

EVERGREEN TERRACE NURSING HOME REMODEL CONSTRUCTION DOCUMENTS

GRAND RAPIDS, MN

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SHEET INDEX

ARCHITECTURAL	
A0.1	TITLE SHEET & CODE PLAN/REVIEW
A1.0	DEMO AND SITE PLANS
A2.0	ENLARGED FLOOR PLANS & WALL TYPES
A3.0	REFLECTED CEILING PLAN DOOR AND WINDOW SCHEDULES
A4.0	EXTERIOR ELEVATIONS
A5.0	SECTIONS & DETAILS
A5.1	DETAILS
A6.0	INTERIOR ELEVATIONS
STRUCTURAL	
S1.1	ROOF FRAMING, FOUNDATION PLAN & NOTES
S2.1	SECTION/DETAILS

CODE REVIEW

2006 INTERNATIONAL BUILDING CODE

OCCUPANCY (CHAPTER 3)				
Description / Use	Occupancy Group	Construction Type	Actual S.F.	Floor Level
Nursing Home	I-2	II-B	26,208	1
Dining/Commons Area	A-2	II-B	9,133	1
Dining-Accessory space	A-3	II-B	4,156	Basement
Chapel	A-3	V-A	1,560	1
Administration	B	V-A	2,966	1
			Total main level	39,687
			Total both levels	44,113

OCCUPANCY SEPARATIONS REQUIRED (TABLE 508.3.3) NOTE: TO BE FULLY SPRINKLED BUILDING

Occupancy Group	Occupancy Group	Separation Req'd (Hours)
I-2	A-2	1 hr
B	A-2	1 hr
A-3	I-2	1 hr

GENERAL BUILDING HEIGHTS AND AREAS (CHAPTER 5)

Occupancy Group	Type of Construction	Max. Building Height (ft)	S.F. per Floor	Levels Allowed
I-2	II-B	55'	11,000	1
A-2	II-B	55'	9,500	2
A-3	V-A	50'	11,500	2
B	V-A	55'	18,000	3

FIRE EXTINGUISHING SYSTEMS (CHAPTER 9)
a) Is the building (or part of building) sprinkled?
Yes (Entire building to be sprinkled as part of this project)
Currently the Chapel, Administration wing and Wing 5 is sprinkled
Is building required to be sprinkled? Yes

AREA / HEIGHT INCREASES (CHAPTER 5)

Occupancy Group	Type	Allowable S.F.	Increase by %	Adjusted S.F.
I-2	II-B	11,000	300	32,000
A-2	II-B	9,500	350	19,000
A-3	V-A	11,500	200	23,000
B	V-A	18,000	200	36,000

b) Area increase due to automatic sprinkler system? (sec. 506.1) Yes
IF = (100% - 25%)(3000) = 7500
= (1,000/2,000) - 25% (3000)
= .84 * 1
= .89

Occupancy Group	Type	Allowable S.F.	Increase by %	Adjusted S.F.
I-2	II-B	11,000	69	7,500
A-2	II-B	9,500	69	6,555
A-3	V-A	11,500	69	7,585
B	V-A	18,000	69	12,420

TOTAL ADJUSTED ALLOWABLE AREA

Occupancy Group	Area increase due to automatic sprinkler	Area increase due to frontage	Base allowable area per floor	Adjusted allowable area per floor	Actual Area
I-2	22,000	7,500	11,000	40,500	36,208
A-2	19,000	6,555	9,500	35,055	9,133
A-3	23,000	7,035	11,500	42,435	1,560
B	36,000	12,420	18,000	66,420	2,966

TOTAL ADJUSTED BUILDING AREA - SUM OF RATIOS FOR SEPARATED OCCUPANCIES (508.3.3.2)

Occupancy Group	Actual Area S.F.	Allowed Area	Combined Ratio (508.3.3.2)
I-2	26,208	40,500	0.65
A-2	9,133	35,055	0.26
A-3	1,560	42,435	0.04
B	2,966	66,420	0.04
			Sum of ratios = 0.99

TOTAL ADJUSTED BUILDING HEIGHT IN NUMBER OF STORIES

Allowed # of Stories	Actual # of Stories
2	1

TYPES OF CONSTRUCTION (CHAPTER 5)
CONSTRUCTION TYPE: II-B

Type	Fire Resistance Ratings (Table 601) Type II-B		Floor	Roof
	Structural Frame	Non-Bearing Walls		
0	1	0	0	0
1	1	1	1	1

