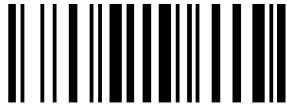


728 Klumac Road
SALISBURY, NC 28144
PHONE: (704) 633-1002
General Fax: 704-636-5038



To: Fax User

Company:

Fax: 9197336592

Phone:

From: Trinity Oaks AL Wing

Fax: 7042163096

Phone:

E-mail:

NOTES:

CONFIDENTIALITY NOTICE: ANY PROTECTED HEALTH INFORMATION (PHI) CONTAINED IN THIS FAX INCLUDING ALL ATTACHMENTS IS CONFIDENTIAL. PHI CONTAINED IN THE FAX BELONGS TO THE ORGANIZATION SENDING THE DATA AND IS LEGALLY PRIVILEGED. PHI IS INTENDED ONLY FOR THE USE OF THE INDIVIDUAL OR ORGANIZATION IDENTIFIED AS THE RECIPIENT. THE RECIPIENT OF PHI IS PROHIBITED FROM DISCLOSING, COPYING, DISTRIBUTING OR USING THE INFORMATION EXCEPT AS PERMITTED BY CURRENT LAW GOVERNING PRIVACY OF INFORMATION ISSUES. SUCH PHI MUST BE DESTROYED AFTER ITS STATED NEED HAS BEEN FULFILLED, OR IN ACCORDANCE WITH A PROPERLY EXECUTED BUSINESS ASSOCIATE AGREEMENT, UNLESS OTHERWISE PROHIBITED BY LAW. IF YOU HAVE RECEIVED THIS FAX IN ERROR, PLEASE NOTIFY THE SENDER IMMEDIATELY FOR RETURN INSTRUCTIONS.



ASSISTED LIVING

FAX COVER SHEET

Resident Service Coordinator, Administrator JoAnn Martin

Phone 704-633-1002 Fax 704-216-3096

Date: 7/24/19

TO: DHSR Construction Section ATT Ed MILLER.

FROM: Trinity Oaks Assisted Living / JoAnn Martin Adm.

SUBJECT: Corrective Actions resulting from DHSR
Construction Section Biennial Survey 6-28-19. for
Trinity Oaks Assisted Living License # HAL 080010.

J. Martin, Adm.

CONFIDENTIALITY NOTICE: Any Protected Health Information contained in this fax belongs to the organization sending the data and is legally privileged. If you have received this fax in error, please notify the sender immediately for return instructions. Thank you.

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL080010	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 1D B. WING: _____	(X3) DATE SURVEY COMPLETED 06/28/2019
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NAME OF PROVIDER OR SUPPLIER TRINITY OAKS CONTINUING CARE RETIREME	STREET ADDRESS, CITY, STATE, ZIP CODE 728 KLUMAC ROAD SALISBURY, NC 28144
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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
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C 000	<p>Initial Comments</p> <p>Report of a Construction Section Biennial Survey by Ed Miller, conducted on June 28, 2019.</p> <p>Records indicate this facility was first licensed on February 19, 1993. The facility is currently licensed for 38 Beds, reflecting an 18 beds addition in 2018. Therefore, the facility was surveyed for conformance with the 2005 Rules for Licensing of Adult Care Homes of Seven or More Beds, the 1991 Rules for Licensing of Adult Care Homes of Seven or More Beds in effect at the time of initial licensure and applicable portions of the 1991 Edition of the North Carolina Building Code(s), Institutional Occupancy and the 2018 North Carolina Building Code, Group I-2 for the 18 beds addition.</p> <p>Deficiencies were cited that require a Plan of Correction.</p>	C 000		
C 101	<p>Existing Licensed Fac- No less than '71 Rules</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0301 APPLICATION OF PHYSICAL PLANT REQUIREMENTS The physical plant requirements for each adult care home shall be applied as follows: (2) Except where otherwise specified, existing licensed facilities or portions of existing licensed facilities shall meet licensure and code requirements in effect at the time of construction, change in service or bed count, addition, renovation, or alteration; however in no case shall the requirements for any licensed facility where no addition or renovation has been made, be less than those requirements found in the 1971 "Minimum and Desired Standards and Regulations" for "Homes for the Aged and Infirm", copies of which are available at the Division of</p>	C 101		

Division of Health Service Regulation
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Johanna M... ..

