges at shampoo niche
B-7	Adjust door alignments	I-3	Add caulk in corners
B-8	Remove paint from millwork	I-4	Floor and wall tile misaligned creating large grout joint/gap
B-9	Splash guard inconsistent finish on each side	I-5	Replace caulk to match grout
B-10	Remove all shims from millwork	I-6	Caulk at threshold
B-11	Shelves not flush with wall	I-7	Raise transition strip to align with top surfaces of tiles- eliminate valley
C-1	Repair damaged gyp bd	I-8	Add correct color grout
C-2	Gyp overcut at I-box	I-9	Repair cracked tile
D-1	Touch-up paint at wall	I-10	Remove substance/clean grout
D-2	Touch-up paint at soffit	J-1	Relocate seat cover dispenser to match divgs.
D-3	Touch-up paint at frame	J-2	Add vertical grab bar
D-4	Touch-up paint at ceiling	J-3	Center light fixture
D-5	Touch-up paint between frame and corner	K-1	Install window blinds
D-6	Touch-up paint between frames	K-2	Add caulk at ext. window
D-7	Remove paint from object	L-1	Provide final cleaning
D-8	Paint gyp. bd. at exposed end	M-1	Adjust/straighten/acid screws to outlet
E-1	Repair/replace damaged wall covering	M-2	Adjust outlet to be flush
E-2	Add wall covering	M-3	Water connection missing
E-3	Repair/rework wall covering seam		
E-4	Unacceptable patchy repair		
E-5	Repair bubble		
E-6	Remove marks		
F-1	Repair damaged base		
F-2	Complete base install		
G-1	Repair damaged floor tile		
G-2	Replace tile too large of gap between tiles		
G-3	Re-glue base		

**NOTES:**

CHS NCRC MOB  
DIAGNOSTIC IMAGING CENTER  
OSR# 2293450

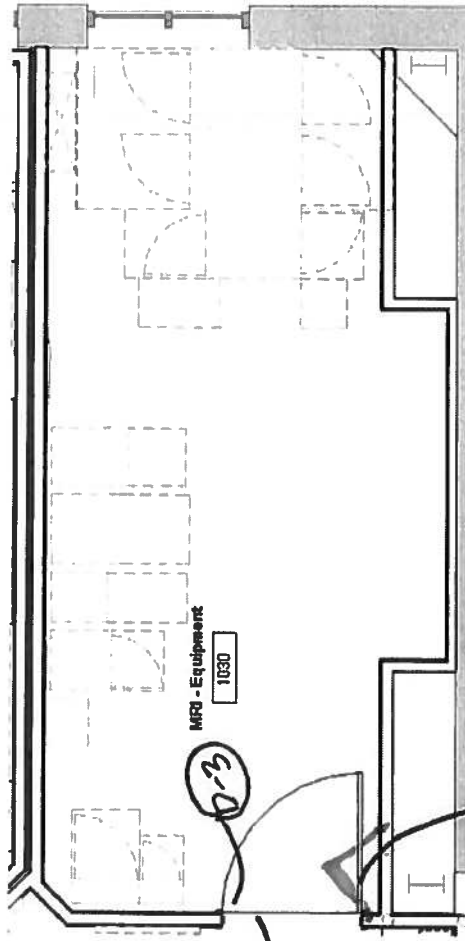
REV #2 8/20/13

DesignStrategies

PUNCH LIST	DATE
	8/9/13

**General Notes:**

1. Final Clean to be performed
2. Clean inside milwork
3. Caulk at hollow metal frames (walls and floors)
4. Caulk at exterior windows
5. Caulk at back splash and side splash to wall



INSTALL FLOOR  
TILES TO MATCH

NOTES: \* REMOVE SCUFFS FROM FLOOR  
\* INSTALL FLOOR DIFFUSERS

REV #2 8/20/13

CHS NCRC MOB  
DIAGNOSTIC IMAGING CENTER  
OSR# 2293450

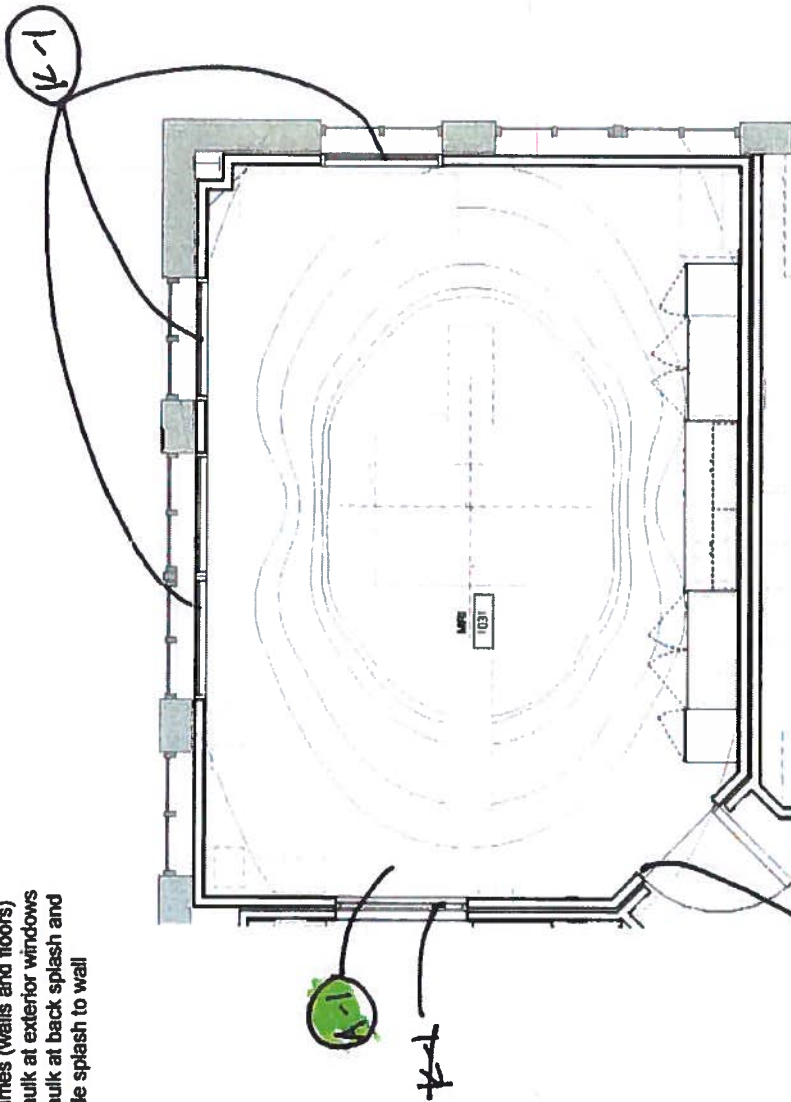
DesignStrategies

PUNCH LIST DATE 8/9/13

**LEGEND**

A-1	Replace damaged ACT	H-1	Adjust door
A-2	Remove paint from grid	H-2	Add smoke seal at door gap
A-3	Repair large/inconsistent gap between grid and partition	H-3	Repair door damage
A-4	Repair bent lee	H-4	Repair frame damage
A-5	Repair/add lens on light	H-5	Remove tape from label
A-6	Repair large gap between grid pieces	H-6	Add caulk at frame
A-7	Repair/miter grid at corner	H-7	Patch nail heads at view window
B-1	Add closet rod	H-8	Repair damage to integral blind
B-2	Add lock	H-9	Add floor stop
B-3	Add closers	H-10	Complete install of view window
B-4	Repair damage	H-11	Integral blinds missing
B-5	Repair/replace/add caulk	I-1	Replace uneven tiles
B-6	Repair misalignment with gyp bd	I-2	Replace sharp edges at shampoo niche
B-7	Adjust door alignments	I-3	Add caulk in corners
B-8	Remove paint from milwork	I-4	Floor and wall tile mis-aligned creating large grout joint/gap
B-9	Splash guard inconsistent finish on each side	I-5	Replace caulk to match grout
B-10	Remove all shims from milwork	I-6	Caulk at threshold
B-11	Shelves not flush with wall	I-7	Raise transition strip to align with top surfaces of tiles- eliminate valley
C-1	Repair damaged gyp bd	I-8	Add correct color grout
C-2	Gyp overcut at J-box	I-9	Repair cracked tile
D-1	Touch-up paint at wall	I-10	Remove substance/clean grout
D-2	Touch-up paint at soffit	J-1	Retecote seat cover dispenser to match dwgts.
D-3	Touch-up paint at frame	J-2	Add vertical grab bar
D-4	Touch-up paint at ceiling	J-3	Center light fixture
D-5	Touch-up paint between frame and corner	K-1	Straighten/center mirror
D-6	Touch-up paint between frames	K-2	Install window blinds
D-7	Remove paint from object	L-1	Add caulk at ext. window
D-8	Paint gyp. bd. at exposed end	M-1	Provide final cleaning
E-1	Repair/replace damaged wall covering	M-2	Adjust/straighten/add screws to outlet
E-2	Add wall covering	M-3	Adjust outlet to be flush
E-3	Repair/rework wall covering seam		Water connection missing
E-4	Unacceptable patch/repair		
E-5	Repair bubble		
E-6	Remove marks		
F-1	Repair damaged base		
F-2	Complete base install		
G-1	Repair damaged floor tile		
G-2	Replace tile/oo large of gap between tiles		
G-3	Re-glue base		

- General Notes:
1. Final Clean to be performed
  2. Clean inside millwork
  3. Caulk at hollow metal frames (walls and floors)
  4. Caulk at exterior windows
  5. Caulk at back splash and side splash to wall



VERIFY HAVE LEFT IN WALL + VMC IS FOR DTR HARDWARE

**LEGEND**

A-1	Replace damaged ACT	H-1	Adjust door
A-2	Remove paint from grid	H-2	Add smoke seal at door gap
A-3	Repair large/inconsistent gap between grid and partition	H-3	Repair door damage
A-4	Repair bent tee	H-4	Repair frame damage
A-5	Repair/add lens on light	H-5	Remove tape from label
A-6	Repair large gap between grid pieces	H-6	Add caulk at frame
A-7	Repair/replace grid at corner	H-7	Patch nail heads at view window
B-1	Add closet rod	H-8	Repair damage to integral blind
B-2	Add lock	H-9	Add floor stop
B-3	Add closers	H-10	Complete install of view window
B-4	Repair damage	H-11	Integral blinds missing
B-5	Repair/replace/add caulk	I-1	Replace uneven tiles
B-6	Repair misalignment with gyp bd	I-2	Replace sharp edges at stamper niche
B-7	Adjust door alignments	I-3	Add caulk in corners
B-8	Remove paint from millwork	I-4	Floor and wall tile misaligned creating large grout joint/gap
B-9	Splash guard inconsistent finish on each side	I-5	Replace caulk to match grout
B-10	Remove all shims from millwork	I-6	Caulk at threshold
B-11	Shelves not flush with wall	I-7	Raise transition strip to align with top surfaces of tiles- eliminate valley
C-1	Repair damaged gyp bd	I-8	Add corner color grout
C-2	Gyp overcut at i-box	I-9	Repair cracked tile
D-1	Touch-up paint at wall	I-10	Remove subsurface/clean grout
D-2	Touch-up paint at soffit	J-1	Relocate seal cover dispenser to match dwgs
D-3	Touch-up paint at frame	J-2	Add vertical grab bar
D-4	Touch-up paint at ceiling	J-3	Center light fixture
D-5	Touch-up paint between frame and corner	J-4	Straighten/center mirror
D-6	Touch-up paint between frames	K-1	Install window blinds
D-7	Remove paint from object	K-2	Add caulk at ext. window
D-8	Paint gyp. bd. at exposed end	L-1	Provide final cleaning
E-1	Repair/replace damaged wall covering	M-1	Adjust/straighten/add screws to outlet
E-2	Add wall covering	M-2	Adjust outlet to be flush
E-3	Repair/replace wall covering seam	M-3	Water connection missing
E-4	Unacceptable patch/repair		
E-5	Repair bubble		
E-6	Remove marks		
F-1	Repair damaged base		
F-2	Complete base install		
G-1	Repair damaged floor tile		
G-2	Replace tile/too large of gap between tiles		
G-3	Re-glue base		

**NOTES:**

CHS NCRC MOB  
DIAGNOSTIC IMAGING CENTER  
OSR# 2293450

REV #2 8/9/13

**DesignStrategies**

PUNCH LIST

DATE 8/9/13

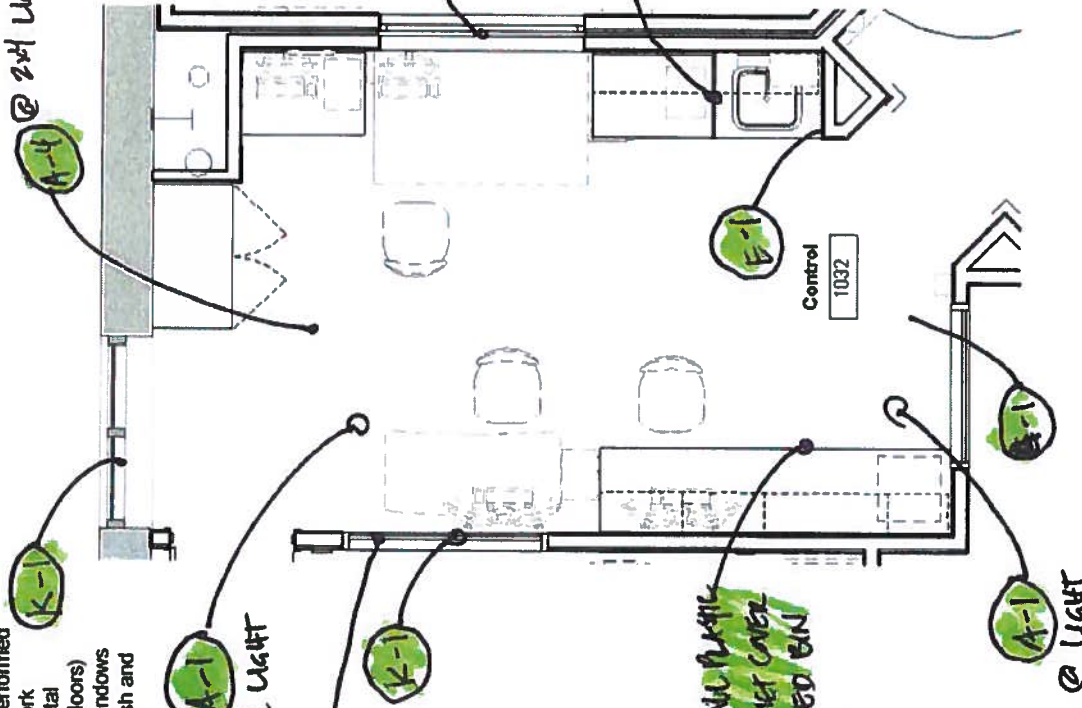
**General Notes:**

1. Final Clean to be performed
2. Clean inside millwork
3. Caulk at hollow metal frames (walls and floors)
4. Caulk at exterior windows
5. Caulk at back splash and side splash to wall

