Georgia Rules and Regulations
Administrative Bulletin for May 2025

OFFICE OF SECRETARY OF STATE
ADMINISTRATIVE PROCEDURE DIVISION
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Final rules filed with the Georgia Secretary of State during the month of *May 2025:*

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Department 45. GEORGIA COUNCIL ON AMERICAN INDIAN CONCERNS

Chapter 45-2. COUNCIL PROCEDURES

45-2-.04 Recommended Guidelines Concerning State Recognition of Indian Tribes

(1) The Georgia Council on American Indian Concerns will use these guidelines in its advisory deliberations and issuance of any subsequent report recommending for or against acknowledgement of Indian groups within the State of Georgia.

Indian groups seeking recognition by the Georgia General Assembly are encouraged to prepare a formal petition for recognition using a format suggested by the Georgia Council on American Indian Concerns. Although not presently required by law, the Georgia General Assembly is encouraged to seek the advice of the Georgia Council on American Indian Concerns prior to final consideration of any recognition legislation.

(a) **Historicity:** The petitioning group should demonstrate a direct genealogical connection to one of the American Indian Tribes, bands, groups, or communities that has been documented historically with reasonable certainty as having inhabited lands within the present boundaries of the State of Georgia for a period of at least forty years prior to the Removal Era.

(b) **Membership:** The petitioning group shall possess formal membership rolls and written standards for membership that are based on unbroken genealogical descent from one of the American Indian Tribes, bands, groups, or communities indigenous to Georgia, as defined in criterion #1.

(c) **Government:** The petitioning group should be able to demonstrate that it is a distinct cultural entity capable of self-regulation by documenting the existence and function of its governmental and social institutions and traditions.

(d) **Geographical Area:** A substantial portion of the members of the petitioning group should presently inhabit a defined area, and its tribal headquarters should be located within the State of Georgia.

(e) **Ethnic Identity:** The members of the petitioning group should be a community that is generally viewed as American Indian and culturally distinct from all other communities surrounding it.

(f) **Exclusions:** The petitioning group shall not be considered if it falls into one of the following categories:

1. The petitioning group is limited to a single family;

2. It is of recent origin;

3. It is determined to be a splinter group or political faction that has separated from the main body of a tribe, band, group, or organized Indian Community previously recognized by the State of Georgia;

4. There is reasonable evidence that the petitioning group was "self-created" for the purpose of improperly gaining American Indian status;

5. The majority of the members of the petitioning group are also members of other American Indian tribes, bands, groups, or communities.

Cite as Ga. Comp. R. & Regs. R. 45-2-.04

AUTHORITY: O.C.G.A. § 44-12-283.2**.**

HISTORY: Original Rule entitled "Recommended Guidelines Concerning State Recognition of Indian Tribes" adopted. F. May 27, 2025; eff. June 16, 2025.

Department 111. RULES OF DEPARTMENT OF COMMUNITY HEALTH

Chapter 111-8. HEALTHCARE FACILITY REGULATION

Subject 111-8-62. PERSONAL CARE HOMES

111-8-62-.03 Definitions

In these rules, unless the context otherwise requires, the words, phrases and symbols shall mean the following:

(a) "Abuse" means any intentional or grossly negligent act or series of acts or intentional or grossly negligent omission to act which causes injury to a resident, including but not limited to, assault or battery, failure to provide treatment or care, or sexual harassment of the resident.

(b) "Activities of daily living" means bathing, shaving, brushing teeth, combing hair, toileting, dressing, eating, laundering, cleaning private living space, managing money, writing letters, shopping, using public transportation, making telephone calls, grooming, obtaining appointments, engaging in leisure and recreational activities, or other similar activities.

(c) "Administrator" means the manager designated by the governing body as responsible for the day-to-day management, administration and supervision of the personal care home, who may also serve as the on-site manager and responsible staff person except during periods of his or her own absence.

(d) "Ambulatory Resident" means a resident who has the ability to move from place to place by walking, either unaided or aided by prosthesis, brace, cane, crutches, walker or hand rails, or by propelling a wheelchair or scooter; who can respond to an emergency condition, whether caused by fire or otherwise, and escape with minimal human assistance such as guiding a resident to an exit, using the normal means of egress.

(e) "Applicant" means any of the following:

1. When the personal care home is owned by a sole proprietorship, the individual proprietor shall be the applicant for the license, complete the statement of responsibility and serve as the licensee.

2. When the personal care home is owned by a partnership, the general partners shall be the applicant for the license, complete the statement of responsibility and serve as the licensee.

3. When the personal care home is owned by an association or limited liability company (LLC), the governing body of the association or LLC shall authorize the application for the license and complete the statement of responsibility and the association shall serve as the licensee.

4. When the personal care home is owned by a corporation, the governing body of the corporation shall authorize the application for the license and complete the statement of responsibility and the corporation shall serve as the licensee.

(f) "Assisted living care" means the specialized care and services provided by an assisted living community which includes the provision of personal services, the administration of medications by a certified medication aide, the provision of assisted self-preservation, and the provision of limited nursing services.

(g) "Certificate" means a certificate issued by the Department to operate a memory care center in a licensed assisted living community or personal care home.

(h) "Chemical Restraint" means a psychopharmacologic drug that is used for discipline or convenience and is not required to treat medical symptoms.

(i) "Department" means the Georgia Department of Community Health operating through the Division of Healthcare Facility Regulation.

(j) "Direct care staff person" means any employee, facility volunteer or contract staff who provides to residents any personal services, including but not limited to, medication administration or assistance, assistance with ambulation and transfer, and essential activities of daily living such as eating, bathing, grooming, dressing, and toileting.

(k) "Disabled individual" means an individual that has a physical or mental impairment that substantially limits one or more major life activities and who meets the criteria for a disability under state or federal law.

(l) "Employee" means any person, other than a director, utilized by a personal care home to provide personal services to any resident on behalf of the personal care home or to perform at any facilities of the personal care home any duties which involve personal contact between that person and any paying resident of the personal care home.

(m) "Exploitation" means an unjust or improper use of another person or the person's property through undue influence, coercion, harassment, duress, deception, false representation, false pretense, or other similar means for one's own personal advantage.

(n) "Governing Body" means the person or group of persons as defined in Georgia law who maintain and control the home and who are legally responsible for the operation of the home.

(o) "Health services" means the specialized assistance that may be provided by or at the direction of either licensed healthcare professionals, such as doctors, nurses, physical therapists or through licensed healthcare programs, such as home health agencies, hospices and private home care providers to address health needs that the home is not authorized by law or regulations to provide.

(p) "Injury" as used in the definition of abuse means a wrong or harm caused by an individual to a resident which is manifested by a physical or behavioral reaction or change in the appearance or actions of the resident, such as, but not limited to, reddened or bruised skin not related to routine care, crying, startling or cowering reaction by the resident and malnutrition or pressure ulcers, such as skin breakdowns, for which the home has not provided proper care.

(q) "Legal Surrogate" means a duly appointed person who is authorized to act, within the scope of the authority granted under the legal surrogate's appointment, on behalf of a resident who is adjudicated or certified incapacitated. The legal surrogate may act on a resident's behalf where a resident has not been adjudicated as incapacitated provided that the action is consistent with the resident's wishes and intent and is within the scope of the authority granted. Where such authority is exercised pursuant to a Power of Attorney executed by a resident, the facility must maintain a copy of this document in the resident's files. The residents duly appointed legal surrogate(s) shall have the authority to act on the resident's behalf as established by written applicable federal and state of Georgia law and shall be entitled to receive information relevant to the exercise of his or her authority. No member of the governing body, administration, or staff of the personal care home or affiliated personal care homes or their family members may serve as the legal surrogate for a resident.

(r) "Limited nursing services" means the assessment of the physical, mental, and emotional status to determine the appropriate level of care for an individual; the performance of health maintenance activities, as defined in division (a)(9)(C)(ii) of Code Section 43-26-12; and the provision of any nursing care within the direct care staff person's scope of practice that can be completed within seven days or intermittently.

(s) "Medical alert system" means any device or combination of devices used to detect and immediately communicate that an individual is experiencing a medical emergency. Such device or combination of devices must be approved for their effectiveness by the department in its sole discretion.

(t) "Medical services" means services which may be provided by a person licensed pursuant to Article II of Chapter 34 of Title 43 of the Official Code of Georgia Annotated. or appropriately licensed and supervised nurse practitioners and physicians' assistants.

(u) "Memory care services" means the additional watchful oversight systems, program, activities and devices that are required for residents who have cognitive deficits which may impact memory, language, thinking, reasoning, or impulse control, and which place the residents at risk of eloping, i.e., engaging in unsafe wandering activities outside the home.

(v) "Memory care center" means the freestanding or incorporated specialized unit within a personal care home or assisted living community that either:

(i) holds itself out as providing additional or specialized care to persons with diagnoses of probably Alzheimer's or other dementias or with cognitive deficits that may place the resident at risk; or

(ii) charges higher rates for care for residents with Alzheimer's or other dementias than for care to other residents.

(w) "Non-Family Adult" means a resident 18 years of age or older who is not related by blood within the third degree of consanguinity or by marriage to the person responsible for the management of the personal care home or to a member of the governing body.

(x) "Nursing services" means those services which may be rendered by a person licensed pursuant to Articles I and 2 of Chapter 26 of Title 43 of the Official Code of Georgia Annotated.

(y) "On-site manager" means the administrator or person designated by the administrator as responsible for carrying on the day-to-day management, supervision, and operation of the personal care home, who may also serve as the responsible staff person except during periods of his or her own absence.

(z) "Owner" means any individual or any person affiliated with a corporation, partnership, or association with 10 percent or greater ownership interest in the facility providing care to persons under the license of the facility in this state and who:

1. purports to or exercises authority of the owner in a facility;

2. applies to operate or operates a facility;

3. maintains an office on the premises of a facility;

4. resides at a facility;

5. has direct access to persons receiving care at a facility;

6. provides direct personal supervision of facility personnel by being immediately available to provide assistance and direction during the time such facility services are being provided; or

7. enters into a contract to acquire ownership of a facility.

(aa) "Permit" or "Regular Permit" means the authorization granted by the Department to the governing body to operate a Personal Care Home.

(bb) "Personal Care Home", "home" or "facility" means any dwelling, whether operated for profit or not, which undertakes through its ownership or management to provide or arrange for the provision of housing, food service, and one or more personal services for two or more adults who are not related to the owner or administrator by blood or marriage.

(cc) "Personal Services" includes, but is not limited to, individual assistance with or supervision of self-administered medication, assistance with ambulation and transfer, and essential activities of daily living such as eating, bathing, grooming, dressing, and toileting.

(dd) "Physician" means an individual who is currently licensed to practice medicine in the State of Georgia. For purposes of these rules, it shall be acceptable for any services required to be performed by a physician to be performed by any other licensed medical professional (i.e., Nurse Practitioner, Physician Assistant, etc.) who is permitted to provide such services under applicable state scope of practice rules and regulations.

(ee) "Proxy caregiver" means an unlicensed person or a licensed health care facility that has been selected by a disabled individual or a person legally authorized to act on behalf of such individual to serve as such individual's proxy caregiver and meets the requirements contained in the Rules and Regulations for Proxy Caregivers Used in Licensed Healthcare Facilities, Chapter 111-8-100.

(ff) "Physical Restraints" are any manual or physical device, material, or equipment attached or adjacent to the resident's body that the individual cannot remove easily which restricts freedom or normal access to one's body. Physical restraints include, but are not limited to, leg restraints, arm restraints, hand mitts, soft ties or vests, and wheelchair safety bars. Also included as restraints are practices employed by the home which function as a restraint, such as tucking in a sheet so tightly that a bedbound resident cannot move, bedrails, or chairs that prevent rising, or placing a wheelchair-bound resident so close to a wall that the wall prevents the resident from rising. Wrist bands or devices on clothing that trigger electronic alarms to warn staff that a resident is leaving a room do not, in and of themselves, restrict freedom of movement and should not be considered as restraints.

(gg) "Plan of Correction" means the written plan prepared in response to cited rule violations which identify by date certain the specific actions that will be taken by the personal care home to come into compliance with applicable rules.

(hh) "Representative" means a person who voluntarily, with the resident's written authorization, may act upon resident's direction with regard to matters concerning the health and welfare of the resident, including being able to access personal records contained in the resident's file and receive information and notices pertaining to the resident's overall care and condition. This written authorization may take the form of an advance directive.

(ii) "Resident" means any non-family adult receiving or requiring personal assistance and residing in a personal care home.

(jj) "Responsible Staff Person" means the employee designated by the administrator or on-site manager as responsible for supervising the operation of the home during periods of temporary absence of the administrator or on-site manager.

(kk) "Self-administration of medications" or "self-administered medications" means those prescription or over-the-counter drugs that the resident personally chooses to ingest or apply where the resident has been assessed and determined to have the cognitive skills necessary to articulate the need for the medications and generally knows the times the medications are to be taken, and physical characteristics of medications to be taken.

(ll) "Self-preservation" means the ability to respond to an emergency condition, whether caused by fire or otherwise, and escape the emergency without physical, hands-on assistance from staff. The resident may move from place to place by walking, either unaided or aided by prosthesis, brace, cane, crutches, walker or hand rails, or by propelling a wheelchair or scooter.

Cite as Ga. Comp. R. & Regs. R. 111-8-62-.03

AUTHORITY: O.C.G.A. §§ 31-2-7**,** 31-2-8**,** 31-2-9**,** 31-7-2.1**,** 31-7-1 **et seq.,** 31-8-80 **et seq.**

HISTORY: Original Rule entitled "Definitions" adopted. F. Nov. 19, 2009; eff. Dec. 9, 2009.

Amended: F. Dec. 19, 2012; eff. Jan. 8, 2013.

Amended: F. Apr. 16, 2018; eff. May 6, 2018.

Amended: F. Feb. 28, 2020; eff. Mar. 19, 2020.

Amended: F. Aug. 24, 2021; eff. Sept. 13, 2021.

Amended: F. May 1, 2025; eff. May 21, 2025.

111-8-62-.04 Applicability of Rules and Exemptions

(1) These rules apply to all personal care homes unless the facility is specifically exempted as provided in paragraph (2) of this rule.

(2) These regulations do not apply to the following facilities:

(a) Boarding homes or rooming houses which provide no personal services other than lodging and meals.

(b) Facilities offering temporary emergency shelter, such as those for the homeless and victims of family violence.

(c) Other facilities, homes or residences licensed by the Department which have not been classified as personal care homes, e.g. assisted living communities, hospices, traumatic brain injury facilities, drug abuse treatment facilities.

(d) Facilities providing residential services for federal, state or local correctional institutions under the jurisdiction of the criminal justice system.

(e) Facilities regulated by the Department of Behavioral Health and Developmental Disabilities.

(f) Host homes as defined in O.C.G.A. § 37-1-20(18).

(g) Group residences organized by or for persons who choose to live independently or who manage their own care and share the cost of services including but not limited to attendant care, transportation, rent, utilities and food preparation.

(h) Charitable organizations providing shelter and other services without charging any fee to the resident.

(i) Any separate and distinct dwelling which is classified by the Department as a community living arrangement subject to the Rules and Regulations for Community Living Arrangements, Chapter 290-9-37. A facility classified as a Community Living Arrangement cannot be operated on the same premises as a personal care home.

(j) Medical foster homes regulated by the U.S. Department of Veterans Affairs.

Cite as Ga. Comp. R. & Regs. R. 111-8-62-.04

AUTHORITY: O.C.G.A. §§ 26-5-1**,** 31-2-4**,** 31-2-7**,** 31-7-1 **et seq.,** 37-1-20(18)**.**

HISTORY: Original Rule entitled "Exemptions" adopted. F. Nov. 19, 2009; eff. Dec. 9, 2009.

Amended: New title of "Applicability of Rules and Exemptions". F. Dec. 19, 2012; eff. Jan. 8, 2013.

Amended: F. Aug. 24, 2021; eff. Sept. 13, 2021.

Amended: F. May 1, 2025; eff. May 21, 2025.

111-8-62-.10 Staffing

(1) Homes licensed for less than 25 beds must maintain a minimum on-site staff to resident ratio of one awake direct care staff person per 15 residents during waking hours and one awake direct care staff person per 25 residents during non-waking hours where the residents have minimal care needs. Homes licensed for 25 or more beds must maintain an average monthly minimum on-site staff to resident ratio of one awake direct care staff person per 15 residents during waking hours and one awake direct care staff person per 20 residents during non-waking hours. Average monthly minimum staffing levels shall be calculated and documented by the home using methods and forms specified by the department. Notwithstanding the above requirements, all homes must staff above these minimum on-site staff ratios to meet the specific residents' ongoing health, safety and care needs.

