



KINETICS NOISE CONTROL, INC
 6300 IRELAN PLACE
 DUBLIN, OHIO 43017
 Ph 614-889-0480. FAX 614-889-0540

SEISMIC CHECKLIST (All except IBC and TI-809-04)

GENERAL DATA: (All items in this box must be completed)

Note: "Not Specified" indicates that there is nothing "special" in the project specification relating to this subject and that the project can be designed to default code values.

Project & Zip Code if U.S., Otherwise Address: _____ **Date:** _____

Seismic Code: SBC UBC BOCA UBC (Calif) NBC-Canada

Code Year of Issue: 1993 1994 1995 1996 1997 2005

Indicate Seismic Acceleration Value if specified: A_v _____ Z _____ v _____ S_a _____

Indicate specified Soil Type:

A (Hard Rock) B (Rock) C (Dense Soil/Soft Rock) D (Stiff Soil)
 E (Soft Soil) F (Other-Back fill, etc) (or) Not Specified

Provide detail data on soil conditions if E or F is selected

Roof Elevation (from grade): _____ ft/m _____ floors (Indicate feet/meters as well as floors)

Indicate the specified Building Use/ Importance Factor: _____ (or) Not Specified

Total Building Occupancy: _____

Indicate any other specified parameters including:

Minimum Seismic Acceleration "G"s: _____ Horiz. _____ Vert. (or) Not Specified

Minimum Safety Factor: _____ (or) Not Specified

Max diameter of unrestrained Hazardous Piping _____ (or) Not Specified

Max area for unrestrained Ductwork (I_p = 1.0) _____ (I_p = 1.5) _____ (or) Not Specified

Other Special Requirements _____ (or) Not Specified

ADDITIONAL DATA:

1997 UBC

If Z = .4, provide distance to nearest fault and source type.

- <= 2 km > 2 km, < 10 km > 10 km
- A (Frequent Lg. Magnitude) B (Other) C (Rare Sm. Magnitude)

Failure of This Equipment Will Result in a Life Safety Issue: Yes No

Soil Type:

- S_a (Hard Rock) S_b (Rock) S_c (Dense Soil/Soft Rock)
- S_d (Stiff Soil) S_e (Soft Soil) S_f (Other-Back fill, etc)

Provide detail data on soil conditions if S_f selected.

EQUIPMENT DATA:

Tag	Qty	Importance Factor, I _p	Operating Weight	Equipment Elevation	Is it Over 10 HP	Mounted to Floor or Suspended	Desired Isolator Type (or Non-Isolated)	Attached to: Steel/ Concrete/ Wood Structure
<i>Example 1</i>	1	1.5	1500lbs	3 rd Flr	Yes	Floor	FHS	Concrete

Include a drawing showing equipment overall dimensions and C.G. location for each Tag

Responsible party to sign and date below:

I take responsibility for the accuracy of this data _____ **Date** _____