Administrative A/C 7/24/19

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL080010	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 1D B. WING: _____	(X3) DATE SURVEY COMPLETED 06/28/2019
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C 101 Continued From page 1
Health Service Regulation at no cost:

This Rule is not met as evidenced by:
1. Based on observation, the facility failed to meet the Code requirements in effect at the time of construction or alterations by not having all the required fire-resistance-rated construction required by NC State Building Code. This could affect all occupants who need time to evacuate the building.
Findings on June 28, 2019:
a. Old Wing - the facility is required to have a one-hour fire-resistance-rated roof/ceiling assembly to protect the noncombustible construction above. The existing acoustical ceiling tiles are not a part of an approved one-hour roof/ceiling assembly. These tiles are not marked with an UL or similar testing laboratory approval stamp. They are also not heavy enough. Provide an approved roof/ceiling assembly, assuring that the exit grid is acceptable with the new one-hour fire-resistance-rated roof/ceiling assembly and if not, replace grid. All penetration must be properly firestopped.

C 101
10A NCAC 13F.0301
See attached letter from Architect for Trinity Oaks Outlying Plant.
To be completed by 6/Sept 9/6/19 2019.
Architect will be made aware of being remodeling of current building up to updated Codes.
Any renovation plan will be checked for current Code Requirements.

C 150 Corridors-Free of equipment and Obstructions

SECTION .0300 - PHYSICAL PLANT
10A NCAC 13F.0305 PHYSICAL ENVIRONMENT
(g) The requirements for corridors are:
(4) Corridors shall be free of all equipment and other obstructions.

This Rule is not met as evidenced by:
1. Based on observation, corridors are not free of obstructions. This would affect all residents,

C 150
10A-NCAC 13F.0305
Physical Environment
① Obstructions in hallway were removed 6/28/19.
All corridors checked for obstructions in a 6 foot wide width.
Will be look at on daily basis - Staff + Res. den's will be educated on Rule.

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL080010	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 1D B. WING: _____	(X3) DATE SURVEY COMPLETED 06/28/2019
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NAME OF PROVIDER OR SUPPLIER TRINITY OAKS CONTINUING CARE RETIREME	STREET ADDRESS, CITY, STATE, ZIP CODE 728 KLUMAC ROAD SALISBURY, NC 28144
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C 150	Continued From page 2 staff, and visitors by slowing or obstructing egress during an emergency. Findings on June 28, 2019: a. Old Wing Entrance Corridor - there is a couch and table, obstructing the required six feet width corridor.	C 150	CoA corrected 6/28/19	
C 166	Housekeeping-Maintained Free of Hazards SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (a) Adult care homes shall: (5) be maintained in an uncluttered, clean and orderly manner, free of all obstructions and hazards; (e) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: 1. Based on Observation, the Building was not maintained free of hazards, if oxygen cylinders fall, breaking their valves, propelling the cylinder, and turning it into a dangerous projectile. Findings on June 28, 2019: a. Bedroom 260 - 4 portable medical oxygen cylinders are laying on the floor and 1 portable medical oxygen cylinder is standing up on the floor. All are not physically secured in racks, stands or chained to the structure.	C 166	10300 10A NCAC 13F, 206 Room was not occupied and resident had two O2 companies. Company picked up supplies + took holder for the company tanks. Laying tanks on floor. Staff knowledge Room was locked. Company picked up empty cylinders 6/28/19 when staff made aware.	6/28/19
C 189	Building Equipment Maintained Safe, Operating SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (a) The building and all fire safety, electrical, mechanical, and plumbing equipment in an adult	C 189	All persons with O2 are monitored for proper storage of full empty tanks on daily basis by staff + housekeeping	

