Emergency Management Planning Criteria for Emergency Environmental Control 58AER17-1& 59AER17-1

Nursing Home

A. Provide basic information concerning the facility to include:

Name of Facility: Bay Breeze Senior Living and Rehabilitation Center

Facility Type: Nursing home / Rehabilitation

Facility Address: 3387 Gulf Breeze Pkwy

City, State and Zip Code: Gulf Breeze, Florida 32563

Telephone Number: 850-932-9257

Administrator: Justin Gibson

B. Identify area within facility and square footage that you plan to keep below 80 degrees:
Future generator circuits will power 17 PTACs on 200 hall. 5292 Sq. Ft.

C. Identify how many people (residents and staff) the area to be cooled will accommodate:
Cool area will accommodate 176 people

D. Provide a statement on how you plan to move residents to the identified location. Identify if beds will be located in the area to be cooled:
We will get the residents to the cooled area by walking and wheel chair. We will also have beds available for the residents.

E. Describe how staff will ensure the area does not exceed 80 degrees and how/how often the temperature will be monitored:
The temperature will be monitored and documented hourly

F. Describe make, model and size of generator. Is the generator fixed or portable?
Generator is 120 KW Kohler and is fixed

G. Describe where the generator is located at your facility:
The generator is located in designated generator room attached to the building

H. Describe what emergency features the generator is capable of powering (lights, fridge, A/C, etc.):
The generator will power all required life safety circuits and in the future will power the PTACs on 200 hall.

I. Describe how much fuel is located on site, where the fuel stored and how long it will provide fuel for the generator (minimum requirement is enough fuel for 96 hours/4 days):
The generator presently has 500 gallons of fuel on site, which will be enough for 96 hours.

J. Describe how the generator is connected to supply emergency power to cool your facility:
It is connected by an automatic transfer switch

K. Describe the plan/procedure for initiating generator power:
It is connected by an automatic transfer switch

L. Document how the emergency generator, fuel supply and all equipment will be protected from debris and any impact:
The generator is located inside a generator room that is connected to the building and has a double wall fuel tank.

M. Describe how the facility will refuel before and after an emergency. If a fuel agreement is established, provide the agreement:
The generator will be refueled by a tanker truck. Please see attached agreement

N. Describe how training will be provided to ensure staff is aware of how to operate the emergency power to the facility (this section may not apply to facilities with automatic transfer switches):
N/A

O. If your facility is planning on installing a fixed generator, describe the construction implementation time and attach the plans:
N/A

P. Describe if the fixed generator is to run the HVAC and provide a certified HVAC letter approving the tonnage required to cool the space indicated:
We will be using existing PTACs in the resident rooms to cool the area. The required cooling for 5292 Sq. Ft. is 10 tons, we will be providing 17 tons of cooling.

ELECTRIC

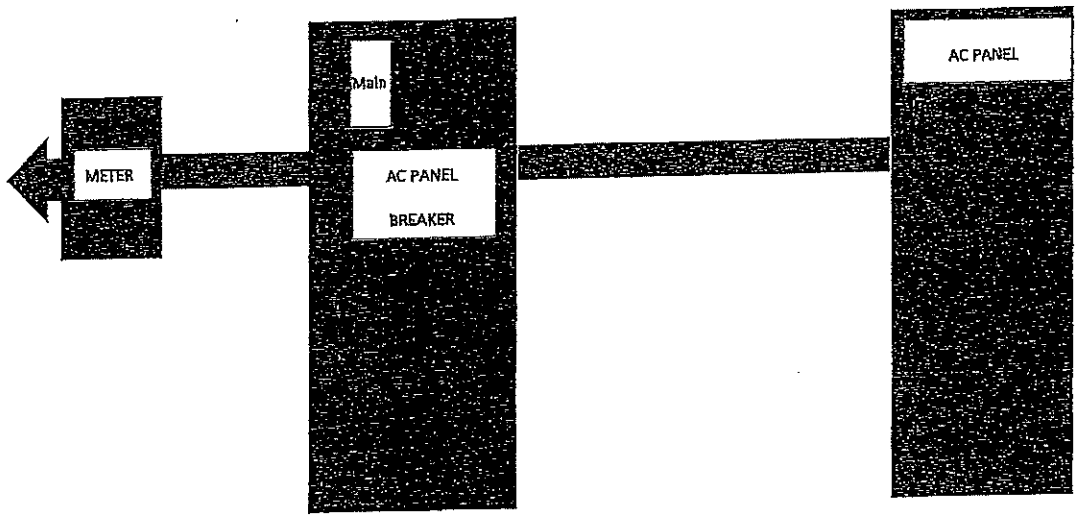
PARAMEDICS

4004 LOWER RIVER ROAD

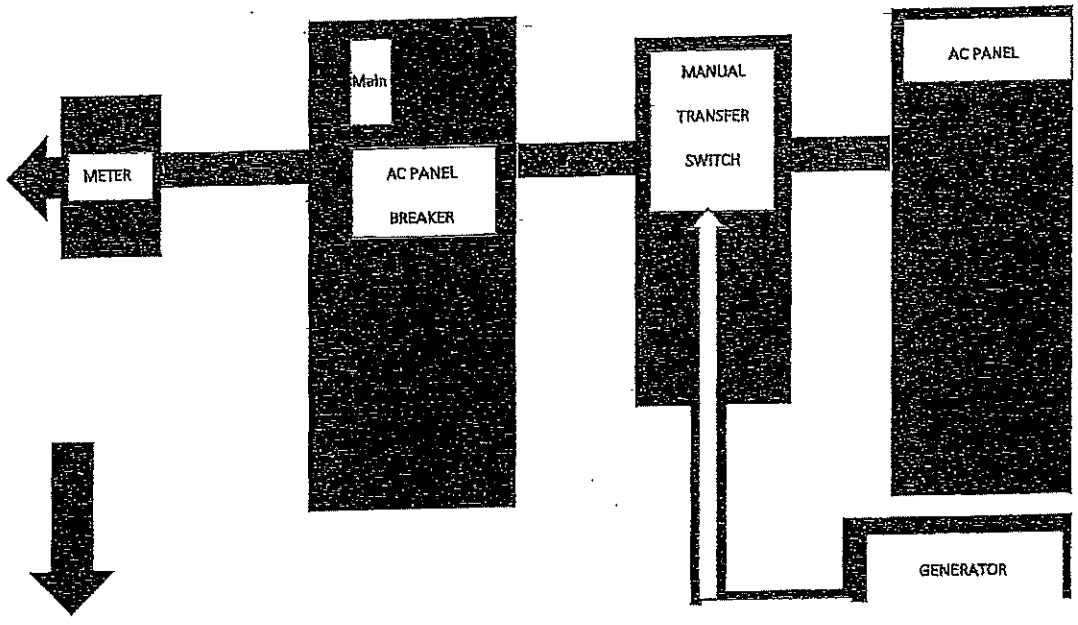
SANFORD, NC 27330

919-971-7033

EXSISTING



PROPOSED



ALL SEASONS
SERVICE NETWORK

89A East Blount St. • P.O. Box 13469 • Pensacola, FL 32591
Phone (850) 434-0384 • Fax (850) 497-7742

October 26, 2017

RE: Gulf Coast Health Care

To whom it may concern:

The usual and customary air conditioning capacity requirements for residential applicants is that one ton is sufficient for 500 to 600 square feet. Should you have any questions, Please call.

Cordially,

Mike Sarra