



QUOTE FOR -	DEPARTMENT:	CPPD
	REQUESTED BY:	Mark Wiggam
	BUILDING:	Frazee Hall
	PROJECT NAME:	Counseling Center Renovation
	PROVIDED BY:	Ed Herkert
	DATE:	6/9/15
	VALID UNTIL:	7/9/15
	EST #	0000586

Customer Copy

Customer Request:

Please review the attached drawings and call me at 859-967-9046 to discuss. This project just got funding and is starting on 6-3. To be completed on 8-3. I will be happy to meet with the estimator whenever he/she is available. Thanks Mark Wiggam.

Project Scope:

This estimate provides for the demolition & install of cabling as described on CPPD Project #807001495103 drawings ED-110 notes #1, #4 & #5 (Leave WAP's per Mark Wiggam) & install drawings E-110 note #3 & E-120 notes #3, #8 & #9 dated 04/2015. Included are as follows:

- Demolition of cabling to equipment as required.
- Install, terminate, test and activate category 6 cable for (14) communication outlets.
- Configure & program.

	Material	Labor	Total
▶ Horizontal Cabling & Hardware	\$ 1,882	\$ 2,892	\$ 4,774
▶ Racks, Patch Panels, Managers	\$ 305	\$ 50	\$ 355
▶ Demolition	\$ -	\$ 480	\$ 480
▶ Engineering & Project Management	\$ -	\$ 600	\$ 600
CNS Total for this Project:	\$ 2,187	\$ 4,022	\$ 6,209

Per University of Kentucky Business Procedure E-3-1 Departments must establish an unexpended plant fund project and WBS element for all construction, renovation, repair, and replacement projects estimated to be \$100,000 or more.

<http://www.uky.edu/eForms/forms/ProjectRequestForm-iris.pdf>

Please Note:

There is a 5-8 week lead time required for Cisco switches & equipment purchases.

At the time of estimate switch ports were available should switch ports not be available at time of installation additional charges will apply.

Any conduit, sleeves through walls & firestopping from communication room to be provided by PPD.

Project Does Not Include:

There are no additional items other than what is listed in Project Scope above.

6/9/2015


 ESTIMATOR: Ed Herkert

0000586

(Please call me at (859) 218-1152 if you have any questions)

CUSTOMER APPROVAL SIGNATURE: _____

DATE: _____

This is only an estimate. Every attempt was made to be accurate in calculating material and labor costs. With CAS, you will be charged actual costs, which may be more or less.

Per UK Business Procedures, all communications contracts, service & equipment must be coordinated, approved and purchased by CNS.

Customer Copy

Cost Accounting

•	0000586	550960	\$2,187	\$4,022	\$6,209
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CNS Departmental Copy



Campus Physical Plant Division
Planning, Design & Construction

211 Peterson Service Building • Lexington, KY 40506
Phone: 859.257.2726 • Fax: 859.323.3287

PRE-CONSTRUCTION MEETING AGENDA

DATE: xxxxday, April xx, 2014
PROJECT: Renovation of xxxxxxxxx

UK Project #:
807001xxxxxx

LOCATION:

- Introduction of Personnel
- Contractor shall have competent Superintendent on site @ all times when work is taking place.
- Use of the Site - Contractor will be in charge of the site inside the project limits.
- Staging Area and Job Site Use
 - Plans & Specs Requirements
 - Site Access - Keys/Passes/Badges
 - Parking (personal and company vehicles)
 - Security
 - Material and/or debris storage & disposal
 - Deliveries & daily access
 - Disposal in accordance with documents
 - Salvage materials
 - Owner-furnished materials - Delivery & Coordination
 - Hazardous materials
 - Existing condition of site
 - Review with Owner & Architect/Engineer before construction
 - Correct and/or restore any damage to original conditions
 - Use of Owner's property, power, water, telephone & other facilities
 - Notify Owner of any outages
- Job Site Noise & Dust Control
 - Respect users (students, faculty, staff), no loud music or foul language
- Scheduling / Coordination
 - Construction Duration
 - Contract dates
 - Start date
 - Completion date
 - Hours of operation
 - Contractor – Standard business hours – Building are open typically at 7am
 - Existing facilities – Phasing / Sequencing of work
 - Scheduling of outages
 - Moving occupants, materials, equipment, etc

- Contractor to give Owner ____ days notice to move
- Design Intent / Contract Documents
 - Brief explanation of design & special features by Architect/Engineer
 - Specifications & Drawings
 - Additional sets
 - Addenda
 - Errors, inconsistencies or omissions
- Meetings & Inspections
 - Site Inspections
 - Progress / Coordination Meetings
 - Architect & sub-consultants project visits
 - Pre-installation & start-up meetings
- Quality Control
 - Contractor's responsibility
 - Owners expects good quality
 - Unacceptable work
- Job Site Record Keeping
 - Contract documents
 - Maintaining as-built conditions
 - RFIs, Change Orders, Submittals, Shop Drawings, etc.
- Pre-construction Submittals – Submit before or in conjunction with first pay request
 - Schedule
 - Bar Chart (Microsoft Project etc.)
 - Milestones & critical dates
 - Two / three week look ahead
 - Schedule of Values
 - Breakdown by division – labor & materials at minimum
 - List of Subcontractors & Suppliers
- Submittals
 - Submittal Schedule
 - Long lead / special items
 - # of copies & who gets
 - Response time
 - Substitutions
 - Format (PDF Files are acceptable)
- Request for Payment
 - Number of copies to be submitted. (AIA Format)
 - Accompanied by updated schedule if changes.
 - Lien releases
 - Stored materials
 - Must be suitably stored and per manufacturer's recommendation when applicable
 - Off-site - copy of invoice & applicable insurance.
 - On-site - copy of invoice
 - Review at monthly progress meeting
- Questions & Clarifications
 - RFIs
 - Response time
 - RFI log
- Modifications and/or Changes

- Must have prior approval from Architect/Engineer before proceeding with changes
- Steps
 - RFI
 - Contractor or architect cost proposal
 - Change Order
- Mtg. to discuss CO's & proposals
- Claims & Delays
 - Process explained in contract documents
 - Liquidated damages
- Construction Methods and Safety Procedures (Comply with OSHA)
 - Means & Methods are the contractor's sole prerogative
 - Safety is responsibility of the contractor.
 - Safety & construction signs are contractor's responsibility
- Testing & Inspections
 - Responsibilities & Requirements
 - Types of test
 - Testing consultant
 - Quality assurance by owner is not substitute for quality control by contractor.
- Commissioning
- Training
 - Follow outline in specifications
 - Submit agenda and list of attendance
- Substantial Completion
 - Contractual obligations fulfilled
 - Formally notify Architect or Engineer for substantial inspection
 - Include list of incomplete items
 - O&M manuals – Submit as package, not bits & pieces
 - As-Built Drawings
- Warranty
 - Starts at substantial completion and ends one (1) year from final acceptance
- Final Acceptance / Closeout
 - Contractual obligations fulfilled including Consent of Surety and Contractor's Affidavit
 - Date Architect/Engineer signs final pay request unless otherwise approved in writing
 - Formally notify Architect/Engineer for final inspection
 - Punch-list needs to be signed & returned to Architect/Engineer
- Concerns of the Facility User

NOTES:


Actual Budget:

199,900

	<u>Actual Budgeted/ Projected Costs</u>	<u>Actual Cost Entered on PO</u>	<u>Actual Project Costs</u>
Demo			
Glenn Perkins LLC	\$147,900.00	\$70,000.00	\$147,900.00
Moving furniture		\$525.00	\$525.00
Environmental Charges		\$928.14	\$928.14
Design & PM Time	\$17,600.00	\$12,823.50	\$14,000.00
key shop	\$280.00		\$600.00 est.
UKCNS	\$6,209.00	\$9,694.77	\$9,694.77
UK Abatement	\$6,786.25		\$6,786.25
Analysis and Lab Services		\$262.00	\$262.00
Building Supplies		\$4.00	\$4.00
misc Maintenance Labor			\$117.25
CPMD Labor-Interior design		\$368.77	\$368.77
Totals:		\$94,606.18	\$181,186.18

Current Contingency:

\$18,713.82

5/15/15


UNIVERSITY OF KENTUCKY
CAPITAL CONSTRUCTION PROCUREMENT SECTION
FORM OF PROPOSAL

Project Title: Frazer Hall Counseling Center Office Renovation (1st & 2nd Floors)

Purchasing Officer: Mike Mudd

NOTE: The following Form of Proposal shall be followed exactly in submitting a proposal for this work. If this copy is lost, an additional copy will be furnished upon written request to the authority issuing Contract Documents.

This Proposal is submitted by:

(NAME AND ADDRESS OF BIDDER)

Date: 5-15-15

G. D. PERKINS, DESIGNER/BUILDER, LLC

Telephone: 859.229-2896

828 LIME ALLEN RD, #205, LEXINGTON, KY 40504

TO: BID CLERK
UNIVERSITY OF KENTUCKY
CAPITAL CONSTRUCTION
PROCUREMENT
RM. 322 SERVICE BUILDING
LEXINGTON, KY. 40506-0005

INVITATION TO BID: CCK-2036-15

BID OPENING DATE: May 12, 2015

TIME 3:00 P.M. E.S.T.

The Bidder, in compliance with your Invitation for Bids for the above referenced Project, having carefully examined the site of the Work, the Drawings and complete Contract Documents as defined in Article I of the General Conditions, as well as the Specifications affecting the work as prepared by the Consultant, hereby proposes to furnish all labor, materials, supplies and services required to construct the Project in accordance with the Contract Documents, within the time set forth therein, and at the price stated below without qualification.

The Bidder hereby acknowledges receipt of the following Addenda:

ADDENDUM NO. 1

DATED 5/5/2015

ADDENDUM NO. 2

DATED 5/6/2015

ADDENDUM NO. _____

DATED _____

(Here insert the number and date of any Addenda issued and received. If none has been issued and received, the word NONE should be inserted.)

Contractor Report of Prior Violations of
Chapters 136, 139, 141, 337, 338, 341, and 342

Pursuant to KRS 45A.485, the Contractor shall, prior to the award of a Contract, reveal final determinations of any violations of the provisions of KRS Chapters 136, 139, 141, 337, 338, 341, and 342 by the Contractor that have occurred in the previous five (5) year period.

This statute also requires for the duration of the Contract established, the Contractor be in continuous compliance with the provisions of Chapters 136, 139, 141, 337, 338, 341, and 342 that apply to the Contractor's operations. The Contractor's failure to reveal a final determination of a violation of KRS Chapters 136, 139, 141, 337, 338, 341, and 342, or failure to comply with any of the above cited statutes for the duration of the Contract shall be grounds for the cancellation of the Contract, and the disqualification from eligibility for future contracts for a period of two (2) years.

The Contractor, by signing and submitting a Bid on this Invitation, agrees as required by KRS 45A.485 to submit final determinations of any violations of the provisions of KRS Chapters 136, 139, 141, 337, 338, 341, and 342 that have occurred in the previous five (5) years prior to the award of a Contract and agrees to remain in continuous compliance with the provisions of these statutes during the duration of any contract that may be established. Final determinations of any violations of these statutes, must be provided to the University by the successful Contractor prior to the award of a Contract.