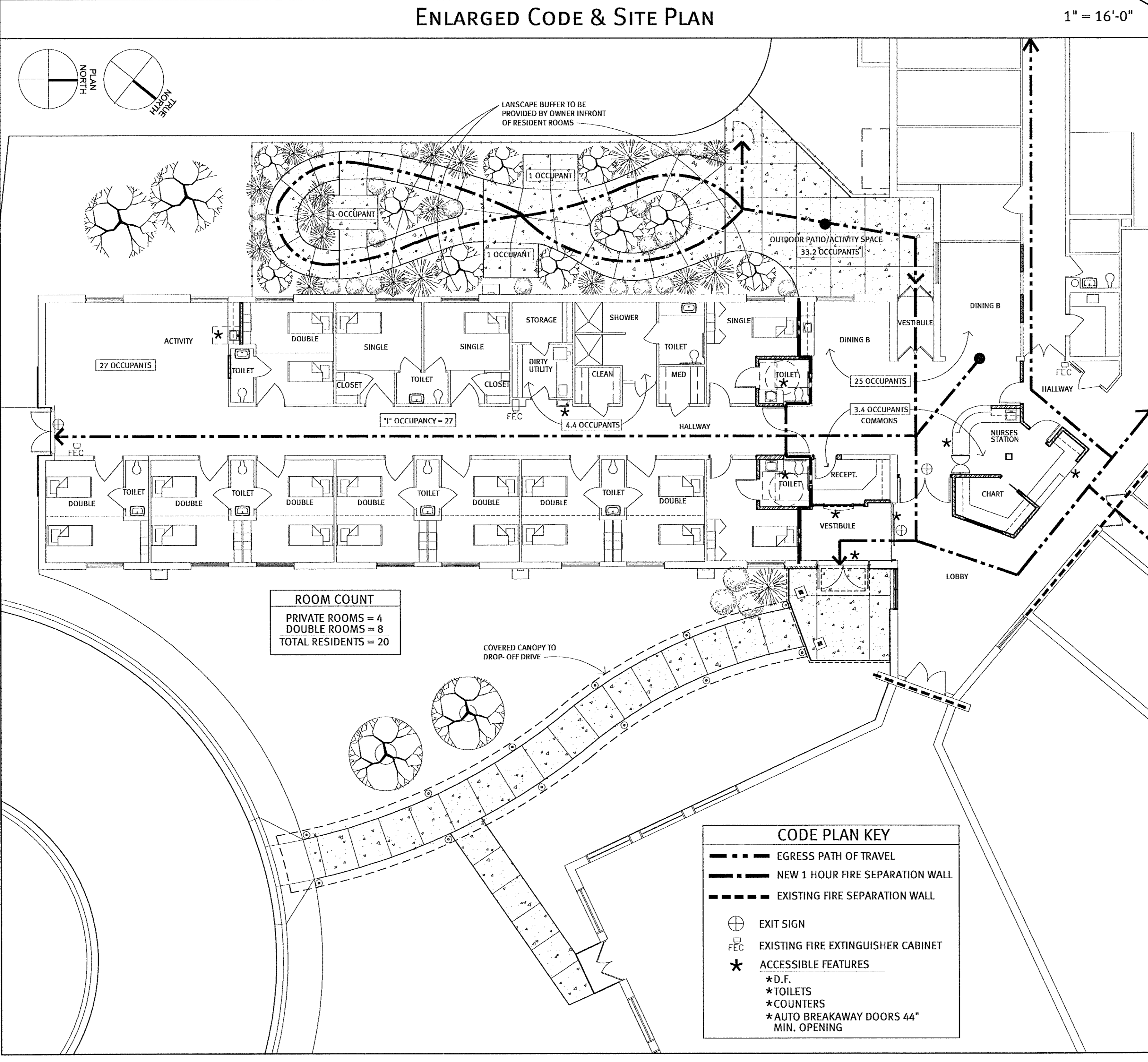
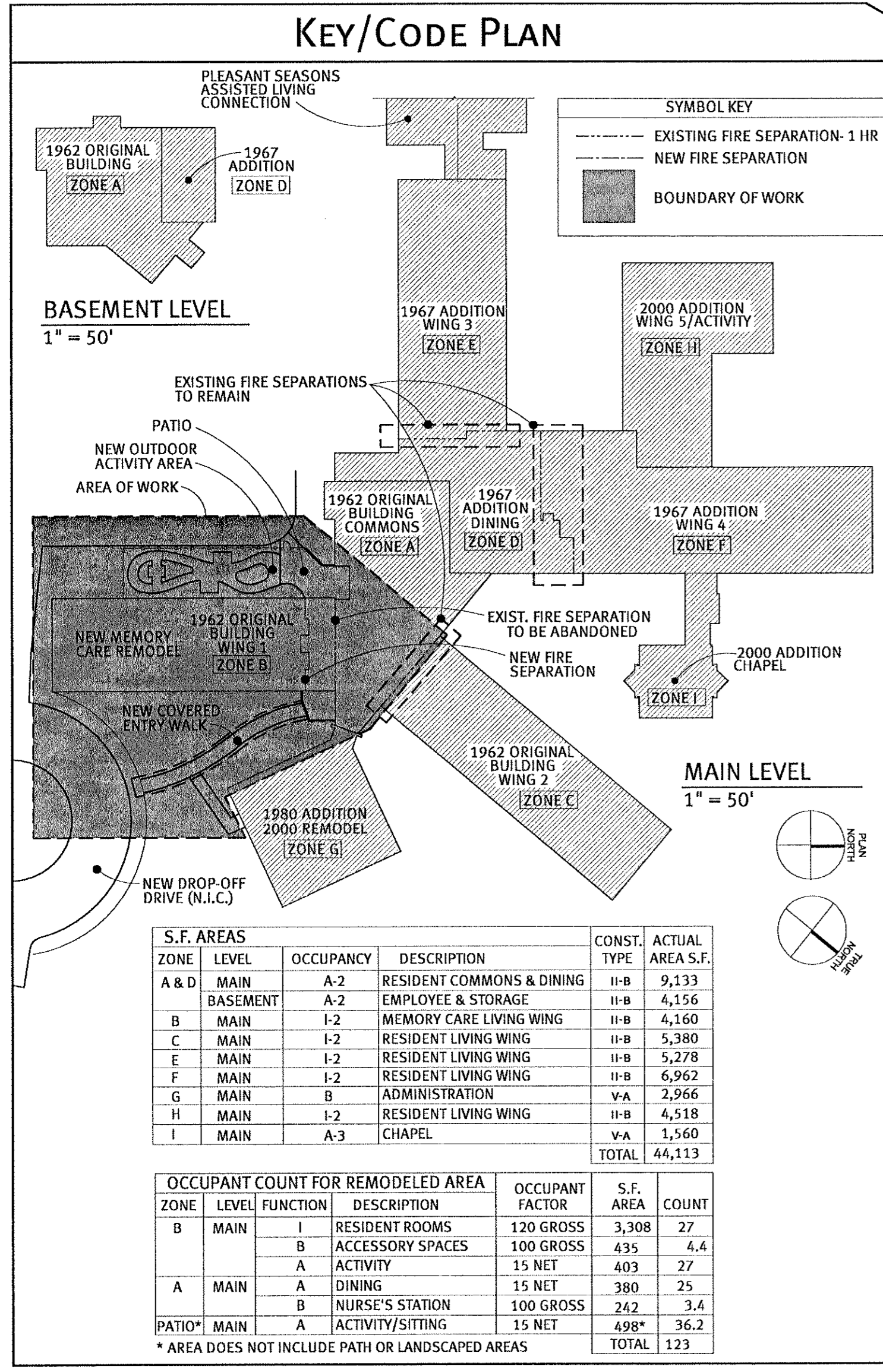
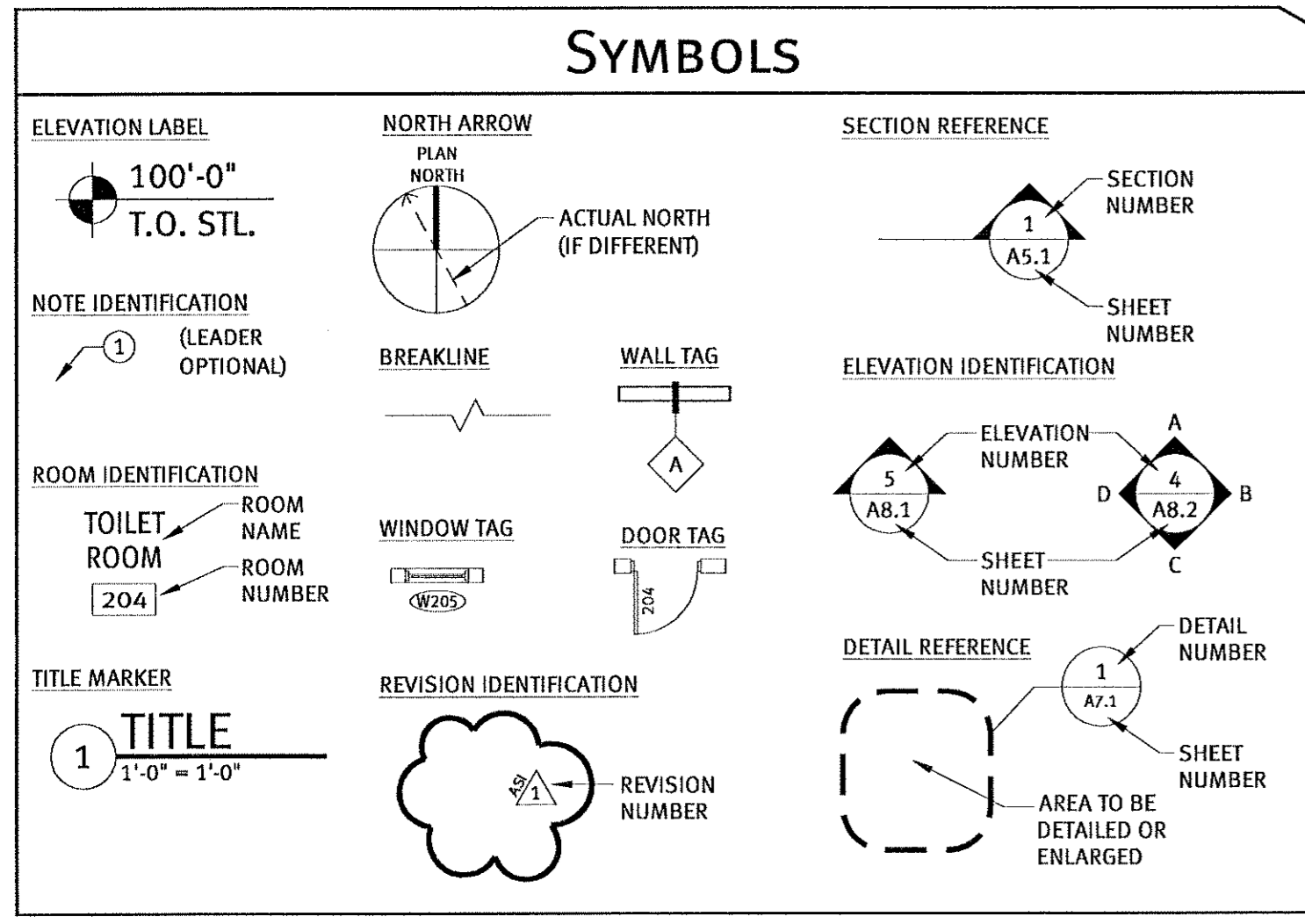