(a) Staff, such as cooks and maintenance staff, who do not receive on-going direct care training and whose job duties do not routinely involve the oversight or delivery of direct personal care to the residents, must not be counted towards these minimum staffing ratios. Personnel who work for another entity, such as a private home care provider, hospice, or private sitters cannot be counted in the staff ratios for the home.

(b) At least one administrator, on-site manager, or a responsible staff person must be on the premises 24 hours per day and available to respond to resident needs, with a minimum of one staff person per occupied floor. Homes licensed for 25 beds or more must ensure that at least two on-site administrators or on-site direct care staff persons are present on the premises at all times with at least one staff person on each occupied floor and that person shall be required to remain posted on their designated floor at all times; provided, however, that the staff person posted on the designated floor may move about the premises as necessary if the personal care home has implemented a medical alert system and each resident has been offered a wearable device that connects to such system when activated to alert an administrator or direct care staff person of a medical emergency.

(c) Residents must be supervised consistent with their needs.

(2) All staff, including the administrator or on-site manager, who offer direct care to the residents on behalf of the home, must maintain an awareness of each resident's normal appearance and must intervene, as appropriate, if a resident's state of health appears to be in jeopardy.

(3) For purposes of these regulations, a resident must not be considered a staff person.

(4) All homes must develop and maintain accurate staffing plans that take into account the specific needs of the residents and monthly work schedules for all employees, including relief workers, showing planned and actual coverage for each day and night.

(5) The home must retain the completed staff schedules for a minimum of one year.

(6) Sufficient staff time must be provided by the home such that each resident:

(a) Receives treatments, medications and diet as prescribed.

(b) Receives proper care to prevent pressure ulcers and contractures.

(c) Is kept comfortable and clean.

(d) Is treated with dignity, kindness, and consideration and respect.

(e) Is protected from avoidable injury and infection.

(f) Is given prompt, unhurried assistance if she or he requires help with eating.

(g) Is given assistance, if needed, with daily hygiene, including baths, oral care.

(h) Is given assistance with transferring when needed.

(7) The administrator, on-site manager, or staff person must not be under the influence of alcohol or other controlled substances while engaged in any work-related activity on behalf of the home.

(8) A home licensed to serve more than 24 residents must ensure that staff wear employee identification badges which are readily visible.

(9) Medical Alert Systems. Homes utilizing medical alert systems to allow on-site staff to move about as specified in Rule 111-8-62-.10(1)(b) must meet the following requirements:

(a) The medical alert system must include a wearable sensor device that enables the resident to request help when needed.

(b) The home may encourage, but not require, residents to wear the sensor device and must ensure that residents who do not consistently wear the sensor device receive appropriate monitoring from staff.

(c) The wearable sensor device must be programmed to immediately notify appropriate staff, and to identify the specific resident or location from which the alert signal has been made, by:

(i) activating a portable electronic device worn by the administrator and/or a direct care staff person with an audible tone or vibration; or

(ii) sending a signal to a stationary electronic device located in a designated area monitored by staff.

(d) The home must establish policies and procedures which address the following requirements and must maintain documentation to demonstrate compliance with such policies and procedures:

(i) routine testing and maintenance of the medical alert system;

(ii) initial training for residents and staff on use of the system and additional training as needed;

(iii) procedures for electrical outages or severe weather events that include making more frequent rounds to check on residents if the system is not working, as well as testing the system following such events to ensure operability; and

(iv) a process for reviewing any documentation produced by the system for opportunities to enhance individualized care and service.

(e) The department may prohibit a home from using or relying on a medical alert system if the above requirements are not met.

Cite as Ga. Comp. R. & Regs. R. 111-8-62-.10

AUTHORITY: O.C.G.A. §§ 31-2-7**,** 31-2-9**,** 31-7-1 **et seq.,** 31-7-250 **et seq.**

HISTORY: Original Rule entitled "Personnel" adopted. F. Nov. 19, 2009; eff. Dec. 9, 2009.

Amended: New Title "Staffing". F. Dec. 19, 2012; eff. Jan. 8, 2013.

Amended: F. Aug. 24, 2021; eff. Sept. 13, 2021.

Amended: F. May 1, 2025; eff. May 21, 2025.

111-8-62-.16 Admission Agreement

(1) A written admission agreement must be entered into between the governing body and the resident. Such agreement must contain the following:

(a) A current statement of all fees and daily, weekly or monthly charges; any other services which are available on an additional fee basis, for which the resident must sign; a request acknowledging the additional cost; and the services provided in the home for that charge.

(b) A statement that residents and their representatives or legal surrogates must be informed, in writing, at least 30 days prior to any increase in established charges related to the provision of personal services and at least 60 days prior to any increase in charges for room and board.

(c) The resident's authorization and consent to release medical information to the home as needed.

(d) Provisions for the administrator or on-site manager's continuous assessment of the resident's needs, referral for appropriate services as may be required if the resident's condition changes and referral for transfer or discharge if required due to a change in the resident's condition.

(e) Provision for transportation of residents for shopping, recreation, rehabilitation and medical services, which must be available either as a basic service or on a reimbursement basis. Provision must also be made for access to emergency transportation at all times.

(f) A statement of the home's refund policy including but not limited to when a resident decides not to move into the home, dies, is transferred or discharged.

(g) A statement that a resident may not perform services for the home.

(h) A copy of the house rules, which must be in writing and also posted in the home. House rules must be consistent with residents' rights. House rules must include, but not be limited to, policies regarding the use of tobacco and alcohol, the times and frequency of use of the telephone, visitors, hours and volume for viewing and listening to television, radio and other audiovisual equipment, whether residents' personal pets or household pets are permitted and the use of personal property.

(i) For residents first admitted after the effective date of these rules, a statement disclosing whether the home permits the resident to hire independent proxy caregivers, sitters, or requires the purchase of such services from the home or approved providers.

(j) For residents first admitted after the effective date of these rules, the admission agreement must disclose how and by what level of staff medications are handled in the home. The agreement must also specify who is responsible for initial acquisition, refilling of prescribed medications and whether unit or multi-dose packaging of medications is required.

(k) An explanation of how and when residents must be discharged or transferred from the home.

(l) For residents first admitted after the effective date of these rules, an explanation of how social media, photos of residents and other media involving residents are handled.

(m) For residents first admitted after July 1, 2025, information on the medical alert system, if applicable, including a statement explaining that use of the system is optional for residents.

(2) Each resident, and representative, where applicable, prior to the execution of the admissions agreement, must have an opportunity to read the agreement. In the event that a resident is unable to read the agreement, the administrator or on-site manager must take special steps to assure communication of its contents to the resident.

(3) The resident and representative or legal surrogate, if any, must each be given a signed copy of the agreement and a copy signed by both parties (resident and administrator or on-site manager) must be retained in the resident's file and maintained by the administrator or on-site manager of the home.

Cite as Ga. Comp. R. & Regs. R. 111-8-62-.16

AUTHORITY: O.C.G.A. §§ 31-2-7**,** 31-2-9**,** 31-7-1**,** 31-7-2.1**,** 31-7-12**.**

HISTORY: Original Rule entitled "Admission" adopted. F. Nov. 19, 2009; eff. Dec. 9, 2009.

Amended: New Title "Admission Agreement." F. Dec. 19, 2012; eff. Jan. 8, 2013.

Amended: F. Apr. 16, 2018; eff. May 6, 2018.

Amended: F. May 1, 2025; eff. May 21, 2025.

111-8-62-.19 Additional Requirements for Certified Memory Care Centers

(1) A home must meet the additional requirements contained in rule 111-8-62-.19 where the home serves persons with probable diagnoses of Alzheimer's Disease or other dementia and does any of the following:

(a) Holds itself out as providing additional or specialized care to such residents; or

(b) Charges rates in excess of that charged other residents for the provision of additional or specialized care.

(2) Written Description. The home must develop an accurate written description of the memory care center that includes the following:

(a) A statement of philosophy and mission.

(b) How the services of the memory care center are different from services provided in the rest of the personal care home.

(c) Staffing, including job titles of staff who work in the center, staff training and continuing education requirements.

(d) Admission procedures, including screening criteria.

(e) Assessment and service planning protocol, including criteria to be used that would trigger a reassessment of the resident's status before the customary quarterly review.

(f) Staffing patterns, maintained within the center, including the ratio of direct care staff to resident for a 24-hour cycle.

(g) A description of the physical environment including safety and security features.

(h) A description of activities, including frequency and type, how the activities meet the needs of residents with dementia.

(i) The program's fee or fee structure for all services provided by the center.

(j) Discharge criteria and procedures;

(k) The procedures that will be utilized for handling emergency situations.

(l) The involvement of the center with families and family support programs.

(3) Disclosure of Description. A personal care home with a memory care center must disclose the written description of the center to:

(a) Any person upon request.

(b) The family or resident's representative before admission of the resident to the center.

(4) Physical Design, Environment, and Safety. The memory care center must be designed to accommodate residents with severe dementia or Alzheimer's Disease in a home-like environment which includes the following:

(a) Multipurpose room(s) for dining, group and individual activities which are appropriately furnished to accommodate the activities taking place.

(b) Secured outdoor spaces and walkways which are wheel chair accessible and allow residents to ambulate safely but prevent undetected egress.

(c) High visual contrasts between floors and walls and doorways and walls in resident use areas except for fire exits, door and access ways which may be designed to minimize contrast to conceal areas where the residents should not enter.

(d) Adequate and even lighting which minimizes glare and shadows.

(e) The free movement of the resident, as the resident chooses, between the common space and the resident's own personal space in a bedroom that accommodates no more than four residents.

(f) Individually identified entrances to residents' rooms to assist residents in readily identifying their own personal spaces.

(g) An effective automated device or system to alert staff to individuals entering or leaving the building in an unauthorized manner. A home need not use an automated alert for an exit door when the particular exit is always staffed by a receptionist or other staff member who views and maintains a log of individuals entering and leaving the home. If the exit door is not always staffed, then the home must have a system that activates an automated alert when the door is not attended;

(h) A communication system(s) which permit staff in the center to communicate with other staff outside the center and with emergency services personnel as needed; and

(i) A center or home which undergoes major renovation or is first constructed after December 9, 2009 must be designed and constructed in compliance with applicable state and local building and fire codes relevant to the center and the home.

(5) Staffing Requirements. The home must ensure that the center is staffed at all times with sufficient specially trained staff to meet the unique needs of the residents in the center. At a minimum, the home must provide the following staffing:

(a) One dementia trained direct care staff person for every 12 residents on-site during all waking hours and for every 15 residents on-site during all nonwaking hours based on a monthly average; provided, however, that such ratio is adequate to meet the needs of the residents;

(b) One registered professional nurse, licensed practical nurse, or certified medication aide on-site or available in the building at all times;

(c) Two direct care staff persons on-site at all times, which may include one licensed registered professional nurse, licensed practical nurse, or certified medication aide, if they remain on-site in the memory care center; and

(d) One registered professional nurse or licensed practical nurse on-site or available in the building at all times as follows:

(i) For memory care centers with one to 12 residents, a minimum of eight hours per week;

(ii) For memory care centers with 13 to 30 residents, a minimum of 16 hours per week;

(iii) For memory care centers with 31 to 40 residents, a minimum of 24 hours per week; or

(iv) For memory care centers with more than 40 residents, a minimum of 40 hours per week.

(6) Staff Training Requirements. The home shall ensure that all staff are properly trained initially and on an annual basis to provide safe, quality care to residents in the memory care center. Effective July 1, 2021, the memory care center shall meet the following training requirements:

(a) General Orientation. All staff, regardless of role, shall receive at least four (4) hours of dementia-specific orientation within the first thirty (30) days of working in the center. Such orientation shall include:

(i) Basic information about the nature, progression, and management of Alzheimer's and other dementias;

(ii) Techniques for creating an environment that minimizes challenging behavior from residents with Alzheimer's and other dementias;

(iii) Methods of identifying and minimizing safety risks to residents with Alzheimer's and other dementias; and

(iv) Techniques for successful communication with individuals with Alzheimer's and other dementias.

(b) Direct Care Orientation. All direct care staff shall receive initial orientation training within the first thirty (30) days of caring for residents independently that, at a minimum, includes:

(i) General training, to include:

(A) Development, updating, and implementation of comprehensive and individual service plans;

(B) Skills for recognizing physical or cognitive changes in the resident that warrant seeking medical attention;

(C) Residents' rights and identification of conduct constituting abuse, neglect, or exploitation;

(D) General infection control principles;

(E) Emergency preparedness training;

(F) Emergency first aid; and

(G) Cardiopulmonary resuscitation.

(ii) A minimum of sixteen (16) hours of specialized, competency-based training using forms specified by the department, to include, at a minimum:

(A) The nature of Alzheimer's and other dementias;

(B) The center's philosophy related to the care of residents with Alzheimer's and other dementias;

(C) The center's policies and procedures related to care of residents with Alzheimer's and other dementias;

(D) Common behavior problems characteristic of residents with Alzheimer's and other dementias;

(E) Positive therapeutic interventions and activities;

(F) Skills for maintaining the safety of the resident; and

(G) The role of the family in caring for residents with Alzheimer's and other dementias.

(iii) Staff members who have passed a memory care specialist competency exam established by the department, as documented by the home, may satisfy the training requirements of Rule 111-8-62-.19(6)(b)(ii) by completing a minimum of four (4) hours of training on the topics specified in Rule 111-8-62-.19(6)(b)(ii)(B) and (C).

(c) Ongoing Training. Direct care staff shall complete a minimum of eight (8) hours of specialized competency-based training in dementia care on an annual basis using forms specified by the department.

(d) Hospice Training for Certified Medication Aides Administering Morphine. The memory care center shall ensure that any medication aide(s) who will be administering liquid morphine to any hospice patient(s) residing in the center receive adequate training from a licensed hospice on the safe and proper administration of liquid morphine prior to such administration and on an annual basis thereafter. The memory care center shall maintain documentation of all training provided.

(e) Training Documentation. The memory care center shall maintain documentation reflecting course content, instructor qualifications, agenda, and attendance rosters for all training sessions provided.

(7) Special Admission Requirements for Memory Care Center Placement. Residents must have a Report of Physical Examination completed by a licensed physician, nurse practitioner or physician's assistant within 30 days prior to admission to the center on forms provided by Department. The physical examination must clearly reflect that the resident has a diagnosis of probable Alzheimer's Disease or other dementia and has symptoms which demonstrate a need for placement in the center. However, the center may also care for a resident who does not have a probable diagnosis of Alzheimer's Disease or other dementia, but desires to live in the center as a companion to a resident with a probable diagnosis of Alzheimer's Disease or other dementia with which the resident has a close personal relationship. In addition, the physical examination report must establish that each potential resident of the center does not require 24-hour skilled nursing care.

(8) Post-Admission Assessment. The home must assess each resident's care needs to include the following components: resident's family supports, level of activities of daily living functioning, physical care needs and level of behavior impairment.

(9) Individual Service Plans. The post-admission assessment must be used to develop the resident's individual service plan within 14 days of admission. The service plan must be developed by a team with at least one member of the direct care staff participating and input from each shift of direct care staff that provides care to the resident. All team members participating must sign the service plan and the service plan must be shared with the direct care staff providing care to the resident and serve as a guide for the delivery of services to the resident. The service plan must include the following:

(a) A description of the resident's care and social needs and the services to be provided, including frequency to address care and social needs.

(b) Resident's expressed preferences regarding care, activities and interests.

(c) Specific behaviors to be addressed with interventions to be used.

(d) Names of staff primarily responsible for implementing the service plan.

(e) Evidence of family involvement in the development of the plan, if possible, with incorporation of family and personal history to support a person-centered approach to care.

(f) Evidence of the service plan being updated at least quarterly or more frequently if the needs of resident change substantially.

(10) Therapeutic Activities. The center must provide therapeutic activities appropriate to the needs of the individual residents and adapt the activities, as necessary, to encourage the participation of the residents. The following kinds of therapeutic activities must be provided at least weekly with at least some therapeutic activities occurring daily:

(a) Gross motor activities; e.g. exercise, dancing, gardening, cooking, other outdoor activities.

(b) Self-care activities; e.g. dressing, personal hygiene/grooming;

(c) Social activities; e.g. games, music, crafts.

(d) Sensory enhancement activities, e.g. distinguishing pictures and picture books, reminiscing and scent and tactile stimulation.

(11) No licensed personal care home may provide or hold itself out as providing specialized care for residents with probable Alzheimer's disease or other dementia or charge a differential rate for care of residents with cognitive deficits that place the residents at risk of engaging in unsafe wandering activities (eloping) unless it meets the additional requirements specified in Rule 111-8-62-.19.