LUMP SUM PROPOSAL

The Bidder agrees to furnish all labor, materials, supplies and services required to complete the Work, for the above referenced Project, for the Capital Construction Procurement Section, University of Kentucky, as described in the Specifications and Contract Documents and shown on the Drawings enumerated below and as modified by the Addenda listed above.

FOR THE LUMP SUM OF One Hundred Forty Seven Thousand
(USE WORDS)
AND Nine Hundred DOLLARS AND zero CENTS.
(USE WORDS) (USE WORDS)

(\$147,900.00)
(USE FIGURES)

FORM OF PROPOSAL

AUTHENTICATION OF BID AND STATEMENT OF NON-COLLUSION AND NON-CONFLICT OF INTEREST

I hereby certify:

1. That I am the Bidder (if the Bidder is an individual), a partner in the Bidder (if the Bidder is a partnership), or an officer or employee of the bidding corporation having authority to sign on its behalf (if the Bidder is a corporation);
2. That the submitted Bid or Bids covering Capital Construction Procurement Section Invitation No. CCK-2036-15 have been arrived at by the Bidder independently and have been submitted without collusion with, and without any agreement, understanding or planned common course of action with, any other contractor, vendor of materials, supplies, equipment or services described in the Invitation to Bid, designed to limit independent bidding or competition; as prohibited by provision KRS 45A.325;
3. That the contents of the Bid or Bids have not been communicated by the Bidder or its employees or agents to any person not an employee or agent of the Bidder or its surety on any bond furnished with the Bid or Bids and will not be communicated to any such person prior to the official opening of the Bid or Bids;
4. That the Bidder is legally entitled to enter into the contracts with the University of Kentucky and is not in violation of any prohibited conflict of interest, including those prohibited by the provisions of KRS 164.390, and 45A.330 to 45A.340 and 45A.455;
5. This offer is good for 60 calendar days from the date this Bid is opened. In submitting the above, it is expressly agreed that upon proper acceptance by the Capital Construction Procurement Section of any or all items Bid above, a contract shall thereby be created with respect to the items accepted;
6. That I have fully informed myself regarding and affirm the accuracy of all statements made in this Form of Proposal including Bid Amount.
7. Unless otherwise exempted by KRS 45.590, the Bidder intends to comply in full with all requirements of the Kentucky Civil Rights Act and to submit data required by the Kentucky Equal Employment Act upon being designated the successful contractor.
8. That the bidding contractor and all subcontractors to be employed do not and will not maintain any facilities they provide for employees in a segregated manner and they are in full compliance with provisions of 41 CFR 60-1.8 that prohibits the maintaining of segregated facilities.
9. In accordance with KRS45A.110(2), the undersigned hereby swears under penalty of perjury that he/she has not knowingly violated any provision of the campaign finance laws of the Commonwealth of Kentucky and that the award of a contract to the bidder will not violate any provision of the campaign finance laws of the Commonwealth of Kentucky.

READ CAREFULLY - SIGN IN SPACE BELOW - FAILURE TO SIGN INVALIDATES BID

SIGNED BY [Signature] TITLE owner

PRINT NAME GLEN D. PERKINS FIRM G.D. PERKINS, DESIGNER/BUILDER, LLC

ADDRESS 828 LANE ALLEN RD. #205 AREA CODE & PHONE 859-229-2896

LEXINGTON KY 40504 FAX 859-231-0332
CITY STATE ZIP CODE

DATE 5-15-15

BUSINESS CLASSIFICATION

Please complete this form which is necessary for the University of Kentucky vendor database. Mark only one classification. Refer to "Definitions" for assistance in determining correct classification.

- | | |
|---|---|
| (01) <input checked="" type="checkbox"/> Small Business | (06) ___ Woman-Owned Large Business |
| (02) ___ Large Business | (07) ___ Disadvantaged Woman-Owned Small Business |
| (03) ___ Disadvantaged Small Business | (08) ___ Disadvantaged Woman-Owned Large Business |
| (04) ___ Disadvantaged Large Business | (09) ___ Other |
| (05) ___ Woman-Owned Small Business | |

DEFINITIONS

- (01) **SMALL BUSINESS:** A business concern that is organized for profit, is independently owned and operated, is not dominant in the field of operations in which it is bidding, and meets the size standards as prescribed in the Code of Federal Regulations, Title 13, Part 121. Consult your local or district Small Business Administration (SBA) office if further clarification is needed.
- (02) **LARGE BUSINESS:** A business concern that exceeds the small business size code standards established by SBA.
- (03) **DISADVANTAGED SMALL BUSINESS:** A business concern (a) that is at least 51 percent owned by one or more socially and economically disadvantaged individuals (as defined below), or a publicly owned business, having at least 51 percent of its stock owned by one or more socially and economically disadvantaged individuals; and (b) has its management and daily business operations controlled by one or more such individuals. Socially and economically disadvantaged individuals include Black Americans, Hispanic Americans, Native Americans, Asian-Pacific Americans and other minorities or individuals found to be disadvantaged by the SBA.
- (04) **DISADVANTAGED LARGE BUSINESS:** A concern that meets the definition of socially and economically disadvantaged individuals, but which is not a small business by the SBA's size standards.
- (05) **WOMAN-OWNED SMALL BUSINESS:** A small business that is at least 51 percent owned by a woman or women who also control and operate it. "Control" in this context means exercising the power to make policy decisions. "Operate" means actively involved in the day to day management.
- (06) **WOMAN-OWNED LARGE BUSINESS:** A concern that meets the definition of woman owned and operated, but which is not a small business by the SBA's standards.
- (07) **DISADVANTAGED, WOMAN-OWNED SMALL BUSINESS:** A concern that meets the definition of both (03) and (05) above.
- (08) **DISADVANTAGED, WOMAN OWNED LARGE BUSINESS:** A concern that meets the definition of both (04) and (06) above.
- (09) **OTHER:** A concern that does not meet any of the above definitions.

THE FOLLOWING ITEMS ARE HERewith ENCLOSED AS REQUIRED BY KRS 45A.185

1. Bid Bond or Certified Check in an amount not less than five percent (5%) of total Bid.
2. List of Proposed Subcontractors and Unit Prices. (if required)
3. Authentication of Bid and Statement of Non-Collusion and Non-Conflict of Interest.
4. List of Materials and Equipment.
5. **VENDOR NUMBER:** It is imperative that you furnish your Federal Employer Identification Number in the space provided below. Failure to do so may delay the processing of purchase orders issued to your firm.

45-0547621

(Nine Digit Number)

BIDDER'S QUALIFICATIONS

The Commonwealth of Kentucky Model Procurement Code (KRS 45A.080) requires contracts to be awarded, "to the responsive and responsible bidder whose bid offers the best value" to the University of Kentucky. In order to determine if the Bidder has the experience, qualifications, resources and necessary attributes to provide the quality workmanship, materials and management required by the plans and specifications, the Bidder may be required to complete and submit the information requested on the University of Kentucky Contractor Bidder Determination of Responsibility questionnaire. Failure to provide the information requested on the questionnaire or failure to provide any additional submittals or information that may be requested to make this determination may be grounds for a declaration of non-responsibility with respect to the Bidder. A copy of the Contractor Determination of Responsibility questionnaire is available upon request to all Bidders.

TIME LIMIT FOR EXECUTION OF CONTRACT DOCUMENTS

It is further agreed, that in the event this Proposal is accepted by the Owner and the undersigned shall fail to execute the Contract and furnish satisfactory Payment and Performance Bond within ten (10) consecutive calendar days from the date of notification of the award of the Contract, the Owner may at his option, determine that the undersigned has abandoned the Contract and thereupon, the Proposal shall become null and void and the Bid guarantee, check or Bid bond which accompanied it shall be forfeited and become the property of the Owner as liquidated damages for each failure and no protest pursuant to such action will be made. If the Undersigned shall execute the Contract, and furnish satisfactory Payment Bond and Performance Bond, it is understood that the Bid Guarantee or Bid Bond will be returned to the undersigned by the Owner.

UNIT PRICES

NOTE: Unit Prices shall include the furnishing of all labor, materials, supplies and services and shall include all items of cost, overhead and profit for the Contractor and any subcontractor involved, and shall be used uniformly without modifications for either additions or deductions. The Unit Prices as established shall be used to determine the equitable adjustment of the Contract Price in connection with changes, deletions or extra work performed under the Contract and the "Rules of Measurement" set forth in the General Conditions shall govern.

All Bidders will be required to complete and submit the following information at the time of bid opening. The information requested in this submittal is required to assist the University in determining contractor responsibility to complete the project being bid.

The apparent low bidder is requested to attend a post bid meeting which will be scheduled at a later date.

DESCRIPTION OF WORK

UNIT PRICE

NA

END OF UNIT PRICE SCHEDULE

PRIMARY LIST OF PROPOSED SUBCONTRACTORS

All subcontractors are subject to the approval of the Capital Construction Procurement Section and Capital Project Management Division, University of Kentucky, Lexington, KY.

If certain branches of the Work are to be done by the Prime Contractor, so state.

The apparent low bidder will be required to complete and submit to the University the following information by twelve (12) noon of the first working day following the bid opening. The information requested in this submittal is required to assist the University in determining contractor responsibility to complete the project being bid.

The apparent low bidder is requested to attend a post bid meeting which will be scheduled at a later date.

BRANCH OF WORK/MATERIAL

SUBCONTRACTOR/SUPPLIER

DIVISION OF WORK

NAME AND ADDRESS OF SUBCONTRACTOR

Plumbing

Mechanical

Electrical

END OF LIST OF SUBCONTRACTORS

LIST OF MATERIALS AND EQUIPMENT

Each item listed under the different phases of construction must be clearly identified so that the Owner will definitely know what the Bidder proposes to furnish.

The use of a manufacturer's or dealer's name only, or stating "as per Plans and Specifications," will not be considered as sufficient identification.

Where more than one "Make" or "Brand" is listed for any one item, the Owner has the right to select the one to be used.

The apparent low bidder will be required to complete and submit to the University the following information by twelve (12) noon of the first working day following the bid opening. The information requested in this submittal is required to assist the University in determining contractor responsibility to complete the project being bid.

The apparent low bidder is requested to attend a post bid meeting which will be scheduled at a later date.

ITEM	BRAND OR MANUFACTURER
Structural Concrete Panels	_____
Self-leveling Concrete Topping	_____
Fireproofing	_____
Doors/frames	_____
Door Hardware	_____
Tile	_____
Resilient Tile/Base	_____
Ceiling Tile/Grid	_____
Toilet & Bath Accessories	_____
Toilet Compartments	_____
Plumbing fixtures	_____
Faucets	_____
Light Fixtures	_____

END OF LIST OF MATERIALS AND EQUIPMENT

IDENTIFICATION OF MINORITY SUBCONTRACTORS AND MATERIAL SUPPLIERS

Participation of Minority and Women owned Contractors and businesses.