**CRACKED GLAZING**

**INSTALL PLUMB GAMMA CENTER @ SHIELD CAN DRIP**

**@ 2x4 LIGHT**



**LEGEND**

A-1	Replace damaged ACT	H-1	Adjust door
A-2	Remove paint from grid	H-2	Add smoke seal at door gap
A-3	Repair large/inconsistent gap between grid and partition	H-3	Repair door damage
A-4	Repair bent tee	H-4	Repair frame damage
A-5	Repair/add lens on light	H-5	Remove tape from label
A-6	Repair large gap between grid pieces	H-6	Add caulk at frame
A-7	Repair/miter grid at corner	H-7	Patch nail heads at view window
B-1	Add closet rod	H-8	Repair damage to integral blind
B-2	Add lock	H-9	Add floor stop
B-3	Add closers	H-10	Complete instal of view window
B-4	Repair damage	H-11	Integral blinds missing
B-5	Repair/replace/add caulk	I-1	Replace uneven tiles
B-6	Repair misalignment with gyp bd	I-2	Replace sharp edges at shampoo niche
B-7	Adjust door alignments	I-3	Add caulk in corners
B-8	Remove paint from millwork	I-4	Floor and wall tile misaligned creating large groyt joint/gap
B-9	Splash guard inconsistent finish on each side	I-5	Replace caulk to match groyt
B-10	Remove all shims from millwork	I-6	Caulk at threshold
B-11	Shelves not flush with wall	I-7	Raise transition strip to align with top surfaces of tiles- eliminate valley
C-1	Repair damaged gyp bd	I-8	Add correct color groyt
C-2	Gyp overcut at J-box	I-9	Repair cracked tile
D-1	Touch-up paint at wall	I-10	Remove substance/clean groyt
D-2	Touch-up paint at soffit	J-1	Reticate seat cover dispenser to match dwg's
D-3	Touch-up paint at frame	J-2	Add vertical grab bar
D-4	Touch-up paint at ceiling frame and corner	J-3	Center light fixture
D-5	Touch-up paint between frames	J-4	Straighten/center mirror
D-6	Touch-up paint between frames	K-1	Instal window blinds
D-7	Remove paint from object	K-2	Add caulk at ext. window
D-8	Paint gyp. bd. at exposed end	L-1	Provide final cleaning
E-1	Repair/replace damaged wall covering	M-1	Adjust/straighten/add screws to outlet
E-2	Add wall covering	M-2	Adjust outlet to be flush
E-3	Repair/rework wall covering seam	M-3	Water connection missing
E-4	Unacceptable patch/repair		
E-5	Repair bubble		
E-6	Remove marks		
F-1	Repair damaged base		
F-2	Complete base instal		
G-1	Repair damaged floor tile		
G-2	Replace tile/too large of gap between tiles		
G-3	Re-glue base		

**NOTES:**

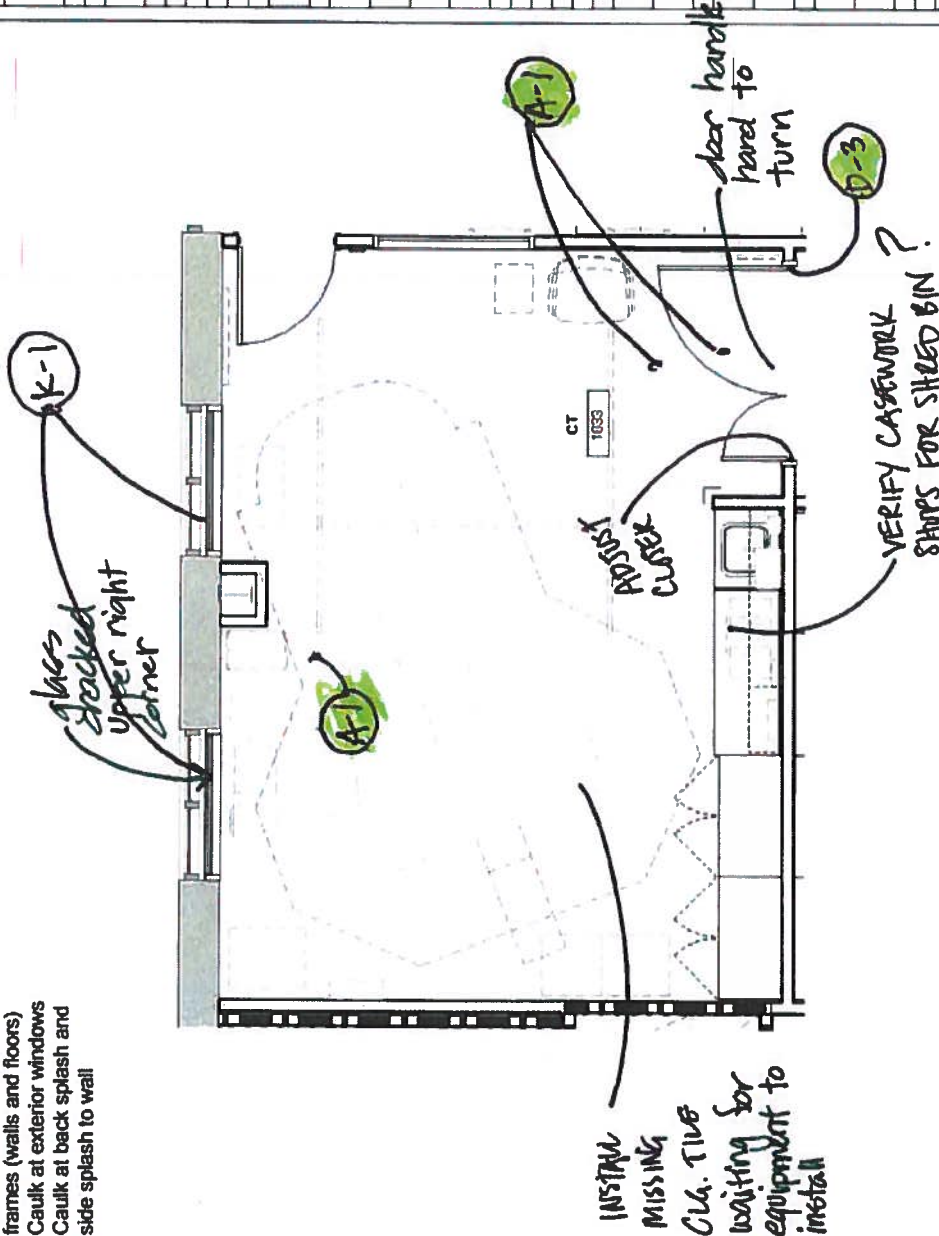
**CHS NCRC MOB DIAGNOSTIC IMAGING CENTER**  
OSR# 2293450

**DesignStrategies**  
REV #2 8/20/13

**PUNCH LIST**      DATE 8/9/13

**General Notes:**

1. Final Clean to be performed
2. Clean inside millwork
3. Caulk at hollow metal frames (walls and floors)
4. Caulk at exterior windows and
5. Caulk at back splash and side splash to wall



INSTALL MISSING CU. TUB waiting for equipment to install

**LEGEND**

A-1	Replace damaged ACT	H-1	Adjust door
A-2	Remove paint from grid	H-2	Add smoke seal at door gap
A-3	Repair large/inconsistent gap between grid and partition	H-3	Repair door damage
A-4	Repair bent tee	H-4	Repair frame damage
A-5	Repair/add lens on light	H-5	Remove tape from label
A-6	Repair large gap between grid pieces	H-6	Add caulk at frame
A-7	Repair/replace grid at corner	H-7	Patch nail heads at view window
B-1	Add closet rod	H-8	Repair damage to integral blind
B-2	Add lock	H-9	Add floor stop
B-3	Add closers	H-10	Complete install of view window
B-4	Repair damage	H-11	Integral blinds missing
B-5	Repair/replace/add caulk	I-1	Replace uneven tiles
B-6	Repair misalignment with gyp bd	I-2	Replace sharp edges at shampoo niche
B-7	Adjust door alignments	I-3	Add caulk in corners
B-8	Remove paint from millwork	I-4	Floor and wall tile misaligned creating large gROUT JOINT/GAP
B-9	Splash guard inconsistent finish on each side	I-5	Replace caulk to match gROUT
B-10	Remove all stams from millwork	I-6	Caulk at threshold
B-11	Shelves not flush with wall	I-7	Raise transition strip to align with top surfaces of tiles- eliminate valley
C-1	Repair damaged gyp bd	I-8	Add correct color grout
C-2	Gyp overcut at J-box	I-9	Repair cracked tile
D-1	Touch-up paint at wall	I-10	Remove substance/clean gROUT
D-2	Touch-up paint at soffit	J-1	Relocate seat cover dispenser to match chgga
D-3	Touch-up paint at frame	J-2	Add vertical grab bar
D-4	Touch-up paint at ceiling	J-3	Center light fixture
D-5	Touch-up paint between frame and corner	J-4	Straighten center mirror
D-6	Touch-up paint between frames	K-1	Install window blinds
D-7	Remove paint from object	K-2	Add caulk at ext. window
D-8	Paint gyp. bd. at exposed end	L-1	Provide final cleaning
E-1	Repair/replace damaged wall covering	M-1	Adjust/straighten/add screws to outlet
E-2	Add wall covering	M-2	Adjust outlet to be flush
E-3	Repair/rework wall covering seam	M-3	Water connection missing
E-4	Unacceptable patch/repair		
E-5	Repair bubble		
E-6	Remove marks		
F-1	Repair damaged base		
F-2	Complete base install		
G-1	Repair damaged floor tile		
G-2	Replace tile/hoo large of gap between tiles		
G-3	Re-glue base		

**NOTES:**

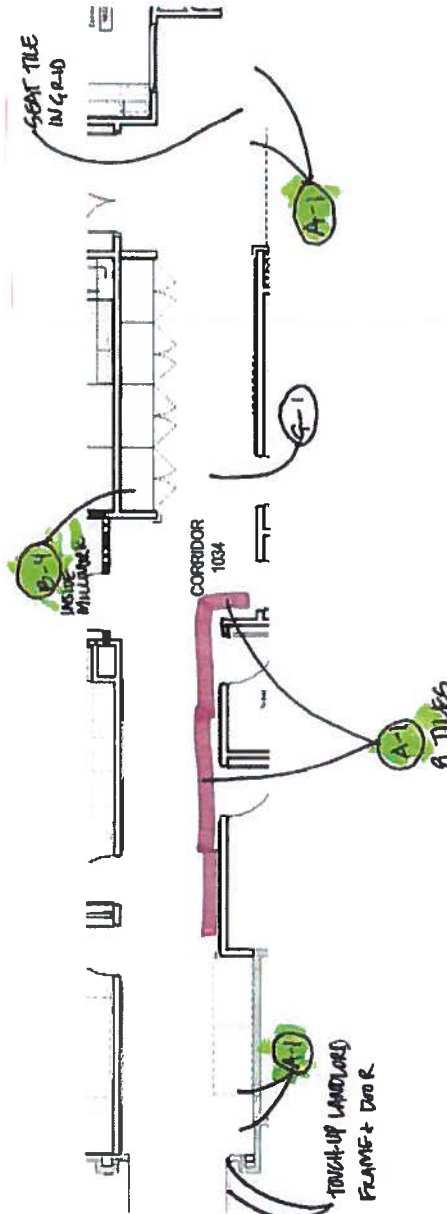
CHS NCRC MOB  
DIAGNOSTIC IMAGING CENTER  
OSR# 2293450

DesignStrategies  
REV #2 8/10/13

PUNCH LIST DATE 8/9/13

**General Notes:**

1. Final Clean to be performed
2. Clean inside millwork
3. Caulk at hollow metal frames (walls and floors)
4. Caulk at exterior windows
5. Caulk at back splash and side splash to wall



**LEGEND**

A-1	Replace damaged ACT	H-1	Adjust door
A-2	Remove paint from grid	H-2	Add smoke seal at door gap
A-3	Repair large/inconsistent gap between grid and partition	H-3	Repair door damage
A-4	Repair bent tee	H-4	Repair frame damage
A-5	Repair/add lens on light	H-5	Remove tape from label
A-6	Repair large gap between grid pieces	H-6	Add caulk at frame
A-7	Repair/mirror grid at corner	H-7	Patch nail heads at view window
B-1	Add obest rod	H-8	Repair damage to integral blind
B-2	Add lock	H-9	Add floor stop
B-3	Add cbeases	H-10	Complete install of view window
B-4	Repair damage	H-11	Integral blinds missing
B-5	Repair/replace/add caulk	I-1	Replace uneven tiles
B-6	Repair misalignment with gyp bd	I-2	Replace sharp edges at shampoo niche
B-7	Adjust door alignments	I-3	Floor and wall tile misaligned creating large groud joint/gap
B-8	Remove paint from millwork	I-4	Replace caulk to match groud
B-9	Splash guard inconsistent finish on each side	I-5	Caulk at threshold
B-10	Remove all shims from millwork	I-6	Raise transition strip to align with top surfaces of tiles- eliminate valley
B-11	Shelves not flush with wall	I-8	Add connect color groud
C-1	Repair damaged gyp bd	I-9	Repair cracked tile
C-2	Gyp overcut at door	I-10	Remove substance/clean groud
D-1	Touch-up paint at wall	J-1	Relocate seat cover dispenser to match dwgs.
D-2	Touch-up paint at soffitt	J-2	Add vertical grab bar
D-3	Touch-up paint at frame	J-3	Center light fixture
D-4	Touch-up paint at ceiling	J-4	Straighten/center mirror
D-5	Touch-up paint between frame and corner	K-1	Install window blinds
D-6	Touch-up paint between frames	L-1	Provide final cleaning
D-7	Remove paint from object	M-1	Adjust/straighten/add screws to outlet
D-8	Paint gyp. bd. at exposed end	M-2	Adjust outlet to be flush
E-1	Repair/replace damaged wall covering	M-3	Water connection missing
E-2	Add wall covering		
E-3	Repair/rework wall covering seam		
E-4	Unacceptable patch/repair		
E-5	Repair bubble		
E-6	Remove marks		
F-1	Repair damaged base		
F-2	Complete base install		
G-1	Repair damaged floor tile		
G-2	Replace tile/tee large of gap between tiles		
G-3	Re-glue base		