Cite as Ga. Comp. R. & Regs. R. 111-8-62-.19

AUTHORITY: O.C.G.A. §§ 31-2-7**,** 31-2-9**,** 31-7-1 **et seq.,** 43-26-32**.**

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Department 111. RULES OF DEPARTMENT OF COMMUNITY HEALTH

Chapter 111-8. HEALTHCARE FACILITY REGULATION

Subject 111-8-63. RULES AND REGULATIONS FOR ASSISTED LIVING COMMUNITIES

111-8-63-.03 Definitions

In these rules, unless the context otherwise requires, the words, phrases and symbols set forth herein shall mean the following:

(a) "Abuse" means any intentional or grossly negligent act or series of acts or intentional or grossly negligent omission to act which causes injury to a resident, including but not limited to, assault or battery, failure to provide treatment or care, or sexual harassment of the resident.

(b) "Activities of daily living" means bathing, shaving, brushing teeth, combing hair, toileting, dressing, eating, laundering, cleaning private living space, managing money, writing letters, shopping, using public transportation, making telephone calls, grooming, obtaining appointments, engaging in leisure and recreational activities, or other similar activities.

(c) "Administrator" means the manager designated by the Governing Body as responsible for the day-to-day management, administration and supervision of the assisted living community, who may also serve as the on-site manager and responsible staff person except during periods of his or her own absence.

(d) "Applicant" means an individual or entity that submits an application for licensure pursuant to these rules as described below:

1. When the assisted living community is owned by a sole proprietorship, the individual proprietor must be the applicant for the license, complete the statement of responsibility and serve as the licensee;

2. When the assisted living community is owned by a partnership, the general partners must be the applicant for the license, complete the statement of responsibility and serve as the licensee;

3. When the assisted living community is owned by an association, limited liability company (LLC) the governing body of the association or LLC must authorize the application for the license, complete the statement of responsibility and serve as the licensee; and

4. When the assisted living community is owned by a corporation, the governing body of the corporation must authorize the application for the license, complete the statement of responsibility and serve as the licensee.

(e) "Assistive device" means a device that may restrain movement which has been determined to be required by a licensed physician, nurse practitioner or physician's assistant working under a protocol or job description respectively and is applied for protection from injury or to support or correct the body alignment of the person, for the treatment of a person's physical condition, and may only be used as a treatment intervention where a specific written plan of care has been developed and the resident consents to such use.

(f) "Assisted living care" means the specialized care and services provided by an assisted living community which includes the provision of personal services, the administration of medications by a certified medication aide, the provision of assisted self-preservation, and the provision of limited nursing services.

(g) "Assisted living community" or "community" means a personal care home serving 25 residents or more that is licensed by the department to provide assisted living care.

(h) "Assisted self-preservation" means the capacity of a resident to be evacuated from an assisted living community to a designated point of safety and within an established period of time as determined by the Office of Fire Safety Commissioner. Assisted self-preservation is a function of all of the following:

1. the condition of the individual,

2. the assistance that is available to be provided to the individual by the staff of the assisted living community; and

3. the construction of the building in which the assisted living community is housed, including whether such building meets the state fire safety requirements applicable to an existing health care occupancy.

(i) "Certificate" means a certificate issued by the department to operate a memory care center in a licensed assisted living community or personal care home.

(j) "Chemical Restraint" means a psychopharmacologic drug that is used for discipline or convenience and not required to treat medical symptoms.

(k) "Department" means the Department of Community Health of the State of Georgia operating through the Division of Healthcare Facility Regulation.

(l) "Direct care staff person" means any employee, facility volunteer, or contract staff who provides to residents:

(i) any personal services, including but not limited to, medication administration or assistance, assistance with ambulation and transfer, and essential activities of daily living such as eating, bathing, grooming, dressing, and toileting; or

(ii) any other limited nursing services.

(m) "Director" means the chief administrator, executive officer or manager.

(n) "Disabled individual" means an individual that has a physical or mental impairment that substantially limits one or more major life activities and who meets the criteria for a disability under state or federal law.

(o) "Employee" means any person, other than a director, utilized by an assisted living community to provide personal services to any resident on behalf of the assisted living community or to perform at any facilities of the assisted living community any duties which involve personal contact between that person and any paying resident of the assisted living community.

(p) "Exploitation" means an unjust or improper use of another person or the person's property through undue influence, coercion, harassment, duress, deception, false representation, false pretense, or other similar means for one's own personal advantage.

(q) "Governing Body" means the owner, the board of trustees or directors, the partnership, the corporation, the association, the sole proprietorship or the person or group of persons who maintains and controls the assisted living community and who is legally responsible for the operation of the community.

(r) "Health maintenance activities" means those limited activities that, but for a disability, a person could reasonably be expected to do for himself or herself. Such activities are typically taught by a registered professional nurse, but may be taught by an attending physician, advanced practice registered nurse, physician assistant, or directly to a patient and are part of ongoing care. Health maintenance activities are those activities that do not include complex care such as administration of intravenous medications, central line maintenance, and complex wound care; do not require complex observations or critical decisions; can be safely performed and have reasonably precise, unchanging

directions; and have outcomes or results that are reasonably predictable. Health maintenance activities conducted pursuant to this paragraph shall not be considered the practice of nursing.

(s) "Health services" means the specialized assistance that may be provided by or at the direction of either licensed healthcare professionals, such as doctors, nurses, physical therapists or through licensed healthcare programs, such as home health agencies, hospices and private home care providers to address health needs that the assisted living community is not staffed to provide or is not authorized by law or regulations to provide.

(t) "Injury" as used in the definition of "abuse" means a wrong or harm caused by an individual to a resident which is manifested by a physical or behavioral reaction or change in the appearance or actions of the resident, such as, but not limited to, reddened or bruised skin not related to routine care, crying, startling or cowering reaction by the resident and malnutrition or pressure ulcers for which the facility has not provided proper care.

(u) "Legal Surrogate" means a duly appointed person who is authorized to act, within the scope of the authority granted under the legal surrogate's appointment, on behalf of a resident who is adjudicated incapacitated.

(v) "Limited nursing services" means the assessment of the physical, mental, and emotional status to determine the appropriate level of care for an individual; the performance of health maintenance activities, as defined in division (a)(9)(C)(ii) of Code Section 43-26-12; and the provision of any nursing care within the direct care staff person's scope of practice that can be completed within seven days or intermittently.

(w) "Medical alert system" means any device or combination of devices used to detect and immediately communicate that an individual is experiencing a medical emergency. Such device or combination of devices must be approved for their effectiveness by the department in its sole discretion.

(x) "Medical services" means services which may be provided by a person licensed pursuant to Article II of Chapter 34 of Title 43 of the Official Code of Georgia Annotated.

(y) "Memory care services" means the additional watchful oversight systems and devices that are required for residents who have cognitive deficits which may impact memory, language, thinking, reasoning, or impulse control, and which place the residents at risk of eloping, i.e. engaging in unsafe wandering activities outside the assisted living community.

(z) "Memory care center" means the freestanding or incorporated specialized unit that either:

(i) holds itself out as providing additional or specialized care to persons with diagnoses of probable Alzheimer's or other dementias or with cognitive deficits that may place the resident at risk; or

(ii) charges higher rates for care for residents with Alzheimer's or other dementias than for care to other residents.

(aa) "Non-Family Adult" means a resident 18 years of age or older who is not related by blood within the third degree of consanguinity or by marriage to the person responsible for the management of the assisted living community or to a member of the governing body.

(bb) "Nursing services" means those services which may be rendered by a person licensed pursuant to Articles I and 2 of Chapter 26 of Title 43 of the Official Code of Georgia Annotated.

(cc) "On-site manager" means the administrator or person designated by the administrator as responsible for carrying out the day-to-day management, supervision, and operation of the assisted living community, who may also serve as responsible staff person except during periods of his or her own absence.

(dd) "Owner" means any individual or any person affiliated with a corporation, partnership, or association with 10 percent or greater ownership interest in the business or agency licensed as an assisted living community and who:

1. purports to or exercises authority of the owner in a facility;

2. applies to operate or operates the business or agency;

3. maintains an office on the premises of the assisted living community;

4. resides at the assisted living community;

5. has direct access to persons receiving care at the assisted living community;

6. provides direct personal supervision of assisted living community personnel by being immediately available to provide assistance and direction during the time such assisted living community services are being provided; or

enters into a contract to acquire ownership of such a business or agency.

(ee) "Permit" or "license" means the authorization granted by the Department to the governing body to operate an assisted living community.

(ff) "Personal care home" means any dwelling, whether operated for profit or not, which undertakes through its ownership or management to provide or arrange for the provision of housing, food service, and one or more personal services for two or more adults who are not related to the owner or administrator by blood or marriage.

(gg) "Personal Services" includes, but is not limited to, individual assistance with or supervision of self-administered medication, assistance, essential activities of daily living such as eating, bathing, grooming, dressing, toileting, ambulation and transfer.

(hh) "Physical Restraints" are any manual or physical device, material, or equipment attached or adjacent to the resident's body that the individual cannot remove easily which restricts freedom or normal access to one's body. Physical restraints include, but are not limited to, leg restraints, arm restraints, hand mitts, soft ties or vests, and wheelchair safety bars. Also included as restraints are assisted living community practices which function as a restraint, such as tucking in a sheet so tightly that a bedbound resident cannot move, bedrails, or chairs that prevent rising, or placing a wheelchair bound resident so close to a wall that the wall prevents the resident from rising. Wrist bands or devices on clothing that trigger electronic alarms to warn staff that a resident is leaving a room do not, in and of themselves, restrict freedom of movement and should not be considered as restraints.

(ii) "Physician" means an individual who is currently licensed to practice medicine in the State of Georgia. For purposes of these rules, it shall be acceptable for any activities required to be performed by a physician to be performed by any other licensed medical professional (i.e., Nurse Practitioner, Physician Assistant, etc.) who is permitted to perform such activities under applicable state scope of practice rules and regulations.

(jj) "Plan of Correction" means the written plan prepared in response to cited rule violations that identifies by date certain the specific actions that will be taken by the assisted living community to come into compliance with these rules.

(kk) "Proxy caregiver" means an unlicensed person or a licensed health care facility that has been selected by a disabled individual or a person legally authorized to act on behalf of such individual to serve as such individual's proxy caregiver and meets the requirements contained in the Rules and Regulations for Proxy Caregivers Used in Licensed Healthcare Facilities, Chapter 111-8-100.

(ll) "Representative" means a person who voluntarily, with the resident's written authorization, acts upon resident's direction with regard to matters concerning the health and welfare of the resident, including being able to access personal and medical records contained in the resident's file and receive information and notices pertaining to the resident's overall care and condition. This written authorization may take the form of an advance directive.

(mm) "Resident" means any non-family adult who receives or requires assisted living care and resides in the assisted living community.

(nn) "Responsible Staff Person" means the employee designated by the administrator or on-site manager as responsible for supervising the operation of the assisted living community during periods of temporary absence of the administrator or on-site manager.

(oo) "Self-administration of medications" or "self-administered medications" means those prescription or over-the-counter drugs that the resident personally chooses to ingest or apply where the resident has been assessed and determined to have the cognitive skills necessary to articulate the need for the medication and generally knows the times, and physical characteristics of medications to be taken.

(pp) "Self-preservation" means the ability to respond to an emergency condition, whether caused by fire or otherwise, and escape the emergency without physical, hands-on assistance from staff. The resident may move from place to place by walking, either unaided or aided by prosthesis, brace, cane, crutches, walker or hand rails, or by propelling a wheelchair.

(qq) "Staff" means any person who performs duties in the assisted living community on behalf of the assisted living community.

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111-8-63-.09 Workforce Qualifications, Training and Staffing

(1) The on-site manager and responsible staff persons must be at least 21 years of age and responsible for supervising the provision of care by all other staff. No staff person under the age of 18 is permitted to work in the assisted living community unless there is direct line-of-sight supervision being provided by the administrator, on-site manager or a responsible staff person or the staff member is at least 17 years of age and has successfully completed a vocational technical training track as a nursing assistant through a Georgia high school.

(2) Initial Training for All Staff. The administrator or on-site manager must ensure that any person working in the assisted living community as staff, receives training within the first 60 days of employment on the following:

(a) residents' rights and identification of conduct constituting abuse, neglect or exploitation of a resident and reporting requirements to include the employee's receipt of a copy of the Long-Term Care Facility Resident Abuse Reporting Act as outlined in O.C.G.A. § 31-8-81 et seq.;

(b) general infection control principles including importance of hand hygiene in all settings and attendance policies when ill;

(c) training necessary to carry out assigned job duties; and

(d) emergency preparedness.

(3) Initial Training for Staff Providing Hands-On Personal Services. In addition to the initial training required of all staff in paragraph (2) above, the administrator must ensure that staff hired to provide hands-on personal services to residents receive training within the first 60 days of employment which includes the following:

(a) current certification in emergency first aid except where the staff person is a currently licensed health care professional;

(b) current certification in cardiopulmonary resuscitation where the training course required return demonstration of competency;

(c) medical and social needs and characteristics of the resident population, including special needs of residents with dementia;

(d) residents' rights and the provision of care to residents that is individualized and helpful; and

(e) training specific to assigned job duties, such as, but not limited to, permissible assistance with medications, contraindications for medications that must be brought to the attention of appropriate individuals, assisting residents in transferring, ambulation, proper food preparation, proper performance of health maintenance activities if serving as a designated proxy caregiver and responding appropriately to dementia-related behaviors.

(4) Trained Staff Present. At least two staff who have completed the minimum training requirements of Rule 111-8-63-.09(2)(a) through (d) and (3)(a) through (e) above must be present in the assisted living community at all times any residents are present, with at least one staff person on each occupied floor, to provide necessary oversight and assistance to staff providing hands-on personal services who have not completed the training, to ensure that care and services are delivered safely and in accordance with these rules. The staff person posted on the designated floor may move about the premises as necessary if the community has implemented a medical alert system and each resident has been offered a wearable device that connects to such system when activated to alert an administrator or direct care staff person of a medical emergency.

(5) Training Hours Required During First Year of Employment. All staff offering hands-on personal services to the residents, including the administrator or on-site manager, must satisfactorily complete a total of at least twenty-four (24) hours of continuing education within the first year of employment as a direct care worker. The courses offered must be relevant to assigned job duties and include such topics as cardiopulmonary resuscitation and first aid certifications, utilizing standard precautions in working with aging residents, working with residents with Alzheimer's or other cognitive impairments, working with persons who have developmental disabilities or persons who have mental illness, providing social and recreational activities, understanding legal issues, performing necessary physical maintenance, fire safety, housekeeping activities, recognizing and reporting abuse, neglect and exploitation, preparing and serving food safely, preserving the dignity and rights of residents receiving care to make meaningful choices, providing and documenting medication assistance, or other topics as determined necessary by the Department to support compliance.

(6) Ongoing Staff Training. Beginning with the second year of employment, staff providing hands-on personal services must have a minimum of sixteen (16) hours of job-related continuing education as referenced in paragraph 111-8-63-.09(5) above annually.

(7) Training Records. The community must maintain documentation reflecting course content, instructor qualifications, agenda and attendance rosters for all trainings provided.

(8) Proxy Caregiver Training. An assisted living community employing proxy caregivers must provide training to the proxy caregivers in accordance with the Rules and Regulations for Use of Proxy Caregivers, Chapter 111-8-100 subject to the limitation that only certified medication aides may administer medications on behalf of the community.

(9) Hospice Training. The assisted living community shall ensure that any medication aide(s) who will be administering liquid morphine to any hospice patient(s) residing in the community receive adequate training from a

licensed hospice on the safe and proper administration of liquid morphine prior to such administration and on an annual basis thereafter. The community shall maintain documentation of all training provided.

(10) Staff Health Examinations and Screenings. The administrator, on-site manager, and each employee must have received a tuberculosis screening and a physical examination by a licensed physician, nurse practitioner or physician's assistant within twelve months prior to providing care to the residents. The physical examination must be sufficiently comprehensive to assure that the employee is physically qualified to work and free of diseases communicable within the scope of employment. Follow-up examinations must be conducted by a licensed physician, nurse practitioner or physician's assistant for each administrator or staff person to determine readiness to return to work following a significant illness or injury. Health information, screenings, assessments and medical releases regarding each staff member must be retained in a readily retrievable format by the assisted living community and made available for review and/or copying by Department representatives upon request.

(11) Criminal History Background Checks for Owners Required. The owner of the business or agency applying for the license must comply with the requirements of the Rules and Regulations for Criminal Background Checks, Chapter 111-8-12.