The University of Kentucky encourages and supports the participation of minority and women owned businesses.

1. Minority and Women Subcontractors

2. Minority and Women Material Suppliers

SUPERINTENDENT

In accordance with Article 17 of the General Conditions a full-time superintendent will be required on this project. Below, please list the superintendent your firm will employ on this project. The successful Bidder will be required to furnish a resume of the superintendents qualifications and or past projects.

List the Superintendent's Name



Phase 1 - 106
Phase 2 - 201

Work Authorization Order

Asbestos Abatement Price Quote

Tommy Taylor
 Accredited Asbestos Management Planner
 Environmental Management Department
 Environmental Quality Management Center
 355 Cooper Drive
 Lexington, Kentucky 40506
 Fax No.: 323-6274
 (O) 257-5295
 (C) 229-3045
 Email: twtayl0@email.uky.edu



PROJECT TITLE: Frazer Hall Rooms 106 & 201
 PROJECT NO.: 15645
 DATE PREPARED: 05/01/15
 CONTACT: Tommy Taylor
 UNIT: _____
 WORK ORDER NO.: _____
 (To be completed by EMD)

ESTIMATED START DATE
05/13/15

ESTIMATED COMPLETION DATE
5/15/15

SCOPE OF WORK or DESCRIPTION OF CHANGE(S)	LINE TOTAL
No charge for services provided by EMD including: scheduling, management, regulatory notifications, inspections and recordkeeping.	
Provide set-up to complete project, 200 sq. ft. of plastic sheeting, 158 sq. yds. of carpeting, 1419 sq. ft. of floor tile & adhesive, 1419 sq. ft. of ceiling tile & glue dots, 16 ea. glovebags, 50 lin. ft. of pipe insulation, and 1419 encapsulation of floors. This work is taking place because of renovations ongoing in the rooms.	\$ 6,676.25
Air Monitoring:	\$ 110.00
<p>Receipt of this signed <i>Work Authorization Order</i> by the Environmental Management Dept. by fax or email will acknowledge the Authorizing Party's acceptance of the services and costs described above and authorize the contractor to proceed with the described work.</p> <p>The Account No. provided by the Authorizing Party will be charged directly for the services described above.</p> <p>The Authorizing Party will be notified if additional asbestos materials are discovered or if conditions are discovered that would alter the above cost estimate or schedule.</p> <p>The Environmental Management Department and the contractor <u>are not</u> responsible for the security of the project area.</p>	
	\$ 6,786.25

*** IMPORTANT ***

Prior to beginning the above work it is the Authorizing Party's responsibility to:

- ✓ Have affected utilities (i.e., electricity, active steam lines) properly deactivated.
- ✓ Notify potentially affected building personnel .
- ✓ Grant or obtain access to the area for all equipment and personnel to perform the work.

807001110731
 Account No. (To be provided by Authorizing Party)
 _____ 5-13-15
 Authorized By (signature) Date
MARK S. WIGGAM
 Printed Name



PUBLIC PROTECTION CABINET
DEPARTMENT OF HOUSING, BUILDINGS & CONSTRUCTION
DIVISION OF BUILDING CODE ENFORCEMENT
ELECTRICAL INSPECTION SECTION
101 Sea Hero Rd., Suite 100, FRANKFORT, KENTUCKY 40601-5412
PHONE 502-573-1797 FAX 502-573-1598

Steven L. Beshear
Governor
Robert D. Vance
Secretary
Ambrose Wilson IV
Commissioner
Jack L. Coleman
Deputy Commissioner

FIELD INSPECTION REPORT

PROJECT/ ENG. FILE #: _____ PERMIT #: _____ DATE: 8/3/15

PROJECT LOCATION: UK Frazee Hall Phase 2 Rm 201 & Rm 106

PROJECT DESCRIPTION: Final Inspection TYPE OF CONSTRUCTION: NEW RENOVATION

ADDRESS: 406 Administration Dr Lex

Street City/County Zip Code

Type of Occupancy: Residential Commercial/Industrial University/College OTHER 31053-106

Consultation Complaint Rough-In Temporary Service Approved FINAL Inspection / Sticker # 31092-201

TEMPORARY OCCUPANCY GRANTED FOR _____ DAYS CERTIFICATE OF COMPLIANCE NUMBER ISSUED C-473588

NUMBER OF HOURS ON INVESTIGATION: _____ NUMBER OF MILES TRAVELED: _____

OWNER'S NAME: UK

ADDRESS: _____

Street City/County Zip Code Phone #

ELECTRICIAN/COMPANY: Beazick LLC CONTACT PERSON: Butch Fain

CONTRACTOR LICENSE #: 64589 MASTER ELECTRICIAN LICENSE #: 27895 ELECTRICIAN LICENSE #: _____

ADDRESS: 2729 Whiteberry Dr Lex 41511 621-5753

Street City/County Zip Code Phone #

MET WITH: Butch Fain TITLE: Foreman

COMMENTS / VIOLATION W/ ARTICLE #'S:

[B-1] Inspected opened the Final inspection Rm 201 which includes the installation of

- 20 amp breakers 20A receptacles
110 ea 12x4 R/O Lights 21 amp on existing ckts
1 emergency light

3 new 20A 120V ckts 17, 19, 21 Panel G
existing 512 #1 Panel G 2 50' new lighting

[B] Also includes 106 Renovation - see past inspections

Dishes wiring not completed

ELECTRICAL INSPECTOR NAME: W. M. ... CERTIFICATION # 117

ET-15-06-0037

DOH EL35-02
Rev. 8-2011



PUBLIC PROTECTION CABINET
DEPARTMENT OF HOUSING, BUILDING AND CONSTRUCTION
DIVISION OF BUILDING CODE ENFORCEMENT
ELECTRICAL INSPECTION SECTION
101 SEA HERO ROAD, SUITE 100
FRANKFORT, KENTUCKY 40601-5405
TELEPHONE (502) 573-1797 FAX (502) 573-1059



C - 473588

Certificate of Compliance

Certificate Number

Type of Occupancy Barn Residential Commercial / Ind. Univ / College Other

Engineer File / Project # UK Frazier Hall Counseling Office Rm 106 & 201 Rm

Location 4016 Administration Dr Lex Description Final

Owner's Name UK

Address _____ City _____ State _____ Zip _____

Electrical Company Name Boazick LLC Butch Fain Work Phone 621-5753

Contractor License 64589 Master Electricians License 27895

Address 2929 Whittberry DR City Lex State _____ Zip 40511

Connection of Temp Pole Serv _____ Connection of Permanent Serv _____

Serv - Undrgrnd _____ Serv - Overhead _____ Phase _____ Volts _____ Amps _____

- | | | |
|---------------------------|---------------------------|-------------------------|
| Panels _____ | Dryers _____ | Duct Heaters _____ |
| Transformer _____ | Ovens _____ | Elec Space Heater _____ |
| Emergency Generator _____ | Water _____ | HVAC _____ |
| Circuits _____ | Dishwashers _____ | Heaters & Vents _____ |
| Fixtures _____ | Disposals _____ | Motors _____ |
| Sockets _____ | Air Conditioners _____ | Emergency System _____ |
| Receptacles _____ | Electrical Furnaces _____ | Fire Alarm _____ |
| Ranges _____ | Kitchen _____ | Controls _____ |

Other see attached -> & past reports

The undersigned further states that to the best of his/her ability and knowledge the above equipment has been installed in compliance with the 2008 National Electrical Code (NEC). It is a condition of this certificate that no additions or alterations shall be made to the above electrical wiring or equipment without first requesting a re-inspection.

Date of Inspection 8/2/15 Certified Electrical Inspector J.V. Muro Certification # 117

**FIRE ALARM SYSTEM
RECORD OF COMPLETION**

Name of protected property: _____
 Address: _____
 Representative of protected property (name/phone): _____
 Authority having jurisdiction: _____
 Address/telephone number: _____

Organization name / phone *Representative name / phone*

Installer _____
 Supplier _____
 Service organization _____
 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): _____
 (b) Site-specific software revision date: _____
 (c) Revision completed by: _____
(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: _____
 Central station location: _____

(NFPA 72, 1 of 4)

FIGURE 4.5.2.1 Record of Completion.

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 the public fire service communications center:

(a) _____

(b) _____

System location: _____

NFPA 72, Chapter 9 — Auxillary

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 the NFPA standards as shown below, was inspected by _____ on _____, includes the devices shown in 5 and 6, and has been in service since _____.

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

Manufacturer's instructions

Other (specify): _____

Signed: _____ Date: _____

Organization: _____

3. Record of System Operation

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

All operational features and functions of this system were tested by _____ date _____ 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

Manufacturer's instructions

Other (specify): _____

Signed: _____ Date: _____

Organization: _____

4. Signaling Line Circuits

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

Quantity: _____ Style: _____ Class: _____

(NFPA 72, 2 of 4)

FIGURE 4.5.2.1 *Continued*

5. Alarm-Initiating Devices and Circuits

Quantity and class of initiating device circuits (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 _____

(b) Duct detectors _____ Ion _____ Photo _____ Addressable _____

(c) Heat detectors _____ FT _____ RR _____ FT/RR _____ RC _____ Addressable _____

(d) Sprinkler waterflow indicators: Transmitters _____ Noncoded _____ Coded _____ Addressable _____

(e) The alarm verification feature is disabled _____ or enabled _____, changed from _____ seconds to _____ seconds.

(f) Other (list): _____

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) _____ 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): _____

(NFPA 72, 3 of 4)

FIGURE 4.5.2.1 Continued

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 the class of notification appliance circuits connected to system (*see NFPA 72, Table 6.7*):
 Quantity: _____ Style: _____ Class: _____

Types and quantities of notification appliances installed:

(a) Bells _____ With Visible _____
 (b) Speakers _____ With Visible _____
 (c) Horns _____ With Visible _____
 (d) Chimes _____ With Visible _____
 (e) Other: _____ With Visible _____
 (f) Visible appliances without audible: _____

9. System Power Supplies

(a) Fire Alarm Control Panel: Nominal voltage: _____ Current rating: _____
 Overcurrent protection: Type: _____ Current rating: _____
 Location: _____

(b) Secondary (standby):
 Storage battery: _____ Amp-hour rating: _____
 Calculated capacity to drive system, in hours: _____
 Engine-driven generator dedicated to fire alarm system: _____
 Location of fuel storage: _____

(c) 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 referenced NFPA standard(s):

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

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

 (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)

(*NFPA 72, 4 of 4*)

FIGURE 4.5.2.1 *Continued*

From: Miller, Debi L
To: [Leach, Bradley](#)
Cc: [Ramsey, John F](#)
Subject: Frazee Hall carpet and pl. laminate
Date: Tuesday, May 19, 2015 3:12:00 PM

Brad,

Below are the carpet and plastic laminate selections that were made at today's meeting. The Shaw carpet is not a Quick Ship carpet, but Rodney Britt, our Shaw rep has it on hold for us for this project.