**CHS NCRB MOB DIAGNOSTIC IMAGING CENTER** NOTES:  
 OSR# 2283450

**REV #2 8/20/13**

**DesignStrategies**

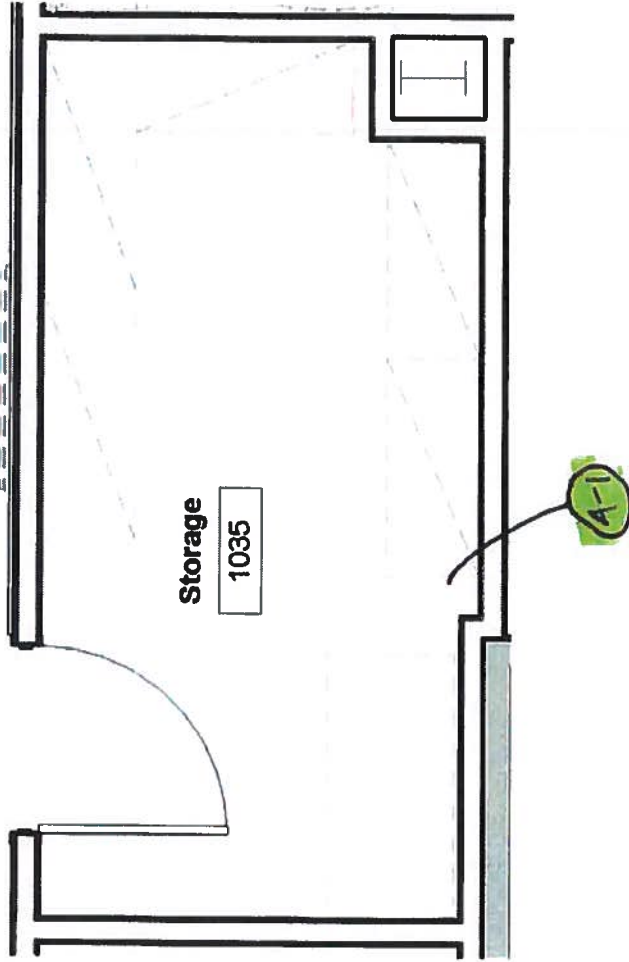
DATE **8/9/13**

PUNCH LIST

00110004  
1024

**General Notes:**

1. Final Clean to be performed
2. Clean inside millwork
3. Caulk at hollow metal frames (walls and floors)
4. Caulk at exterior windows
5. Caulk at back splash and side splash to wall



**LEGEND**

A-1	Replace damaged ACT	H-1	Adjust door
A-2	Remove paint from grid	H-2	Add smoke seal at door gap
A-3	Repair large/inconsistent gap between grid and partition	H-3	Repair door damage
A-4	Repair bent tee	H-4	Repair frame damage
A-5	Repair/add lens on light	H-5	Remove tape from label
A-6	Repair large gap between grid pieces	H-6	Add caulk at frame
A-7	Repair/miler grid at corner	H-7	Patch nail heads at view window
B-1	Add closet rod	H-8	Repair damage to integral blind
B-2	Add lock	H-9	Add floor stop
B-3	Add closers	H-10	Complete install of view window
B-4	Repair damage	H-11	Integral blinds missing
B-5	Repair/replace/add caulk	I-1	Replace uneven tiles
B-6	Repair misalignment with gyp bd	I-2	Replace sharp edges at stamper niche
B-7	Adjust door alignments	I-3	Add caulk in corners
B-8	Remove paint from millwork	I-4	Floor and wall tile misaligned creating large grout joint/gap
B-9	Splash guard inconsistent finish on each side	I-5	Replace caulk to match grout
B-10	Remove all shims from millwork	I-6	Caulk at threshold
B-11	Shelves not flush with wall	I-7	Raise transition strip to align with top surfaces of tiles- eliminate valley
C-1	Repair damaged gyp bd	I-8	Add corner color grout
C-2	Gyp overcut at J-box	I-9	Repair cracked tile
D-1	Touch-up paint at wall	I-10	Remove substance/clean grout
D-2	Touch-up paint at soffit	J-1	Relocate seat cover dispenser to match dwgs.
D-3	Touch-up paint at frame	J-2	Add vertical grab bar
D-4	Touch-up paint at ceiling	J-3	Center light fixture
D-5	Touch-up paint between frame and corner	J-4	Straighten/center mirror
D-6	Touch-up paint between frames	K-1	Install window blinds
D-7	Remove paint from object	K-2	Add caulk at ext. window
D-8	Paint gyp. bd. at exposed end	L-1	Provide final cleaning
E-1	Repair/replace damaged wall covering	M-1	Adjust/straighten/add screws to outlet
E-2	Add wall covering	M-2	Adjust outlet to be flush
E-3	Repair/rework wall covering seam	M-3	Water connection missing
E-4	Unacceptable patch/repair		
E-5	Repair bubble		
E-6	Remove marks		
F-1	Repair damaged base		
F-2	Complete base install		
G-1	Repair damaged floor tile		
G-2	Replace tile/too large of gap between tiles		
G-3	Re-glue base		

**NOTES:**

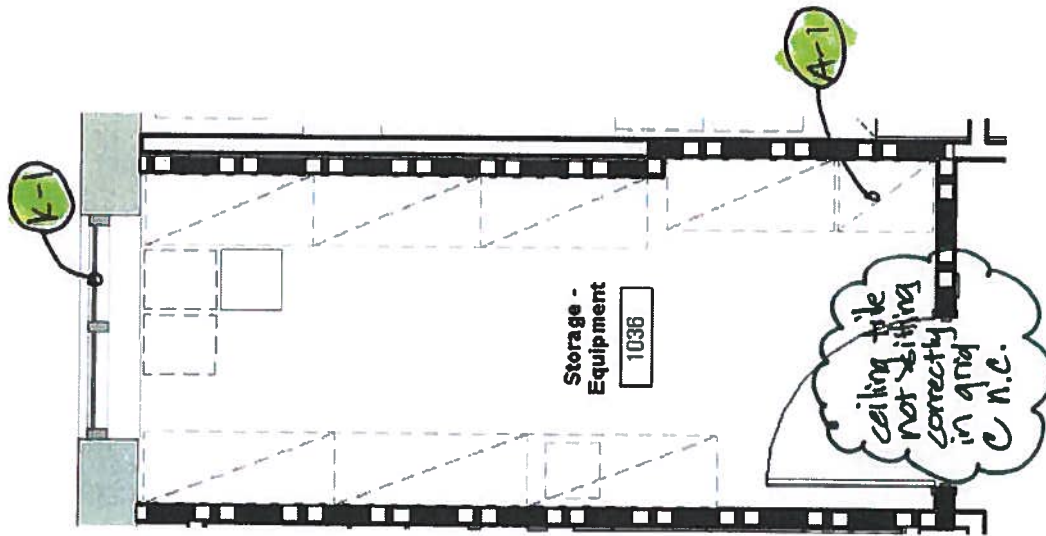
**CHS NCRC MOB  
DIAGNOSTIC IMAGING CENTER**  
OSR# 2293450

**DesignStrategies**  
REV # 2 8/20/13

**PUNCH LIST**      DATE 8/9/13

**General Notes:**

1. Final Clean to be performed
2. Clean inside millwork
3. Caulk at hollow metal frames (walls and floors)
4. Caulk at exterior windows
5. Caulk at back splash and side splash to wall



**LEGEND**

A-1	Replace damaged ACT	H-1	Adjust door
A-2	Remove paint from grid	H-2	Add smoke seal at door gap
A-3	Repair large/inconsistent gap between grid and partition	H-3	Repair door damage
A-4	Repair bent tee	H-4	Repair frame damage
A-5	Repair/add lens on light	H-5	Remove tape from label
A-6	Repair large gap between grid pieces	H-6	Add caulk at frame
A-7	Repair/miter grid at corner	H-7	Patch nail heads at view window
B-1	Add closet rod	H-8	Repair damage to integral blind
B-2	Add lock	H-9	Add floor stop
B-3	Add closers	H-10	Complete install of view window
B-4	Repair damage	H-11	Integral blinds missing
B-5	Repair/replace/add caulk	I-1	Replace uneven tiles
B-6	Repair misalignment with gyp bd	I-2	Replace sharp edges at shampoo niche
B-7	Adjust door alignment - millwork	I-3	Add caulk in corners
B-8	Remove paint from millwork	I-4	Floor and wall tile misaligned creating large grot joint/gap
B-9	Splash guard inconsistent finish on each side	I-5	Replace caulk to match grot
B-10	Remove all stems from millwork	I-6	Caulk at threshold
B-11	Shelves not flush with wall	I-7	Raise transition strip to align with top surfaces of tiles - eliminate valley
C-1	Repair damaged gyp bd	I-8	Add correct color grot
C-2	Gyp overcut at J-box	I-9	Repair cracked tile
D-1	Touch-up paint at wall	I-10	Remove substance/clean grot
D-2	Touch-up paint at soffit	J-1	Relocate seat cover dispenser to match dwg's.
D-3	Touch-up paint at frame	J-2	Add vertical grab bar
D-4	Touch-up paint at ceiling	J-3	Center light fixture
D-5	Touch-up paint between frame and corner	J-4	Straighten/center mirror
D-6	Touch-up paint between frames	K-1	Install window blinds
D-7	Remove paint from object	K-2	Add caulk at ext. window
D-8	Paint gyp. bd. at exposed end	L-1	Provide final cleaning
E-1	Repair/replace damaged wall covering	M-1	Adjust/straighten/add screws to outlet
E-2	Add wall covering	M-2	Adjust outlet to be flush
E-3	Repair/network wall covering seam	M-3	Water connection missing
E-4	Unacceptable patch/repair		
E-5	Repair bubble		
E-6	Remove marks		
F-1	Repair damaged base		
F-2	Complete base install		
G-1	Repair damaged floor tile		
G-2	Replace tile/hoo large of gap between tiles		
G-3	Re-glue base		

**NOTES:**

**CHS NCRC MOB  
DIAGNOSTIC IMAGING CENTER**  
OSR# 2293450

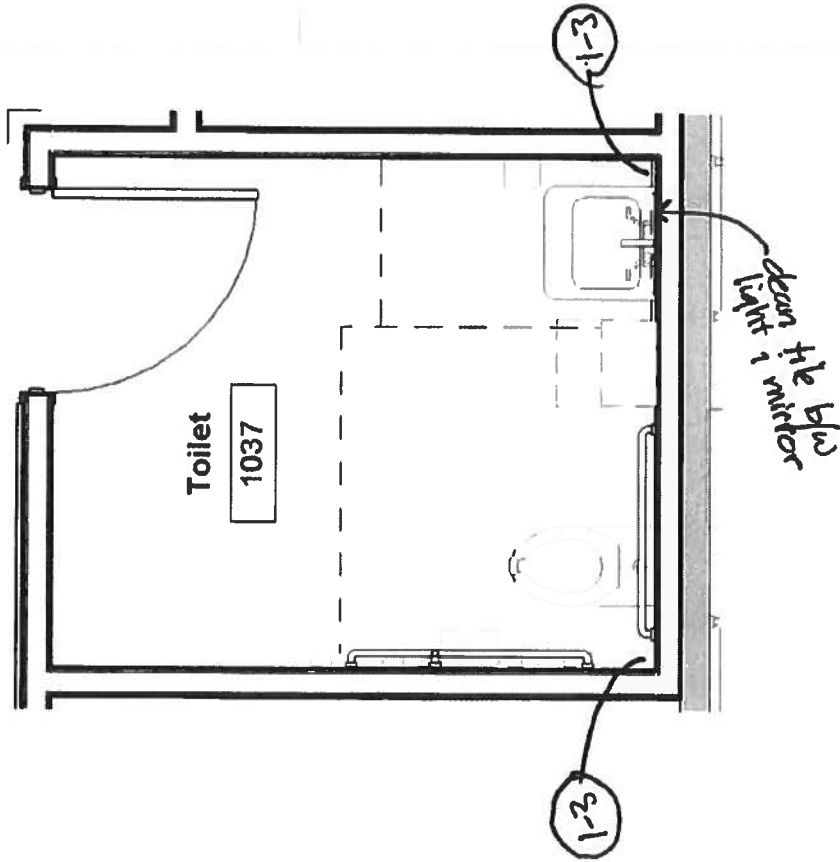
**DesignStrategies** REV #2 8/20/13

**PUNCH LIST** DATE 8/9/13



**General Notes:**

1. Final Clean to be performed
2. Clean inside millwork
3. Caulk at hollow metal frames (walls and floors)
4. Caulk at exterior windows
5. Caulk at back splash and side splash to wall



**LEGEND**

A-1	Replace damaged ACT	H-1	Adjust door
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A-4	Repair bent tee	H-4	Repair frame damage
A-5	Repair/add lens on light	H-5	Remove tape from label
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B-9	Splash guard inconsistent finish on each side	I-5	Replace caulk to match grot
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C-2	Gyp overcut at j-box	I-9	Repair cracked tile
D-1	Touch-up paint at wall	I-10	Remove substance/clean grot
D-2	Touch-up paint at soffit	J-1	Relocate seal cover dispenser to match dwgs.
D-3	Touch-up paint at frame	J-2	Add vertical grab bar
D-4	Touch-up paint of ceiling frame and corner	J-3	Center light fixture
D-5	Touch-up paint between frames	J-4	Straighten/center mirror
D-6	Touch-up paint between frames	K-1	Install window blinds
D-7	Remove paint from object	K-2	Add caulk at ext. window
D-8	Paint gyp. bd. at exposed end	L-1	Provide final cleaning
E-1	Repair/replace damaged wall covering	M-1	Adjust/straighten/add screws to outlet
E-2	Add wall covering	M-2	Adjust outlet to be flush
E-3	Repair/rework wall covering seam	M-3	Water connection missing
E-4	Unacceptable patch/repair		
E-5	Repair bubble		
E-6	Remove marks		
F-1	Repair damaged base		
F-2	Complete base install		
G-1	Repair damaged floor tile		
G-2	Replace tile/too large of gap between tiles		
G-3	Re-glue base		

