

Contact Person: Ann-Marie Rimple, Administrator

Ann's House - Oakwood Assisted Living Facility
4407 Millwood Road
Spring Hill, FL 34608
Phone: 352-556-5357

GENERATOR ADDENDUM TO ANN'S HOUSE - OAKWOOD ALF COMPREHENSIVE EMERGENCY MANAGEMENT PLAN

Pursuant to Emergency Rule 58Aer 17-1, entitled Procedures Regarding Emergency Environmental Control for Assisted Living Facilities," this addendum is supplied as an addendum to my current Comprehensive Emergency Management Plan.

Scope of Addendum: This addendum is intended to address the implementation of a plan to ensure ambient temperature will be maintained at or below 80 degrees fahrenheit for a minimum of ninety six (96) hours in the event of the loss of electrical power to our assisted living facility.

1. The area of the facility to be kept below 80 degrees (See Floor Plan) consists of one (1) apartment of 1000 sq. feet, and one of 1200 sq feet.
2. Both areas will be cooled by using two Generac 22.00 KW with ATS switches. The Units will provide power for A/C equipment, lightning, 120/240V power for refrigeration and existing equipment within the center unit of the building.

Procedures During the Loss of Power

3. If power is lost to the building, staff will make rounds on all residents to ensure they have a light source and check on the safety of all residents. Staff on Duty will perform the following:
 - A. Notify the power company of the loss of electrical service by calling Withalacocohee Electric at 352-596-4000.
 - B. Staff will check all breaker panels and reset if necessary
 - C. Staff will contact the Administrator/Manager, additional staff may be called in to assist.
 - D. If power remains off for longer than 15minutes, staff will determine whether residents would like to come to an area of the building where temperature will be between 78 - 80 degrees
 - E. If the temperature is not an issue, staff should regularly patrol the building every 20 minutes for wellness checks, determine the needs for assistance for residents, the smell of smoke or evidence of fire
 - F. If power remains off for a significant length of time and temperatures reaches 80

Degrees in the common area of the building designated for resident cooling in a Power outage, staff must engage the generator if it does not engage automatically.

4. How many residents and staff do you plan to locate in this cooled space/area
The cooled areas consists of five (5) bedrooms. Residents in their rooms will remain in said bedrooms (7 residents) Eight residents and staff will occupy the common areas as indicated on the plan. For sleeping residents and staff will use The sofa, recliners, and inflated mattresses/cots which are on site.

5. Where is the generator located.
The generators will be located at the side of unit 4401 due to its proximity to the electrical panel

6. Describe the fuel type you will need to operate the generators
The fuel to be used is liquid propane, which consists of two large tanks each holding 250 gallons of liquid propane for fours days (96 hours)

7. How is the generator, fuel supply, and all equipment protected from debris and any Impact?

Generac generators are self contained in that they are enclosed, therefore protected from debris. All units, fuel and the generator will be anchored onto a concrete slab

8. Provide a maintenance schedule for both the generator and cooling system to include minimal monthly test of operation of 30 minutes or more under at least 30 percent of the rated capacity.

A maintenance log will be developed with signature and run time columns. The units will be tested once monthly and allowed to run at the manufacturers suggested capacity load

9. State the procedure of how your facility will refuel after an emergency. If a fuel agreement is established, please provide the agreement.

A fuel agreement is not entered into at this time. On November 7th, such An agreement will be entered into with Suburban Propane, at such a time The agreement will be forwarded. Suburban has notified writer that prior to an emergency they will call and once the tank is 20% they will top it off.

10. Provide a training procedure and schedule to ensure staff is aware of how to operate The emergency power to the facility.

Upon installation the installer will be providing training. Thereafter training will be provided each time the generator is being tested until all staff is proficient in it's operation

Training & Resource for Generator

Gaudette Electric Inc.

352-628-3064

Suburban Propane

727-286-9181

Floor Plan



New doors

Add 5 additional beds / mattresses

a nook costed

extra sleeping area

a 2nd dining costed

10th + 11th

Permit Number _____
Key Number 00625700

NOTICE OF COMMENCEMENT

THIS AREA IS RESERVED FOR CLERK OF THE COURT CERTIFICATION

State of Florida
County of Hernando

THE UNDERSIGNED hereby gives notice that improvements will be made to certain real property, and in accordance with Section 713. of the Florida Statutes, the following information is provided in this NOTICE OF COMMENCEMENT.