Carpet – Shaw (modular)
Style: Evolve #59415
Color: Sparkling Bliss #14225

Install Method: Quarter-Turn

Plastic Laminate – Counter Top
Wilsonart
4588K-07
Kalahari Topaz

Since Filito had a meeting at 1:00 we did not have an opportunity to discuss paint selections. I have some suggested colors if you would like for me to meet with them to finalize the selection(s).

Thanks,
Debi

Debi Miller, KYCID

*University of Kentucky
CPMD
Interior Designer
220 Peterson Service Building
Lexington, Kentucky 40506*

Phone 859-218-3111



FEATURES & SPECIFICATIONS

INTENDED USE — Low-profile static luminaire provides general illumination for recessed applications; Ideal for restricted plenum spaces.

Certain airborne contaminants can diminish integrity of acrylic. [Click here for Acrylic Environmental Compatibility table for suitable uses.](#)

ATTRIBUTES — Designed exclusively for use with T8 lamps, electronic ballasts and sockets.

CONSTRUCTION — Smooth hemmed sides and smooth, inward formed end flanges for safe handling. Lighter weight fixture allows for safe, easy installation.

Standard steel door frame has superior structural integrity with premium extruded appearance and precision flush mitered corners. Steel door allows easy lens replacement without frame disassembly (for lenses up to .156" thick). Powder painted, steel latches provide easy, secure door closure.

Superior mechanical light seal requires no foam gasketing. Integral T-bar clips secure fixture to T-bar system. Housing formed from cold-rolled steel. Acrylic shielding material 100% UV stabilized. No asbestos is used in this product.

FINISH — Five-stage iron-phosphate pretreatment ensures superior paint adhesion and rust resistance. Painted parts finished with high-gloss, baked white enamel.

ELECTRICAL — Standard ballast is electronic, thermally protected, resetting, Class P, HPF, non-PCB, UL Listed, CSA certified ballast, universal voltage and sound rated A.

Luminaire is suitable for damp locations. AWM, TFN or THHN wire used throughout, rated for required temperatures.

LISTING — Standard: UL. Optional: Canada — CSA or cUL; Mexico — NOM.

WARRANTY — 1-year limited warranty. Complete warranty terms located at

www.acuitybrands.com/CustomResources/Terms_and_conditions.aspx

US patents: 6,210,025; 6,231,213; 2,288,471.

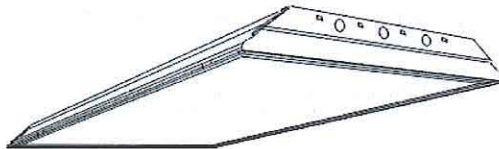
Note: Specifications subject to change without notice.

Catalog Number	2GT8 2 32 A12 MVOLT GEB10IS
Notes	SN1
Type	UK FRAZEE HALL

General Purpose T8 Troffer

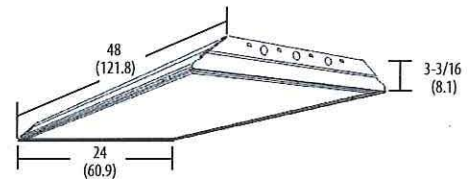


GT8 2'x4'



2, 3 or 4 Lamps

Specifications
 Length: 48 (121.8)
 Width: 24 (60.9)
 Depth: 3-3/16 (8.1)
 Weight: 22 lbs (9.9 kg)



All dimensions are inches (centimeters).

ORDERING INFORMATION

For shortest lead times, configure products using **bolded options**.

Example: 2GT8 2 32 A12 MVOLT GEB10IS

2GT8		2	32		A12	MOL	GEB010IS
Series	Trim type	Number of lamps	Lamp type	Door frame	Diffuser type	Voltage	Options
2GT8 2' wide	(blank) Grid F Overlapping flanged	2 3 4 Not included	32 32W T8 (48")	(blank) Flush steel, white FN Flush aluminum, natural FM Flush aluminum, matte black FW Flush aluminum, white RN Regressed aluminum, natural RM Regressed aluminum, matte black RW Regressed aluminum, white	A12 #12 pattern acrylic A12125 #12 pattern acrylic, .125" thick A19 #19 pattern acrylic, .156" thick A15 #15 pattern acrylic, .2" thick PC1S 1/2" x 1/2" x 1/2" plastic cube louver, silver PC2S 1-1/2" x 1-1/2" x 1" plastic cube louver, silver w/ flange ¹ PC3S 3/4" x 3/4" x 1/2" plastic cube louver, silver	120 277 347 MVOLT ² Others available	1/4 One 4-lamp ballast 1/3 One 3-lamp ballast GEB10IS Electronic ballast, <10% THD, instant start GEB10PS Electronic ballast, <10% THD, programmed start GEB10RS Electronic ballast, <10% THD, rapid start EL Emergency battery pack (nominal 300 lumens) EL14 Emergency battery pack (nominal 1400 lumens) GLR Internal fast-blow fuse ³ GMF Internal slow-blow fuse ³ LST Tandem-wired fixture pairs (shared ballasts) PWS1836 6' prewire, 3/8" dia., 18-gauge, 1 circuit LP_ Lamped, specify lamp type and color JP Palletized and stretch-wrapped without individual cartons; grid trim only CSA CSA Certified NOM NOM Certified

**UNIVERSITY OF KENTUCKY
 PHYSICAL PLANT DIVISION
 LEXINGTON CAMPUS**

- APPROVED
 APPROVED AS NOTED
 NOT APPROVED - REVISE AND RESUBMIT

CORRECTIONS OR COMMENTS MADE ON THE SHOP DRAWINGS DURING THIS REVIEW DO NOT RELIEVE THE CONTRACTOR FROM COMPLIANCE WITH THE REQUIREMENTS OF THESE DRAWINGS AND SPECIFICATIONS.

BY: [Signature]
 DATE: 6-11-15

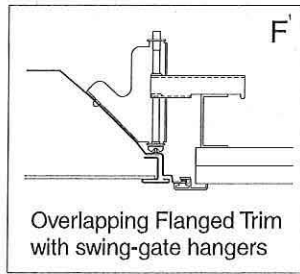
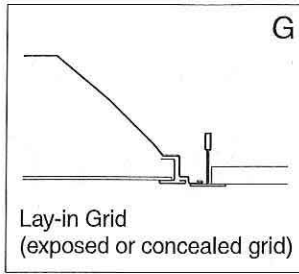
NOTES:

- 1 Available with flush door frames only.
- 2 MVOLT standard for 120-277V applications, 50-60 hz operation. Some options require voltage specified.
- 3 Must specify voltage 120V or 277V.

GT8 2'x4' Static T8 Troffer

MOUNTING DATA

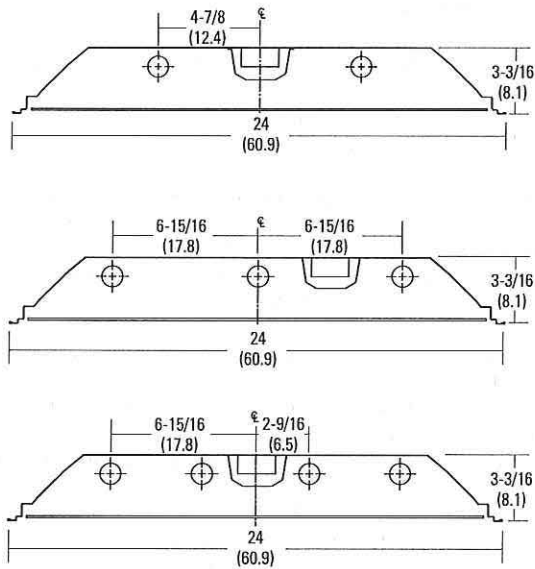
Continuous row mounting of flanged units requires CRE and CRM trim options (see Options).



NOTE:

1 Recommended rough-in dimensions for F-trim fixtures 24"x48" (Tolerance is +1/4"-0"). Swing-gate range 1-3/16" to 3-15/16". Swing-gate span 23-3/8" to 26-11/16". Fixture swing-gate points require additional 1-1/16" over nominal fixture height.

DIMENSIONS



PHOTOMETRICS

Calculated using the zonal cavity method in accordance with IESNA LM41 procedure. Floor reflectances are 20%. Lamp configurations shown are typical. Full photometric data on these and other configurations available upon request.

2GT8 2 32 A12

Report LTL 7424

Lumens per lamp - 2850 - Lum. eff. - 81.7%

S/MH (along) 1.2 (across) 1.4

Coefficient of Utilization

Ceiling Wall	80%			70%			50%		
	70%	50%	30%	70%	50%	30%	50%	30%	10%
0	97	97	97	95	95	95	91	91	91
1	89	86	82	87	84	81	80	78	76
2	82	75	70	80	74	69	71	67	63
3	75	67	60	73	65	59	63	58	54
4	69	59	52	67	58	52	56	51	46
5	63	53	46	62	52	46	51	45	40
6	59	48	41	47	47	40	46	40	35
7	54	44	37	53	43	36	42	36	31
8	51	40	33	49	39	33	38	32	28
9	47	37	30	46	36	30	35	29	25
10	44	34	27	43	33	27	32	27	23

2GT8 3 32 A12 1/3

Report LTL 7421

Lumens per lamp - 2850 - Lum. eff. - 80.1%

S/MH (along) 1.2 (across) 1.4

Coefficient of Utilization

Ceiling Wall	80%			70%			50%		
	70%	50%	30%	70%	50%	30%	50%	30%	10%
0	95	95	95	93	93	93	89	89	89
1	88	84	81	85	82	79	79	76	74
2	80	74	69	78	72	68	70	66	62
3	74	66	59	72	64	58	62	57	53
4	68	58	52	66	57	51	55	50	46
5	62	52	45	61	52	45	50	44	40
6	58	47	40	56	47	40	45	39	35
7	54	43	36	52	42	36	41	35	31
8	50	39	33	49	39	32	38	32	28
9	47	36	30	45	36	29	35	29	25
10	44	33	27	43	33	27	32	27	23

2GT8 4 32 A12 1/4

Report LTL 7425

Lumens per lamp - 2850 - Lum. eff. - 78.6%

S/MH (along) 1.2 (across) 1.4

Coefficient of Utilization

Ceiling Wall	80%			70%			50%		
	70%	50%	30%	70%	50%	30%	50%	30%	10%
0	94	94	94	91	91	91	87	87	87
1	86	82	79	84	81	78	77	75	73
2	79	73	68	77	71	67	68	64	61
3	72	64	58	70	63	57	61	56	52
4	66	57	51	65	56	50	54	49	45
5	61	51	45	60	51	44	49	43	39
6	57	47	40	55	46	39	44	39	34
7	53	42	36	51	42	35	40	35	31
8	49	39	32	48	38	32	37	31	27
9	46	35	29	45	35	29	34	29	25
10	43	33	27	42	32	27	32	26	22

Zonal Lumens Summary

Zone	Lumens	%Lamp	%Fixture
0-30	1372	24.1	29.4
0-40	2277	39.9	48.9
0-60	3907	68.5	83.9
0-90	4658	81.7	100.0
90-180	0	0	0
0-180	4658	81.7	100.0

Zonal Lumens Summary

Zone	Lumens	%Lamp	%Fixture
0-30	2066	24.2	30.2
0-40	3412	39.9	49.8
0-60	5768	67.5	84.2
0-90	6851	80.1	100.0
90-180	0	0	0
0-180	6851	80.1	100.0

Zonal Lumens Summary

Zone	Lumens	%Lamp	%Fixture
0-30	2718	23.8	30.3
0-40	4481	39.3	50.0
0-60	7553	66.3	84.2
0-90	8965	78.6	100.0
90-180	0	0	0
0-180	8965	78.6	100.0



FEATURES & SPECIFICATIONS

INTENDED USE — RT8S is designed for applications that require the extremely energy efficient delivery of comfortable volumetric light from a lay-in fixture that is appealing and shallow in depth and where room-side ballast access is required. Ideal for offices, schools, hospitals and numerous other commercial applications. **Certain airborne contaminants can diminish integrity of acrylic. [Click here for Acrylic Environmental Compatibility table for suitable uses.](#)**

CONSTRUCTION — Rugged, steel reflector with embossed facets. Painted after fabrication.