**NOTES:**

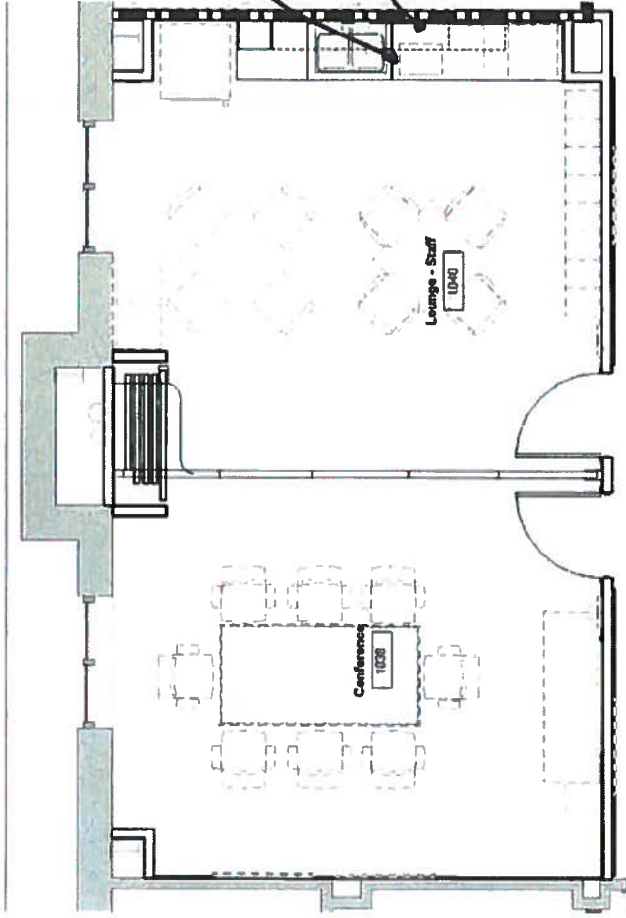
**CHS NCRC MOB  
DIAGNOSTIC IMAGING CENTER**  
OSR# 2293450

**DesignStrategies**  
REV #2 8/20/13

**PUNCH LIST**      DATE 8/9/13

**General Notes:**

1. Final Clean to be performed
2. Clean inside milwork
3. Caulk at hollow metal frames (walls and floors)
4. Caulk at exterior windows
5. Caulk at back splash and side splash to wall



**LEGEND**

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A-2	Remove paint from grid	H-2	Add smoke seal at door gap
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B-9	Splash guard inconsistent finish on each side	I-5	Replace caulk to match grout
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D-2	Touch-up paint at soffit	J-1	Relocate seal cover dispenser to match chgs.
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D-4	Touch-up paint at ceiling	J-3	Center light fixture
D-5	Touch-up paint between frame and corner	J-4	Straighten/center mirror
D-6	Touch-up paint between frames	K-1	Install window blinds
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D-8	Paint gyp bd. at exposed end	L-1	Provide final cleaning
E-1	Repair/replace damaged wall covering	M-1	Adjust/straighten/add screws to outlet
E-2	Add wall covering	M-2	Adjust outlet to be flush
E-3	Repair/network wall covering seam	M-3	Water connection missing
E-4	Unacceptable patch/repair		
E-5	Repair bubble		
E-6	Remove marks		
F-1	Repair damaged base		
F-2	Complete base install		
G-1	Repair damaged floor tile		
G-2	Replace tile/floor large of gap between tiles		
G-3	Re-glue base		

**NOTES:**

**CHS NCRC MOB  
DIAGNOSTIC IMAGING CENTER**

OSR# 2293450

**DesignStrategies**

REV #2 8/29/13

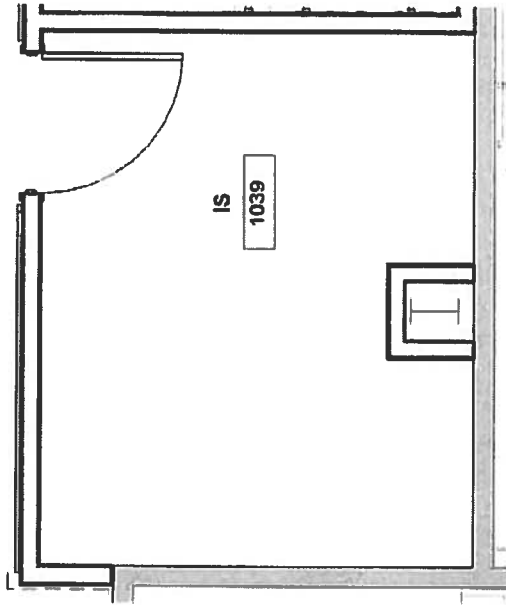
**PUNCH LIST**

**DATE**

8/9/13

**General Notes:**

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2. Clean inside millwork
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**LEGEND**

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A-7	Repair/replace grid at corner	H-7	Patch nail heads at view window
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E-3	Repair/rework wall covering seam		Water connection missing
E-4	Unacceptable patch/repair		
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E-6	Remove marks		
F-1	Repair damaged base		
F-2	Complete base install		
G-1	Repair damaged floor tile		
G-2	Replace tile/floor large of gap between tiles		
G-3	Re-glue base		

NOTES: NO COMMENTS

CHS NCRC MOB  
DIAGNOSTIC IMAGING CENTER  
OSR# 2293450

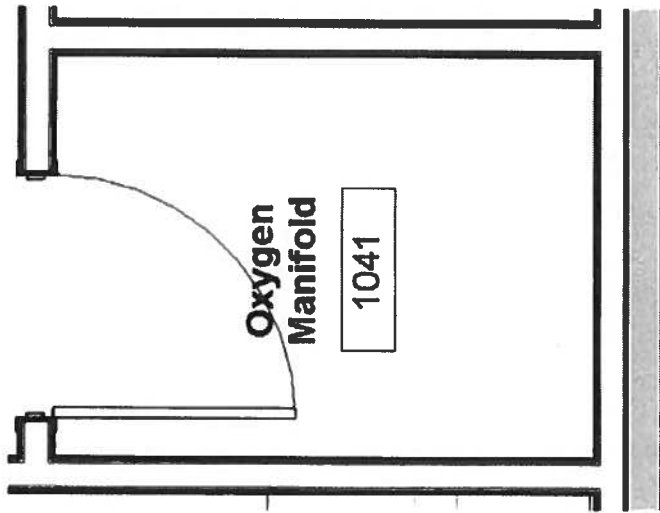
REV #2 8/20/13

DesignStrategies

PUNCH LIST DATE 8/9/13

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E-6	Remove marks		
F-1	Repair damaged base		
F-2	Complete base install		
G-1	Repair damaged floor tile		
G-2	Replace tile/oo large of gap between tiles		
G-3	Re-glue base		

NOTES: NO COMMENTS

**CHS NCRC MOB  
DIAGNOSTIC IMAGING CENTER**

OSR# 2293450

REV #2 8/20/13

**DesignStrategies**

PUNCH LIST

DATE

0/9/13

Date: August 1, 2013

To: Lisa Yagla  
Design Strategies, LLC  
500 East Boulevard  
Charlotte, NC 28203

RE: CHS – NCRC MOB - Imaging  
Caveo Project No: 12-2263

Dear Lisa:

On Thursday, August 1<sup>st</sup>, a final mechanical and electrical punch list was performed on the above project. In attendance was:

- Kline Kelly – Caveo
- Richard Wood – Caveo
- Ryan Arni - Caveo

The attached punch list calls out the mechanical and electrical items to be completed by the Contractor.

Upon completion of these items, the Contractor should notify you, at which time the mechanical and electrical division of the project should be ready for acceptance by the Owner.

Acceptance does not relieve the Contractor of the responsibility for completion of the contract if there are other items in the plans and specifications not yet completed.

If you have any questions, please call.

Sincerely,

Kline Kelly, PE  
Caveo Consulting Engineers

JKK:kh

cc: Tony Stamper, Robert Marzheuser – Messer Construction

## MECHANICAL

### General Comments

1. At project completion, shut off the MRI room exhaust fan. Fan will be needed for MRI, but not for general occupancy/usage.

### Oxygen Manifold Room 1041:

1. Install grilles on inside of oxygen storage room 1041. Ventilation grilles are installed on corridor side only.
2. Oxygen tanks are not installed yet. Manifold system is installed and appears operational.

### Closet at the end of Corridor 1025:

1. Preaction air compressor appears to be disconnected. Install and connect compressor.

### MRI – Equipment Room 1030:

1. Seal floor around the CRAC unit. The black panel on bottom works well to direct air below floor.
2. Raised floor needs a few diffuser panels so that conditioned air can enter occupied space.
3. Install insulation inserts at the hanger location for valved and capped piping for future MRI equipment. Currently, copper pipe is sitting on galvanized hanger
4. Insulate the exhaust air discharge panel.
5. Install a larger MRI exhaust discharge plenum. Currently there is no plenum. The duct terminates at the back of stationary louver.

### MRI Room 1031:

1. Install ceiling mounted oxygen outlet.
2. Sprinkler head covers are needed.

### CT Room 1033:

1. Install ceiling mounted oxygen outlet.

### Dressing Room 1024:

1. Return register and supply diffuser are switched. Dressing Room 1024B should match dressing room 1024.

### Lounge-Staff Room 1040:

1. Faucet needs to be tightened.

### Waiting Oral Contrast Room 1008:

1. Aerator needs to be tightened or teflon tape added to stop water from spraying out where the aerator connects to the faucet.

Toilet 1011:

1. Toilet does not flush.

ELECTRICAL

General Comments

1. Complete installation of low voltage devices.
2. Provide covers on fire alarm notification devices.
3. Provide cover plates on all devices.
4. Label device covers with panel board and circuit number.
5. Dual switching on F4 fixtures is not consistent. One switch shall control inner lamp ballast and one switch outer lamp ballast of each luminaire; Rooms 1002, 1004, 1038, & 1040.
6. Dimmer switches do not meet specifications. Provide Lutron Maestro series.
7. Complete installation of lighting control system. Including sensors and wall stations. Demonstrate/train owner.
8. Clean luminaire lamps, lenses and housings.

Waiting Room 1001:

1. Complete installation of auto-door.
2. Rotate plan northeast F2 90° to match other fixtures orientation in room.

Reception Room 1002:

1. Blanket warmer receptacle and data not installed.
2. Ensure battery backed up egress F4 fixtures are provided per plan.

Roof:

1. Label disconnects with panel and circuit numbers.
2. Provide fuses in CU-1 disconnect per equipment schedule.
3. Provide fused disconnect at GEF-1

Consult Room 1004:

1. Plan north F3 has non-functioning ballast/lamps.

Office 1007:

1. Plan south F3 has non-functioning ballast/lamps.

X-ray 1013:

2. Label circuit breakers in panel "A1".
3. Coordinate circuit breakers and feeders with vendor drawings.

Office 1014:

1. Plan east F3 has non-functioning ballast/lamp.

Control Room 1032:

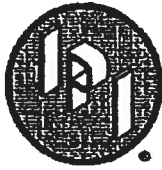
1. Complete installation of emergency off button with circuitry from A1 main disconnect.
2. Ensure battery backed up F3 fixtures are provided per plan.

CT Room 1033:

1. F11 dimmers switch not operating.



**Attachment D**  
**Sprinkler Certification**



Since 1945

# **Fire Protection**

a division of Industrial Piping, Inc.

July 15, 2013

Messer Construction Company  
4201 Stuart Andrew Blvd. Suite B  
Charlotte, NC 28217

Attn: Tony Stamper  
Phone: (704) 577-5930

**Subject: FIRE SPRINKLER CERTIFICATION**

**Re: CHS Diag. Imaging - Kannapolis  
201 Dale Earnhardt Blvd.  
Kannapolis, NC 28081**

Mr. Stamper,

IPI Fire Protection has installed a preaction sprinkler system for the referenced area and added or relocated the existing sprinkler system and put the system into service in accordance with NFPA 13 Guidelines, State and Local codes. All materials used for this project are UL or FM approved.

**IPI State License No. 16276 (FS-1)**

Should you require any additional information or have any questions, please do not hesitate to contact me at 704-588-1100, extension 215.

Very Truly Yours,

INDUSTRIAL PIPING, INC.

Chris Shea  
Division Manager  
Fire Protection Division

800 Culp Road | P.O. Box 518 | Pineville, NC 28134 | 704/588-1100 TEL | 704/588-5614 FAX  
Website: [www.goipi.com](http://www.goipi.com)

**Attachment E**  
**NFPA Fire Alarm System Certification**

**FIRE ALARM SYSTEM  
RECORD OF COMPLETION**

Name of protected property: NCRC MOB Diagnositic & Imaging 1st Floor Upfit - 969447103

Address: 201 Dale Earnhardt Blvd. - Kannapolis, NC 28081

Representative of protected property (name/phone): \_\_\_\_\_

Authority having jurisdiction: Kannapolis Fire Department

Address/telephone number: Kannapolis, NC

<i>Organization name / phone</i>	<i>Representative name / phone</i>
<u>Installer SimplexGrinnell</u>	<u>Spencer Woods 704-501-0500</u>
<u>Supplier SimplexGrinnell</u>	<u>Del Clark 704-501-0500</u>
<u>Service organization SimplexGrinnell</u>	<u>Johnnie Williamson 704-501-0501</u>

Location of record (as built) drawings: \_\_\_\_\_

Location of operation and maintenance manuals: \_\_\_\_\_

Location of test reports: \_\_\_\_\_

A contract for test and inspection in accordance with NFPA standard(s)  
Contract No(s): \_\_\_\_\_ Effective date: \_\_\_\_\_ Expiration date: \_\_\_\_\_

System Software  
(a) Operating system (executive) software revision level(s): 1.03.01  
(b) Site-specific software revision date: 08-06-2013  
(c) Revision completed by: R. Carl Thompson SimplexGrinnell  
(name) (firm)

**1. Type(s) of System or Service**

*NFPA 72, Chapter 6 – Local*  
If alarm is transmitted to location(s) off premises, list where received: \_\_\_\_\_

*NFPA 72, Chapter 8 – Remote Station*  
Telephone numbers of the organization receiving alarm: \_\_\_\_\_  
Alarm: \_\_\_\_\_  
Supervisory: \_\_\_\_\_  
Trouble: \_\_\_\_\_

If alarms are retransmitted to public fire service communications centers or others, indicate location and telephone numbers of the organization receiving alarm: \_\_\_\_\_  
Indicate how alarm is retransmitted: \_\_\_\_\_

*NFPA 72, Chapter 8 – Proprietary* Telephone numbers of the organization receiving alarm: \_\_\_\_\_  
Alarm: \_\_\_\_\_  
Supervisory: \_\_\_\_\_  
Trouble: \_\_\_\_\_

If alarms are retransmitted to public fire service communications centers or others, indicate location and telephone numbers of the organization receiving alarm: \_\_\_\_\_  
Indicate how alarm is retransmitted: \_\_\_\_\_

NFPA 72, Chapter 8 – Central Station

Prime contractor: SimplexGrinnell

Central station location: Westminister, MA

Means of transmission of signals from the protected premises to the central station:

- McCulloh                       Multiplex                       One-way radio
- Digital alarm communicator     Two-way radio                       Others

Means of transmission of alarms to public fire service communications center:

(a) 2 - Dedicated Phone Lines

(b) \_\_\_\_\_

System location: \_\_\_\_\_

NFPA 72, Chapter 9 – Auxiliary

Indicate type of connection:  Local energy     Shunt     Parallel telephone

Location of telephone number for receipt of signals: \_\_\_\_\_

**2. Record of System Installation**

(Fill out after installation is complete and wiring is checked for opens, shorts, ground faults, and improper branching, but prior to conducting operational acceptance tests.)