(12) Criminal History Background Checks for Director, Administrator and Onsite Manager Required. Prior to serving as a director, administrator or onsite manager of an assisted living community, the community must obtain a satisfactory fingerprint records check determination for the person to be hired in compliance with the Rules and Regulations for Criminal Background Checks, Chapter 111-8-12.

(13) Criminal History Background Checks for Direct Access Employees Required. Prior to serving as a direct access employee, the community must obtain a satisfactory fingerprint records check determination for the person to be hired in compliance with the Rules and Regulations for Criminal Background Checks, Chapter 111-8-12.

(14) The administrator or on-site manager must obtain an employment history for each employee and maintain documentation in the employee's file. If the potential employee has no prior employment history, then the assisted living community must retain documentation of a satisfactory personal reference check.

(15) Personnel files must be maintained in the assisted living community for each employee and for three years following the employee's departure or discharge. These files must be available for inspection by departmental staff but must be maintained to protect the confidentiality of the information contained in them from improper disclosure. The files must include the following:

(a) evidence of a satisfactory fingerprint record check determination, if applicable;

(b) report of physical examination completed by a licensed physician, nurse practitioner or physician's assistant, and a TB screening completed within the 12 months preceding the date of hire;

(c) evidence of trainings, skills competency determinations and recertifications as required by these rules and, if applicable, the Rules for Proxy Caregivers, Chapter 111-8-100;

(d) employment history, including previous places of work, employers and telephone contacts with previous employers;

(e) supporting documentation reflecting that the employee has the basic qualifications as represented, e.g. documentation of good standing by nursing board, no findings of abuse, neglect or exploitation entered against the individual in the nurse aide registry, satisfactory report of motor vehicle driving record where the employee may be transporting residents; and

(f) written evidence of satisfactory initial and annual work performance reviews for unlicensed staff providing hands-on personal care. Where the unlicensed staff perform specialized tasks, such as health maintenance activities, assistance with medications or medication administration, such performance reviews must include the satisfactory completion of skills competency checklists as specified in applicable rules. Such reviews must be conducted by staff

or contractors qualified by education, training and experience to assess that the assigned duties are being performed in accordance with these rules and accepted health and safety standards.

(16) Where the assisted living community permits a resident to hire his or her own companion-sitter, proxy caregiver to perform health maintenance activities or aide of any sort, the assisted living community must require assurance that the companion-sitter, proxy caregiver or aide so hired is familiar with emergency evacuation routes and has documentation reflecting compliance with the provisions of the Rules for Proxy Caregivers, Chapter 111-8-100, as applicable.

(17) The administrator, on-site manager, and staff persons must not be under the influence of alcohol or other controlled substances while engaged in any work-related activity on behalf of the assisted living community.

(18) The community must maintain an average monthly minimum on-site staff to resident ratio of one awake direct care staff person per 15 residents during waking hours and one awake direct care staff person per 20 residents during non-waking hours where the residents have minimal care needs. Average monthly minimum staffing levels shall be calculated and documented by the community using methods and forms specified by the department. However, the assisted living community must staff above these minimum on-site staff ratios to meet the specific residents' ongoing health, safety and care needs.

(a) Staff, such as cooks and maintenance staff, who do not receive on-going direct care training and whose job duties do not routinely involve the oversight or delivery of direct personal care to the residents, must not be counted towards these minimum staffing ratios. Personnel who work for another entity, such as a private home care provider, hospice, etc. or private sitters cannot be counted in the staff ratios for the assisted living community.

(b) At least two on-site direct care staff persons must be on the premises 24 hours per day providing supervision whenever residents are present, with at least one staff person on each occupied floor.

(c) A registered professional nurse or licensed practical nurse must be on-site to support care and oversight of the residents, as follows:

(i) For communities with one to 30 residents, a minimum of 8 hours per week;

(ii) For communities with 31 to 60 residents, a minimum of 16 hours per week;

(iii) For communities with 61 to 90 residents, a minimum of 24 hours per week;

(iv) For communities with more than 90 residents, a minimum of 40 hours per week;

(d) Residents must be supervised consistent with their needs.

(19) Sufficient staff time must be provided by the assisted living community such that each resident:

(a) receives services, treatments, medications and diet as prescribed;

(b) receives proper care to prevent decubitus ulcers and contractures;

(c) is kept comfortable and clean;

(d) is treated with dignity, kindness, and consideration and respect;

(e) is protected from avoidable injury and infection;

(f) is given prompt, unhurried assistance if she or he requires help with eating;

(g) is given assistance, if needed, with daily hygiene, including baths and oral care; and

(h) is given assistance in transferring and assisted self-preservation when needed.

(20) All persons, including the administrator or on-site manager, who offer direct care to the residents on behalf of the assisted living community, must maintain an awareness of each resident's normal appearance and must intervene, as appropriate, if a resident's state of health appears to be in jeopardy.

(21) All assisted living communities must develop and maintain accurate staffing plans that take into account the specific needs of the residents and monthly work schedules for all employees, including relief workers, showing planned and actual coverage for each day and night. The assisted living community must retain the completed staff schedules for a minimum of one year.

(22) Staff must wear employee identification badges which are readily visible with abbreviations for professional/special credentials displayed on the badges, if any.

(23) Medical Alert Systems. Homes utilizing medical alert systems to allow on-site staff to move about as specified in Rule 111-8-63-.09(4) must meet the following requirements:

(a) The medical alert system must include a wearable sensor device that enables the resident to request help when needed.

(b) The home may encourage, but not require, residents to wear the sensor device and must ensure that residents who do not consistently wear the sensor device receive appropriate monitoring from staff.

(c) The wearable sensor device must be programmed to immediately notify appropriate staff, and to identify the specific resident or location from which the alert signal has been made, by:

(i) activating a portable electronic device worn by the administrator and/or a direct care staff person with an audible tone or vibration; or

(ii) sending a signal to a stationary electronic device located in a designated area monitored by staff.

(d) The home must establish policies and procedures which address the following requirements and must maintain documentation to demonstrate compliance with such policies and procedures:

(i) routine testing and maintenance of the medical alert system;

(ii) initial training for residents and staff on use of the system and additional training as needed;

(iii) procedures for electrical outages or severe weather events that include making more frequent rounds to check on residents if the system is not working, as well as testing the system following such events to ensure operability; and

(iv) a process for reviewing any documentation produced by the system for opportunities to enhance individualized care and service.

(e) The department may prohibit a home from using or relying on a medical alert system if the above requirements are not met.

Cite as Ga. Comp. R. & Regs. R. 111-8-63-.09

AUTHORITY: O.C.G.A. §§ 31-2-7**,** 31-2-8**,** 31-2-9**,** 31-7-1 **et seq.,** 43-26-12**.**

HISTORY: Original Rule entitled "Workforce Qualifications, Training and Staffing" adopted. F. Dec. 13, 2012; eff. Jan. 2, 2012.

Amended: F. Feb. 28, 2020; eff. Mar. 19, 2020.

Amended: F. Aug. 24, 2021; eff. Sept. 13, 2021.

Amended: F. May 1, 2025; eff. May 21, 2025.

111-8-63-.16 Admission Agreements

(1) Contents of the Written Admission Agreement. The assisted living community must ensure that the admission agreement is written in plain and understandable language and is consistent with the information contained on the licensed residential care profile.

(a) The admission agreement must include a current statement of all fees and daily, weekly or monthly charges; the services covered by those basic fees and any other services which the assisted living community provides on an additional fee basis.

(b) The admission agreement must contain a statement that residents and their representatives or legal surrogates shall be informed, in writing, at least 30 days prior to any increase in established charges related to the provision of personal services and at least 60 days prior to any increase in charges for room and board.

(c) The admission agreement must contain provisions for the administrator or on-site manager's continuous assessment of the resident's needs, referral for appropriate services as may be required if the resident's condition changes and referral for transfer or discharge if required due to a change in the resident's condition.

(d) The admission agreement must contain a description of how the community responds to formal complaints received from residents and their representatives and how to file a complaint within the community.

(e) The admission agreement must contain provisions for transportation of residents for shopping, recreation, rehabilitation, medical services. Such transportation service may be provided by the assisted living community as either a basic service or on a reimbursement basis; with transportation for emergency use available at all times.

(f) The admission agreement must include the assisted living community's refund policy when a resident dies, is transferred or discharged.

(g) The admission agreement must include a statement that a resident may not be required to perform services for the assisted living community.

(h) The admission agreement must include a copy of the house rules, which must be in writing and also posted in the assisted living community and explain how violations of the house rules will be addressed by the community. House rules must be consistent with residents' rights. House rules must include, but not be limited to policies regarding the use of tobacco and alcohol, the times and frequency of use of the telephone, visitors elopement from the community, hours and volume for viewing and listening to television, radio and other audiovisual equipment, whether residents' personal pets or household pets are permitted and the use of personal property.

(i) The admission agreement must disclose how and by what level of staff medications are handled in the community. The agreement must also specify who is responsible for initial acquisition and refilling of prescribed medications utilizing unit or multidose packaging for the resident. Either this responsibility will remain with the resident, representative or legal surrogate, if any, or be assigned to the assisted living community operating through the administrator or on-site manager.

(j) The admission agreement must disclose whether the community permits the resident to employ independent proxy caregivers, sitters, etc. or requires the purchase of such services from approved providers.

(k) For residents first admitted after July 1, 2025, the admission agreement must include information on the medical alert system, if applicable, including a statement explaining that use of the system is optional for residents.

(2) The assisted living community must provide each resident, representative, legal surrogate with an opportunity to read the complete agreement prior to the execution of the admissions agreement. In the event that a resident,

representative or legal surrogate is unable to read the agreement, the administrator or on-site manager must take steps to assure communication of the contents of the admission agreement to be signed.

(3) The assisted living community must provide the resident and representative or legal surrogate, if any, with a signed copy of the agreement. A copy signed by both parties (resident and administrator or on-site manager) must be retained in the resident's file and maintained by the administrator or on-site manager of the assisted living community.

(4) The assisted living community must not use a written admission agreement or any other written agreement signed by the resident or the resident's legal representative which waives or attempts to waive any of the resident's rights these rules protect.

Cite as Ga. Comp. R. & Regs. R. 111-8-63-.16

AUTHORITY: O.C.G.A. §§ 31-2-7**,** 31-2-8**,** 31-7-1 **et seq.**

HISTORY: Original Rule entitled "Admission Agreements" adopted. F. Dec. 13, 2011; eff. Jan. 2, 2012.

Note: Correction of typographical error on SOS Rules and Regulations website. In accordance with Official Compilation Rules and Regulations of the State of Georgia, eff. Jan. 2, 2012, original filed date, "Dec. 13, 2012", corrected to "Dec. 13, 2011." Effective May 6, 2018.

Amended: F. Apr. 16, 2018; eff. May 6, 2018.

Amended: F. May 1, 2025; eff. May 21, 2025.

111-8-63-.19 Additional Requirements for Certified Memory Care Centers

(1) In addition to all other requirements contained in this Chapter, where an assisted living community holds itself out as providing additional or specialized care to persons with probable diagnoses of Alzheimer's Disease or other dementia, or charges rates in excess of that charged other residents for the provision of additional or specialized care, the assisted living community must meet the following requirements:

(a) Written Description. The assisted living community must include in its licensed residential care profile an accurate written description of the memory care center that includes the following:

1. a statement of philosophy and mission;

2. how the services and activities of the memory care center are different from those provided in the rest of the assisted living community;

3. staffing including job titles of staff who work in the center, staff training and continuing education requirements;

4. admission procedures, including screening criteria;

5. assessment and service planning protocol, including criteria to be used that would trigger a reassessment of the resident's status before the customary quarterly review;

6. staffing patterns, including the ratio of direct care staff to resident for a 24-hour cycle, and a description of how the staffing pattern differs from that of the rest of the program;

7. a description of the physical environment including safety and security features;

8. a description of activities, including frequency and type, and how the activities meet the needs of residents with dementia,

9. the program's fee or fee structure for all services provided by the center or assisted living community;

10. the discharge criteria and procedures;

11. the procedures that will be utilized for handling emergency situations; and

12. the involvement of the center with families and family support programs.

(b) Physical Design, Environment, and Safety. The memory care center must be designed to accommodate residents with severe dementia or Alzheimer's Disease in an assisted living community-like environment which includes the following:

1. multipurpose room(s) for dining, group and individual activities which are appropriately furnished to accommodate the activities taking place;

2. secured outdoor spaces and walkways which are wheelchair accessible and allow residents to ambulate safely but prevent undetected egress;

3. high visual contrast between floors and walls and doorways and walls in resident use areas-except for fire exits, door and access ways which may be designed to minimize contrast to conceal areas where the residents should not enter;

4. adequate and even lighting which minimizes glare and shadows;

5. the free movement of the resident, as the resident chooses, between the common space and the resident's own personal space in a bedroom that accommodates no more than two (2) residents;

6. individually identified entrances to residents' rooms to assist residents in readily identifying their own personal spaces;

7. an effective automated device or system to alert staff to individuals entering or leaving the center in an unauthorized manner. An assisted living community need not use an automated alert for an exit door when the particular exit is always staffed by a receptionist or other staff member who views and maintains a log of individuals entering and leaving the assisted living community. If the exit door is not always staffed, then the assisted living community must activate an automated alert when the door is not attended;

8. communication system(s) which permit staff in the center to communicate with other staff outside the center and with emergency services personnel as needed; and

9. a center providing specialized memory care services which undergoes major renovation or is first constructed after December 9, 2009, must be designed and constructed in compliance with applicable state and local building and fire codes relevant to the center and the assisted living community.

(c) Staffing Requirements. The assisted living community must ensure that the memory care center is staffed with sufficient specially trained staff to meet the unique needs of the residents in the center. At a minimum, the memory care center must provide the following staffing:

(i) One dementia trained direct care staff person for every 12 residents on-site during all waking hours and for every 15 residents on-site during all non-waking hours based on a monthly average; provided, however, that such ratio is adequate to meet the needs of the residents;

(ii) One registered professional nurse, licensed practical nurse, or certified medication aide on-site or available in the building at all times;

(iii) Two direct care staff persons on-site at all times, which may include one licensed registered professional nurse, licensed practical nurse, or certified medication aide, if they remain on-site in the memory care center; and

(iv) One registered professional nurse or licensed practical nurse on-site or available in the building at all times as follows:

(A) For memory care centers with one to 12 residents, a minimum of 8 hours per week;

(B) For memory care centers with 13 to 30 residents, a minimum of 16 hours per week;

(C) For memory care centers with 31 to 40 residents, a minimum of 24 hours per week; or

(D) For memory care centers with more than 40 residents, a minimum of 40 hours per week.

(d) Staff Training Requirements. The community shall ensure that all staff are properly trained initially and on an annual basis to provide safe, quality care to residents in the memory care center. The memory care center shall meet the following training requirements:

(i) General Orientation. All staff, regardless of role, shall receive at least four (4) hours of dementia-specific orientation within the first thirty (30) days of working in the center. Such orientation shall include:

(A) Basic information about the nature, progression, and management of Alzheimer's and other dementias;

(B) Techniques for creating an environment that minimizes challenging behavior from residents with Alzheimer's and other dementias;

(C) Methods of identifying and minimizing safety risks to residents with Alzheimer's and other dementias; and

(D) Techniques for successful communication with individuals with Alzheimer's and other dementias.

(ii) Direct Care Orientation. All direct care staff shall receive initial orientation training within the first thirty (30) days of caring for residents independently that, at a minimum, includes:

(A) General training, to include:

(I) Development, updating, and implementation of comprehensive and individual service plans;

(II) Skills for recognizing physical or cognitive changes in the resident that warrant seeking medical attention;

(III) Residents' rights and identification of conduct constituting abuse, neglect, or exploitation;

(IV) General infection control principles;

(V) Emergency preparedness training;

(VI) Emergency first aid;

(VII) Cardiopulmonary resuscitation.

(B) A minimum of sixteen (16) hours of specialized, competency-based training using forms specified by the department, to include, at a minimum:

(I) The nature of Alzheimer's and other dementias;

(II) The center's philosophy related to the care of residents with Alzheimer's and other dementias;

(III) The center's policies and procedures related to care of residents with Alzheimer's and other dementias;

(IV) Common behavior problems characteristic of residents with Alzheimer's and other dementias;

(V) Positive therapeutic interventions and activities;

(VI) Skills for maintaining the safety of the resident; and

(VII) The role of the family in caring for residents with Alzheimer's and other dementias.