Fixtures may be mounted end-to-end.

OPTICS — Delivers volumetric lighting by filling the entire volume of space with light, providing the ideal amount to walls, cubicles, work surfaces and people.

Luminous characteristics are carefully managed at high angles, distributing just enough intensity to deliver the volumetric effect.

98% reflective Alanod MIRO® silver optical assembly efficiently redirects lamp output to the refractor.

Regressed refractive system obscures and softens the lamp and smoothly washes the reflector with light.

Linear faceted reflector softens and distributes light into the space and minimizes the luminance ratio between the fixture and the ceiling.

Mechanical cut-off across the reflector and fresnel refraction along the refractor provide high angle shielding and a quiet ceiling.

Sloped endplates provide a balanced fixture to ceiling ratio while enhancing the perception of fixture depth.

ELECTRICAL — High-efficiency, CEE qualified, instant-start, ≤ 10% THD, universal voltage and sound rated A are available as quick-ship items.

Optional program-start and step-dimming ballasts available.

Designed and optimized for use with CEE (Consortium for Energy Efficiency) qualified, high-lumen, long life T8 lamps and energy-efficient electronic ballasts.

INSTALLATION — Lamps accessed by unlatching trim and allowing it to hinge open for easy maintenance. Ballast is accessed from below by removing channel cover.

LISTINGS — UL Listed to US and Canadian standards.

WARRANTY — 1-year limited warranty. Complete warranty terms located at

www.acuitybrands.com/CustomerResources/Terms and conditions.aspx

Protected by one or more of US Patents Nos. 7,229,192; D541,467; D541,468; D544,633; D544,634; D544,992; D544,933 and additional patent pending.

Actual performance may differ as a result of end-user environment and application.

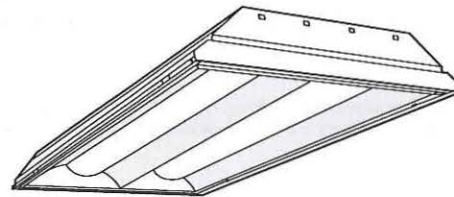
Note: Specifications subject to change without notice.

Catalog Number	2RT8S 2 32 MVOLT GEB10IS
Notes	UK-FRAZEE HALL
Type	SN1

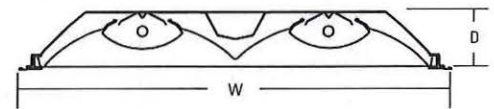


2RT8S

2 X 4
2 Lamps T8



Specifications
Length: 48 (121.8)
Width: 24 (61.0)
Depth: 3-3/16 (8.1)



All dimensions are inches (centimeters) unless otherwise specified.

ORDERING INFORMATION

For shortest lead times, configure products using **bolded options**.

Example: 2RT8S 2 32 MVOLT BINP L835HT8

2RT8S		2	32	MVOLT	GEB10IS				
Series	Trim type	Number of lamps	Wattage	Voltage	Ballast		Lamp	Options	
2RT8S	(blank) Lay-in grid F Overlapping flanged	2	32 32W T8 (48")	MVOLT ¹ 347	BILP	IS, high efficiency, .78 bf (low) ²	L835HT8 3100 lumen long life, 3500 K	GLR	Fast-blow fuse ⁴
					BINP	IS, high efficiency, .88 bf (normal) ²		EL	Emergency battery pack (see Life Safety section)
					GEB10IS	IS, .88 ballast factor		EL14	Emergency battery pack (see Life Safety section)
					BIHP	IS, high efficiency, 120 bf (high) ²		PWS1836	6' prewire, 3/8" diameter, 18 gauge, 3-wires ⁵
					BSNP	PS, step-dimming, high efficiency, .88 bf (normal) ^{2,3}		PWS1846	6' prewire, 3/8" diameter, 18 gauge, 4-wires ⁶
								QFC_	Quick-flex fixture cable, factory installed prewired cable (RELOC [®]) ⁴

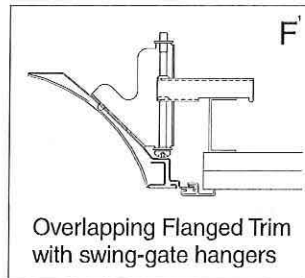
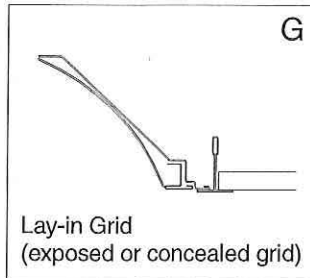
Notes

- MVOLT standard for 120V-277V applications.
- CEE qualified HPT8, NEMA premium ballast to qualify for many utility rebates.
- Not available with 347 volt.
- Must specify voltage, 120 or 277.
- For use with standard ballast.
- For use with step-dimming ballast.

2RT8S Volumetric Recessed Lighting 2' x 4'

MOUNTING DATA

Continuous row mounting of flanged units requires CRE and CRM trim options (see Options).



NOTES:

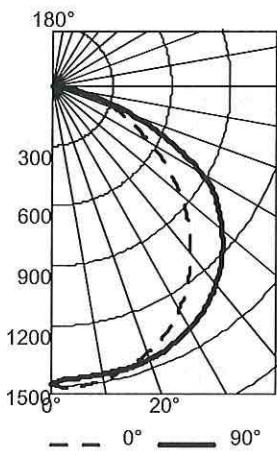
- 1 Recommended rough-in dimensions for F-trim fixtures 24"x48" (Tolerance is +1/4"-0"). Swing-gate range 1-3/16" to 3-15/16". Swing-gate span 23-3/8" to 26-11/16". Fixture swing-gate points require additional 1-1/16" over nominal fixture height.

T8 Energy Comparison

System	Lamp Type	Ballast Factor	Input Watts	Watts Saved Compared to 3 lamp T8
3-lamp T8 Parabolic	F32T8	0.88	85	—
2RT8B 2-lamp BINP T8	F32T8	0.88	55	30
2RT8B 2-lamp BILP T8	F32T8	0.78	48	37

PHOTOMETRICS

2RT8S 2 32, F032 lamps, 2800 lumens per lamp, s/m 1.28 (along) 1.4 (across), test no. LTL18481



CP Summary	Coefficients of Utilization												Zonal Lumen Summary			
	0°	90	pf	80%			70%			50%			Zone	Lumens	% Lamp	% Fixture
				pc	70%	50%	30%	50%	30%	10%	50%	30%				
0°	1490	1490	0	96	96	96	94	94	94	90	90	90	0° - 30°	1198	21.4	26.5
5°	1507	1464	1	88	84	81	82	79	77	79	77	74	0° - 40°	1997	35.7	44.2
15°	1459	1461	2	80	73	68	72	67	63	69	65	61	0° - 60°	3630	64.8	80.4
25°	1362	1430	3	73	64	58	63	57	52	61	56	51	0° - 90°	4515	80.6	100.0
35°	1198	1352	4	67	57	50	56	49	44	54	48	44	90° - 180°	0	0.0	0.0
45°	975	1215	5	61	51	43	50	43	38	48	42	37	0° - 180°	4515	80.6	100.0
55°	707	1017	6	56	46	38	45	38	33	43	37	33				
65°	438	648	7	52	41	34	41	34	29	39	33	29				
75°	205	208	8	49	38	31	37	30	26	36	30	26				
85°	35	20	9	45	34	28	34	28	23	33	27	23				
90	0	0	10	42	32	25	31	25	21	30	25	21				

Efficiency: 80.6%

*The LER (Luminaire Efficacy Rating) is the lumens per watt rating for this fixture. It is used to compare the energy efficiency of various products. This photometric report is based upon IES testing procedures, as stated in LM-41-1998.



Catalog Number	Z 217 MVOLT
Notes	UK-FRAZEE HALL
Type	SM8

FEATURES & SPECIFICATIONS

INTENDED USE — The industry's next generation in linear direct fluorescent products. This new compact, low-profile design offers our customers unique product features which improve the overall installation process and appearance while reducing labor cost, making it the most versatile solution for commercial, retail, manufacturing, warehouse, and cove and display applications.

CONSTRUCTION — Compact designed channel and cover are formed from code-gauge cold-rolled steel. Innovative T8 two-lamp back plate offers compact design and additional socket protection. Locking lamp holder tracks bolsters strength of the overall strip construction while creating improved lamp stability. Design includes T8 socket, features rotating collar and enclosed contacts. Improved easy "snap n' lock" end plates allow for quick attachment.

Designed to accommodate a wide variety of T8 lamp lengths. Channel offers the gripper back feature which strengthens the overall construction and allows for the use of the new Z spring hanger (see back). Newly designed, patent-pending channel cover offers a secure fit design, allowing for easy access and quick attachment without pinching wires.

Finish: High-gloss, baked white enamel finish (white standard). Five-stage iron-phosphate pretreatment ensures superior paint adhesion and rust resistance. Other channel paint finish options: black (MB), smoke gray (SMG) and galvanized (GALV).

OPTICS — Reflector options include solid or apertured designs in both symmetric and asymmetric configurations. Consult factory for special-apertured versions.

ELECTRICAL — Thermally protected, resetting, Class P, HPF, non-PCB, UL listed. Suitable for damp locations. AWN, TFN or THHN wire used throughout, rated for required temperatures.

INSTALLATION — Patented-pending "three-point" row connector locks channel together for straighter and faster row mounting; included as standard. Ideal for surface-mount or suspended.

LISTINGS — UL Listed, CUL Listed or CSA Certified to Canadian Standards. Listed for 25° C ambient temperature.

WARRANTY — 1-year limited warranty. Complete warranty terms located at www.acuitybrands.com/CustomerResources/Terms_and_conditions.aspx

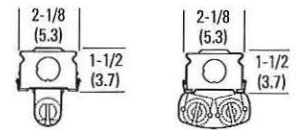
Actual performance may differ as a result of end-user environment and application.

Note: Specifications subject to change without notice.