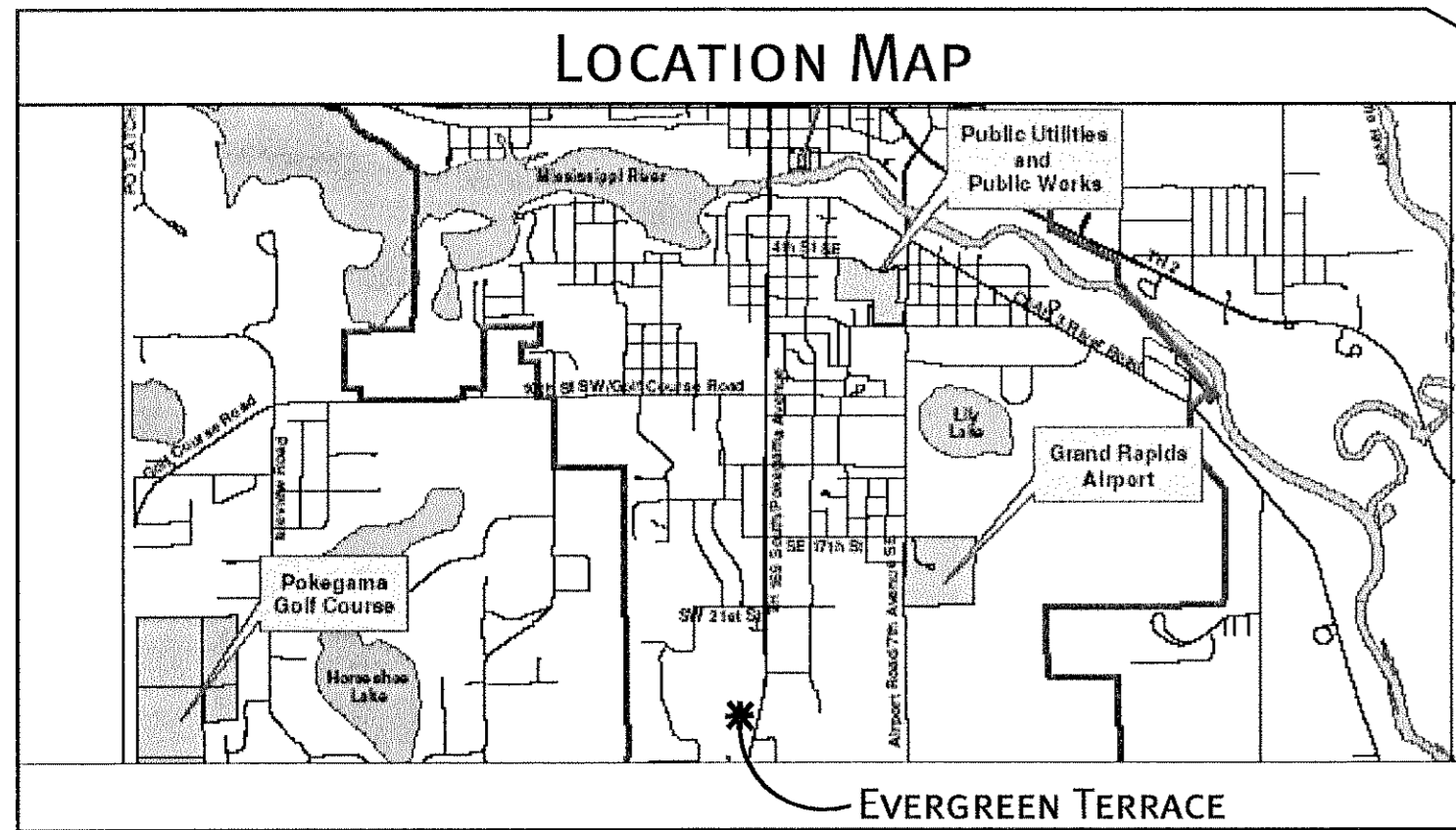
MEANS OF EGRESS (CHAPTER 10) NOTE: SHOWN FOR AREA OF WORK ONLY
OCCUPANT LOAD (Table 1004.1.1)