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL080010	(X2) MULTIPLE CONSTRUCTION A. BUILDING, 1D _____ B. WING _____	(X3) DATE SURVEY COMPLETED 06/28/2019	
NAME OF PROVIDER OR SUPPLIER TRINITY OAKS CONTINUING CARE RETIREME		STREET ADDRESS, CITY, STATE, ZIP CODE 728 KLUMAC ROAD SALISBURY, NC 28144		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
C 189	<p>Continued From page 3</p> <p>care home shall be maintained in a safe and operating condition. (k) This Rule shall apply to new and existing facilities with the exception of Paragraph (e) which shall not apply to existing facilities.</p> <p>This Rule is not met as evidenced by:</p> <p>1. Based on observation, the Fire Alarm system is not maintained in a safe and operating condition. This would affect all by having doors held open, not providing the require smoke compartmentation that prevents the spread of smoke and fire to other compartments of the building. Findings on June 28, 2019: a. Fire Alarm System - when the fire alarm is activated, the hold open devices released their doors closing the openings in their walls. When the fire alarm system is put into silence mode, these hold open devices reenergized, which allows the doors to be held open during an alarm.</p> <p>2. Based on observation, the Building is not maintained in a safe and operating condition, because the fire rated doors in a Firewall did not close completely and latch to contain fire and smoke. This could affect all residents, staff and visitors by not containing smoke/fire in the fire compartment of origin. Findings on June 28, 2019: a. Firewall, - both leaves of the cross-corridor double-egress doors do not latch when the fire alarm hold-open devices released. Deficiency corrected before Construction Surveyors departed site.</p> <p>3. Based on observation, the Building was not maintained in a safe and operating condition, because the door(s) protecting the opening in the</p>	C 189	<p>.0300 10A NCAC 13F .0311</p> <p>LEI will reprogram doors so they will not be energized when system is put in silence mode.</p> <p>This alarm system controls complete building. will be inspected monthly during fire drills to ensure they are NOT energized during silent mode</p> <p>will be checked monthly during fire drills.</p> <p>Fire door will be checked to ensure latching during all fire drills.</p>	<p>7/30/19</p> <p>6/28/19</p>

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL080010	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 1D B. WING: _____	(X3) DATE SURVEY COMPLETED 06/28/2019
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C 189	<p>Continued From page 4</p> <p>smoke barrier did not close completely and latch to restrict fire and smoke. This could affect all residents, staff, and visitors by not containing the smoke of the fire in the compartment of origin. Findings on June 28, 2019: a. New Wing Smoke Barrier - the both leaves, of the double-egress cross-corridor doors, do not latch into the frame when the fire alarm system released the doors.</p> <p>4. Based on observations, the Building fire safety was not maintained in a safe and operating condition. This could expose all to fire/smoke if not contained in room of origin. Findings on June 28, 2019: a. Laundry - there are two holes not sealed as they penetrate the wall construction. b. Exit near Screened Porch - there is a gap at the base of the exit sign not firestopped as it penetrates the fire-resistance-rated ceiling assembly. c. New Wing IT Room - there is a cable not firestopped as it penetrates the fire-resistance-rated ceiling assembly.</p> <p>5. Based on observation, the Facility failed to maintain the electrical system in a safe and operating condition. Findings on June 28, 2019: a. Executive Director - two extension cords are plug into two electrical power receptacles. b. Bedroom 246 - a multiple plug adaptor, without integral overcurrent protection, is plugged into an electrical power receptacle. c. Bedroom 268 - a multiple plug adaptor, without integral overcurrent protection, is plugged into an electrical power receptacle. d. Bedroom 278 - a multiple plug adaptor, without integral overcurrent protection, is plugged into an electrical power receptacle.</p>	C 189	<p>A Vertex construction adjusted door to ensure Latching will check door during each fire drill for proper Closure. 7/24/19</p> <p>4. All existing fire wall Penetrations have been fire stopped using proper fire resistant materials 7/19/19</p> <p>Maintenance Director will make quarterly rounds to identify any new Penetrations after any alteration of ceiling or fire walls. Monitored By maintenance Director</p> <p>5- A All electrical extension cords were removed as well as multiple plug adaptors 6/28/19 B C D Staff families were educated about proper use of cords which are the appropriate with integral over current protection. These will be provided.</p>

