



Temporary Occupancy Policy for Phased Projects

Facility Name and City _____

Project Name _____ IDPH Number _____

This temporary occupancy policy was developed in order to enable a facility to occupy limited areas prior to the completion of the project. In order to receive permission for the partial occupancy from the Illinois Department of Public Health (IDPH), the following certifications from the architect /engineer of record must be submitted and deemed complete. **Submissions are to be single sided. Double sided submissions will be required to be resubmitted.**

Phase _____ of _____

1. Detailed narrative and small graphic plan indicating area(s) for temporary occupancy, areas currently occupied, future areas of occupancy. Indicate the type of room (e.g., patient, procedure, lab, waiting) and the location (e.g., second floor, north wing, specific building).
2. The architect/engineer's signed certification that all necessary communication, fire protection systems and other items affecting the health and safety of the occupants are substantially complete and fully operational for the area requested.
3. A signed letter from the architect/engineer certifying that all means of egress (temporary and permanent) are complete and usable and that the entire project is completed in a manner that will not constitute a health, safety or nuisance hazard to the occupants in a partially completed project.
4. Signed certification from the mechanical and electrical systems installer that the mechanical and electrical systems are functioning properly and in accordance with the state's licensing requirements for hospitals, ambulatory surgical treatment centers, or nursing homes. Testing and certification documents for any system in the requested area of temporary occupancy to include but not limited to:

<input type="checkbox"/> Sprinkler acceptance and hydrostatic test report	<input type="checkbox"/> Nurse call system
<input type="checkbox"/> Emergency generator initial 4-hour acceptance test	<input type="checkbox"/> Fire pump testing
<input type="checkbox"/> Other fire extinguishment systems	<input type="checkbox"/> Range hood and duct systems, NFPA 96
<input type="checkbox"/> Complete copy of the third party certification per NFPA 99, for the Non-Flammable Medical Gas and Vacuum Systems	
5. Submit the following matrices that are applicable to the work completed in the area of temporary occupancy request.

<input type="checkbox"/> 4A U.L. Assembly Rating	N/A, why?	_____
<input type="checkbox"/> 4B Through Wall/floor penetrations	N/A, why?	_____
<input type="checkbox"/> 4C Interior Finishes	N/A, why?	_____
<input type="checkbox"/> 4E Smoke and Fire Dampers	N/A, why?	_____
<input type="checkbox"/> 4F Air balancing matrix	Air balancing reports for the area(s) involved in the request for temporary occupancy must be attached and on the Department's matrix. Electronic signatures are not acceptable.	
	N/A, why?	_____
<input type="checkbox"/> NFPA 72 Fire Alarm System, Record of Completion	N/A, why?	_____
6. Signed certification letter that the air balancing is completed and clean filters are installed in the air handling units.
7. Provide a current occupancy phasing schedule identifying all phases to be occupied along with the estimated occupancy dates.
8. A copy of the facility's Life Safety interim measures plan.

After acceptance of the certifications, the Department will determine if an on-site inspection is required prior to the issuance of an occupancy. This decision is made on a case by case basis. Permission to occupy portions of a partially completed project does not relieve the owner and architect from full compliance with IDPH standards when the final inspection is made.

The final phase of a project constitutes the completion for the entire project and requires the complete Certifications for Request of Inspection to be submitted will all requested certifications for the entire project.