Specifications

T8 Length:	24 (61.0), 36 (91.4), 48 (121.9) 72 (182.9) or 96 (243.8)
T5 Length:	22-3/8 (56.8), 34-1/8 (86.7), 46 (116.8) 68-3/8 (173.6) or 92 (233.6)
Width:	2-1/8 (5.4)
Depth:	1-1/2 (3.8)



All dimensions are inches (centimeters) unless otherwise noted.

ORDERING INFORMATION For shortest lead times, configure products using standard options (shown in bold.)

Example: Z 1 32 MVOLT GEB10S

Z		2	17	MV													
Series	Reflectors	Number of lamps	Lamp type	Voltage	Ballast	Options											
Z Compact strip For tandem double-length unit, add prefix T. Example: TZ	(see page 3 for ordering nomenclature)	1	17	17W T8 (24")	120	GEB10IS T8 electronic ballast, ≤10% THD, instant start (T8 only)	GLR Internal fast-blow fuse (add X for external) ²	GMF Internal slow-blow fuse (add X for external) ²	PLR Plug in wiring, specify number of branch circuits and hot wires (A-black, B-Red, C-Blue, AB or AC)	EL55 Emergency battery pack (nominal 390-700 lumens); consult factory for additional battery packs ^{2,3,4}	EL65 Emergency battery pack (nominal 725-1325 lumens) ^{2,3,4}	TILW Tandem in-line wiring	CSA CSA Certified	NOM NOM Certified	MSI Aisle motion sensor ^{2,3}	MSI360 360° motion sensor ^{2,3}	MSE360LBZ 360° motion sensor; for mounting within row or at end of row ^{2,3,4}
			25	25W T8 (36")	277												
		Not included	32	32W T8 (48")	347												
			14T5	14W T5 (22")	MVOLT Others available	GEB10RS T8 electronic ballast, ≤10% THD, rapid start ¹											
			21T5	21W T5 (34")													
			24T5HO	24W T5 HO (22")													
			28T5	28W T5 (46")													
			39T5HO	39W T5 HO (34")													
			54T5HO	54W T5 HO (46")													
		BILP High-efficiency .78 bf (low)															

Accessories: Order as separate catalog number.		Field Installable Reflectors	
		For T8 fixtures only	For T5 fixtures only
SQ_	Swivel-stem hanger (specify length in 2" increments)	Z8SMR48	Symmetric reflector, 48" white ⁵
ZSPRG	Tong and T-grid hanger (for 15/16" T-grid)	Z8ASR48	Asymmetric reflector, 48" white ⁵
HC36	Hanger chain, 36"	Z8SMR36	Symmetric reflector, 36" white ⁵
ZACVH	Adjustable aircraft cable with hook	Z8ASR36	Asymmetric reflector, 36" white ⁵
WGZ48	48" wireguard, white ⁵	Z8SMR24	Symmetric reflector, 24" white
WGZ8SMR48	48" wireguard, white, for symmetric reflector ⁵	Z8ASR24	Asymmetric reflector, 24" white
WGZ8ASR48	48" wireguard, white, for asymmetric reflector ⁵		
WGZ46	46" wireguard, white ⁵		
WGZ5SMR46	46" wireguard, white, for symmetric reflector ⁵		
WGZ5ASR46	46" wireguard, white, for asymmetric reflector ⁵		

- Notes**
- 1 For 347V.
 - 2 Specify voltage (available 120/277V).
 - 3 Not available with CSA Certified.
 - 4 Available with 4' and 8' lengths only.
 - 5 Order two for tandem double length fixtures.

Z T8 / T5 Striplight

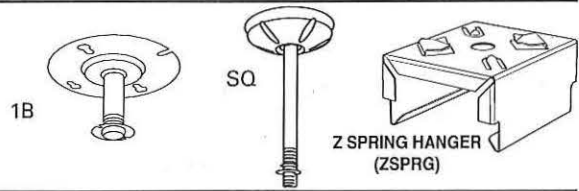
MOUNTING DATA

For unit or row installation, surface or stem mounting.

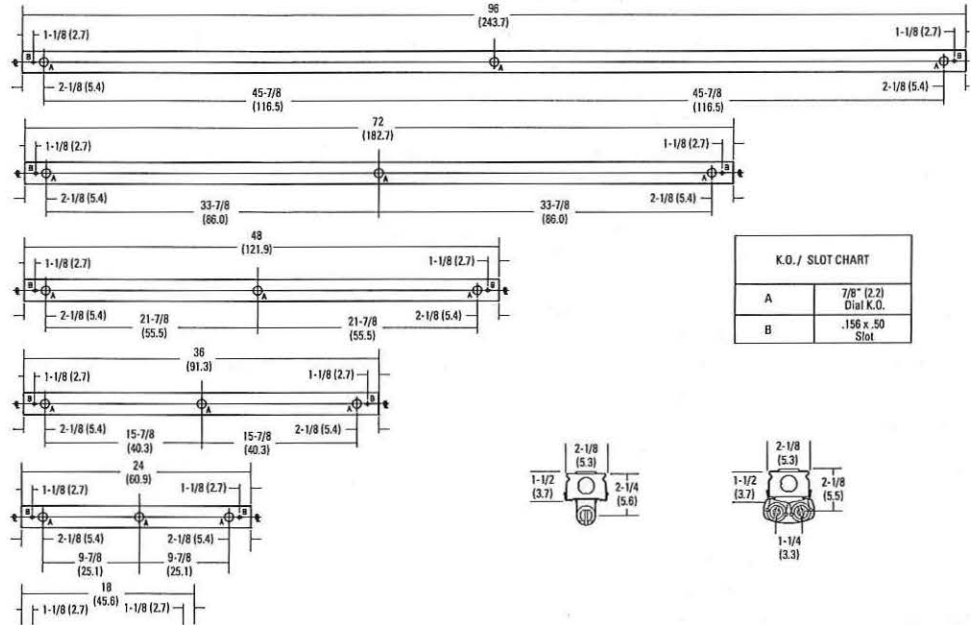
Unit installation — Minimum of two hangers required.

Row installation — One hanger per channel plus one per row required.

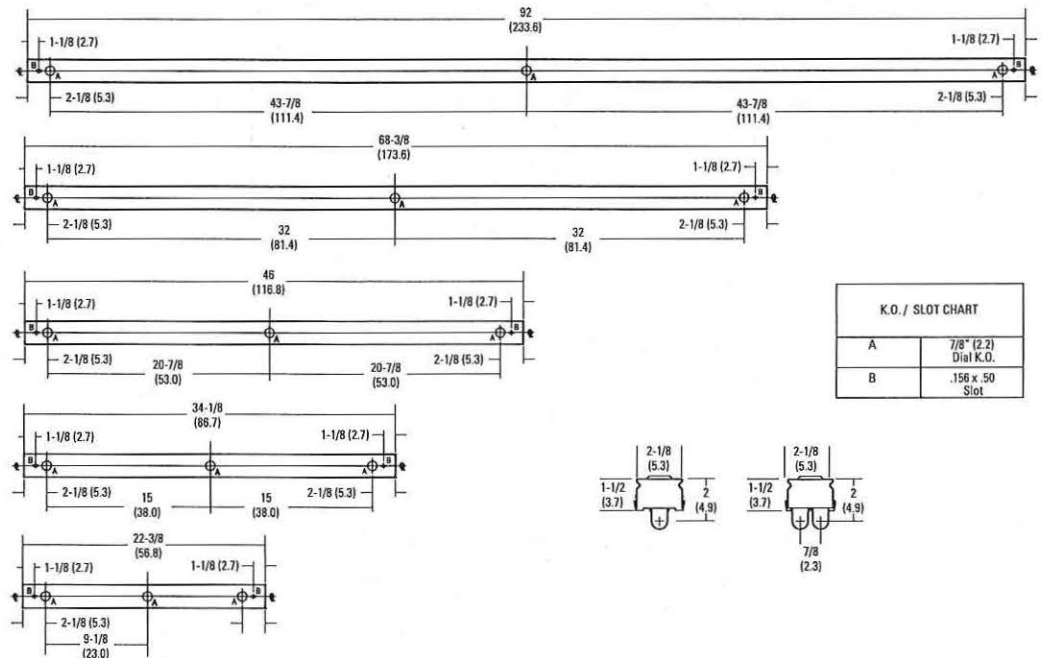
Review local codes when installing any product, as the minimum of 1 hanger per fixture may not satisfy your local building code.



T8 DIMENSIONS



T5 DIMENSIONS



PHOTOMETRICS

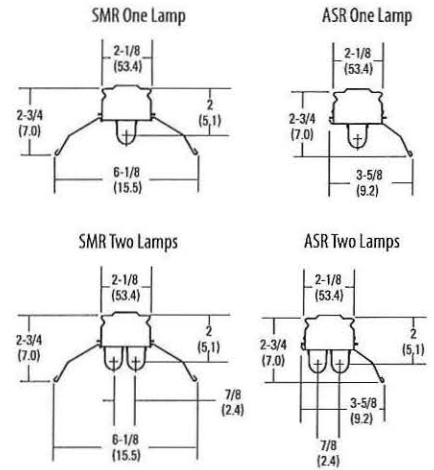
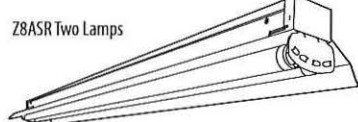
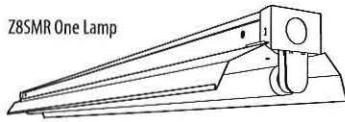
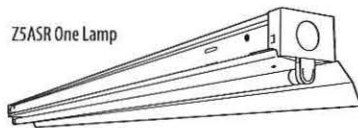
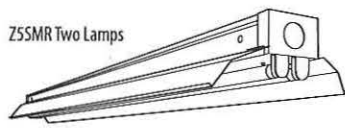
See www.lithonia.com.



Z-T8-T5

Z T8 / T5 Striplight

REFLECTORS



Specifications

All dimensions are inches (centimeters)

ORDERING INFORMATION

For shortest lead times, configure products using **bolded options**.

Example: Z5SMR46A8

Series/Length/Distribution			Finish
Series	Length	Distribution	(blank) White
Z5ASR Asymmetric reflector, T5	<u>Z5ASR/Z5SMR only</u>	(blank) Solid	MB Matte black
Z5SMR Symmetric reflector, T5	22 Nominal 22" length	A2 ASR with 2% uplight	GALV Galvanized
Z8ASR Asymmetric reflector, T8	34 Nominal 34" length	A4 ASR with 4% uplight	SKGY Smoke gray
Z8SMR Symmetric reflector, T8	46 Nominal 46" length	A5 SMR with 5% uplight	SSR Specular finish aluminum (95% reflectance)
	<u>Z8ASR/Z8SMR only</u>	A8 SMR with 8% uplight	
	24 Nominal 24" length	P Perforated	
	36 Nominal 36" length		
	48 Nominal 48" length		

EQUIPMENT INVENTORY

Your Printed Name C. Withrow Date _____

Add Modify Delete

Work Order # 807000000000 Equipment # _____
(for Modify or Delete only)

Equip Description _____

Object Type _____ http://www.uky.edu/IRIS/PM/PM_Object_Types.pdf

Building Name ABC Hall 123 Bldg # 1
[University of Kentucky Campus Map](#)

Room #	Action (Mark one box)	Comments
_____	New <input type="checkbox"/> Reloc <input type="checkbox"/> Remove <input type="checkbox"/>	_____
_____	New <input type="checkbox"/> Reloc <input type="checkbox"/> Remove <input type="checkbox"/>	_____
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_____	New <input type="checkbox"/> Reloc <input type="checkbox"/> Remove <input type="checkbox"/>	_____

EQUIPMENT CHARACTERISTICS

Manufacturer _____

Model # _____ Serial # _____

Schedules & Task List

Default Task List? Yes No

If no, please attach appropriate task list on a separate sheet of paper and attach to this form.