Division of Health Service Regulation

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C 189	Continued From page 5 e. New Wing Electrical Room - in electrical panel "B" there is an open slot where a breaker has been removed or blank fell out. This allows access to energized components that are not guarded against accidental contact. 6. Based on observation, the smoke tight corridor doors are not maintained in a safe and operating condition. Findings on June 28, 2019: a. Old Nourishment Room - the corridor door closes but will not stay latch into its frame. Deficiency corrected before Construction Surveyors departed site. b. Bedroom 266 - the corridor door does not latch into its frame when closed. 7. Based on observation, the Building Sprinkler System was not maintained in a safe and operating condition. This could affect all residents, staff, and visitors if smoke/fire is not contained in the room or compartment of origin. Findings on June 28, 2019: a. Screen Porch - a fire sprinkler head is missing its escutcheon plate, exposing an opening through the fire-resistance-rated ceiling that allows the spread of smoke and heat. 8. Based on Observation, corridor doors are not maintained in a safe and operating condition. Doors are blocked open or held open by unapproved devices or methods. All occupants in the facility could be affected if doors cannot be closed or closed rapidly with a light push or pull of the door to limit the spread of smoke and fire to the area of origin. Findings on June 28, 2019: a. Bedroom 255 - the corridor door has a heavy item holding the door open.	C 189	<p>New Blank was put in place in panel</p> <p>Will monitor all electrical panels monthly to check for any open slots and repair.</p> <p>6/28/19 Maintenance repaired door on day of inspection. All staff will check door for proper closing daily.</p> <p>6/28/19 Maintenance repaired door day of inspection. Will be monitored daily by staff</p> <p>7/30/19 John Kearney @ Phoenix Fire Systems will repair escutcheon plate to sprinker head on screen porch - 7/30/19</p> <p>7/30/19 Maintenance director will monitor condition of all sprinker head and escutcheon plates monthly.</p> <p>6/28/19 Bedroom 255 item removed and taken from room. Resident informed of fate.</p>	<p>7/8/19</p> <p>6/28/19</p> <p>6/28/19</p> <p>7/30/19</p> <p>6/28/19</p>
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DAVID R. POLSTON • ARCHITECT

3806 Park Avenue, Suite 2L
Wilmington, North Carolina 28403
(910) 350-8900 Fax: (910) 350-0401
Email: polstonaia@bellsouth.net

July 24, 2019

Mr. Ed Miller
Biennial Institutional Engineering Surveyor
DHSR Construction Section
1800 Umstead Drive
Raleigh, North Carolina 27603

RE: HA Biennial Survey (6/28/2019)
Trinity Oaks Continuing Care
728 Klumac Road
Salisbury (Rowan County)
FID # 931257; HA 1080010

Dear Ed:

Trinity Oaks Continuing Care Retirement Community requested that I assist them in evaluating the existing roof/ceiling assembly for the "Old Wing" and assist with remediation work required to ensure that the total assembly provides a one hour fire resistant rating. The deficiency is labeled as PreFix Tag C101 in your July 10th Survey Results letter to the facility.

I visited the facility to document the existing conditions. Similar to your findings, the ceiling tiles do not have a UL stamp or complied with the 1.0 LBS/SF weight. The ceiling grid appears to be the original steel rated grid similar to Armstrong Prelude XL fire rated grid. The recessed light fixtures were not boxed with rated acoustical tile material. It does appear that the HVAC supply and return grills have listed radiation dampers which were integral to the steel grill box.

I was also able to review the 1991 construction drawings prepared by Calloway Moore and Johnson. The documents indicated that the roof/ceiling assembly for this area to be one hour rated and also appears that UL L209 was the basis of design. UL L209 matches the existing field conditions except for the rated ceiling tiles and protection of the light fixtures.

Based on my on-site observations, review of the original construction drawings and review of the UL assembly components, it appears that ceiling tiles must be replaced and the light fixtures protected. Attached is a floor plan of the "Old Wing" identifying the areas for tile replacement. The UL L209 lists Armstrong tiles as an acceptable manufacturer. We have instructed the owner

Architecture, Planning, Design.

to replace all acoustical ceiling tile with Armstrong Cortega Fireguard (Item #824). This tile is tested for the 1 Hour assembly and weighs 1.09 LBS/SF. I have also instructed the owner to tent the light fixture with a 5 sided box constructed of the same Armstrong Cortega Fireguard. The tenting of the light fixture with the acoustical material complies with UL 1209 requirements.

The replacement of the ceiling tiles and tenting of the light fixtures will return the assembly to its' original condition and comply with the UL assembly requirements for a 1 Hour fire resistant rating. I appreciate your assistance and please contact me should you have any questions or comments.