1. Description of property (legal description): SPRING HILL UNIT 17 BLK 1148 LOT 5
a) Street (job) Address: 4407 MILLWOOD RD SPRING HILL, FL 34608
2. General description of improvements: SUPPLY, INSTALL & HOOK UP (2) 22KW GENERATOR & (2) ATS

3. Owner Information or Lessee information if the Lessee contracted for the improvement:
a) Name and address: ANN'S HOUSE INC. 4407 MILLWOOD RD SPRING HILL, FL 34608
b) Name and address of fee simple titleholder (if different than Owner listed above) N/A
c) Interest in property: FEE SIMPLE

4. Contractor Information
a) Name and address: GAUDETTE ELECTRIC, INC P O BOX 2820 HOMOSASSA SPRINGS, FL 34447
b) Telephone No.: 352-628-3064 Fax No.: (optional) 352-628-7701

5. Surety (if applicable, a copy of the payment bond is attached)
a) Name and address: N/A
b) Telephone No.: _____
c) Amount of Bond: \$

6. Lender
a) Name and address: N/A
b) Telephone No.: _____

7. Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by Section 713.13 (1) (a) 7., Florida Statutes:

- a) Name and address: _____
b) Telephone No.: _____ Fax No.: (optional) _____ of _____

8. a. In addition to himself or herself, Owner designates _____ of _____ to receive a copy of the Lienor's Notice as provided in Section 713.13 (1) (b), Florida Statutes.
b) Phone Number of Person or entity designated by Owner: _____

9. Expiration date of notice of commencement (the expiration date may not be before the completion of construction and final payment to the contractor, but will be 1 year from the date of recording unless a different date is specified): _____, 20____

WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

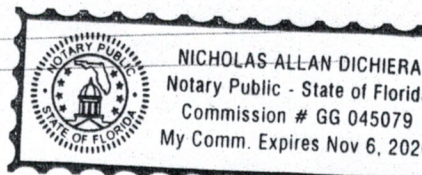
_____ (Signature of Owner or Lessee, or Owner's or Lessee's (Authorized Officer/Director/Partner/Manager))
 Ann-Marie Rimple (Print Name and Provide Signatory's Title/Office)

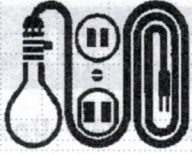
State of Florida County of Pasco

The foregoing instrument was acknowledged before me this 17 day of October, 2017
by Ann-Marie Rimple as Self
(Name of Person) (type of authority, ... e.g. officer, trustee, attorney in fact)
for _____ (name of party on behalf of whom instrument was executed).

Personally Known Produced ID
Type of ID USA Passport

Notary Signature _____
Print name Nicholas Dechene





Bid Proposal

Installation of 2 - 22Kw LP Generators & ATS Units

GAUDETTE ELECTRIC, INC.

6380 S. TEX POINT
HOMOSASSA, FLORIDA 34448
Phone: 352-628-3064 ext. 101
Website: WWW.GAUDETTEELECTRIC.COM

Ann's House - ALF
4407 Millwood Road
Spring Hill, Florida 34608

3 October 2017

Installation of 2 - 22Kw LP Generators & ATS Units
4407 Millwood Road
Spring Hill, Florida 34608

Attention: Ann-Marie Rimple

Re: Proposal for complete generator system.

We are pleased to quote the Electrical Generator Installation for the (2) 22.00 kW with ATS Switches at the above referenced project with the following qualifications and exclusions:

Scope: Installation of (2) complete generator systems on 2 separate meter services providing power to the center core of the existing structure. This will provide power for A/C equipment, Lighting, 120/240v power for refrigeration and existing equipment within the center unit of the building only.

Qualifications:

1. Permit Fees, Recording Fees, Site and Electrical Drawing and all necessary documents for generator installation permit.
2. All wiring to meet the requirements of current Local & National Electrical Code.
3. All units are backed by GENERAC 5-Year Standard Limited Warranty.
4. Units to be anchored down when installed on new concrete foundations.
5. Installation of (2) 525 amp 26R battery at time of startup.
6. Fuel System, LP Gas to be provided by owner.
7. Coordination between Power Company and Building Dept to be handled by Gaudette Electric to keep owner power outage as short as possible.
8. Gaudette Electric, Inc. to return after LP gas is installed to perform Generac Factory Certified Start-up.

Exclusions:

1. Utility Company Charges if any.
2. Fuel installation to be provided by Owner.
3. No special requirements by ARCH known or included within this installation.

Pricing:

Proposal Amount: \$19,632.13



Gaudette Electric, Inc.

P.O. Box 2820
Homosassa Springs, FL 34447

License # EC0001149

INVOICE NO. 43067

(352) 628-3064 • Fax 628-7701

Bill to		Account # 019350	
Address		Job # 288702	
Phone		C.C. 4500	
Billing Date		Terms	
JOB			
Customer Name		Ticket #	
Location		Employee #	
Phone			
Email			
DESCRIPTION OF WORK		AMOUNT	
Deposit for			
(2) 22 KW Generator			
4 (2) 200 AMP ATS			
TOTAL INCLUDES PRICE OF MATERIALS USED		PAID	
LABOR		OCT 12 2017	
DATE		CK#S 2186190809/	
HOURS			
OT			
RATE			
AMOUNT		2186190810	
1st HR.			
Work Ordered By		Date Completed	
Signature		TOTAL AMOUNT DUE 2,000.00	

A finance charge of 1.5% per month will be added to your account 30 days after billing date.



Thank You