OCCUPANCY CALCULATIONS - SEE KEY/CODE PLAN NOTES
123 TOTAL OCCUPANTS (NOTE: ACTUAL OCCUPANT LOAD WOULD BE LESS BEING SAME OCCUPANTS, STAFF AND VISITORS WILL NOT BE UTILIZING ALL SPACES DURING ONE TIME)
Ratio actual occupancy = 25' max. common path of egress travel: actual = 100'
= Two means of egress required
35 occupants < 50' door may swing into space (1008.1.2)
Exit door requirements = 1/3 of total distance (100' level) = 30 feet (1015.2.1.c. #2)

NUMBER OF EXITS FROM BUILDING (table 1019.1 & 1019.2): 2 required
COMMON PATH OF EGRESS TRAVEL (1014.2.2)
0' SLEEPING ROOMS (SEE EXCEPTIONS UNDER 1014.2.2)
100' NON-SLEEPING ROOMS, ONE INTERVENING ROOM OR INSIDE SUITE
50' NON-SLEEPING ROOMS OUTSIDE OF SUITE
75' GROUP A OCCUPANCY, PATH (1014.3)
EXIT ACCESS TRAVEL DISTANCE (table 1016.1) 200'
FIRE RATING OF CORRIDORS (table 1017.1) 0 hrs (w/sprinkler system)
DEAD END CORRIDOR LENGTH: (sec. 1017.3) 20'
EGRESS WIDTH (table 1005.1, note min. width is 44" 44"