Sincerely,



David R. Polston, AIA

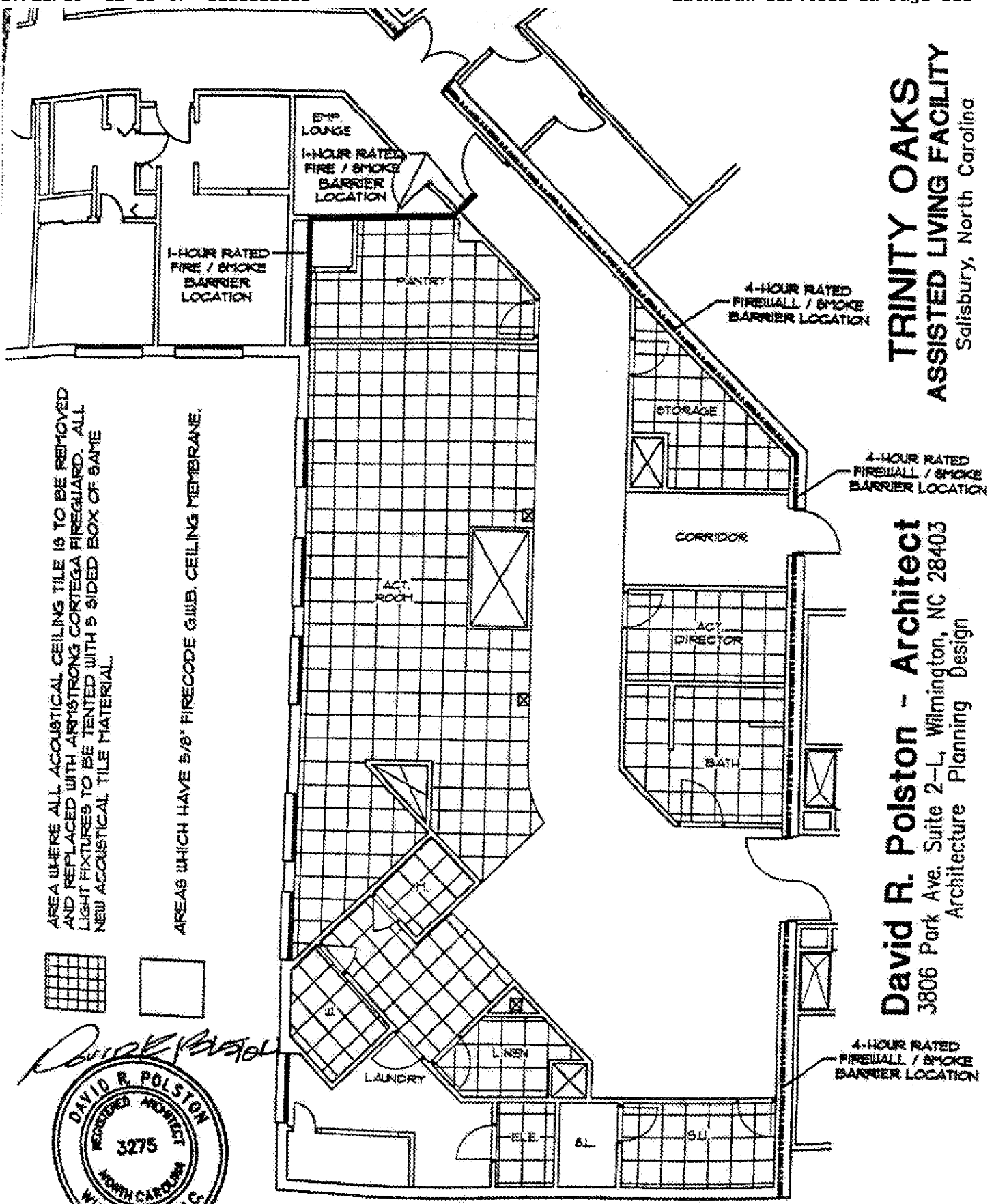
DRP/sp

Enclosure

cc: Courtney Johnson, LSC
Bill Johnson, Trinity Oaks

TRINITY OAKS
ASSISTED LIVING FACILITY
Salisbury, North Carolina

David R. Polston - Architect
3806 Park Ave. Suite 2-L, Wilmington, NC 28403
Architecture Planning Design

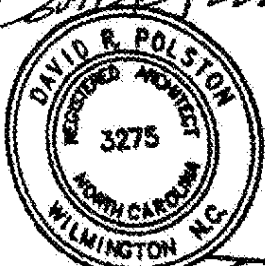


AREA WHERE ALL ACOUSTICAL CEILING TILE IS TO BE REMOVED AND REPLACED WITH ARMSSTRONG CORTEGA FIREGUARD. ALL LIGHT FIXTURES TO BE TENTED WITH 5 SIDED BOX OF SAME NEW ACOUSTICAL TILE MATERIAL.