This system has been installed in accordance with NFPA standards as shown below. Was inspected by R. Carl Thompson on 08-07-2013 includes the devices shown in 5 and 6, and has been in service since 08-07-2013

NFPA 72, Chapters    1   2   3   4 5 6 7   8   9 10   11 (circle all that apply)

NFPA 70, *National Electrical Code*, Article 760

Manufacturers instructions

Other (specify): \_\_\_\_\_

Signed:  Date: 08-07-2013

Organization: SimplexGrinnell

**3. Record of System Operation**

Documentation in accordance with Inspection Testing Form, Figure 10.6.2.3, is attached .

All operational features of this system were tested by R. Carl Thompson date 07-03-2013

and found to be operating properly in accordance with the requirements of:

NFPA 72, Chapters    1   2   3   4 5 6 7   8   9 10   11 (circle all that apply)

NFPA 70, *National Electrical Code*, Article 760

Manufacturers instructions

Other (specify): \_\_\_\_\_

Signed:  Date: 08-07-2013

Organization: SimplexGrinnell

**4. Signaling Line Circuits**

Quantity and class of signaling line circuits connected to system (see NFPA 72, Table 6.6.1):

Quantity: 1                      Style: Z                      Class: A

## 5. Alarm Initiating Devices and Circuits

Quantity and class of initiating device circuits connected to system (see NFPA 72, Table 6.5):

Quantity: \_\_\_\_\_ Style: \_\_\_\_\_ Class: \_\_\_\_\_

### MANUAL

- (a) Manual stations Noncoded \_\_\_\_\_ Transmitters \_\_\_\_\_ Coded \_\_\_\_\_ Addressable \_\_\_\_\_  
(b) Combination manual fire alarm and guard's tour coded stations \_\_\_\_\_

### AUTOMATIC

Coverage: Complete  Partial  Selective  Nonrequired

- (a) Smoke detectors ----- Ion \_\_\_\_\_ Photo  Addressable 30  
(b) Duct detectors ----- Ion \_\_\_\_\_ Photo  Addressable 1  
(c) Heat detectors ---- FT  RR \_\_\_\_\_ FT/RR \_\_\_\_\_ RC \_\_\_\_\_ Addressable 1  
(d) Sprinkler waterflow indicators: Transmitters ---- Noncoded \_\_\_\_\_ Coded \_\_\_\_\_ Addressable 1  
(e) The alarm verification feature is disabled  or enabled , changed from \_\_\_\_\_ seconds to \_\_\_\_\_ seconds.  
(f) Other (list): 1-Low Air For Dry System

## 6. Supervisory Signal-Initiating Devices and Circuits (use blanks to indicate quantity of devices)

### GUARD'S TOUR

- (a) \_\_\_\_\_ Coded stations  
(b) \_\_\_\_\_ Noncoded stations  
(c) \_\_\_\_\_ Compulsory guard's tour system comprised of \_\_\_\_\_ transmitter stations and intermediate stations

Note: Combination devices are recorded under 5(b), Manual, and 6(a), Guard's Tour.

### SPRINKLER SYSTEM

Check if provided

- (a) 1 \_\_\_\_\_ Valve supervisory switches  
(b) \_\_\_\_\_ Building temperature points  
(c) \_\_\_\_\_ Site water temperature points  
(d) \_\_\_\_\_ Site water supply level points

Electric fire pump:

- (e) \_\_\_\_\_ Fire pump power  
(f) \_\_\_\_\_ Fire pump running  
(g) \_\_\_\_\_ Phase reversal

Engine-driven fire pump:

- (h) \_\_\_\_\_ Selector in auto position  
(i) \_\_\_\_\_ Engine or control panel trouble  
(j) \_\_\_\_\_ Fire pump running

### ENGINE-DRIVEN GENERATOR:

- (a) \_\_\_\_\_ Selector in auto position  
(b) \_\_\_\_\_ Control panel trouble  
(c) \_\_\_\_\_ Transfer switches  
(d) \_\_\_\_\_ Engine running

Other supervisory function(s) (specify): \_\_\_\_\_

**7. Annunciator(s)**

Number: \_\_\_\_\_ Type: \_\_\_\_\_ Location: \_\_\_\_\_

**8. Alarm Notification Appliances and Circuits**

NFPA 72, Chapter 6 – Emergency Voice/Alarm Service

Quantity of voice/alarm channels: \_\_\_\_\_ Single: \_\_\_\_\_ Multiple: \_\_\_\_\_

Quantity of speakers installed: \_\_\_\_\_ Quantity of speaker zones: \_\_\_\_\_

Quantity of telephones or telephone jacks included in system: \_\_\_\_\_

Quantity and class of notification appliance circuits connected to system (see NFPA 72, Table 6.7):

Quantity: 2 Style: Y Class: B

Types and quantities of notification appliances installed:

- (a) Bells \_\_\_\_\_ With Visible \_\_\_\_\_
- (b) Speakers \_\_\_\_\_ With Visible 14
- (c) Horns \_\_\_\_\_ With Visible \_\_\_\_\_
- (d) Chimes \_\_\_\_\_ With Visible \_\_\_\_\_
- (e) Other \_\_\_\_\_ With Visible \_\_\_\_\_
- (f) Visible appliances without audible: 20

**9. System Power Supplies**

(a) Fire Alarm Control Panel: Nominal voltage: 120VAC Current rating: 20Amp  
 Overcurrent protection: Type: \_\_\_\_\_ Current rating: \_\_\_\_\_  
 Location: \_\_\_\_\_

(b) Secondary (standby):  
 Storage Battery: X Amp-hour rating: 33 Amp Hour  
 Calculated capacity to drive system, in hours: 24  
 Engine driven generator dedicated to fire alarm system: \_\_\_\_\_  
 Location of fuel storage: \_\_\_\_\_

(d) Emergency system used as backup to primary power supply: \_\_\_\_\_  
 Emergency system described in NFPA 70, Article 700: \_\_\_\_\_

**10. Comments**

Frequency of routine tests and inspections, if other than in accordance with the referred NFPA standard(s):

System deviations from the referenced NFPA standard(s) are: \_\_\_\_\_

\_\_\_\_\_  
(signed) for installation contractor/supplier (title) (date)

\_\_\_\_\_  
(title) (date)

Operations Technician 08-07-2013

\_\_\_\_\_  
(signed) for alarm service company (title) (date)

\_\_\_\_\_  
(signed) for central station (title) (date)

Upon completion of the system(s) satisfactory test(s) witnessed (if required by the authority having jurisdiction):

\_\_\_\_\_  
(signed) representative of the authority having jurisdiction (title) (date)

**Attachment F**  
**Electrical Grounding Report**



# **Howard Brothers Electric of Charlotte, LLC.**

August 6, 2013

Re: NCRC Diagnostic Imaging Center, 1<sup>st</sup> floor  
201 Dale Earnhardt Blvd., Kannapolis, NC 28081

To Whom It May Concern:

Please use this letter as certification that the Grounding of all electrical components installed at, NCRC Diagnostic Imaging Center, 1<sup>st</sup> floor , 201 Dale Earnhardt Blvd., Kannapolis, NC 28081, Electrical permit # EL-2013-00592, are installed according to NEC Electrical Code.

If any additional information is necessary, please do not hesitate to call.

Sincerely,

HOWARD BROTHERS ELECTRIC CO., INC.

Lloyd Rigdon

**Attachment G**  
**CHS Medical Gas Certification**



**Medgastech, Inc.**

PO Box 7328  
Charlotte, NC 28241

T 800.554.0324  
F 704.588.7759  
www.medgastech.com

**HEALTHCARE ORGANIZATION:**

Carolinas Healthcare System  
Charlotte, NC

**CONTRACTOR:**

CHS Facility Support Services

**LETTER OF VERIFICATION**

ALL APPLICABLE PROVISIONS OF THIS DOCUMENT (NFPA 99) HAVE BEEN ADHERED TO AND SYSTEM INTEGRITY HAS BEEN ACHIEVED OR MAINTAINED. ALL TESTING PERFORMED IS IN ACCORDANCE TO STANDARDS ESTABLISHED BY THE NATIONAL FIRE PROTECTION ASSOCIATION (NFPA 99-2005). COMPLETE DOCUMENTATION ON THIS PROJECT IS INCLUDED IN THE ATTACHED MANUAL OF VERIFICATION AND TESTING.

PROJECT NAME: NCRC Imaging

**NOTE: ANY CHANGES MADE TO THE MEDICAL GAS DELIVERY SYSTEM AFTER COMPLETION OF THIS VERIFICATION WILL MANDATE REVERIFICATION OF THE AFFECTED AREA(S).**

COMMENTS:

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Field Representative: Mike Vilella "CMGV"

Date: 1.16.2014



Medgastech, Inc.

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Charlotte, NC 28241

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### Installer Performance Testing Record and Project Checklist

Facility Name: NCRC Imaging

Installing Contractor: CHS Facility Support Services Address: \_\_\_\_\_

City: Charlotte State: NC Zip: \_\_\_\_\_ Tel#: \_\_\_\_\_

Installer/Brazer: Robert Thompson Installers Card Info: MGTC Exp: 12/31/2015

Test Area: New Facility Witnessed By: N/A

1. Initial Blow Down Test per NFPA 99c-2005 5.1.12.2.2 and ASSE 6000 10-4.12  
Intermittent flow of Nitrogen NF through piping. Pass X Fail \_\_\_\_\_ N/A \_\_\_\_\_
2. Initial Pressure Test (Joints/Pipe Integrity) per NFPA 99c-2005 5.1.12.2.3 and ASSE 6000 10-4.13  
Pressure test of 1 1/2 times the working pressure, 1035 kPa (150 psig) minimum, nitrogen at 1655 kPa (240 psig) minimum using Nitrogen NF. Pass X Fail \_\_\_\_\_ N/A \_\_\_\_\_
3. Initial Pressure Test for Vacuum Systems per NFPA 99c-2005 5.1.12.2.3 and ASSE 6000 10-4.13  
Pressure test of 415 kPa (60 psig) minimum using Nitrogen NF.  
Pass \_\_\_\_\_ Fail \_\_\_\_\_ N/A X
4. Cross Connection Test (Initial) per NFPA 99c-2005 5.1.12.2.4 and ASSE 6000 10-4.14  
Determine that each outlet/inlet is connected to the appropriate line by flowing gas through each system.  
Test one system at a time using Nitrogen NF. Pass X Fail \_\_\_\_\_ N/A \_\_\_\_\_
5. Piping Purge Test per NFPA 99c-2005 5.1.12.2.5 and ASSE 6000 10-4.15  
High flow through assembled outlets/inlets. Pass X Fail \_\_\_\_\_ N/A \_\_\_\_\_
6. Standing Pressure Test for Positive Pressure Piping per NFPA 99c-2005 5.1.12.2.6 and ASSE 6000 10-4.16  
Twenty-four (24) hour standing pressure test at 20% above normal line pressure using Nitrogen NF with outlets and other components assembled. Pass X Fail \_\_\_\_\_ N/A \_\_\_\_\_
7. Standing Pressure Test for Vacuum Systems per NFPA 99c-2005 5.1.12.2.7 and ASSE 6000 10-4.16  
Twenty-four (24) hour standing vacuum test at 300 mm (12 inches) gage HgV with inlets and other components assembled. Pass \_\_\_\_\_ Fail \_\_\_\_\_ N/A X
8. Were all lines purged after pressure test? Yes X No \_\_\_\_\_ N/A \_\_\_\_\_
9. Was Nitrogen NF used for all tests? Yes X No \_\_\_\_\_ N/A \_\_\_\_\_
10. Do piping materials for Field-Installed Positive Pressure Medical Gas Systems meet all requirements per NFPA 99c-2005 5.1.10.1.1-6? Yes X No \_\_\_\_\_ N/A \_\_\_\_\_
11. Do piping materials for Field-Installed Medical-Surgical Vacuum and WAGD Systems meet all requirements per NFPA 99c-2005 5.1.10.2.1? Yes \_\_\_\_\_ No \_\_\_\_\_ N/A X
12. Do all fittings meet the requirements of NFPA 99c-2005 5.1.10.3.1-3? Yes X No \_\_\_\_\_ N/A \_\_\_\_\_
13. Do all brazed joints meet the requirements of NFPA 99c-2005 5.1.10.5.1.1-6? Yes X No \_\_\_\_\_ N/A \_\_\_\_\_
14. Was a purge with Nitrogen NF performed during all brazing per NFPA 99c-2005 5.1.10.5.5.1-11? Yes X No \_\_\_\_\_ N/A \_\_\_\_\_
15. Is all pipe supported per NFPA 99c-2005 5.1.10.10.4.1-5? Yes X No \_\_\_\_\_
16. Is all pipeline labeled per NFPA 99c-2005 5.1.11.1-4? Yes X No \_\_\_\_\_

\* By accepting this document the installing contractor/facility confirm the above to be accurate.