Date of 1st work order _____

Building Equipment or Departmental Equipment

UNIVERSITY OF KENTUCKY . CAMPUS PHYSICAL PLANT DIVISION

Planning, Design & Construction Field Report
Project Description: ABC Hall 123



W.O. Number	807000000000
Building /Room #	0000 ABC Hall 123
Construction Manager	C. Withrow
Date / Time of Visit	__/__/__ __:__:__ AM/PM

Work Accomplished/Ongoing

1	_____
2	_____
3	_____
4	_____
5	_____
6	_____
7	_____
8	_____
9	_____

Possible Change Order Items

1	_____
2	_____
3	_____
4	_____
5	_____
6	_____
7	_____

UK CPPD Shops on Site / # of Crew ; Contractor on Site ; Unit Price Contractor

<small>On Site</small>	<small>N/A</small>	Electrical Shop	_____	<small>On Site</small>	<small>N/A</small>	Sheet Metal Shop	_____
<input type="checkbox"/>	<input type="checkbox"/>	Electronics Shop	_____	<input type="checkbox"/>	<input type="checkbox"/>	Air Conditioning Shop	_____
<input type="checkbox"/>	<input type="checkbox"/>	Carpentry Shop	_____	<input type="checkbox"/>	<input type="checkbox"/>	Building Operators	_____
<input type="checkbox"/>	<input type="checkbox"/>	Plumbing Shop	_____	<input type="checkbox"/>	<input type="checkbox"/>	Contractor	_____
<input type="checkbox"/>	<input type="checkbox"/>	Paint Shop	_____	<input type="checkbox"/>	<input type="checkbox"/>	Unit Price Contractor	_____

Materials / Equipment / Furnishings - Delivered to Site

1	_____
2	_____
3	_____
4	_____

Other Noteable Events - Discussions / Requests from the Customer

1	_____
2	_____
3	_____
4	_____
5	_____
6	_____

UNIVERSITY OF KENTUCKY . CAMPUS PHYSICAL PLANT DIVISION

**Planning, Design & Construction
Office Renovation Checklist**

Project Description:
ABC Hall 123



W.O. Number	807000000000
Building /Room #	0000 ABC Hall 123
Construction Manager	C. Withrow
Selected Contractor	

Contractor Selection Criteria

Yes	N/A	BEX Inc.	Yes	N/A	G.D. Perkins	Yes	N/A	Jarboe Inc.	Yes	N/A	Stone Design Inc.
<input type="checkbox"/>	<input type="checkbox"/>	Request Bid	<input type="checkbox"/>	<input type="checkbox"/>	Request Bid	<input type="checkbox"/>	<input type="checkbox"/>	Request Bid	<input type="checkbox"/>	<input type="checkbox"/>	Request Bid
<input type="checkbox"/>	<input type="checkbox"/>	Received Written Bid	<input type="checkbox"/>	<input type="checkbox"/>	Received Written Bid	<input type="checkbox"/>	<input type="checkbox"/>	Received Written Bid	<input type="checkbox"/>	<input type="checkbox"/>	Received Written Bid
<input type="checkbox"/>	<input type="checkbox"/>	Per Plans / Specs	<input type="checkbox"/>	<input type="checkbox"/>	Per Plans / Specs	<input type="checkbox"/>	<input type="checkbox"/>	Per Plans / Specs	<input type="checkbox"/>	<input type="checkbox"/>	Per Plans / Specs
<input type="checkbox"/>	<input type="checkbox"/>	Alternate Pricing	<input type="checkbox"/>	<input type="checkbox"/>	Alternate Pricing	<input type="checkbox"/>	<input type="checkbox"/>	Alternate Pricing	<input type="checkbox"/>	<input type="checkbox"/>	Alternate Pricing
<input type="checkbox"/>	<input type="checkbox"/>	Responded	<input type="checkbox"/>	<input type="checkbox"/>	Responded	<input type="checkbox"/>	<input type="checkbox"/>	Responded	<input type="checkbox"/>	<input type="checkbox"/>	Responded

UK PPD Shops Working on Project

Yes	No	Notes	Yes	No	Notes
<input type="checkbox"/>	<input type="checkbox"/>	Electrical Shop	<input type="checkbox"/>	<input type="checkbox"/>	Sheet Metal Shop
<input type="checkbox"/>	<input type="checkbox"/>	Electronics Shop	<input type="checkbox"/>	<input type="checkbox"/>	A /C Shop
<input type="checkbox"/>	<input type="checkbox"/>	Carpentry Shop	<input type="checkbox"/>	<input type="checkbox"/>	Building Operators
<input type="checkbox"/>	<input type="checkbox"/>	Plumbing Shop	<input type="checkbox"/>	<input type="checkbox"/>	Contractor
<input type="checkbox"/>	<input type="checkbox"/>	Paint Shop	<input type="checkbox"/>	<input type="checkbox"/>	Unit Price

Office Renovation Specific Items

Yes	N/A	Yes	N/A	Yes	N/A	Yes	N/A				
<input type="checkbox"/>	<input type="checkbox"/>	Clg. Tiles Only	<input type="checkbox"/>	<input type="checkbox"/>	Asbestos In Room/s	<input type="checkbox"/>	<input type="checkbox"/>	Furnishings Plan Rec'd.	<input type="checkbox"/>	<input type="checkbox"/>	Keying Change Required
<input type="checkbox"/>	<input type="checkbox"/>	Clg. New Grid / Tiles	<input type="checkbox"/>	<input type="checkbox"/>	Abatement Pricing	<input type="checkbox"/>	<input type="checkbox"/>	Furnishings Selected	<input type="checkbox"/>	<input type="checkbox"/>	Keying Change Requested
<input type="checkbox"/>	<input type="checkbox"/>	Clg. Material Ordered?	<input type="checkbox"/>	<input type="checkbox"/>	Abatement Scheduled	<input type="checkbox"/>	<input type="checkbox"/>	Furnishings Ordered	<input type="checkbox"/>	<input type="checkbox"/>	Closers Required
<input type="checkbox"/>	<input type="checkbox"/>	Light Fixtures Selected	<input type="checkbox"/>	<input type="checkbox"/>	Abatement Completed	<input type="checkbox"/>	<input type="checkbox"/>	Furnishings Delivery Sched.	<input type="checkbox"/>	<input type="checkbox"/>	Window Inserts in Doors
<input type="checkbox"/>	<input type="checkbox"/>	Light Fixtures Ordered	<input type="checkbox"/>	<input type="checkbox"/>	Flooring Selected	<input type="checkbox"/>	<input type="checkbox"/>	Window Treatments	<input type="checkbox"/>	<input type="checkbox"/>	Lever Handle for Doors
<input type="checkbox"/>	<input type="checkbox"/>	Re-Use Light Fixtures	<input type="checkbox"/>	<input type="checkbox"/>	Flooring Mat. Quotes	<input type="checkbox"/>	<input type="checkbox"/>	P.O. Window Treatments	<input type="checkbox"/>	<input type="checkbox"/>	Sprinkler Re-Work Req'd.
<input type="checkbox"/>	<input type="checkbox"/>	Salvage Light Fixtures	<input type="checkbox"/>	<input type="checkbox"/>	Flooring Labor Priced	<input type="checkbox"/>	<input type="checkbox"/>	Wall Color Selections	<input type="checkbox"/>	<input type="checkbox"/>	Revise /New Fire Alarm A/V Req'd
<input type="checkbox"/>	<input type="checkbox"/>	Re-Use Grilles/Diff.	<input type="checkbox"/>	<input type="checkbox"/>	P.O. Flooring Mat.	<input type="checkbox"/>	<input type="checkbox"/>	Accent Walls	<input type="checkbox"/>	<input type="checkbox"/>	Re-Use Doors / Frames
<input type="checkbox"/>	<input type="checkbox"/>	Salvage Grilles/Diff.	<input type="checkbox"/>	<input type="checkbox"/>	P.O. Flooring Labor	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	Salvage Doors / Frames
<input type="checkbox"/>	<input type="checkbox"/>	HVAC Grilles/Diff. Ordered	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	CNS Pricing
<input type="checkbox"/>	<input type="checkbox"/>	HVAC Unit/s Req'd?	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	CNS Requested
<input type="checkbox"/>	<input type="checkbox"/>	HVAC Units ordered	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
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UNIVERSITY OF KENTUCKY . CAMPUS PHYSICAL PLANT DIVISION



Planning, Design & Construction Project Log
Project Description: ABC Hall 123

W.O. Number	807000000000
Building /Room #	0000 ABC Hall 123
Construction Manager	C. Withrow
Contractor	XYZ inc.