AREAS WHICH HAVE 5/8" FIRECODE G.I.W.B. CEILING MEMBRANE.



David R. Polston



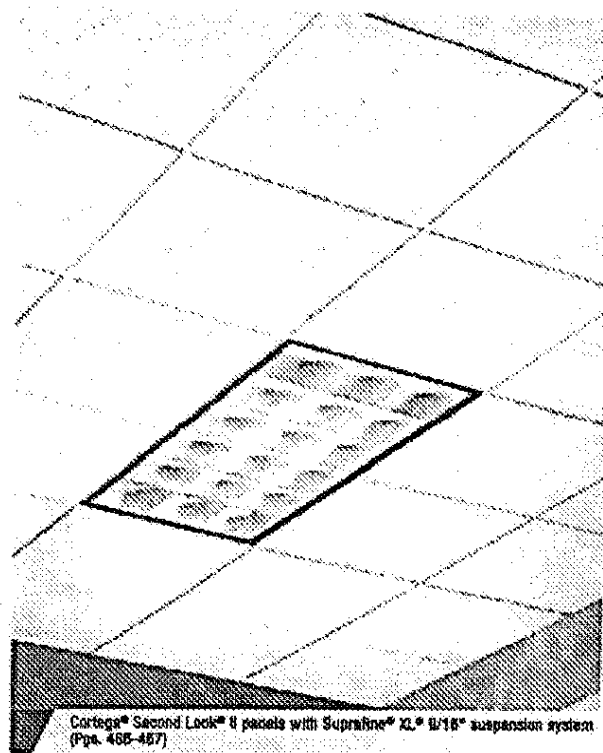
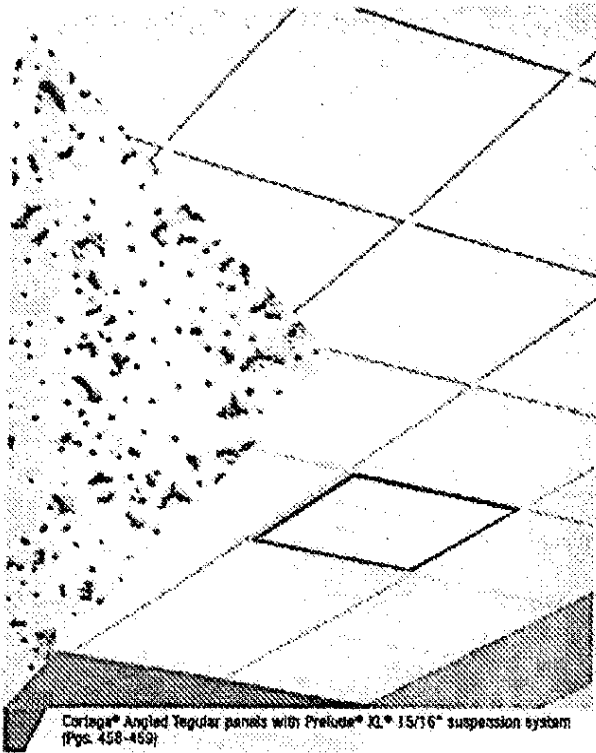
7-25-2019

101

FLOOR PLAN
SCALE: 3/32" = 1'-0"

CEILING REMEDIATION

CORTEGA®/CORTEGA® Second Look®
 Square Lay-in & Tegular
 medium texture

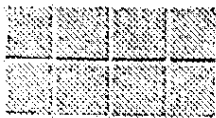


Cortega® panels offers a medium-textured, economical solution with standard acoustical absorption.

KEY SELECTION ATTRIBUTES

- Economical
- Non-directional visual reduces scrap and installation time (excludes Second Look® items)
- Geometric Scored Visuals (Second Look items)

FACE VIEW



Cortega® Second Look® I panels – Scoring creates nominal 12" x 12" squares.

Cortega® Second Look® II panels – Scoring creates nominal 24" x 24" squares.

COLORS Colored ceilings are dye-locked and should be segregated by dye lot. Do not mix.



DETAILS (Other Suspension Systems compatible. Refer to listing on page 301.)