PLUMBING SYSTEMS (CHAPTER 22)
MINIMUM PLUMBING FIXTURES (table 2002.1)
Note: sinks & lavatories for employees located outside scope of work.
Note: wing will occupy a maximum of 20 residents (1 single room, 8 double rooms)

Fixture	Minimum Required		Provided	
	Men	Women	Men	Women
water closet	1/room	1/room	1/room	1/room
urinal	1/room	1/room	1/room	1/room
lavatories	1/room	1/room	1/room	1/room
drinking fountain	1/100			1
service sinks	1		2	1
showers	1/15			



EVERGREEN TERRACE NURSING HOME MEMORY CARE WING REMODEL

2801 HIGHWAY 169 SOUTH
GRAND RAPIDS, MINNESOTA

project # 06045.0
date 5-7-07
file name 06045.0-A0.1 TITLE SHEET & CODE REVIEW
drawn by TLE
checked by RJL
name REBECCA LEWIS, AIA
reg. # 23539
sign date MAY 7, 2007

I hereby certify that this plan, specification, or report was prepared by me or under my direct supervision and that I am a duly Licensed Architect under the laws of the State of Minnesota.

signature *Rebecca Lewis*

mark revision/issue date

TITLE SHEET & CODE REVIEW

sheet title
sheet number
A0.1

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