Field Representative: Mike Villela "CMGV" Date: 1.16.2014





**Medgastech, Inc.**

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FACILITY: CMC South Market

**AREA ALARM PANEL SET POINTS**

Location: <u>Nurse Station</u>		
Model: <u>Amico</u>		
<b>GAS</b>	<b>LOW</b>	<b>HIGH</b>
O <sub>2</sub>	40 psi	60 psi
AIR	psi	psi
VAC	Hg"	N/A
N <sub>2</sub> O	psi	psi
N <sub>2</sub>	psi	psi
WAGD	Hg"	N/A
CO <sub>2</sub>	psi	psi
COMMENTS:		

Location: _____		
Model: _____		
<b>GAS</b>	<b>LOW</b>	<b>HIGH</b>
O <sub>2</sub>	psi	psi
AIR	psi	psi
VAC	Hg"	N/A
N <sub>2</sub> O	psi	psi
N <sub>2</sub>	psi	psi
WAGD	Hg"	N/A
CO <sub>2</sub>	psi	psi
COMMENTS:		

Location: _____		
Model: _____		
<b>GAS</b>	<b>LOW</b>	<b>HIGH</b>
O <sub>2</sub>	psi	psi
AIR	psi	psi
VAC	Hg"	N/A
N <sub>2</sub> O	psi	psi
N <sub>2</sub>	psi	psi
WAGD	Hg"	N/A
CO <sub>2</sub>	psi	psi
COMMENTS:		

Location: _____		
Model: _____		
<b>GAS</b>	<b>LOW</b>	<b>HIGH</b>
O <sub>2</sub>	psi	psi
AIR	psi	psi
VAC	Hg"	N/A
N <sub>2</sub> O	psi	psi
N <sub>2</sub>	psi	psi
WAGD	Hg"	N/A
CO <sub>2</sub>	psi	psi
COMMENTS:		

Location: _____		
Model: _____		
<b>GAS</b>	<b>LOW</b>	<b>HIGH</b>
O <sub>2</sub>	psi	psi
AIR	psi	psi
VAC	Hg"	N/A
N <sub>2</sub> O	psi	psi
N <sub>2</sub>	psi	psi
WAGD	Hg"	N/A
CO <sub>2</sub>	psi	psi
COMMENTS:		

Location: _____		
Model: _____		
<b>GAS</b>	<b>LOW</b>	<b>HIGH</b>
O <sub>2</sub>	psi	psi
AIR	psi	psi
VAC	Hg"	N/A
N <sub>2</sub> O	psi	psi
N <sub>2</sub>	psi	psi
WAGD	Hg"	N/A
CO <sub>2</sub>	psi	psi
COMMENTS:		

Location: _____		
Model: _____		
<b>GAS</b>	<b>LOW</b>	<b>HIGH</b>
O <sub>2</sub>	psi	psi
AIR	psi	psi
VAC	Hg"	N/A
N <sub>2</sub> O	psi	psi
N <sub>2</sub>	psi	psi
WAGD	Hg"	N/A
CO <sub>2</sub>	psi	psi
COMMENTS:		

Location: _____		
Model: _____		
<b>GAS</b>	<b>LOW</b>	<b>HIGH</b>
O <sub>2</sub>	psi	psi
AIR	psi	psi
VAC	Hg"	N/A
N <sub>2</sub> O	psi	psi
N <sub>2</sub>	psi	psi
WAGD	Hg"	N/A
CO <sub>2</sub>	psi	psi
COMMENTS:		

Location: _____		
Model: _____		
<b>GAS</b>	<b>LOW</b>	<b>HIGH</b>
O <sub>2</sub>	psi	psi
AIR	psi	psi
VAC	Hg"	N/A
N <sub>2</sub> O	psi	psi
N <sub>2</sub>	psi	psi
WAGD	Hg"	N/A
CO <sub>2</sub>	psi	psi
COMMENTS:		

Field Representative: Mike Villela "CMGV"

Date: 1.16.2014



**Medgastech, Inc.**

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www.medgastech.com

Facility: NCRC Imaging

**MASTER MEDICAL GAS ALARM SYSTEM PERFORMANCE TEST**

Alarm Location: Nurse Station			Alarm Manufacturer/Model: Amico					
MODULE I			MODULE II		MODULE III			
	Signal	Test OK		Signal	Test OK		Signal	Test OK
1	O2 Line Press High	X	1			1		
2	O2 Line Press Low	X	2			2		
3	O2 Reserve Low	X	3			3		
4			4			4		
5			5			5		
6			6			6		
7			7			7		
8			8			8		
9			9			9		
10			10			10		
Comments:			Comments:		Comments:			
Alarm Location:			Alarm Manufacturer/Model:					
MODULE IV			MODULE V		MODULE VI			
	Signal	Test OK		Signal	Test OK		Signal	Test OK
1			1			1		
2			2			2		
3			3			3		
4			4			4		
5			5			5		
6			6			6		
7			7			7		
8			8			8		
9			9			9		
10			10			10		
Comments:			Comments:		Comments:			

Field Representative: Mike Villela "CMGV"

Date: 1.16.2014



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### MANIFOLD INSPECTION CHECKLIST

- 1. Facility: NCRC Imaging
- 2. Location of manifold: Med Gas Rm 1041
- 3. Part # Mod/Cat # 6-107012-02
- 4. Area(s) served by manifold: Entire Facility Serial # HOP802769
- 5. System: O2
- 6. Gas or liquid source: Gas
- 7. Manifold manufact.: BeaconMedaes
- 8. Number of cylinders per bank: 2
- 9. Verify automatic alternation: Yes X No
- 10. Cylinder check valves installed: Yes X No
- 11. Shut off valves for each side of manifold: Yes X No
- 12. Pressure at which left to right bank switch over occurs: 150 psig
- 13. Pressure at which right to left bank switch over occurs: 150 psig
- 14. Manifold is equipped with status/warning lights: Yes X No
- 15. Manifold is on emergency electrical power: Yes X No
- 16. Manifold emergency electrical verified by whom: N/A
- 17. Dual line pressure regulators installed? Yes X No
- 18. Regulators pressure settings (PSIG): # 1 50 psig # 2 50 psig
- 19. Can regulators be isolated from system? Yes X No
- 20. Line pressure relief valve installed? Yes X No
- 21. Is relief valve vented to outside? Yes X No      N/A
- 22. Piped in copper tubing? Yes X No
- 23. Pipeline labeled appropriately? Yes X No
- 24. Source valve installed? Yes X No
- 25. Source valve located properly in system? Yes X No       
     Properly labeled: Yes X No       
     For area(s) serviced: Yes X No       
     "Closed only in Case of Emergency": Yes X No
- 26. Leaks detected in manifold piping? Yes      No X
- 27. Area posted "No Smoking"? Yes X No
- 28. Enclosed with lockable entry? Yes X No
- 29. Interior locations properly ventilated? Yes X No      N/A
- 30. Free of flammable liquids or gases? Yes X No
- 31. Electrical switches and outlets 5 ft. above floor? Yes X No
- 32. Cylinders are chained or secured? Yes X No

COMMENTS:

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Field Representative

Mike Villela "CMGV"

Date:

1.16.2014





**Medgastech, Inc.**

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Charlotte, NC 28241

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www.medgastech.com

Facility: NCRC Imaging

**OUTLET TEST FILTERS**

Location: <u>Ultrasound</u> O <sub>2</sub> <input checked="" type="checkbox"/> Air <input type="checkbox"/> N <sub>2</sub> O <input type="checkbox"/> CO <sub>2</sub> <input type="checkbox"/>	Location: _____ O <sub>2</sub> <input type="checkbox"/> Air <input type="checkbox"/> N <sub>2</sub> O <input type="checkbox"/> CO <sub>2</sub> <input type="checkbox"/>	Location: _____ O <sub>2</sub> <input type="checkbox"/> Air <input type="checkbox"/> N <sub>2</sub> O <input type="checkbox"/> CO <sub>2</sub> <input type="checkbox"/>
PASSED		
Location: _____ O <sub>2</sub> <input type="checkbox"/> Air <input type="checkbox"/> N <sub>2</sub> O <input type="checkbox"/> CO <sub>2</sub> <input type="checkbox"/>	Location: _____ O <sub>2</sub> <input type="checkbox"/> Air <input type="checkbox"/> N <sub>2</sub> O <input type="checkbox"/> CO <sub>2</sub> <input type="checkbox"/>	Location: _____ O <sub>2</sub> <input type="checkbox"/> Air <input type="checkbox"/> N <sub>2</sub> O <input type="checkbox"/> CO <sub>2</sub> <input type="checkbox"/>
Location: _____ O <sub>2</sub> <input type="checkbox"/> Air <input type="checkbox"/> N <sub>2</sub> O <input type="checkbox"/> CO <sub>2</sub> <input type="checkbox"/>	Location: _____ O <sub>2</sub> <input type="checkbox"/> Air <input type="checkbox"/> N <sub>2</sub> O <input type="checkbox"/> CO <sub>2</sub> <input type="checkbox"/>	Location: _____ O <sub>2</sub> <input type="checkbox"/> Air <input type="checkbox"/> N <sub>2</sub> O <input type="checkbox"/> CO <sub>2</sub> <input type="checkbox"/>

Field Representative: Mike Vilella "CMGV"

Date: 1.16.2014



**Attachment H**  
**General Contractor's Final Certificate for Payment**

AIA Document G702  
 APPLICATION NO.: B  
 PERIOD TO : 31-OCT-13  
 PROJECT NOS.: 13-4230-00  
 INVOICE NO. 866778  
 DISTRIBUTION TO:  
 OWNER  
 ARCHITECT  
 CONTRACTOR  
 CONTRACT DATE : 27-FEB-13

4828 Airport Center Parkway  
 Charlotte, NC 28208  
 ARCHITECT: Design Strategies  
 500 East Blvd.  
 Charlotte, NC 28203, NC 28203

FROM CONTRACTOR: Messer Construction Co.  
 5158 Fishwick Drive  
 Cincinnati, OH, 45216

CONTRACT FOR: CHS - NCR - Imaging

**CONTRACTOR'S APPLICATION FOR PAYMENT**

Application is made for payment, as shown below, in connection with the Contract. Continuation sheet is attached.

- 1. ORIGINAL CONTRACT SUM ..... \$ 1,157,000.00 ✓
- 2. Net change by change orders ..... \$ 36,002.31 ✓
- 3. CONTRACT SUM TO DATE (Line 1 +/- 2) ..... \$ 1,193,002.31
- 4. TOTAL COMPLETED & STORED TO DATE ..... \$ 1,193,002.31  
 (Column G on G703)
- 5. RETAINAGE:  
 Total retainage (Column I of G703) ..... \$ 0.00
- 6. TOTAL EARNED LESS RETAINAGE ..... \$ 1,193,002.31  
 (Line 4 less Line 5 Total)
- 7. LESS PREVIOUS CERTIFICATES FOR PAYMENT  
 (Line 6 from prior Certificate) ..... \$ 1,167,125.71
- 8. CURRENT PAYMENT DUE ..... \$ 25,876.60
- 9. BALANCE TO FINISH, INCLUDING RETAINAGE ..... \$ 0.00  
 (Line 3 less Line 6)

The undersigned Contractor certifies that to the best of the Contractor's knowledge, information and belief the work covered by this Application for Payment has been completed in accordance with the Contract Documents, that all amounts have been paid by the Contractor for work for which previous Certificates for payment were issued and payments received from the Owner, and that current payment shown herein is now due.

Contractor: Messer Construction Co.

By: [Signature] Date: 10/23/13  
 State of: North Carolina  
 County of: Mecklenburg  
 Subscribed and sworn to before me this 23rd day of October 2013  
 Notary Public: [Signature]  
 My Commission expires: May 2, 2018

**KELCY WOODS**  
 NOTARY PUBLIC  
 Mecklenburg County  
 North Carolina  
 My Commission Expires May 2, 2018

**ARCHITECT'S CERTIFICATE FOR PAYMENT**

In accordance with the Contract Documents, based on on-site observations and the data comprising the above application, the Architect certifies to the Owner that to the best of the Architect's knowledge, information and belief the Work has progressed as indicated, the quality of Work is in accordance with the Contract Documents, and the Contractor is entitled to the payment of the AMOUNT CERTIFIED.

AMOUNT CERTIFIED ..... \$ 25,876.60  
 (Attach explanation if amount certified differs from the amount applied for. Initial figures on this Application and on the Continuation Sheet that are changed to conform to the amount certified.)

ARCHITECT: Design Strategies

By: [Signature] Date: 10/23/13  
 This Certificate is not negotiable. The AMOUNT CERTIFIED is payable only to the Contractor named herein. Issuance, payment and acceptance of payment are without prejudice to any rights of the Owner of Contractor under this Contract.

CHANGE ORDER SUMMARY	ADDITIONS	DEDUCTIONS
Change Order approved in previous months by Owner	23,880.72	0.00
APPROVED THIS MONTH		
Number: Date Approved		
OCC003: 25-SEP-2013	16,505.36	
OCC004: 26-SEP-2013	320.78	
OCC005: 30-SEP-2013		4,714.55
<b>CURRENT TOTAL</b>	<b>16,826.14</b>	<b>4,714.55</b>
<b>Net Change by Change Orders</b>		<b>36,002.31</b>

Messer Construction Co.

PAGE: 2

CONTINUATION SHEET AIA DOCUMENT G703

AIA DOCUMENT G702, APPLICATION AND CERTIFICATE FOR PAYMENT, containing

Contractor's signed Certification is attached.

In tabulation below, amounts are stated to the nearest cent.

Use Column I on Contracts where variable retainage for line items may apply.