1. Cortega® Square Lay-in
2. Cortega® Beveled Tegular
3. Cortega® Second Look®
4. Cortega® Lay-in with Prelude 15/16" suspension system
5. Cortega® Beveled Tegular with Suprafine® 8/18" suspension system

300 TechLine 877 276-7876
 armstrongceilings.com/commercial



CORTEGA®/CORTEGA® Second Look®

Square Lay-in & Tegular medium texture

GREENGUARD Gold Certified

43% RECYCLED CONTENT 55% RECYCLED CONTENT

Calculate LEED contribution at armstrongceilings.com/pregreen

VISUAL SELECTION

PERFORMANCE SELECTION

Data represent high level of performance

SSSS

Edge Profile	Susp. Dwg. Pgs. 474-476 armstrongceilings.com/ceiling	Item No. *	Dimensions (inches)
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UL Classified Acoustics	Total Acoustics ¹	Fire Performance	Light Reflectance	Heat & Moisture Absorption	Prevention	Salt Resist	Classified Low VOC Emissions	Durability	Recycled Content	Recycled Program	Warranty
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CORTEGA® Square Lay-in

15/16" Square Lay-in	1	770 770M	24 x 24 x 5/8" 600 x 600 x 15mm		0.55	33	-	Class A	0.82	-	Std	•	Std	•	1-Yr
	1	824 824M	24 x 24 x 5/8" 600 x 600 x 15mm		0.55	35	-	Fire Guard	0.82	-	Std	•	Std	•	1-Yr
	1	769 769M	24 x 48 x 5/8" 600 x 1200 x 15mm		0.55	35	-	Class A	0.82	-	Std	•	Std	•	1-Yr
	1	823 823M	24 x 48 x 5/8" 600 x 1200 x 15mm		0.55	35	-	Fire Guard	0.82	-	Std	•	Std	•	1-Yr
	1	747	24 x 48 x 5/8"		0.55	40	-	Class A	0.82	-	Std	•	Std	•	1-Yr
	1	773 773M	20 x 80 x 5/8" 500 x 1500 x 15mm		0.55	35	-	Class A	0.82	-	Std	•	Std	•	1-Yr
	1	772 772M	24 x 80 x 5/8" 600 x 1500 x 15mm		0.55	35	-	Class A	0.82	-	Std	•	Std	•	1-Yr
	1	Other Size Panels	W: 12" - 30" / L: 18" - 72" 5/8" Thick		N/A	N/A	-	Class A	0.82	-	Std	•	Std	•	1-Yr

0.55	33	-	Class A	0.82	-	Std	•	Std	•	1-Yr
0.55	35	-	Fire Guard	0.82	-	Std	•	Std	•	1-Yr
0.55	35	-	Class A	0.82	-	Std	•	Std	•	1-Yr
0.55	35	-	Fire Guard	0.82	-	Std	•	Std	•	1-Yr
0.55	40	-	Class A	0.82	-	Std	•	Std	•	1-Yr
0.55	35	-	Class A	0.82	-	Std	•	Std	•	1-Yr
0.55	35	-	Class A	0.82	-	Std	•	Std	•	1-Yr
N/A	N/A	-	Class A	0.82	-	Std	•	Std	•	1-Yr

CORTEGA Tegular

15/16" Angled Tegular	12	704 704M	24 x 24 x 5/8" 600 x 600 x 15mm		0.55	33	-	Class A	0.82	-	Std	•	Std	•	1-Yr
	12	818	24 x 24 x 5/8"		0.55	35	-	Fire Guard	0.82	-	Std	•	Std	•	1-Yr
	12	703 703M	24 x 48 x 5/8"		0.55	35	-	Class A	0.82	-	Std	•	Std	•	1-Yr

0.55	33	-	Class A	0.82	-	Std	•	Std	•	1-Yr
0.55	35	-	Fire Guard	0.82	-	Std	•	Std	•	1-Yr
0.55	35	-	Class A	0.82	-	Std	•	Std	•	1-Yr

9/16" Beveled Tegular	29, 44, 48, 52, 58	2195 2195M	24 x 24 x 5/8"		0.55	35*	-	Class A	0.82	-	Std	•	Std	•	1-Yr
	29, 44, 48, 52, 58	Other Size Panels	W: 12" - 30" / L: 18" - 72" 5/8" Thick		N/A	N/A	-	Class A	0.82	-	Std	•	Std	•	1-Yr

0.55	35*	-	Class A	0.82	-	Std	•	Std	•	1-Yr
N/A	N/A	-	Class A	0.82	-	Std	•	Std	•	1-Yr