(C) Staff members who have passed a memory care specialist competency exam established by the department, as documented by the home, may satisfy the training requirements of Rule 111-8-63-.19(1)(d)(ii)(B) by completing a minimum of four (4) hours of training on the topics specified in Rule 111-8-63-.19(1)(d)(ii)(B)(II) and (III).

(iii) Ongoing Training. Direct care staff shall complete a minimum of eight (8) hours of specialized training in dementia care on an annual basis.

(iv) Training Documentation. The memory care center shall maintain documentation reflecting course content, instructor qualifications, agenda, and attendance rosters for all training sessions provided.

(e) Special Admission Requirements for Memory Center Placement. Residents must have a physician's report of physical examination completed within 30 days prior to admission to the center on forms made available by Department. The physical examination must clearly reflect that the resident has a diagnosis of probable Alzheimer's Disease or other dementia and has symptoms which demonstrate a need for placement in the center. However, the center may also care for a resident who does not have a probable diagnosis of Alzheimer's Disease or other dementia, but desires to live in this center and waives his or her right to live in a less restrictive environment. In addition, the physical examination report must establish that the potential resident of the center does not require 24-hour skilled nursing care.

(f) Post-Admission Assessment. If the resident is admitted directly into the specialized memory care center, the center must obtain an assessment of each resident's care needs to include the following components: resident's family supports, level of activities of daily living functioning, physical care needs and level of behavior impairment.

(g) Individual Written Care Plan and Reviews. The resident's written care plan will be developed or updated by staff with at least one member of the specialized memory care staff providing direct care participating. Input from each shift of direct care staff that provides care to the resident will be requested. All team members participating shall sign the written care plan and the plan will be shared with the direct care staff providing care to the resident and serve as a guide for the delivery of care to the resident. The resident's family shall participate in the development of the plan, if possible, with incorporation of family and personal history to support a person-centered approach to care. The written care plan must be reviewed at least quarterly and modified as changes in the resident's needs occur.

(h) Therapeutic Activities. The unit shall provide activities appropriate to the needs of the individual residents and adapt the activities, as necessary, to encourage participation of the residents in the following at least weekly with at least some therapeutic activities occurring daily:

1. gross motor activities; e.g. exercise, dancing, gardening, cooking, etc;

2. self-care activities; e.g. dressing, personal hygiene/grooming;

3. social activities; e.g. games, music;

4. sensory enhancement activities, e.g. distinguishing pictures and picture books, reminiscing and scent and tactile stimulation; and

5. outdoor activities; e.g. walking outdoors and field trips.

(2) No licensed assisted living community is permitted to hold itself out as providing specialized care for residents with probable Alzheimer's disease or other dementia or charge a differential rate for care of such residents unless it meets the additional requirements specified in Rule 111-8-63-.19(1) and its subparagraphs (a) through (h) above.

Cite as Ga. Comp. R. & Regs. R. 111-8-63-.19

AUTHORITY: O.C.G.A. §§ 31-2-7**,** 31-2-8**,** 31-7-1 **et seq.,** 43-26-32**.**

HISTORY: Original Rule entitled "Additional Requirements for Specialized Memory Care Units" adopted. F. Dec. 13, 2012; eff. Jan. 2, 2012.

Amended: New title "Additional Requirements for Certified Memory Care Centers." F. Aug. 24, 2021; eff. Sept. 13, 2021.

Amended: F. May 1, 2025; eff. May 21, 2025.

Department 120. OFFICE OF COMMISSIONER OF INSURANCE, SAFETY FIRE COMMISSIONER AND INDUSTRIAL LOAN COMMISSIONER

Chapter 120-3. RULES OF SAFETY FIRE COMMISSIONER

Subject 120-3-3. RULES AND REGULATIONS FOR THE STATE MINIMUM FIRE SAFETY STANDARDS

120-3-3-.01 Promulgation and Purpose

(1) These rules and regulations of the Safety Fire Commissioner entitled, "Rules and Regulations for the State Minimum Fire Safety Standards" are promulgated to establish the State's minimum fire safety standards as specified in O.C.G.A. § 25-2-4.

(2) The primary purpose of these rules and regulations is to establish the state minimum fire safety standards and requirements for the prevention of loss of life and property from fire, panic from fear of fire, explosions or related hazards in all buildings, structures and facilities with the exception of one and two family dwellings, one and two-family row houses separated by a 2-hour fire wall and two family townhouses separated by a 2-hour fire wall.

Cite as Ga. Comp. R. & Regs. R. 120-3-3-.01

AUTHORITY: O.C.G.A. §§ 25-2-4**,** 33-2-9**,** 50-13-21.

HISTORY: Original Rule entitled "The Following Standards as Published by the National Fire Protection Association Are Adopted" adopted. F. Jan. 29, 1968; eff. Apr. 1, 1968, as specified by the Agency.

Repealed: New Rule entitled "Minimum Fire Safety Standards" adopted. F. Feb. 8, 1979; eff. Mar. 1, 1979, as specified by the Agency.

Amended: F. Aug. 6, 1982; eff. Sept. 1, 1982, as specified by the Agency.

Amended: F. July 7, 1983; eff. August 1, 1983, as specified by the Agency.

Amended: F. Apr. 23, 1986; eff. May 15, 1986.

Repealed: New Rule entitled "Minimum Fire Safety Standards with Modifications" adopted. F. Sept. 30, 1987; eff. Nov. 1, 1987, as specified by the Agency.

Repealed: New Rule of same title adopted. F. Dec. 3, 1990; eff. Jan. 1, 1991, as specified by the Agency.

Amended: F. Jan. 8, 1993; eff. Jan. 28, 1993.

Amended: F. July 9, 1998; eff. July 29, 1998.

Amended: F. Dec. 21, 1999; eff. Jan. 10, 2000.

Repealed: New Rule entitled "Promulgation and Purpose" adopted. F. Aug. 21, 2003; eff. Sept. 10, 2003.

Repealed: New Rule of same title adopted. F. Jan. 12, 2007; eff. Feb. 1, 2007.

Repealed: New Rule of same title adopted. F. Feb. 17, 2010; eff. Mar. 9, 2010.

Repealed: New Rule of same title adopted. F. Jan. 10, 2014; eff. Jan. 30, 2014.

Amended: F. Dec. 13, 2019; eff. Jan. 1, 2020, as specified by the Agency.

Amended: F. May 7, 2025; eff. May 27, 2025.

120-3-3-.02 Application

(1) Pursuant to O.C.G.A. § 25-2-4, rules and regulations adopted by the Safety Fire Commissioner shall have the force and effect of law and shall have statewide application as being the state minimum fire safety standards and shall not require adoption by a municipality or county. The governing authority of any municipality or county in this state is authorized to enforce the state minimum fire safety standards on all buildings and structures except one-family and two-family dwellings, one- and two-family row houses (townhouses) separated by a 2-hour fire wall and two-family townhouses separated by a 2-hour fire wall, and those buildings and structures listed in O.C.G.A. § 25-2-13, except as may be required or permitted by O.C.G.A. §§ 25-2-12 and 25-2-12.1.

(2) Pursuant to O.C.G.A. § 25-2-13(f), the municipal governing authority in any incorporated area or the county governing authority in any unincorporated area of the state shall have the authority to enact such ordinances as it deems necessary to perform fire safety inspections and related activities for those buildings and structures not covered by O.C.G.A. § 25-2-13.

(3) Whenever the provisions of this Subject of the Rules and Regulations of the Safety Fire Commissioner offers alternatives, as far as fire safety requirements are concerned, that were not permissible under previous editions of any Rules and Regulations of the Safety Fire Commissioner covering the same subject matter, the provisions of this chapter may be used by the authority having jurisdiction in determining whether a building is in compliance with the provisions of Title 25, Chapter 2, and the rules and regulations promulgated thereunder.

Cite as Ga. Comp. R. & Regs. R. 120-3-3-.02

AUTHORITY: O.C.G.A. §§ 25-2-4**,** 33-2-9**,** 50-13-21.

HISTORY: Original Rule entitled "Definitions" adopted. F. Feb. 8, 1979; eff. Mar. 1, 1979, as specified by the Agency.

Amended: F. Aug. 6, 1982; eff. Sept. 1, 1982, as specified by the Agency.

Amended: F. July 7, 1983; eff. August 1, 1983, as specified by the Agency.

Amended: F. Apr. 23, 1986; eff. May 15, 1986, as specified by the Agency.

Repealed: New Rule of same title adopted. F. Sept. 30, 1987; eff. Nov. 1, 1987, as specified by the Agency.

Repealed: New Rule of same title adopted. F. Dec. 3, 1990; eff. Jan. 1, 1991, as specified by the Agency.

Amended: F. Jan. 8, 1993; eff. Jan. 28, 1993.

Amended: F. July 9, 1998; eff. July 29, 1998.

Amended: F. Dec. 21, 1999; eff. Jan. 10, 2000.

Repealed: New Rule entitled "Application" adopted. F. Aug. 21, 2003; eff. Sept. 10, 2003.

Repealed: New Rule of same title adopted. F. Jan. 12, 2007; eff. Feb. 1, 2007.

Amended: ER. 120-3-3-0.6-.02 adopted. F. and eff. Nov. 13, 2007, the date of adoption.

Amended: ER. 120-3-3-0.9-.02 adopted. F. and eff. March 31, 2008, the date of adoption.

Repealed: New Rule of same title adopted. F. Feb. 17, 2010; eff. Mar. 9, 2010.

Repealed: New Rule of same title adopted. F. Jan. 10, 2014; eff. Jan. 30, 2014.

Amended: F. Dec. 13, 2019; eff. Jan. 1, 2020, as specified by the Agency.

Amended: F. May 7, 2025; eff. May 27, 2025.

120-3-3-.03 Definitions

(1) "Ambulatory Health Care Occupancy" means a building or portion thereof used to provide services or treatment simultaneously to four or more patients that (1) provides, on an outpatient basis, treatment for patients that renders the patients incapable of taking action for self-preservation under emergency conditions without the assistance of others; or (2) provides, on an outpatient basis, anesthesia that renders the patients incapable of taking action for self-preservation under emergency conditions without the assistance of others. For the purpose of compliance with Centers for Medicare & Medicaid Services (CMS) an Ambulatory Health Care Occupancy is a building or portion thereof used to provide services or treatment for one or more patients that (1) provides, on an outpatient basis, treatment for patient(s) that renders the patient(s) incapable of taking action for self-preservation under emergency conditions without the assistance of others; or (2) provides, on an outpatient basis, anesthesia that renders the patient(s) incapable of taking action for self-preservation under emergency conditions without the assistance of others.

(2) "Assistive device" means a device that may restrain movement, which has been determined to be required by a licensed physician, nurse practitioner, or physician's assistant working under a protocol or job description respectively, and is applied for protection from injury or to support or correct the body alignment of a person, for the treatment of a person's physical condition, and may only be used as a treatment intervention where a specific written plan of care has been developed and the person consents to such use.

(3) "Assisted living care" means the specialized care and services provided by an assisted living community which includes the provision of personal services, the administration of medications by a certified medication aide and the provision of assisted self-preservation.

(4) "Assisted Living Community" means a facility serving 25 residents or more that is licensed by the Georgia Department of Community Health and meets the requirements of an existing health care occupancy found in Chapter 19 of the Life Safety Code or the requirements established in Chapter 34 and 35 of the Life Safety Code as may be applicable for new or existing facilities.

(5) "Assisted self-preservation" as applied to an Assisted Living Community means the capacity of a resident to be evacuated from an assisted living community to a designated point of safety and within an established period of time as determined by the Commissioner. Assisted self-preservation is a function of all of the following:

(A) the condition of the individual;

(B) the assistance that is available to be provided to the individual by the staff of the assisted living community; and

(C) the construction of the building in which the assisted living community is housed, including whether such building meets the safety requirements applicable to an existing Health Care Occupancy or an Assisted Living Community as established by Chapter 34 and 35 of NFPA 101, Life Safety Code, as may be applicable respectively to a new or existing facility, and other safety to life provisions as adopted.

(6) "Community Living Arrangement" means for the purpose of this chapter, any residence whether operated for profit or not which is subject to being licensed by the State, that undertakes through its ownership or management to

provide or arrange for the provision of daily personal services, supports, care or treatment exclusively for two or more adults who are not related to the owner or manager by blood or marriage and whose residential services are financially supported, in whole or in part, by funds designated through the Department of Human Services, Division of Mental Health, Developmental Disabilities, and Addictive Diseases.

(7) "Evacuation Capability, Impractical" Means the total evacuation of all residents from a building or structure cannot be achieved in less than thirteen minutes whether day or night. The evacuation capabilities of residents in all cases are based on the time of day or night when the evacuation of the facility would be most difficult.

(8) "Evacuation Capability, Prompt" means the total evacuation of all residents from the building or structure can be achieved in three minutes or less whether day or night. The evacuation capabilities of residents in all cases are based on the time of day or night when evacuation of the facility would be the most difficult.

(9) "Evacuation Capability, Slow" Means the total evacuation of all residents from the building or structure can be achieved in over three minutes but not in excess of thirteen minutes whether day or night. The evacuation capabilities of residents in all cases are based on the time of day or night when evacuation of the facility would be the most difficult.

(10) "Existing Building" means buildings, structures, facilities or conditions which are already in existence or constructed and officially authorized prior to the effective date for the adoption of this Chapter. This definition shall apply to all situations covered by this chapter except where otherwise noted by this chapter.

(11) "Fire hazard" means an activity, circumstance, condition, situation, combination of materials, material process, use or improper use of heat sources, or that on the basis of applicable documentation, data, or sources deemed reliable by the authority having jurisdiction, can cause an unwanted fire, a fire out of control, an explosion, or a related condition, such as panic from a fear of smoke, fire, or explosion, that the authority having jurisdiction determines it to be a risk to persons, to property, or to the health, safety and or welfare of the jurisdiction.

(12) "Fire Wall" means, for the purpose of this chapter and O.C.G.A. §§ 25-2-4 and 25-2-13, walls of any approved noncombustible construction having sufficient structural stability under fire conditions to allow collapse of construction on either side without collapse of the wall for the duration of time indicated by the required fire-resistance rating, and that comply with the provisions for fire walls in accordance with the International Building Code, as adopted by the Georgia Department of Community Affairs.

(13) "ICC Code" means any of the codes, or portions thereof, as published by the International Code Council and as adopted and modified as set forth in this Chapter or any other chapter of the Safety Fire Commissioner's Rules and Regulations.

(14) "Limited Care (Custodial Care) Facilities" means a building, or part thereof, used on a 24-hour basis, for the housing, lodging or boarding of four or more persons who are incapable of self-preservation because of age, physical limitation(s) due to accident or illness, or mental limitation(s) such as mental illness or chemical dependency. This occupancy classification also includes, but is not limited to TBI Facilities or Traumatic Brain Injury Facilities. See Chapters 18 and 19 of the Life Safety Code for minimum requirements. Also see the definitions of "Assisted Living Community" and "Memory Care Unit".

(15) "Lodging or Rooming House" means a building or portion thereof that does not qualify as a one- or two-family dwelling, that provides sleeping accommodations for a total of 15 or fewer people on a transient or permanent basis, with or without meals, but without separate cooking facilities for individual occupants. Foster homes, group homes, battered spouse shelters, or similar facilities providing lodging and boarding for four but not more than 15 residents or clients, not related by blood or adoption to the owner(s) or operator(s) shall be deemed a lodging or rooming house.

(16) "Memory care unit" means the assisted living community, or specialized unit thereof, that either holds itself out as providing additional or specialized care to persons with diagnoses of probable Alzheimer's Disease or other dementia who may be at risk of engaging unsafe wandering activities outside the unit or assisted living community

(eloping), or charges rates in excess of those charged other residents because of cognitive deficits which may place the residents at risk of eloping.

(17) "Mobile or portable classroom structure" means a portable structure built on a chassis, designed as a temporary student classroom structure for educational purposes, and designed to be used with or without a permanent foundation.

(18) "Mobile or portable classroom structure, Existing" means a mobile or portable classroom structure approved, constructed and placed in use before the effective date of this Subject 120-3-3.

(19) "NFPA Code or Standard" means, for the purposes of the Safety Fire Commissioner's Rules and Regulations, any of the codes or standards, or portions thereof, as published by the National Fire Protection Association (NFPA) and as adopted and modified in this Subject 120-3-3.

(20) "Occupiable Story" means, for the purpose of this chapter and the codes and standards adopted herein, a story occupied by people on a regular basis. Stories used exclusively for mechanical equipment rooms, elevator penthouses and similar spaces are not occupiable stories.