PRE-CONSTRUCTION CHECKLIST

REQD	N/A	
<input type="checkbox"/>	<input type="checkbox"/>	Verification of Preconstruction Approvals (Manager of Renovations, Fire Marshall, EHS, etc.)
<input type="checkbox"/>	<input type="checkbox"/>	Review Design Project Log
<input type="checkbox"/>	<input type="checkbox"/>	Verify Drawings/Specifications are Completed for PPD Shops / Contractor Bids
<input type="checkbox"/>	<input type="checkbox"/>	Review / Revise Estimates as Bids / Quotes are received
<input type="checkbox"/>	<input type="checkbox"/>	If Contractor Bids are used - Bid Requests - 2-3 vendors with Proof of Liability Insurance, Worker's Comp. etc.
<input type="checkbox"/>	<input type="checkbox"/>	Pre-Construction Meeting (PPD Shops/Contractor and Customer)
<input type="checkbox"/>	<input type="checkbox"/>	Review Construction Schedule with Customer and Shops/Contractor
<input type="checkbox"/>	<input type="checkbox"/>	Verify Asbestos Abatement/Mold Remediation is scheduled for completion
<input type="checkbox"/>	<input type="checkbox"/>	Other:

CONSTRUCTION CHECKLIST

REQD	N/A	
<input type="checkbox"/>	<input type="checkbox"/>	Issue all P.O. Requests ASAP - long lead items (Carpet, Light Fixtures, Casework, Fume Hoods,etc.)
<input type="checkbox"/>	<input type="checkbox"/>	Request/Develop Schedule of Values
<input type="checkbox"/>	<input type="checkbox"/>	Review / Revise schedule with Customer and Shops/Contractor as work progresses
<input type="checkbox"/>	<input type="checkbox"/>	Progress Meetings - as required due to Size and Scope of the project
<input type="checkbox"/>	<input type="checkbox"/>	CNS and Key Shop orders ASAP
<input type="checkbox"/>	<input type="checkbox"/>	Document any changes to the project - Change orders , As-Built's, etc.
<input type="checkbox"/>	<input type="checkbox"/>	Develop Project Milestones Schedule
<input type="checkbox"/>	<input type="checkbox"/>	Track / Install any Customer Supplied Items
<input type="checkbox"/>	<input type="checkbox"/>	Extra materials turned over to Building Operator's / PPD Shops
<input type="checkbox"/>	<input type="checkbox"/>	Other:
<input type="checkbox"/>	<input type="checkbox"/>	Other:
<input type="checkbox"/>	<input type="checkbox"/>	Other:

INSPECTION CHECKLIST (Digital copies for Archive)

REQD	N/A		REQD	N/A	
<input type="checkbox"/>	<input type="checkbox"/>	Electrical Rough-In	<input type="checkbox"/>	<input type="checkbox"/>	HVAC Final
<input type="checkbox"/>	<input type="checkbox"/>	Electrical Final	<input type="checkbox"/>	<input type="checkbox"/>	Fire Alarm
<input type="checkbox"/>	<input type="checkbox"/>	Plumbing Rough-In	<input type="checkbox"/>	<input type="checkbox"/>	Sprinkler
<input type="checkbox"/>	<input type="checkbox"/>	Plumbing Final	<input type="checkbox"/>	<input type="checkbox"/>	EHS Inspections
<input type="checkbox"/>	<input type="checkbox"/>	HVAC Rough-In	<input type="checkbox"/>	<input type="checkbox"/>	Fire Marshall / C.O.

CLOSE-OUT DOCUMENTATION CHECKLIST

REQD	N/A		REQD	N/A	
<input type="checkbox"/>	<input type="checkbox"/>	Key Drawing / Map Changes	<input type="checkbox"/>	<input type="checkbox"/>	Construction Cost Review (Final vs. Estimate)
<input type="checkbox"/>	<input type="checkbox"/>	Warranties / Shop Drawings	<input type="checkbox"/>	<input type="checkbox"/>	Retrieve Keys from Shops/Contractor's
<input type="checkbox"/>	<input type="checkbox"/>	Punch List Development	<input type="checkbox"/>	<input type="checkbox"/>	"MIGO" Completed Work P.O.'s - Goods Receipt
<input type="checkbox"/>	<input type="checkbox"/>	Punch List Completion	<input type="checkbox"/>	<input type="checkbox"/>	Close-Out all Shops and Scheduler
<input type="checkbox"/>	<input type="checkbox"/>	As-Built Drawings	<input type="checkbox"/>	<input type="checkbox"/>	1 year Warranty Inspection (Large Scale Projects)
<input type="checkbox"/>	<input type="checkbox"/>	Preventative Maintenance Tracking List	<input type="checkbox"/>	<input type="checkbox"/>	Surplus/Stock Materials turned over to Bldg. Operator
<input type="checkbox"/>	<input type="checkbox"/>	Other:	<input type="checkbox"/>	<input type="checkbox"/>	Other:
<input type="checkbox"/>	<input type="checkbox"/>	Other:	<input type="checkbox"/>	<input type="checkbox"/>	Other:

FINAL APPROVAL BY CUSTOMER

DATE OF APPROVAL

UNIVERSITY OF KENTUCKY . CAMPUS PHYSICAL PLANT DIVISION

**UTILITY OUTAGE
REQUEST**



W.O. Number	807000000000
Building /Room #	0000 ABC Hall 123
Construction Manager	C. Withrow
Contractor	XYZ inc.

Project Description:
ABC Hall 123

REQUESTOR/CONTRACTOR INFO: Requests must be turned in a minimum of 2 weeks prior to proposed outage date

Main Contact:		Dept./ Company:	XYZ inc.	Contact Number:	
Field Contact:				Contact Number:	

REQUESTS THE FOLLOWING UTILITY OUTAGE (CHECK ALL SYSTEMS THAT APPLY)

<input type="checkbox"/> Electricity *	<input type="checkbox"/> Domestic Water **	<input type="checkbox"/> Sprinklers	<input type="checkbox"/> Natural Gas
<input type="checkbox"/> High Voltage Work	<input type="checkbox"/> Domestic Hot Water	<input type="checkbox"/> Fire Alarm Systems	<input type="checkbox"/> Propane Gas
<input type="checkbox"/> Low Voltage Work	<input type="checkbox"/> Domestic Cold Water	<input type="checkbox"/> Telecommunications	<input type="checkbox"/> Compressed Air
<input type="checkbox"/> HVAC	<input type="checkbox"/> Heating Hot Water	<input type="checkbox"/> Computer System	<input type="checkbox"/> Vacuum
<input type="checkbox"/> Condensate	<input type="checkbox"/> Steam	<input type="checkbox"/> Sanitary Sewer	<input type="checkbox"/> Controls (Delta Room)
<input type="checkbox"/> Chilled Water	<input type="checkbox"/> Fire Water **	<input type="checkbox"/> Storm Sewer	<input type="checkbox"/> Other:

* Identify all systems that may be affected by this electrical outage.
 ** Identify all systems (fire alarms, fire and/or domestic water) that may be affected by either fire or domestic water outage.

OUTAGE DURATION & PROPOSED DATES/TIMES

	Date:	Hours:	AM/PM	To	AM/PM
1st CHOICE					
2nd CHOICE:					

RECOMMENDED CPPD TRADES TO PERFORM OUTAGE and/or TO BE ON CALL

<input type="checkbox"/> Electrical Trade	Notes	<input type="checkbox"/> Building Operators	Notes
<input type="checkbox"/> Electronics Trade	_____	<input type="checkbox"/> Contractor	_____
<input type="checkbox"/> Plumbing Trade	_____	<input type="checkbox"/> Heating/Cooling Plant	_____
<input type="checkbox"/> A/C & R Trade	_____	<input type="checkbox"/> Elec. High Voltage	_____
<input type="checkbox"/> Sheet Metal Trade	_____	<input type="checkbox"/> OTHER:	_____
<input type="checkbox"/> Delta Room	_____	<input type="checkbox"/> OTHER:	_____

DESCRIPTION OF OUTAGE PURPOSE - BUILDING/S AND AREAS AFFECTED

Yes	No	
<input type="checkbox"/>	<input type="checkbox"/>	Contractor verifies that all materials required for work to be done are on site, prior to outage work starting
<input type="checkbox"/>	<input type="checkbox"/>	Utility shut off's (Valves, Breakers, etc.) located by CPPD prior to outage work starting
<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	

STATUS OF OUTAGE REQUEST

APPROVED DATE: _____ REJECTED DATE: _____

UK- CPPD Manager of Utilities John Zachem

UK Campus Physical Plant - Planning, Design & Construction Services Project Final Completion Checklist

Project Number: 807001495103
 Project Description: Frazer Hall

Check off all applicable items below and have appropriate documentation uploaded to N: Drive/ Project Folder.

Mark N/A on any items not applicable to the project.

- Abatement
- Electrical Inspection Certificates (Rough-in & Final)
- N/A Plumbing Inspection Certificates (Rough-in & Final)
- N/A Sprinkler Certificate (Record of Completion)
- Fire Alarm System AV (Record of Completion)
- UK Fire Marshall Certificate of Occupancy
- N/A State Fire Marshall Occupancy Certificate (If Required)
- N/A Building Occupancy Signage Posted
- Record Drawings Complete
- N/A Air Balance Certification
- N/A HVAC Certification (Boiler certification as required)

Items to the PM Maintenance Team: Name sent to Date:
 Equipment Add/Delete Sheets on N: Drive
 Guarantees & Warranties on SharePoint on N: Drive

Items to the Controls/Security Date:
 Programming:
N/A UK Delta – Controls operator
N/A Security Doors (alarming, programming) – UKPD/ Dept. Controls complete

Building Operators Training-Completed: NA Date:
 Building Operations - Final Approval: NA Date:

- N/A Equipment Operations and Maintenance manuals hard copy delivered
- Surplus/Stock materials turned over to Maintenance
- Shop Drawings on N: Drive

Project Manager: sign when turning in check list Date turned in

- Project Punch List held and completed
- Key shop work completed
- Final approval by customer (Signature) Date:
- Archiving of closeout documents/ key plan update Date:

Reviewed by Construction Services Manager: Date:

Joderius Alvarado, Ph.D.
 10/9/2015



Permit Number: **T-08-07-2015-02**
 Date of Issue: **August 7, 2015**
 Owner Name: **University of Kentucky**
 Owner Address: **222 Peterson Office Building
 Lexington, KY 40506**

Office of the University
 Fire Marshal
 252 East Maxwell Street
 Lexington, KY 40506

859 257-8590
 fax 859 257-8787

www.ehs.uky.edu/fire

Temporary - Certificate of Occupancy – 30 Days

Building Name & Number: **Frazee Hall (0031)**
 Building Address: **406 Administration Drive
 Lexington, KY 40506**
 Project ID Number: **SAP # 807001495103**
 Project Description: **Renovation of suites 106 and 201.**

The described portion of this structure has been inspected for compliance with the requirements of the 2007 Kentucky Building Code for the occupancy and division of occupancy and the use for which the proposed occupancy is classified.

Construction Type: **Type III**
 Use Group: **B – Business**
 Occupant Load: **Suite 106 – 3 people
 Suite 201 – 4 people**
 Automatic Sprinkler System: Yes No Partial
 System Required: Yes No

Restrictions (If Any): **Rooms 201A, 201B, and 201C may not be occupied until fire alarm notification units are installed.**

Brandon Ernest
 Code Specialist & Plan Review

Greg Williamson
 University of Kentucky Fire Marshal



Permit Number: **08-25-2015-06**
 Date of Issue: **August 25, 2015**
 Owner Name: **University of Kentucky**
 Owner Address: **222 Peterson Office Building
 Lexington, KY 40506**

Office of the University
 Fire Marshal
 252 East Maxwell Street
 Lexington, KY 40506

859 257-8590
 fax 859 257-8787

www.ehs.uky.edu/fire

Certificate of Occupancy

Building Name & Number: **Frazer Hall (0031)**
 Building Address: **406 Administration Drive
 Lexington, KY 40506**
 Project ID Number: **SAP # 807001495103**
 Project Description: **Renovation of suites 106 and 201.**

The described portion of this structure has been inspected for compliance with the requirements of the 2007 Kentucky Building Code for the occupancy and division of occupancy and the use for which the proposed occupancy is classified.

Construction Type: **Type III**
 Use Group: **B – Business**
 Occupant Load: **Suite 106 – 3 people
 Suite 201 – 4 people**
 Automatic Sprinkler System: Yes No Partial
 System Required: Yes No
 Restrictions (If Any): **None**

Brandon Ernest
 Code Specialist & Plan Review

Greg Williamson
 University of Kentucky Fire Marshal