CORTEGA® Second Look® I

15/16" Angled Tegular	11	2785	24 x 48 x 3/4"		0.55	35	-	Class A	0.82	-	Std	•	Std	•	1-Yr
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0.55	35	-	Class A	0.82	-	Std	•	Std	•	1-Yr
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CORTEGA Second Look® II

15/16" Angled Tegular	11	2758	24 x 48 x 3/4"		0.55	40	-	Fire Guard	0.82	-	Std	•	Std	•	1-Yr
	11	2787	24 x 48 x 3/4"		0.55	35	-	Class A	0.82	-	Std	•	Std	•	1-Yr

0.55	40	-	Fire Guard	0.82	-	Std	•	Std	•	1-Yr
0.55	35	-	Class A	0.82	-	Std	•	Std	•	1-Yr

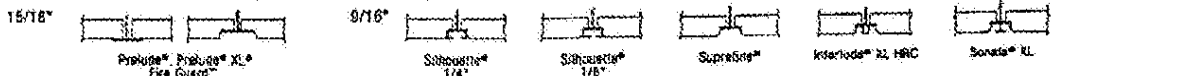
9/16" Angled Tegular	27	2778	24 x 48 x 3/4"		0.55	30	-	Class A	0.82	-	Std	•	Std	•	1-Yr
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0.55	30	-	Class A	0.82	-	Std	•	Std	•	1-Yr
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* Total Acoustics[®] ceiling panels have an ideal combination of noise reduction and sound-blocking performance in one product. * Add 2-digit color suffix to item number when specifying or ordering (e.g., 769 21).

SUSPENSION SYSTEMS

* Item 2195 - CAC 31 on 9/16" S/Schedule*



NOTE: 9/16" Cortega Second Look items are installed using Supreme® suspension systems only.

PHYSICAL DATA

Material: Wet-formed mineral fiber
Surface Finish: Factory-applied latex paint
Fire Performance: ASTM E84 and CAN/ULC S102 surface burning characteristics. Flame Spread Index 25 or less. Smoke Developed Index 50 or less (UL labeled). Fire Guard: A fire-resistant ceiling when used in applicable UL assemblies (Class A).
ASTM E1294 Classification: Type R, Form 2, Pattern C D
Humidity/Say Resistance: Standard performance ceiling panels are recommended where the building is enclosed and the HVAC is continuously functioning.

VOC Emissions: GREENGUARD Gold Certified. Third-party certified compliant with California Department of Public Health (CDPHE) Standard Method Version 1.1, 2010. This standard is the guideline for low emissions in LEED. California Title 24, ANSI/ASHRAE/USGBC/IES Standard 189: ANSI/SGI Green Building Assessment Protocol. (Excludes 769B1)
Primary (Embedded) Energy: See all LCA information on our EPD's.
High Recycled Content: Contains greater than 50% total recycled content. Total recycled content based on product composition of post-consumer and pre-consumer (post-industrial) recycled content per FTC guidelines.
Insulation Value: 2195, 704, 818, 703 - R Factor - 1.8 (BTU units), R Factor - 0.28 (Watts units)



770, 772, 769, 773, 823, 824 - R Factor - 1.5 (BTU units); R Factor - 0.28 (Watts units)
 747, 2765, 2758, 2787, 2776 - R Factor - 1.5 (BTU units); R Factor - 0.28 (Watts units)
Weight: Square Feet/Carton
 769 - 0.61 lbs/SF; 96 SF/crt
 704, 2195 - 0.63 lbs/SF; 84 SF/crt
 84 SF/crt
 772, 773 - 0.83 lbs/SF; 72 SF/crt
 100 SF/crt
 703 - 0.65 lbs/SF; 80 SF/crt
 770 - 0.69 lbs/SF; 64 SF/crt
 818 - 1.03 lbs/SF; 48 SF/crt
 2765, 2767 - 0.73 lbs/SF; 80 SF/crt
 2758 - 1.26 lbs/SF; 64 SF/crt
 2776 - 0.70 lbs/SF; 80 SF/crt
Minimum Order Quantity: 1 carton, excludes other size panels.
Metric Items Available: 770M, 824M, 769M, 773M, 2195M, 704M, 703M, 823M - Metric items are subject to extended lead times and minimum quantities. Contact your representative for more details.

TechLine / 1 877 276-7878
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 (search: cortega)
 BPCS-3017/3022-718

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