(21) "Personal Care Home" means, for the purposes of this chapter and O.C.G.A. § 25-2-13(b)(1)(J), a facility licensed by the Georgia Department of Community Health as a personal care home. A personal care home is further defined as any dwelling, whether operated for profit or not, which undertakes through its ownership or management to provide or arrange for the provision of housing, food service, and one or more personal services for two or more adults who are not related to the owner or administrator by blood or marriage. Personal Care Homes not designated as an "Assisted Living Community" or a "Memory Care Unit" shall comply with the provisions of Chapter 32 or 33, as applicable for Residential Board and Care Occupancies of NFPA 101.

(22) "Primary Level of Exit Discharge" means the story which is level with or above finished grade by more than fifty percent (50%) of the cubic volume of the occupiable story. Building levels below the primary level shall not count as a story in determining the height of a building.

(23) "Residential Board and Care Occupancies" means a building, or part thereof, which is used for lodging and boarding of four or more residents who are not related by blood or marriage to the owners or operators, for the purpose of providing personal care services. Such facilities may also be utilized as a Community Living Arrangement. Either use must be licensed by the State agency having licensing jurisdiction. Any facility providing lodging and boarding and personal care for four or more residents who are mostly incapable of self-preservation, except brain injury centers, because of physical or mental disability, shall require relocation of so classified excess residents to an appropriate health care facility meeting, at the least, the provisions, for limited care facilities as set forth by NFPA 101.

(24) "Self-Preservation", except as defined in NFPA 101 for day-care occupancies, means the ability to respond to an emergency condition, whether caused by fire or otherwise, and escape the emergency without physical, hands-on assistance from staff. The resident may move from place to place by walking, either unaided or aided by prosthesis, brace, cane, crutches, walker or handrails, or by propelling a wheelchair.

(25) "Sleeping Accommodations for Hire" means, for the purpose of this chapter and O.C.G.A. § 25-2-13(b)(1), and the adopted codes herein, a bed, whether single, double, queen, or king, which is for hire or rental, whether by the day, week, month, or some other period of time.

(26) "Stories" means, for the purpose of O.C.G.A. § 25-2-13(b)(1) and the codes and standards adopted herein, that level starting at the primary level of exit discharge and ending at the highest occupiable story. A building level below the primary level shall not count as a story in determining the height of a building.

Cite as Ga. Comp. R. & Regs. R. 120-3-3-.03

AUTHORITY: O.C.G.A. §§ 25-2-4**,** 33-2-9**,** 50-13-21.

HISTORY: Original Rule entitled "Modifications, Additions and Deletions to Standards Adopted" adopted. F. Feb. 8, 1979; eff. Mar. 1, 1979, as specified by the Agency.

Amended: F. Aug. 6, 1982; eff. Sept. 1, 1982, as specified by the Agency.

Amended: F. July 7, 1983; eff. August 1, 1983, as specified by the Agency.

Amended: F. Apr. 23, 1986; eff. May 15, 1986, as specified by the Agency.

Repealed: New Rule entitled "Request for Modification of Specific Requirements" adopted. F. Sept. 30, 1987; eff. Nov. 1, 1987, as specified by the Agency.

Repealed: New Rule of same title adopted. F. Dec. 3, 1990; eff. Jan. 1, 1991, as specified by the Agency.

Amended: F. July 9, 1998; eff. July 29, 1998.

Amended: F. Dec. 21, 1999; eff. Jan. 10, 2000.

Repealed: New Rule "Definitions" adopted. F. Aug. 21, 2003; eff. Sept. 10, 2003.

Repealed: New Rule of same title adopted. F. Jan. 12, 2007; eff. Feb. 1, 2007.

Repealed: New Rule of same title adopted. F. Feb. 17, 2010; eff. Mar. 9, 2010.

Repealed: New Rule of same title adopted. F. Jan. 10, 2014; eff. Jan. 30, 2014.

Amended: F. Dec. 13, 2019; eff. Jan. 1, 2020, as specified by the Agency.

Amended: F. May 7, 2025; eff. May 27, 2025.

120-3-3-.04 State Minimum Fire Safety Standards with Modifications

(1) **Applicability.** Unless otherwise stated in this chapter, the edition of the International Fire Code (IFC), and the following editions of the codes, standards, recommended practices, guides and methods, as published in the National Fire Codes (NFC) by the National Fire Protection Association (NFPA), as adopted and modified in this Chapter, shall be the state minimum fire safety standards. Where any of the adopted publications of the NFPA references NFPA 1 or NFPA 5000, or any fire code or building code, it shall be construed that such references apply to the International Fire Code (IFC) or the International Building Code (IBC) respectively, as adopted by this Chapter, and the Georgia Department of Community Affairs. Where the IFC or IBC does not specifically address the referenced issue, NFPA 1 or NFPA 5000 may be applied subject to the approval of the authority having jurisdiction.

(2) **Application of Fire and Life Safety Rules and Regulations Adopted by CMS.** Hospitals, hospices, ambulatory surgical centers, nursing homes, assisted living communities, assisted living homes, memory care units or other health care type occupancies or facilities that are regulated by the federal Centers for Medicare and Medicaid Services (CMS) shall comply with the fire and life safety rules and regulations imposed by that agency even though the codes and standards or the editions of codes and standards adopted by that agency may not be specifically addressed or included in this Chapter. The codes and standards adopted and modified herein shall also apply where applicable and shall be deemed to be the minimum state fire and life safety standards where they are at least as protective as the CMS rules and regulations.

(3) **International Fire Code (IFC), 2018 Edition.**

(a) **Modifications to Chapter 1:**

1. Delete section 101.1 in its entirety and substitute in its place the following:

101.1 Title. The International Fire Code, 2018 edition, published by the International Code Council, when used in conjunction with this Chapter, shall be known as a Georgia State Minimum Fire Prevention Code, hereafter referred to as 'this Code'.

2. Delete section 101.3 in its entirety and substitute in its place the following:

101.3 **Purposes and Intents of This Code.** The primary purpose of this Code, as adopted, is to provide, along with other adopted codes and standards, for the reasonable minimum protection of life and property from the hazards created by fire, smoke, explosion, or panic created from a fear of fire or smoke. It is intended that the purposes of this Code be accomplished by:

(1) Coordinating application and enforcement of its provisions with those of other applicable laws, rules, regulations, codes, and standards; and,

(2) By coordinating the application of its provisions, where possible, with educational programs or efforts designed to bring about changes in high risk attitudes and behaviors that are the root causes of most fire related problems in Georgia; and

(3) By encouraging or requiring informational and awareness programs designed to make the citizens of Georgia aware of their responsibilities for compliance with this *Code* as well as the other Rules and Regulations of the Safety Fire Commissioner. The intent of this *Code* is to establish the minimum requirements, consistent with nationally recognized good practice, for providing a reasonable level of life safety and property protection from the hazards of fire, explosion, or dangerous conditions in new and existing buildings, structures, and premises and to provide safety to fire fighters and emergency responders during emergency operations.

3. Add an exception to section 102.1 to read as follows:

Exception: This Code does not apply to one and two family dwellings or one and two family row houses (townhouses) separated by a 2-hour fire wall containing not more than three dwelling units per structure.

4. Add an exception to section 102.2 to read as follows:

Exception: This Code does not apply to one and two family dwellings or one- and two-family row houses (townhouses) separated by a 2-hour fire wall containing not more than three dwelling units per structure.

5. Delete section 102.3 in its entirety and substitute in its place the following:

102.3 **Change of use or occupancy.** No change shall be made in use or occupancy of any building or structure that would place the structure in a different division of the same group or occupancy or in a different group of occupancies, unless such structure is made to comply with the requirements of this *Code*, as may be applicable, as well as those of the *International Building Code (IBC)*, as adopted by the Department of Community Affairs. Pursuant to O.C.G.A. § 25-2-14, due to a change of use or occupancy of a building or structure the building or structure shall be treated as a proposed new building. (Refer to 103.3 of this *Code* regarding the requirements applicable to proposed new buildings and structures.)

6. Delete section 102.4 in its entirety and substitute in its place the following:

102.4 **Application of the building code.** The design and construction of proposed (new) buildings and structures shall comply with the *International Building Code (IBC)*, as modified and adopted by the Georgia Department of Community Affairs. Repairs, alterations, additions, changes in use or occupancy classification, or changes in buildings or structures required by provisions of the *IFC*, and which are within the scope of the *IBC*, shall be made in accordance with the *IBC*, for purposes of this Chapter.

7. Add a new 102.5.1 to read as follows:

102.5.1 The provisions of 102.5 shall apply to local authorities having jurisdiction unless there is a change of use or occupancy that would apply under 102.3 and which would bring the new use or occupancy under the jurisdiction of O.C.G.A. § 25-2-13(b)(1).

8. Delete section 102.6 in its entirety and insert in its place the following:

102.6 **Historic Buildings, General.** O.C.G.A. § 25-2-13(a)(2) defines a "Historic building or structure" as any individual building which contributes to the historic character of a historic district, so designated by the state historic preservation officer pursuant to rules and regulations adopted by the Board of Natural Resources, or so designated pursuant to the provisions of Article 2 of Chapter 10 of Title 44, "the Georgia Historic Preservation Act".

(A) Refer to 102.1 and 102.2 regarding the application of this *Code* to existing buildings. Except to the extent required by applicable laws of Georgia (O.C.G.A. § 25-2-13(b)(3)(D) and (E)), the provisions of this *Code* are not mandatory for buildings or structures identified and classified by the state, or as appropriate, a local jurisdiction, as historic buildings when such buildings or structures are judged by the fire code official to be safe and in the public interest of health, safety and welfare, based on the criteria established by the referenced provisions of the Official Code of Georgia Annotated. When evaluating the safety of historic buildings the fire official should consult Title 8, Chapter 2, Article 3 entitled, *"Uniform Act for the Application of Building and Fire Related Codes to Existing Buildings*", and the provisions of O.C.G.A. §§ 25-2-13(b)(3) and 25-2-13(b)(4), and NFPA Standard 914, Code for Fire Protection of Historic Structures, as adopted by this Chapter as a recommended practice.

9. Delete section 102.7 in its entirety and substitute in its place the following:

102.7 **Referenced codes and standards.** Where the provisions of this *Code* or the standards referenced thereby and in Chapter 45 of this *Code* do not apply to the specific subjects, situations or conditions encountered that involve risks to life and property from the hazards of fire, panic from fear of fire or smoke, or related hazards, compliance with the applicable chapters of the Rules and Regulations of the Safety Fire Commissioner shall be evidence of compliance with this *Code*.

10. Add a new section 102.13 to read as follows:

102.13 **Coordination of provisions.** This *Code* shall apply to all buildings, structures and facilities as provided in subsections 102.1 and 102.2, and shall be utilized in conjunction with codes and standards specified in **Table 102.13** entitled, **CODES REFERENCE GUIDE.**

Table 102.13 Codes Reference Guide

Area	**Primary**	**Supplement**
Occupancy Classification	LSC	IBC
Building Construction Types, including allowable height, allowable building area, and the requirements for sprinkler protection related to minimum building construction types	IBC	LSC
Means of Egress	LSC	NONE
Standpipes	IBC	IFC
Interior Finish	LSC	NONE
HVAC Systems	IMC	NONE
Vertical Openings	LSC	NONE
Sprinklers Systems minimum construction standard	LSC	NONE
Fire Alarm Systems	LSC	NONE
Smoke alarms & Smoke Detection Systems	State Statute & LSC	NONE
Portable Fire Extinguishers	IFC	NONE
Cooking Equipment	LSC & NFPA 96	NONE

Table 102.13 Codes Reference Guide

Fuel Fired Appliances	IFGC	NFPA 54
Liquid Petroleum Gas	NFPA 58	NFPA 54
Compressed Natural Gas	NFPA 52	NONE

11. Delete section 103 and all sections there-under in their entirety and substitute in its place the following:

SECTION 103. **GENERAL PROVISIONS FOR EXISTING AND PROPOSED (NEW) BUILDINGS.**

103.1 **General Provisions.** The administration, enforcement and penalty provisions of Title 25, Chapter 2, and the administrative provisions of the various chapters of the Rules and Regulations of the Safety Fire Commissioner shall apply to and regulate the application and enforcement of this *Code* by the Safety Fire Division of the Office of the Safety Fire Commissioner.

NOTE: Nothing herein shall be construed as prohibiting any local jurisdiction from adopting the deleted portions of Chapter 1 of this *Code* for local purposes, provided, however, local amendments shall not be less restrictive than this *Code*, and other codes and standards as adopted by the various chapters of the Rules and Regulations of the Safety Fire Commissioner.

103.1.1 The provisions of Title 25, Chapter 2, and other applicable state laws, and the applicable provisions of various chapters of the Rules and Regulations of the Safety Fire Commissioner regarding the requirements for certificates, licenses, permits, plan reviews, inspections, approvals, fees, etc. shall apply and are in addition to any requirements of local jurisdictions. Local authorities having jurisdiction need to be consulted to determine if rules and regulations of the local jurisdiction regarding the requirements for local certificates, licenses, permits, plan reviews, inspections, approvals, fees, etc. also apply.

103.1.1.1 The administrative, operational, and maintenance provisions of this *Code*, with regard to the Safety Fire Division of the Office of the Georgia Safety Fire Commissioner, shall be limited to the scope and intents and purposes of the Title 25, Chapter 2, and the Commissioner's Rules and Regulations.

103.1.1.1.1 Pursuant to O.C.G.A. § 25-2-13(d), every person who owns or controls the use of any building, part of a building, or structure described in O.C.G.A. § 25-2-13(b)(1), which because of floor area, height, location, use or intended use as a gathering place for large groups, or use or intended use by or for the aged, the ill, the incompetent, or the imprisoned, constitutes a special hazard to property or to the life and safety on account of fire or panic from fear of fire, must so construct, equip, maintain, and use such building or structure as to afford every reasonable and practical precaution and protection against injury from such hazards. No person who owns or controls the use or occupancy of such a building or structure shall permit the use of the premises so controlled for any such specially hazardous use unless he has provided such precautions against damage to property or injury to persons by these hazards as are found and determined by the Commissioner in the manner described in O.C.G.A. § 25-2-13(d) to be reasonable and practical.

103.2 **Existing buildings.** Every building and structure existing as of April 1, 1968, which building or structure is listed in paragraph (1) of subsection (b) of O.C.G.A. § 25-2-13 shall comply with the minimum fire safety standards in the Rules and Regulations of the Safety Fire Commissioner promulgated pursuant to O.C.G.A. § 25-2 which were in effect at the time such building or structure was constructed.

Exception 1: Any nonconformance noted under the electrical standards adopted at the time such building or structure was constructed shall be corrected in accordance with the current electrical standards adopted pursuant to O.C.G.A. § 25-2-1 *et seq*.

Exception 2: A less restrictive provision contained in any subsequently adopted minimum fire safety standard pursuant to O.C.G.A. § 25-2-1 *et seq.*, may be applied to any existing building or structure.

103.2.1 Existing buildings to be deemed a proposed building. For the purposes of O.C.G.A. § 25-2-14(b), any existing building or structure listed in paragraph (1) of subsection (b) of O.C.G.A. § 25-2-13 and which comes under the jurisdiction of the Office of the Safety Fire Commissioner, pursuant to O.C.G.A. § 25-2-12, shall be deemed to

be a proposed (new) building in the event such building or structure is subject to substantial renovation, a fire or other hazard of serious consequence, or a change in the classification of occupancy, or a change to the occupant load or structure issued as a condition of occupancy. The term "substantial renovation", for purposes of this subsection means any construction project involving exits or internal features of such building or structure costing more than the building's or structure's assessed value according to county tax records at the time of such renovation (O.C.G.A. § 25-2-14). Where a change of classification is involved, also refer to 102.3 of this *Code.*

103.3 **Proposed (new) buildings and additions to existing buildings:**

103.3.1 Pursuant to O.C.G.A. § 25-2-14.1(b), every proposed building and structure listed in paragraph (1) of subsection (b) of O.C.G.A. § 25-2-13 shall comply with the adopted minimum fire safety standards that were in effect on the date that plans and specifications therefore were received by the state fire marshal, the proper local fire official marshal, or state inspector for review and approval. Complete plans for proposed (new) buildings and structures recorded as received by the authority having jurisdiction for review prior to the effective date of this Chapter, may be reviewed under the codes, standards, and Rules and Regulations of the Safety Fire Commissioner in force prior to the effective date of this Chapter.

103.3.1.1 Projects receiving a construction permit under earlier editions of the codes and standards must start construction no later than 360 days from the issue date of the permit in order not to require resubmittal for review under the newer adopted codes and standards.