APPLICATION NUMBER : 8  
 APPLICATION DATE : 10-31-2013  
 PERIOD TO : 10-31-2013  
 PROJECT NO : 13-4230-00

INVOICE NO  
 868778

A ITEM NO.	B DESCRIPTION OF WORK	C SCHEDULED VALUE	D WORK COMPLETED (D+E)		E THIS PERIOD	F MATERIAL PRESENTLY STORED	G TOTAL COMPLETED AND STORED TO DATE	H BALANCE TO FINISH	I RETAINAGE
			FROM PREVIOUS APPLICATION						
13-4230-00-000100	Division #001 - General Conditions	25,609.00	25,609.00	0.00	0.00	0.00	25,609.00	0.00	0.00
13-4230-00-000110	Division #001 - General Requirements	11,357.00	11,357.00	0.00	0.00	0.00	11,357.00	0.00	0.00
13-4230-00-000120	Division #001 - Insurance & Bonds	17,000.00	17,000.00	0.00	0.00	0.00	17,000.00	0.00	0.00
13-4230-00-000130	Division #001 - Testing & Inspection Allowance	5,500.00	0.00	5,500.00	0.00	0.00	5,500.00	0.00	0.00
13-4230-00-000140	Division #001 - Permit Allowance	6,000.00	3,600.00	2,400.00	0.00	0.00	6,000.00	0.00	0.00
13-4230-00-000200	Division #003 - Concrete	28,628.00	28,628.00	0.00	0.00	0.00	28,628.00	0.00	0.00
13-4230-00-000300	Division #005 - Misc. Structural Steel	23,181.00	23,181.00	0.00	0.00	0.00	23,181.00	0.00	0.00
13-4230-00-000400	Division #006 - Carpentry & Millwork	110,567.00	110,567.00	0.00	0.00	0.00	110,567.00	0.00	0.00
13-4230-00-000500	Division #007 - Roofing	3,996.00	3,996.00	0.00	0.00	0.00	3,996.00	0.00	0.00
13-4230-00-000600	Division #008 - Doors/ Frames/ Hardware	48,176.00	48,176.00	0.00	0.00	0.00	48,176.00	0.00	0.00
13-4230-00-000610	Division #008 - Glass	49,269.00	49,269.00	0.00	0.00	0.00	49,269.00	0.00	0.00
13-4230-00-000700	Division #009 - Flooring	53,770.00	53,770.00	0.00	0.00	0.00	53,770.00	0.00	0.00
13-4230-00-000710	Division #009 - Drywall & Ceilings	69,840.00	69,840.00	0.00	0.00	0.00	69,840.00	0.00	0.00
13-4230-00-000720	Division #009 - Painting	16,881.00	16,881.00	0.00	0.00	0.00	16,881.00	0.00	0.00
13-4230-00-000800	Division #010 - Misc. Accessories	12,851.00	12,851.00	0.00	0.00	0.00	12,851.00	0.00	0.00
13-4230-00-000900	Division #011 - O/FCH Equipment	318.00	318.00	0.00	0.00	0.00	318.00	0.00	0.00
13-4230-00-001000	Division #012 - Roller Shades	3,307.00	3,307.00	0.00	0.00	0.00	3,307.00	0.00	0.00
13-4230-00-001100	Division #013 - RF Shielding	73,285.00	73,285.00	0.00	0.00	0.00	73,285.00	0.00	0.00
13-4230-00-001200	Division #021 - Sprinkler	23,999.00	23,999.00	0.00	0.00	0.00	23,999.00	0.00	0.00
13-4230-00-001300	Division #022 - Plumbing	58,740.00	58,740.00	0.00	0.00	0.00	58,740.00	0.00	0.00
13-4230-00-001400	Division #023 - HVAC	166,508.00	166,508.00	0.00	0.00	0.00	166,508.00	0.00	0.00
13-4230-00-001500	Division #026 - Electric	318,217.00	318,217.00	0.00	0.00	0.00	318,217.00	0.00	0.00
13-4230-00-001600	Owner Change Order #001	6,382.93	6,382.93	0.00	0.00	0.00	6,382.93	0.00	0.00
13-4230-00-001700	Owner Change Order #002	17,507.79	17,507.79	0.00	0.00	0.00	17,507.79	0.00	0.00
13-4230-00-001800	Owner Change Order #003	12,111.59	0.00	12,111.59	0.00	0.00	12,111.59	0.00	0.00
<b>PROJECT TOTAL :</b>		<b>1,193,002.31</b>	<b>1,172,990.72</b>	<b>20,011.59</b>	<b>0.00</b>	<b>0.00</b>	<b>1,193,002.31</b>	<b>0.00</b>	<b>0.00</b>

**Attachment I  
AIA Documents**

# AIA<sup>®</sup> Document G706A™ – 1994

## Contractor's Affidavit of Release of Liens

<b>PROJECT:</b> <i>(Name and address)</i> CHS NCRC Imaging 201 Dale Earnhardt Blvd. Kannapolis, NC 28081	<b>ARCHITECT'S PROJECT NUMBER:</b> 13-4230-00 <b>CONTRACT FOR:</b> General Construction <b>CONTRACT DATED:</b> 02/21/2013	<b>OWNER:</b> <input type="checkbox"/> <b>ARCHITECT:</b> <input type="checkbox"/> <b>CONTRACTOR:</b> <input type="checkbox"/> <b>SURETY:</b> <input type="checkbox"/> <b>OTHER:</b> <input type="checkbox"/>
<b>TO OWNER:</b> <i>(Name and address)</i> Carolinas Health Care Systems 4828 Airport Center Parkway Charlotte, NC 28208		

STATE OF: North Carolina  
COUNTY OF: Cabarrus

The undersigned hereby certifies that to the best of the undersigned's knowledge, information and belief, except as listed below, the Releases or Waivers of Lien attached hereto include the Contractor, all Subcontractors, all suppliers of materials and equipment, and all performers of Work, labor or services who have or may have liens or encumbrances or the right to assert liens or encumbrances against any property of the Owner arising in any manner out of the performance of the Contract referenced above.


### EXCEPTIONS:

#### SUPPORTING DOCUMENTS ATTACHED HERETO:

1. Contractor's Release or Waiver of Liens, conditional upon receipt of final payment.
2. Separate Releases or Waivers of Liens from Subcontractors and material and equipment suppliers, to the extent required by the Owner, accompanied by a list thereof.

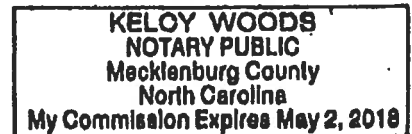
**CONTRACTOR:** *(Name and address)*  
Messer Construction Co.  
5158 Fishwick Drive  
Cincinnati, OH 45216

BY:

  
*(Signature of authorized representative)*  
Tony Stamper, Project Executive  
*(Printed name and title)*

Subscribed and sworn to before me on this date: 23<sup>rd</sup> October, 2013

Notary Public:   
My Commission Expires: May 2, 2018



# AIA® Document G706™ – 1994

## Contractor's Affidavit of Payment of Debts and Claims

<b>PROJECT:</b> <i>(Name and address)</i> CHS NCRC Imaging 201 Dale Barnhardt Blvd. Kannapolis, NC 28081	<b>ARCHITECT'S PROJECT NUMBER:</b> 13-4230-00	<b>OWNER:</b> <input type="checkbox"/>
<b>TO OWNER:</b> <i>(Name and address)</i> Carolinas Health Care Systems 4828 Airport Center Parkway Charlotte, NC 28208	<b>CONTRACT FOR:</b> General Construction	<b>ARCHITECT:</b> <input type="checkbox"/>
	<b>CONTRACT DATED:</b> 02/21/2013	<b>CONTRACTOR:</b> <input type="checkbox"/>
		<b>SURETY:</b> <input type="checkbox"/>
		<b>OTHER:</b> <input type="checkbox"/>

STATE OF: North Carolina  
COUNTY OF: Cabarrus


The undersigned hereby certifies that, except as listed below, payment has been made in full and all obligations have otherwise been satisfied for all materials and equipment furnished, for all work, labor, and services performed, and for all known indebtedness and claims against the Contractor for damages arising in any manner in connection with the performance of the Contract referenced above for which the Owner or Owner's property might in any way be held responsible or encumbered.

**EXCEPTIONS:**

**SUPPORTING DOCUMENTS ATTACHED HERETO:**

- Consent of Surety to Final Payment. Whenever Surety is involved, Consent of Surety is required. AIA Document G707, Consent of Surety, may be used for this purpose.
- Indicate Attachment       Yes       No

**CONTRACTOR:** *(Name and address)*  
Messer Construction Co.  
5158 Fishwick Drive  
Cincinnati, OH 45216

BY:   
*(Signature of authorized representative)*  
Tony Stamper, Project Executive  
*(Printed name and title)*

*The following supporting documents should be attached hereto if required by the Owner:*

- Contractor's Release or Waiver of Liens, conditional upon receipt of final payment.
- Separate Releases or Waivers of Liens from Subcontractors and material and equipment suppliers, to the extent required by the Owner, accompanied by a list thereof.
- Contractor's Affidavit of Release of Liens (AIA Document G706A).

Subscribed and sworn to before me on this date: 23<sup>rd</sup> October, 2013

Notary Public:   
My Commission Expires: May 2, 2018

**KELOY WOODS**  
**NOTARY PUBLIC**  
Mecklenburg County  
North Carolina  
My Commission Expires May 2, 2018



# AIA® Document G707™ – 1994

## Consent Of Surety to Final Payment

<b>PROJECT:</b> <i>(Name and address)</i> CHS NCRC Tenant Uplifts for Diagnostic Imaging Center 201 Dale Earnhardt Blvd. Kannapolis, NC 28081	<b>ARCHITECT'S PROJECT NUMBER:</b>  <b>CONTRACT FOR:</b> General Construction	<b>OWNER:</b> <input type="checkbox"/> <b>ARCHITECT:</b> <input type="checkbox"/> <b>CONTRACTOR:</b> <input type="checkbox"/> <b>SURETY:</b> <input type="checkbox"/> <b>OTHER:</b> <input type="checkbox"/>
<b>TO OWNER:</b> <i>(Name and address)</i> The Charlotte Mecklenburg Hospital Authority dba Carolinas Health Care System P. O. Box 32861 Charlotte, NC-28217	<b>CONTRACT DATED:</b> February 21, 2013	

In accordance with the provisions of the Contract between the Owner and the Contractor as indicated above, the  
*(Insert name and address of Surety)*

Travelers Casualty and Surety Company of America  
Construction Services, Travelers Bond & Financial Products  
1 Tower Square, Hartford, CT 06183

and  
Federal Insurance Company  
15 Mountain View Road  
Warren, NJ 07059

, SURETY,

on bond of  
*(Insert name and address of Contractor)*

Messer Construction Co.  
4201 Stuart Andrew Boulevard, Suite B  
Charlotte, NC 28217

, CONTRACTOR,

hereby approves of the final payment to the Contractor, and agrees that final payment to the Contractor shall not relieve the  
Surety of any of its obligations to  
*(Insert name and address of Owner)*

The Charlotte Mecklenburg Hospital Authority dba Carolinas Health Care System  
P. O. Box 32861  
Charlotte, NC 28217

, OWNER,

as set forth in said Surety's bond.

IN WITNESS WHEREOF, the Surety has hereunto set its hand on this date: October 3, 2013  
*(Insert in writing the month followed by the numeric date and year.)*

Travelers Casualty and Surety Company of  
America and Federal Insurance Company

*(Surety)*

*(Signature of authorized representative)*

Phyllis T. Neal, Attorney-in-Fact

*(Printed name and title)*

Attest:  
*(Seal)*

Attachment J  
General Contractor's Warranty

CHS NCRC MOB  
Diagnostic Imaging Tenant Upfit  
OSR No. 2293450  
Kannapolis, NC

SECTION 017704 - CONTRACTOR'S GENERAL WARRANTY

Name of Project: CHS NCRC MOB  
Diagnostic Imaging Tenant Upfit  
OSR Number: 2293450

The undersigned Contractor hereby warrants, in accordance with the applicable provisions and terms set forth in the Contract Documents, all materials and workmanship incorporated in the Project against any and all defects due to faulty materials or workmanship or negligence for a period of twelve (12) months, or such longer periods as set forth in the Contract Documents, from the effective date of Substantial Completion for the Project (or any phased portion thereof). The undersigned Contractor also guarantees, as a part of this warranty, that the materials and workmanship incorporated into the Project by all Subcontractors and material suppliers is hereby warranted against any and all defects due to faulty materials or workmanship or negligence for a period of twelve (12) months from the date of Substantial Completion for the Project (or any phased portion thereof), regardless of whether the equipment or work was started up or otherwise put into service prior to the date of Substantial Completion.

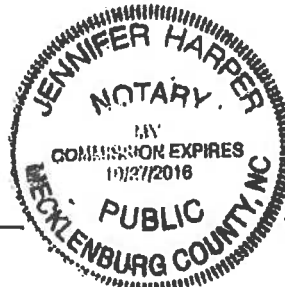
This Warranty shall be binding where defects occur due to normal usage conditions and does not cover willful or malicious damage caused by acts of God or other casualty beyond the control of the Contractor.

This Warranty shall be in addition to other warranties and guarantees set forth in the Contract Documents, and shall not act to constitute a waiver of additional protection of the Owner afforded, where applicable, by consumer protection and product liability provisions of law, and these stipulations shall not constitute waiver of any additional rights or remedies available to the Owner under the law.

Signed: Tony Stamer  
Name: Tony Stamer  
Title: Project Executive  
Date: 8/6/13

(Corporate Seal)

Subscribed and sworn before me this  
6 day of August, 2013.  
Jennifer Harper  
(Notary Public)



END OF SECTION 017704

0429.00  
Design Strategies, PLLC  
January 11, 2013

017704 - CONTRACTOR'S GENERAL WARRANTY  
Construction Documents  
Page 1 of 1

**Attachment K**  
**Fully Executed Certificate of Substantial Completion**

# AIA<sup>®</sup> Document G704<sup>™</sup> – 2000

## Certificate of Substantial Completion

**PROJECT:**  
*(Name and address)*  
CHS NC RC MOB Diagnostic Imaging  
Center  
201 Dale Earnhardt Blvd.  
Kannapolis, NC 28051

**PROJECT NUMBER:** 0429 2293450  
**CONTRACT FOR:** General Construction  
**CONTRACT DATE:** February 21, 2013

**OWNER:**   
**ARCHITECT:**   
**CONTRACTOR:**   
**FIELD:**   
**OTHER:**

**TO OWNER:**  
*(Name and address)*  
Charlotte Mecklenburg Hospital  
Authority d b a Carolinas  
HealthCare System  
PO Box 32861  
Charlotte, NC 28232

**TO CONTRACTOR:**  
*(Name and address)*  
Messer Construction  
4201 Stuart Andrew Boulevard  
Suite B  
Charlotte, NC 28217

**PROJECT OR PORTION OF THE PROJECT DESIGNATED FOR PARTIAL OCCUPANCY OR USE SHALL INCLUDE:**

The Work performed under this Contract has been reviewed and found, to the Architect's best knowledge, information and belief, to be substantially complete. Substantial Completion is the stage in the progress of the Work when the Work or designated portion is sufficiently complete in accordance with the Contract Documents so that the Owner can occupy or utilize the Work for its intended use. The date of Substantial Completion of the Project or portion designated above is the date of issuance established by this Certificate, which is also the date of commencement of applicable warranties required by the Contract Documents, except as stated below:

**Warranty**

**Date of Commencement**

DesignStrategies LLC

**ARCHITECT**

**BY**

*[Signature]*

September 16, 2013

**DATE OF ISSUANCE**

A list of items to be completed or corrected is attached hereto. The failure to include any items on such list does not alter the responsibility of the Contractor to complete all Work in accordance with the Contract Documents. Unless otherwise agreed to in writing, the date of commencement of warranties for items on the attached list will be the date of issuance of the final Certificate of Payment or the date of final payment.