103.3.2 Plans and specifications for all proposed buildings which come under classification in paragraph (1) of subsection (b) of O.C.G.A. § 25-2-13 and which come under the jurisdiction of the Office of the Safety Fire Commissioner pursuant to O.C.G.A. § 25-2-12 shall be submitted to and receive approval by either the state fire marshal, the proper local fire marshal, or state inspector before any state, municipal, or county building permit may be issued or construction started pursuant to O.C.G.A. § 25-2-14(a). All such plans and specifications submitted as required by O.C.G.A. § 25-2-14(a) shall be accompanied by a fee in the amount provided in O.C.G.A. § 25-2-4.1 and shall bear the seal and Georgia registration number of the drafting architect or engineer or shall otherwise have the approval of the Commissioner.

103.3.3 Pursuant to O.C.G.A. § 25-2-37(a), it shall be unlawful for any person to begin construction on any proposed building or structure which comes under the classification in paragraph (1) of subsection (b) of O.C.G.A. § 25-2-13 and which comes under the jurisdiction of the Office of the Safety Fire Commissioner pursuant to O.C.G.A. § 25-2-12 without first having plans approved in accordance with O.C.G.A. § 25-2-14.

103.4 **Proposed building construction and completion.** Pursuant to O.C.G.A. § 25-2-14(b), a complete set of plans and specifications approved as set forth in 103.3.3 shall be maintained on the construction site, and construction shall proceed in compliance with the state minimum fire safety standards under which such plans and specifications were approved. The owner of any such building or structure or his authorized representative shall notify the state fire marshal, the proper local fire marshal, or state inspector upon completion of approximately 80 percent of the construction thereof and shall apply for a certificate of occupancy when construction of such building or structure is completed.

103.5 **Certificate of occupancy required.** Pursuant to O.C.G.A. § 25-2-14(c), every building or structure which comes under classification in paragraph (1) of subsection (b) of O.C.G.A. § 25-2-13 and which comes under the jurisdiction of the Office of the Safety Fire Commissioner pursuant to O.C.G.A. § 25-2-12 shall have a certificate of occupancy issued by the state fire marshal, the proper local fire marshal, or state inspector before such building or structure may be occupied. Such certificates of occupancy shall be issued for each business establishment within the building, shall carry a charge in the amount provided in O.C.G.A. § 25-2-4.1, shall state the occupant load for such business establishment or building, shall be posted in a prominent location within such business establishment or building, and shall run for the life of the building, except as provided in O.C.G.A. § 25-2-14(d). See 103.2.1 of the IFC, as adopted by this Chapter.

12. The provisions of section 105, PERMITS, are not adopted for purposes of this Chapter. Local governing authorities may adopt the provisions for local purposes. Refer to section 103.3 with regard to permits required by the Rules and Regulations of the Safety Fire Commissioner.

13. The provisions of section 109, BOARD OF APPEALS, are not adopted for purposes of this Chapter. Local governing authorities may adopt the provisions for local purposes.

14. Delete section 110.4 and all sections there-under in their entirety and substitute in its place the following:

110.4 **Violation penalties.** Persons who shall violate a provision of this *Code* or shall fail to comply with any of the requirements thereof or who shall erect, install, alter, repair or do work in violation of the approved construction documents or directive of the fire code official, or of a permit or certificate used under provisions of this *Code*, shall be guilty of violation of Section 25-2-37 of the Official Code of Georgia Annotated. Each day that a violation continues after due notice has been served shall be deemed a separate offense.

110.4.1 **Abatement of violation.** In addition to the imposition of the penalties herein described, the fire code official is authorized to institute appropriate action to prevent unlawful construction or to restrain, correct or abate a violation; or to prevent illegal occupancy of a structure or premises; or to stop an illegal act, conduct of business or occupancy of a structure on or about any premises.

15. Delete Section 111 Unsafe Buildings and replace it with the following: Section 111 - Unsafe Structures or Equipment

111.1 General. If during the inspection of a premises, a structure, or any building system, in whole or in part, constitutes a clear and inimical threat to human life, safety, or health, the fire code official shall issue such notice or orders to remove or remedy the conditions as shall be deemed necessary in accordance with this section, and shall refer the building to the building official for any repairs, alterations, remodeling, removing or demolition required.

111.1.1 Unsafe conditions. Structures or existing equipment that are or hereafter become unsafe, insanitary or deficient because of inadequate means of egress, inadequate light and ventilation, or that constitute a fire hazard, are otherwise dangerous to human life or the public welfare, or involve illegal or improper occupancy or inadequate maintenance, shall be deemed an unsafe condition. Unsafe structures shall be taken down and removed or made safe, as the fire code official deems necessary and as provided for in this section. A vacant structure that is not secured against unauthorized entry shall be deemed unsafe.

111.1.2 Structural hazards. Where an apparent structural hazard is caused by the faulty installation, operation or malfunction of any of the items or devices governed by this code, the fire code official shall immediately notify the building code official in accordance with Section 115.1.

111.2 Evacuation. The fire code official or the fire department official in charge of an incident shall be authorized to order the immediate evacuation of any occupied structure deemed unsafe where such structure has hazardous conditions that pose an imminent danger to structure occupants. Persons so notified shall immediately leave the structure or premises and shall not enter or re- enter until authorized to do so by the fire code official or the fire department official in charge of the incident.

111.3 Record. The fire code official shall cause a report to be filed on an unsafe condition. The report shall state the occupancy of the structure and the nature of the unsafe condition.

111.4 Notice. If an unsafe condition is found, the fire code official shall serve on the owner of the structure or the owner's authorized agent a written notice that describes the condition deemed unsafe and specifies the required repairs or improvements to be made to abate the unsafe condition, or requires the unsafe structure to be demolished within a stipulated time. Such notice shall require the person thus notified to declare immediately to the fire code official acceptance or rejection of the terms of the order.

111.5 Method of service. Such notice shall be deemed properly served where a copy thereof is served in accordance with one of the following methods:

1. A copy is served upon the owner personally.

2. A copy is sent by certified or registered mail addressed to the owner at the principal place of business or last address of record in the Commissioner's office with return receipt requested; or

3. A copy is delivered in any other manner prescribed by law.

Service of such notice in the foregoing manner on the owner's authorized agent shall constitute service of notice on the owner.

111.6 Restoration or abatement. The structure or equipment determined to be unsafe by the fire code official is permitted to be restored to a safe condition. The owner, the owner's authorized agent, operator or occupant of a structure, premises or equipment deemed unsafe by the fire code official shall abate or cause to be abated or corrected such unsafe conditions either by repair, rehabilitation, demolition or other approved corrective action. To the extent that repairs, alterations or additions are made or a change of occupancy occurs during the restoration of the structure, such repairs, alterations, additions or change of occupancy shall comply with the requirements of Section 10S.1.5 and the International Existing Building Code.

111.7 Summary abatement. Where conditions exist that are deemed hazardous to life and property, the fire code official or fire department official in charge of the incident is authorized to abate summarily such hazardous conditions that are in violation of this code.

16. The provisions of section 113, SERVICE UTILITIES, are not adopted for purposes of this Chapter. Local governing authorities may adopt the provisions for local purposes.

(b) **Modifications to Chapter 2:**

1. Delete section 201.3 in its entirety and substitute in its place the following:

201.3 **Terms defined in other codes.** Where terms are not defined in Rule 120-3-3-.03 or other applicable chapters of the Rules and Regulations of the Safety Fire Commissioner, or this *Code* and are defined in the *International Building Code (IBC), the International Fuel Gas Code (IFGC), the International Mechanical Code (IMC),* or the codes and standards of the National Fire Protection Association (NFPA), as adopted by this Chapter and other Rules and Regulations of the Safety Fire Commissioner, such terms shall have the meanings ascribed to them as in those codes and standards.

2. Delete Institutional Group I-2 in its entirety and replace with:

Institutional Group I-2. Institutional Group I-2 occupancy shall include buildings and structures used for medical care on a 24-hour basis for more than five persons who are not capable of self-preservation. This group shall include, but not be limited to, the following: Foster care facilities, Detoxification facilities, Hospitals, Nursing homes, Psychiatric hospitals, Assisted Living Communities, Memory Care Units, and Limited Care Facilities (Limited Healthcare).

(c) **Modifications to Chapter 3:**

1. Delete section 303.5 in its entirety and substitute in its place the following:

303.5 **Portable Fire Extinguishers.** There shall be at least one portable fire extinguisher complying with Section 906 and with a minimum 2-A:40-B:C rating within 25 feet (7620 mm) of each asphalt (tar) kettle during the period such kettle is being utilized, and a minimum of one additional portable fire extinguisher with a minimum 3-A:40-B:C rating on the roof being covered.

2. Add new exceptions 4, 5, 6, 7 and 8 to section 308.3 to read as follows:

Exception #4:

In Group A public assembly occupancies having an occupant load greater than 300, a minimum ceiling height of 25 feet and that are protected throughout by an approved, supervised automatic sprinkler system installed in accordance with NFPA 13, as adopted by this Chapter, pyrotechnic special effect devices shall be permitted to be used on stages before proximate audiences for ceremonial or religious purposes, as part of a demonstration in exhibits, or as part of a performance, provided that precautions satisfactory to the authority having jurisdiction are taken to prevent ignition of any combustible material and use of the pyrotechnic device complies with NFPA 1126, *Standard for the Use of Pyrotechnics before a Proximate Audience*, as adopted by Subject 120-3-22 Rules and Regulations of the Safety Fire Commissioner. The ceiling height may be lowered to a minimum of 15 feet upon approval of the authority having jurisdiction having witnessed a demonstration shot of all types of devices being used in the display.

Exception #5:

In Group A public assembly occupancies having an occupant load greater than 300, a minimum ceiling height of 25 feet and that are protected throughout by an approved, supervised automatic sprinkler system installed in accordance with NFPA 13, as adopted by this Chapter, flame effects before an audience shall be permitted in accordance with NFPA 160, *Standard for Flame Effects Before an Audience*, as adopted by Subject 120-3-22 Rules and Regulations of the Safety Fire Commissioner. The ceiling height may be lowered to a minimum of 15 feet upon approval of the authority having jurisdiction having witnessed a demonstration of all types of devices being used in the display.

Exception #6:

On stages and platforms as a necessary part of a performance in public assembly occupancies having an occupant load greater than 300, a minimum ceiling height of 25 feet and that are protected throughout by an approved, supervised automatic sprinkler system installed in accordance with NFPA 13, as adopted by this Chapter. The ceiling height may be lowered to a minimum of 15 feet upon approval of the authority having jurisdiction having witnessed a demonstration of all types of devices being used in the display.

Exception #7:

In Group A public assembly occupancies having an occupant load greater than 100 with fixed seating, a minimum ceiling height of 25 feet and that have a minimum of two certified fire fighters on site with proper firefighting equipment as determined by the local fire official, pyrotechnic special effect devices shall be permitted to be used on stages before proximate audiences for ceremonial or religious purposes, as part of a demonstration in exhibits, or as part of a performance, provided that precautions satisfactory to the authority having jurisdiction are taken to prevent ignition of any combustible material and use of the pyrotechnic device complies with NFPA 1126, *Standard for the Use of Pyrotechnics before a Proximate Audience*, as adopted by Subject 120-3-22 Rules and Regulations of the Safety Fire Commissioner. The ceiling height may be lowered to a minimum of 15 feet upon approval of the authority having jurisdiction having witnessed a demonstration shot of all types of devices being used in the display.

Exception #8:

In public assembly occupancies having an occupant load greater than 100 with fixed seating, a minimum ceiling height of 25 feet and that have a minimum of two certified fire fighters on site with proper firefighting equipment as determined by the local fire official, flame effects before an audience shall be permitted in accordance with NFPA 160, *Standard for Flame Effects Before an Audience*, as adopted by this Chapter. The ceiling height may be lowered to a minimum of 15 feet upon approval of the authority having jurisdiction having witnessed a demonstration of all types of devices being used in the display.

3. Delete section 310.1 "General" its entirety and substitute in its place the following:

310.1 **General.** The smoking or carrying of a lighted pipe, cigar, cigarette or any other type of smoking paraphernalia or material is prohibited in areas indicated in Sections 310.2 through 31.8, buildings, structures, or areas, or portions of buildings, structures, or areas, as indicated is this *Code*, or where prohibited by Chapter 12A of Title 31.

4. Delete section 319.1 'General' its entirety and substitute in its place the following:

319.1 **General.** Mobile food preparation vehicles that are equipped with appliances that produce smoke or grease-laden vapors shall comply with NFPA 96, *Standard for Ventilation Control and Fire Protection of Commercial Cooking Operations* as adopted by this Subject 120-3-3 and this section.

5. Delete section 319.3 'Exhaust hood' in its entirety and substitute in its place the following:

319.3 **Exhaust hood.** Cooking equipment that produces grease-laden vapors shall be provided with a kitchen exhaust hood that complies with NFPA 96, *Standard for Ventilation Control and Fire Protection of Commercial Cooking Operations* as adopted by this Subject 120-3-3.

6. Delete section 319.4 'Fire protection' in its entirety and substitute in its place the following:

319.4 **Fire protection.** Fire protection shall be provided in accordance with NFPA 96, *Standard for Ventilation Control and Fire Protection of Commercial Cooking Operations* as adopted by this Subject 120-3-3-.03 of the Rules and Regulations of the Safety Fire Commissioner.

7. Add a new Section 320 to read as follows:

320. **Lithium-Ion and Lithium-Ion Metal Battery Storage**

320.1 **General.** The storage of lithium-ion and lithium-ion metal batteries shall comply with Section 320.

Exceptions:

1. New or refurbished batteries installed in the equipment, devices, or vehicles they are designed to power.

2. New or refurbished batteries packed for use with the equipment, devices, or vehicles they are designed to power.

3. Batteries in original retail packaging that are rated at no more than 300 watt-hours for lithium-ion batteries or contain no more than 25 grams of lithium metal for lithium metal batteries.

4. Temporary storage of batteries or battery components during the battery manufacturing process prior to the completion of final quality control checks.

5. Temporary storage of batteries during the vehicle manufacturing or repair process.

320.2 **Permits.** If required by the local governing authority permits shall be required for an accumulation of more than 15 cubic feet (0.42 m3) of lithium-ion ad lithium metal batteries, other than batteries listed in the exceptions 320.1.

320.3 **Fire Safety Plan.** A fire safety plan shall be provided in accordance with Section 404.

320.4 **Storage Requirements.** Lithium-ion and lithium metal batteries shall be stored in accordance with Section 320.4.1, 320.4.2, 320.4.3 or 320.4.4, as applicable.

320.4.1 **Storage Classification.** Lithium-ion and lithium metal batteries shall be classified as high-hazard commodities as defined in Section 3203.6.

320.4.1.1. Where required by the fire code official, where the top of storage is greater than 6 feet (1829 mm) in height lithium-ion and lithium metal battery storage shall be classified as high piled combustible storage.

320.4.2 **Limited indoor storage in containers.** Not more than 15 cubic feet (0.42 m3) of lithium-ion or lithium metal batteries shall be permitted to be stored in containers in accordance with all of the following:

1. Containers shall be open top and constructed of noncombustible materials or shall be approved for battery collection.

2. Individual containers or groups of containers shall not exceed a capacity of 7.5 cubic feet (0.21 m3).

3. A second container or group of containers shall be separated by not less than 3 feet (914 mm) of open space or 10 feet (3048 mm) of space that contains combustible materials.

4. Containers shall be located not less than 5 feet (1524 mm) from exits or exit access doors.

320.4.3 **Indoor storage areas.** Indoor storage areas for lithium-ion or lithium metal batteries, other than those complying with Section 320.4.2, shall comply with 320.4.3.1 through 320.4.3.6.

320.4.3.1 **Technical opinion and report.** A technical opinion and report complying with Section 104.7.2 shall be prepared to evaluate the fire and explosion risk associated with the indoor storage area and to make recommendations for fire and explosion protection. The report shall be submitted to the fire code official and shall require the fire code official's approval prior to the issuance of a permit. In addition to the requirements of Section 104.7.2, the technical opinion and report shall specifically evaluate the following:

1. The potential for deflagration of flammable gases released during a thermal runaway event.

2. The basis of design for an automatic sprinkler system or other approved fire suppression system. Such design basis shall reference relevant full scale fire testing or other approved method of demonstrating sufficiency of the recommended design.

320.4.3.2 **Construction requirements.** Where indoor storage of lithium-ion or lithium metal batteries are located in a building with other uses, battery storage areas shall be separated from the remainder of the building by 2-hour fire rated fire barriers or horizontal assemblies constructed in accordance with Section 8.3 of NFPA 101 as adopted in this Chapter.

Exceptions:

1. Where battery storage is contained in one or more approved prefabricated portable structures providing a complete 2-hour fire-resistance-rated enclosure, fire barriers and horizontal assemblies are not required.