**Cost estimate of Work that is incomplete or defective:** \$ 0.00

The Contractor will complete or correct the Work on the list of items attached hereto within Zero (0) days from the above date of Substantial Completion.

Messer Construction

**CONTRACTOR**

**BY**

*[Signature]*

**DATE**

9/16/13

The Owner accepts the Work or designated portion as substantially complete and will assume full possession at 8:00 A.M. (time) on 9/16/13 (date)

**OWNER**

**BY**

*[Signature]*

**DATE**

9/16/13

**Attachment L**  
**Purchase Orders**

## CON PO Summary As of 6/30/2014

Type	Cost Account	Commitment Number	Vendor Name	Date Enter	Commitment Amount	Actual Amount	Invoice Number	Description	OSR
PO	301	C1114375	G.E.MEDICAL SYSTEMS	12/21/2012	\$490,473	\$0	0	0	2293450
INV	301	C1114375	G.E.MEDICAL SYSTEMS	08/21/2013	\$0	\$490,473	500523716	QUOTE P4-C155649 V 1 O 1 EA	2293450
<b>Sub Total C1114375</b>					<b>\$490,473</b>	<b>\$490,473</b>			
PO	302	C1166821	CMS IMAGING INC	03/21/2013	\$137,150	\$0	0	0	2293450
INV	302	C1166821	CMS IMAGING INC	08/21/2013	\$0	\$73,850	31988	RadSpeed Auto 80kW Sys 1 EA	2293450
INV	302	C1166821	CMS IMAGING INC	09/20/2013	\$0	\$16,022	32171	RadSpeed Auto 80kW Sys 1 EA	2293450
INV	302	C1166821	CMS IMAGING INC	04/24/2013	\$0	\$21,100	31102	RadSpeed Auto 80kW Sys 1 EA	2293450
<b>Sub Total C1166821</b>					<b>\$137,150</b>	<b>\$110,972</b>			
PO	411.01	C1169222	ACF TECHNOLOGIES	03/25/2013	\$25,986	\$0	0	0	2293450
INV	411.01	C1169222	ACF TECHNOLOGIES	09/12/2013	\$0	\$31,168	38286	QUOTE# JG19112D - Q-FL 1 EA	2293450
INV	411.01	C1169222	ACF TECHNOLOGIES	09/12/2013	\$0	\$468	38286	QUOTE# JG19112D - SHIP 1 EA	2293450
INV	411.01	C1169222	ACF TECHNOLOGIES	09/12/2013	\$0	(\$5,650)	38286	QUOTE# JG19112D - DISO -1 EA	2293450
<b>Sub Total C1169222</b>					<b>\$25,986</b>	<b>\$25,986</b>			
PO	410.01	C1173995	TELEHEALTH SERVICES	04/03/2013	\$12,260	\$0	0	0	2293450
INV	410.01	C1173995	TELEHEALTH SERVICES	12/30/2013	\$0	\$12,540	INV0067275	QUOTE 89197 1 EA	2293450
<b>Sub Total C1173995</b>					<b>\$12,260</b>	<b>\$12,540</b>			
PO	303.06	C1179080	OFFICE ENVIRONMENTS	04/11/2013	\$54,817	\$0	0	0	2293450
INV	303.06	C1179080	OFFICE ENVIRONMENTS	06/26/2013	\$0	\$54,817	209306	QUOTE#107036 1 EA	2293450
<b>Sub Total C1179080</b>					<b>\$54,817</b>	<b>\$54,817</b>			
PO	305	C1188226	MEDRAD	04/26/2013	\$25,350	\$0	0	0	2293450
INV	305	C1188226	MEDRAD	05/13/2013	\$0	\$25,500	139564058	Quote No: 20154937 1 EA	2293450
<b>Sub Total C1188226</b>					<b>\$25,350</b>	<b>\$25,500</b>			
PO	301	C1191818	PATTERSON POPE INC.	05/02/2013	\$12,854	\$0	0	0	2293450
INV	301	C1191818	PATTERSON POPE INC.	09/06/2013	\$0	\$12,048	1277931	Quote # 73966 1 EA	2293450
<b>Sub Total C1191818</b>					<b>\$12,854</b>	<b>\$12,048</b>			
PO	302	C1197143	KONICA MINOLTA	05/10/2013	\$87,822	\$0	0	0	2293450
INV	302	C1197143	KONICA MINOLTA	06/07/2013	\$0	\$87,822	45169	Aero DR HQ- Profession 1 EA	2293450
<b>Sub Total C1197143</b>					<b>\$87,822</b>	<b>\$87,822</b>			
PO	302	C1208646	OFFICE ENVIRONMENTS	05/30/2013	\$10,130	\$0	0	0	2293450
INV	302	C1208646	OFFICE ENVIRONMENTS	03/24/2014	\$0	\$390	216641	STORAGE 1 EA	2293450
INV	302	C1208646	OFFICE ENVIRONMENTS	12/21/2013	\$0	\$881	214247	STORAGE 1 EA	2293450
INV	302	C1208646	OFFICE ENVIRONMENTS	09/06/2013	\$0	\$388	210661	STORAGE 1 EA	2293450
INV	302	C1208646	OFFICE ENVIRONMENTS	02/26/2014	\$0	\$466	215945	STORAGE 1 EA	2293450
INV	302	C1208646	OFFICE ENVIRONMENTS	11/19/2013	\$0	\$724	213162	STORAGE 1 EA	2293450
INV	302	C1208646	OFFICE ENVIRONMENTS	09/05/2013	\$0	\$431	209901	STORAGE 1 EA	2293450
INV	302	C1208646	OFFICE ENVIRONMENTS	02/20/2014	\$0	\$625	215734	INVOICE 215734 1 EA	2293450
INV	302	C1208646	OFFICE ENVIRONMENTS	09/24/2013	\$0	\$511	211513	STORAGE 1 EA	2293450
INV	302	C1208646	OFFICE ENVIRONMENTS	01/27/2014	\$0	\$596	215196	STORAGE 1 EA	2293450
INV	302	C1208646	OFFICE ENVIRONMENTS	01/23/2014	\$0	\$428	215335	STORAGE 1 EA	2293450
INV	302	C1208646	OFFICE ENVIRONMENTS	09/18/2013	\$0	\$561	211656	STORAGE 1 EA	2293450
INV	302	C1208646	OFFICE ENVIRONMENTS	10/21/2013	\$0	\$720	212221	STORAGE 1 EA	2293450
INV	302	C1208646	OFFICE ENVIRONMENTS	11/21/2013	\$0	\$1,264	213317	STORAGE 1 EA	2293450
INV	302	C1208646	OFFICE ENVIRONMENTS	06/18/2014	\$0	\$520	219180	STORAGE 1 EA	2293450
INV	302	C1208646	OFFICE ENVIRONMENTS	06/04/2014	\$0	\$558	218095	STORAGE 1 EA	2293450
INV	302	C1208646	OFFICE ENVIRONMENTS	04/22/2014	\$0	\$520	217402	STORAGE 1 EA	2293450
INV	302	C1208646	OFFICE ENVIRONMENTS	03/25/2014	\$0	\$615	216722	STORAGE 1 EA	2293450
<b>Sub Total C1208646</b>					<b>\$10,130</b>	<b>\$10,195</b>			
PO	302	C1214715	PHYSICIAN SALES AND SERVICE	06/11/2013	\$15,364	\$0	0	0	2293450
INV	302	C1214715	PHYSICIAN SALES AND SERVICE	10/22/2013	\$0	\$152	92282223	EQUIPMENT FOR OSR#2293 1 EA	2293450
INV	302	C1214715	PHYSICIAN SALES AND SERVICE	10/22/2013	\$0	\$234	92104936	EQUIPMENT FOR OSR#2293 1 EA	2293450
INV	302	C1214715	PHYSICIAN SALES AND SERVICE	12/03/2013	\$0	(\$297)	92530423	EQUIPMENT FOR OSR#2293 -1 EA	2293450

## CON PO Summary As of 6/30/2014

Type	Cost Account	Commitment Number	Vendor Name	Date Enter	Commitment Amount	Actual Amount	Invoice Number	Description	OSR
INV	302	C1214715	PHYSICIAN SALES AND SERVICE	12/03/2013	\$0	(\$224)	92560730	EQUIPMENT FOR OSR#2293 -1 EA	229345
INV	302	C1214715	PHYSICIAN SALES AND SERVICE	10/03/2013	\$0	\$14,100	92104939	EQUIPMENT FOR OSR#2293 1 EA	229345
<b>Sub Total C1214715</b>					<b>\$15,364</b>	<b>\$13,964</b>			
PO	302	C1222549	OMNICELL INC	06/24/2013	\$15,014	\$0	0		229345
INV	302	C1222549	OMNICELL INC	12/17/2013	\$0	\$13,716	90205343	QUOTE# 5049038/PRODUCT 1 EA	229345
INV	302	C1222549	OMNICELL INC	12/17/2013	\$0	\$832	90205343	QUOTE# 5049038/TOTAL S 1 EA	229345
INV	302	C1222549	OMNICELL INC	12/17/2013	\$0	\$466	90205343	QUOTE# 5049038/SHIPPIN 1 EA	229345
<b>Sub Total C1222549</b>					<b>\$15,014</b>	<b>\$15,014</b>			
PO	302	C1228682	COLLIER'S MEDICAL EQUIPMENT	07/03/2013	\$10,460	\$0	0		229345
INV	302	C1228682	COLLIER'S MEDICAL EQUIPMENT	09/06/2013	\$0	\$4,911	17735	18 inch counter top wa 1 EA	229345
INV	302	C1228682	COLLIER'S MEDICAL EQUIPMENT	09/06/2013	\$0	\$6,256	17735	Available with Two Com 1 EA	229345
<b>Sub Total C1228682</b>					<b>\$10,460</b>	<b>\$11,167</b>			
PO	302	C1266069	CONE INSTRUMENTS	09/04/2013	\$10,250	\$0	0		229345
INV	302	C1266069	CONE INSTRUMENTS	11/19/2013	\$0	\$71	C031054	FLANNEL BLANKET, LARGE 1 EA	229345
INV	302	C1266069	CONE INSTRUMENTS	09/30/2013	\$0	\$52	C026453	SMALL KIT - 7 PCS - PO 1 EA	229345
INV	302	C1266069	CONE INSTRUMENTS	11/19/2013	\$0	\$62	C031054	FLANNEL BLANKET, SMALL 1 EA	229345
INV	302	C1266069	CONE INSTRUMENTS	09/30/2013	\$0	\$499	C026453	LEG SUPPORT LGS-09 1 EA	229345
INV	302	C1266069	CONE INSTRUMENTS	01/20/2014	\$0	\$354	C027502	CR GRID 10X12 IN, 8:1  1 EA	229345
INV	302	C1266069	CONE INSTRUMENTS	10/08/2013	\$0	\$4,485	C027041	PIGG-O-STAT IMMOBILIZE 1 EA	229345
INV	302	C1266069	CONE INSTRUMENTS	01/20/2014	\$0	\$439	C027502	PROTECT-A-GRID II ALUM 2 EA	229345
INV	302	C1266069	CONE INSTRUMENTS	01/20/2014	\$0	\$194	C027502	PROTECT-A-GRID II ALUM 1 EA	229345
INV	302	C1266069	CONE INSTRUMENTS	11/19/2013	\$0	\$2,078	C031054	OCTOSTOP PEDIATRIC CHA 1 EA	229345
INV	302	C1266069	CONE INSTRUMENTS	09/30/2013	\$0	\$241	C026453	CO - PORTABLE CASSETTE 1 EA	229345
INV	302	C1266069	CONE INSTRUMENTS	01/20/2014	\$0	\$1,202	C027502	CR GRID 14X17 IN, 8:1  2 EA	229345
INV	302	C1266069	CONE INSTRUMENTS	11/19/2013	\$0	\$103	C031054	U HEAD CUSHION, LARGE  1 EA	229345
INV	302	C1266069	CONE INSTRUMENTS	09/30/2013	\$0	\$152	C026453	CERVICAL SAND BAGS, 2/ 2 EA	229345
INV	302	C1266069	CONE INSTRUMENTS	01/20/2014	\$0	\$354	C027502	CR GRID 24X30CM, 8:1 R 1 EA	229345
INV	302	C1266069	CONE INSTRUMENTS	11/19/2013	\$0	\$47	C031054	VELCRO STRAPS 3 PCS. 4 1 EA	229345
INV	302	C1266069	CONE INSTRUMENTS	09/30/2013	\$0	\$21	C026453	TRIANGLE 45 DEGREE 7"X 1 EA	229345
<b>Sub Total C1266069</b>					<b>\$10,250</b>	<b>\$10,353</b>			
PO	410.01	C1270459	CDW	09/11/2013	\$12,329	\$0	0		229345
INV	410.01	C1270459	CDW	09/27/2013	\$0	\$128	FS15312	1740993 4 EA	229345
INV	410.01	C1270459	CDW	09/25/2013	\$0	\$24	FS81386	511106 2 EA	229345
INV	410.01	C1270459	CDW	09/30/2013	\$0	\$10,000	FV61929	2442530 1 EA	229345
INV	410.01	C1270459	CDW	09/30/2013	\$0	\$27	FV61929	575404 1 EA	229345
INV	410.01	C1270459	CDW	09/30/2013	\$0	\$85	FV61929	FREIGHT 1 EA	229345
INV	410.01	C1270459	CDW	09/27/2013	\$0	\$1,182	FS15312	2975783 1 EA	229345
INV	410.01	C1270459	CDW	09/27/2013	\$0	\$68	FS15312	2666020 1 EA	229345
INV	410.01	C1270459	CDW	09/27/2013	\$0	\$189	FS15312	2872795 1 EA	229345
INV	410.01	C1270459	CDW	09/27/2013	\$0	\$550	FS15312	2913011 2 EA	229345
INV	410.01	C1270459	CDW	09/27/2013	\$0	\$7	FS15312	2192875 1 EA	229345
INV	410.01	C1270459	CDW	09/27/2013	\$0	\$70	FS15312	1836222 1 EA	229345
<b>Sub Total C1270459</b>					<b>\$12,329</b>	<b>\$12,329</b>			
<b>Total</b>					<b>\$920,258</b>	<b>\$893,179</b>			