2. Where battery storage is limited to new batteries in packaging that has been demonstrated to and approved by the fire code official sufficient to isolate a fire in packaging to the package interior, fire barriers and horizontal assemblies are not required.

320.4.3.3 **Fire protection systems.** Indoor storage areas for lithium-ion or lithium metal batteries shall be protected by an automatic sprinkler system complying with NFPA 13 or an approved alternative fire suppression system. The system design shall be based on the recommendations in the approved technical opinion and report required by Section 320.4.3.1.

320.4.3.4 **Fire alarm systems.** Indoor storage areas for lithium-ion or lithium metal batteries shall be provided with an approved automatic fire detection and alarm system complying with NFPA 72. The fire detection system shall use air-aspirating smoke detection, radiant energy-sensing fire detection or both.

320.4.3.5 **Explosion control.** Where the approved technical opinion and report required by Section 320.4.3.1 recommends explosion control, explosion control complying with Section 911 shall be provided.

320.4.3.6 **Reduced requirements for storage of partially charged batteries.** Indoor storage areas for lithium-ion or lithium metal batteries with a demonstrated state of charge not exceeding 30 percent shall not be required to comply with Sections 320.4.3.1, 320.4.3.2 and 320.4.3.5, provided that procedures for limiting and verifying that the state of charge will not exceed 30 percent have been approved.

320.4.4 **Outdoor storage.** Outdoor storage of lithium-ion and lithium metal batteries shall comply with Sections 320.4.4.1 through 320.4.4.3.

320.4.4.1 **Distance from storage to exposures.** Outdoor storage of lithium-ion and lithium metal batteries, including storage beneath weather protection in accordance with Section 414.6.1 of the International Building Code as adopted by the Georgia Department of Community Affairs, shall comply with one of the following:

1. Battery storage shall be located not less than 20 feet (6069 mm) from any building, lot line, public street, public alley, public way, or means of egress.

2. Battery storage shall be located not less than 3 feet (914 mm) from any building, lot line, public street, public alley, public way, or means of egress, where the battery storage is separated by a 2-hour fire-resistance-rated assembly without openings or penetrations and exceeding 5 feet (1524 mm) above and to the sides of the battery storage area.

3. Battery storage shall be located not less than 3 feet (914 mm) from any building, lot line, public street, public alley, public way, or means of egress, where batteries are contained in an approved, prefabricated portable structures providing a complete 2-hour fire-resistance-rated enclosure.

320.4.4.2 **Storage area size limits and separation.** Outdoor storage areas of lithium-ion and lithium metal batteries, including storage beneath weather protection in accordance with Section 414.6.1 of the International Building Code as adopted by the Georgia Department of Community Affairs, shall not exceed 900 square feet (83.6 m2). The height of such battery storage in such areas shall not exceed 10 feet (3048 mm). Multiple battery storage areas shall be separated from each other by not less than 10 feet (3048 mm) of open space.

320.4.4.3 **Fire detection.** Outdoor storage areas of lithium-ion and lithium metal batteries, regardless of whether such areas are open, under weather protection or in a prefabricated portable structure, shall be provided with an approved automatic fire detection and alarm system complying with NFPA 72. The fire detection system shall use radiant energy-sensing fire detection.

8. Add a new Section 321 to read as follows:

321 **Micromobility Devices**

321.1 **General.** Lithium-ion and lithium metal battery powered micromobility devices shall be operated and maintained in accordance with this section.

Exceptions:

1. Storage, repair and charging in residential occupancies of powered mobility devices, provided that such devices are for personal use.

2. Charging of a single micromobility device in any occupancy by the owner.

321.1.1 **Micromobility device defined.** Electric bicycles, Personal E-mobility devices, motorized scooters, and other personal mobility devices powered by a lithium-ion or lithium metal battery except that this definition shall not apply to any motor vehicle that is required to be registered with the Motor Vehicle Division of the Department of Revenue.

321.1.2 **Electric bicycle defined.** Two or three wheeled electrical or mechanical device provided with functional pedals that includes one or more electric motors to either assist the rider when pedaling or provide motive power to the wheels when the rider is not pedaling, provided that this definition shall not apply to any motor vehicle that is required to be registered with the Motor Vehicle Division of the Department of Revenue.

312.1.3 **Personal E-mobility Device defined.** A consumer mobility device intended for a single rider with a rechargeable electric drive train that propels the rider, and which may be provided with a handle for grasping while

riding. This device may or may not be self-balancing and may or may not be seated. This definition shall not apply to any motor vehicle that is required to be registered with the Motor Vehicle Division of the Department of Revenue.

312.1.4 **Traction Battery defined.** A rechargeable battery used to power the electric motors of a micromobility product.

321.2 **Battery chargers and equipment.** Powered micromobility devices shall be charged in accordance with their listing and the manufacturer's instructions using only the original manufacturer-supplied charging equipment or charging equipment in accordance with the listing and manufacturer's instructions.

321.3 **Evaluation and Certification.** All micromobility devices and traction batteries for such devices manufactured, distributed, sold, or offered for lease or rent shall meet appropriate safety standards in accordance with this subsection.

1. Electric Bicycles powered by a lithium-ion or lithium metal battery shall be evaluated, tested and certified to UL 2849 and bear the mark of a certifying body.

(A) Evaluation, testing and certification to UL 2849 shall be performed by a Nationally Recognized Testing Laboratory with UL 2849 included within its scope of recognition under the Nationally Recognized Testing Laboratory program.

(B) Certification bodies applying marks to electric bicycles shall have within their scope of accreditation:

(i) ICS code 43.150 Cycles;

(ii) ICS code 43.120 Electric Road Vehicles; and

(iii) UL 2849.

2. Personal E-Mobility Devices shall be evaluated, tested and certified to UL 2272 and bear the mark of a certifying body.

(A) Evaluation, testing and certification to UL 2272 shall be performed by a Nationally Recognized Testing Laboratory with UL 2272 included within its scope of recognition under the Nationally Recognized Testing Laboratory program.

(B) Certification bodies applying marks to personal emobility devices shall have within their scope of accreditation:

(i) ICS code 29.220.99 Other Cells and Batteries;

(ii) ICS code 43.120 Electric Road Vehicles; and

(iii) UL 2272.

3. Traction batteries for use in micromobility devices shall be evaluated, tested and certified to UL 2271 and bear the mark of the certifying body.

(A) Evaluation, testing and certification to UL 2271 shall be performed by a Nationally Recognized Testing Laboratory with UL 2271 included within its scope of recognition under the Nationally Recognized Testing Laboratory program.

(B) Certification bodies applying marks to traction batteries shall have within their scope of accreditation:

(i) ICS code 29.220.99 Other Cells and Batteries;

(ii) ICS code 43.120 Electric Road Vehicles; and

(iii) UL 2271.

321.4 **Battery charging areas**. Where approved, powered micromobility devices shall be permitted to be charged in a room or area that complies with all of the following:

1. The device is provided with sufficient electrical receptacles to allow the charging equipment for each device to be directly connected to a receptacle. Extension cords and relocatable power taps shall not be used.

2. Storage of combustible materials, combustible waste or hazardous materials shall not be permitted.

3. The charging operation shall not be conducted in or obstruct any required means of egress.

4. Removable storage batteries shall not be stacked or charged in an enclosed cabinet unless the cabinet is specially designed and approved for such purpose.

5. A minimum distance of 18 inches (457.2 mm) shall be maintained between each removable storage battery during charging operations unless each battery is isolated from neighboring batteries by an approved fire-resistant material.

6. A minimum of 18 inches (457.2 mm) shall be maintained between the location of the battery on each micromobility device during charging.

7. The indoor room or area shall be protected by a fire alarm system utilizing air-aspirating smoke detectors or radiant energy-sensing fire detection.

321.5 **Fire Safety Plan.** A fire safety plan shall be provided in accordance with 321.6. In addition, the fire safety plan shall include emergency response actions to be taken upon detection of a fire or possible fire involving lithium-ion or lithium metal battery storage.

321.6 **Emergency preparedness requirements for lithium-ion and lithium metal batteries.**

321.6.1. An approved fire safety and evacuation plan in accordance with Section 404 shall be prepared and maintained for occupancies that involve activities for the research and development, testing, manufacturing, handling or storage of lithium-ion batteries or lithium metal batteries, or the repair or servicing of vehicles powered by lithium-ion batteries or lithium metal batteries.

Exceptions: A fire safety and evacuation plan is not required for the storage or merchandizing of any of the following:

1. New or refurbished batteries installed for use in equipment or vehicles they are designed to power.

2. New or refurbished batteries packed for use with the equipment or vehicles they are designed to power for merchandizing purposes.

3. New or refurbished lithium-ion batteries rated at no more than 300 watt-hours and lithium metal batteries containing not more than 25 grams of lithium metal in their original retail packaging.

4. The storage, repair and charging activities in detached one- and two-family dwellings and townhouses, provided that such devices are for personal use.

5. The storage, repair, and charging activities associated with personal use in sleeping units and dwelling units of Group R-1 and R-2 occupancies.

321.6.1.1. **Mitigation planning.** The approved fire safety and evacuation plan shall include thermal runaway event mitigation measures. These measures shall include activities undertaken to prevent thermal runaway, early detection

of a thermal runaway event and mitigation measures to be taken to limit the size and impact of the event on occupants and the facility.

(d) **Modifications to Chapter 4:**

1. Add section 403.1.1 to read as follows:

403.1.1 **Caregiver training**. A minimum of three hours' initial fire safety training for receipt of a certificate of training for successful completion shall be required for all directors, operators and all staff members of day-care facilities (adult and children), and for administrator's, directors, operators and all staff of Group I-1 and Group R-4, assisted living communities, assisted living facilities, community living arrangements, memory care units, personal care homes, and residential board and care homes, as defined in Chapter 2 of this Code or as defined by the Life Safety Code, and or as adopted by Subject 120-3-3 of the Rules and Regulations of the Georgia Safety Fire Commissioner. The curriculum for the fire safety training shall receive written approval by the State Fire Marshal's Office and be taught by an instructor registered with the Safety Fire Commissioner's Office. All persons as required herein to obtain such required training shall receive this training within 90 days from receipt of a license, being commissioned or the opening of a new facility. Such new persons shall receive a minimum of three hours' initial fire safety training and recommendation for receipt of a certificate of training for successful completion of the training within 90 days of employment. In addition, a minimum of two hours of fire safety refresher training shall be required for receipt of a certificate of training for successful completion of the refresher training. The refresher training shall be required for all persons coming under 403.1.1, every three years from the date initial training is received. Registered instructors shall deliver the training based on policies and direction from the State Fire Marshal's Office. Instructors found not to be delivering the training in accordance with the said policies and direction shall be removed from the registry and prohibited from delivering future training.

2. Delete section 403.8.2 in its entirety and substitute in its place the following:

403.8.2 **Group I-2 occupancies.** Group I-2 occupancies to include Assisted Living Communities, Memory Care Units and Limited Care Facilities (Limited Healthcare) shall comply with Sections 401, 403.8.2.1 through 403.8.2.3 and 404 through 406.

(e) **Modifications to Chapter 5:**

1. Add a new section 501.5 to read as follows:

501.5 Where buildings or facilities fall under the jurisdiction of the Georgia Safety Fire Commissioner as set forth in Title 25, Chapter 2, except for State owned facilities and State occupied facilities, it is intended that the provisions of Chapter 5 that primarily relate to fire department response, access to facilities, access to building interiors, key boxes, premises identification, fire department connection locations, and fire hydrant locations be administered by the local Fire Chief or Fire Code Official responsible for providing fire or other emergency response to the buildings or facilities. With regard to State owned State occupied facilities, that are not provided with a facility fire department, it is intended that the local Fire Chief or Fire Code Official providing fire protection to such facilities shall have input in the planning of facilities with regard to the noted provisions covered by Chapter 5.

2. Delete section 503.1.1 in its entirety and substitute in its place the following:

503.1.1 **Buildings and facilities.** Approved fire apparatus access roads shall be provided for every facility, building or portion of a building hereafter constructed or moved into or within the jurisdiction as determined by the local Fire Chief or Fire Code Official of the responding fire department or agency. The fire apparatus access road shall comply with the requirements of this section and Appendix D of this Code. The fire apparatus access road shall extend to within 150 feet (45.7 m) of all portions of the facility or any portion of the exterior wall of the first story of the building as measured by an approved route around the exterior of the building or facility.

Exception: The local Fire Chief or Fire Code Official of the responding fire department or agency is authorized to increase the dimension of 150 feet (45.7 m) where:

1. *The building is equipped throughout with an approved automatic sprinkler system installed in accordance with Section 903.3.1.1, 903.3.1.2 or 903.3.1.3.*

2. *The fire apparatus access roads cannot be installed because of location on the property, topography, waterways, nonnegotiable grades or other similar conditions, and an approved alternative means of fire protection is provided.*

3. *There are not more than two Group R-3 or Group U occupancies.*

3. Add a new section 504.1.1 to read as follows:

504.1.1 **Access Doors.** For fire department emergency access purposes, there shall be at least one access door in each 100 linear feet (30.5 m) or major fraction thereof of the exterior walls which face the access roadways required by Section 503, unless otherwise required in this code section. In exterior walls designed with continuous rolling dock doors, which face access roadways, there shall be at least one access door in each 200 linear feet (61 m) or fraction thereof. Required access doors shall be a minimum of 3 feet (0.9 m) wide and 6 feet 8 inches (2 m) high and shall be accessible without use of a ladder. Rolling doors are acceptable for such purposes in buildings protected throughout by an approved automatic sprinkler system(s) unless otherwise approved for unsprinklered buildings by the local Fire Chief or Fire Code Official.

Exception: The local Fire Chief or Fire Code Official of the responding fire department or agency is authorized to increase the 100 linear feet.

4. Delete section 507.5.1 in its entirety and substitute in its place the following:

507.5.1 **Where required.** Where a portion of the facility or building hereafter constructed or moved into or within the jurisdiction is more than 500 feet (152 m) from a hydrant on a fire apparatus access road, as measured by an approved route around the exterior of the facility or building, on-site fire hydrant and mains shall be provided where required by the local Fire Chief or Fire Code Official of the responding fire department or agency.

Exceptions:

1. *For group R-3 and Group U occupancies, the distance requirement shall be 600 feet (183 m).*

2. *For buildings equipped throughout with an approved automatic sprinkler system installed in accordance with Section 903.3.1.1 or 903.3.1.2, the distance requirement shall be 600 feet (183 m).*

5. Delete subsection 507.5.1.1 in its entirety without substitution. Refer to section 905 of this Code.

6. Delete Section 510 (510.1 through 510.6.4) in its entirety and replace with the following:

Section 510. In-Building Emergency Responder Communications Enhancement Systems.

510.1 In all new and existing buildings, minimum radio signal strength for emergency services department communications shall be maintained at a level determined by the local Fire Chief or Fire Code Official responsible for providing fire or other emergency response to the building.

510.2 In-building emergency responder communication enhancement systems shall comply with the design, installation, testing, inspection, and maintenance requirements in Chapter 18 of NFPA 1225 as adopted in the Rules and Regulations of the Safety Fire Commissioner Subject 120-3-3.

7. **Add a new section, Appendix D 107.1, as follows:**

Developments of one- or two-family dwellings where the number of dwelling units exceeds 120 shall be provided with two separate and approved fire apparatus access roads.

Exceptions:

1. Where there are more than 120 dwelling units on a single public or private fire apparatus access road and all dwelling units are equipped throughout with an approved automatic sprinkler system in accordance with Section 903.3.1.1, 903.3.1.2 or 903.3.1.3, access from two directions shall not be required.

2. The number of dwelling units on a single fire apparatus access road shall not be increased unless fire apparatus access roads will connect with future development, as determined by the fire code official.

3. The fire apparatus access roads cannot be installed because of location on the property, topography, waterways, nonnegotiable grades or other similar conditions, and an approved alternative means of fire protection is provided. Plans shall accompany the written request that delineate improvements to proposed fire apparatus access roads approved by the fire code official of the local responding fire department. Recommended compliance alternatives for residential developments having less than the minimum of two entrances includes, but is not limited to one of more of the following alternative remedies:

1. Enhanced turning radii to meet local responding fire department requirements; or

2. Increased road widths to meet local responding fire department requirements; or

3. Fire Lane signs per D103.6 in locations determined by the Fire Code Official; or

4. The absence of dead-end streets and cul-de-sacs; and unless the requirements meet or exceed Table D103.4 for Fire Apparatus Access Roads; or

5. The primary entrance roadway being a boulevard with medians and each lane meeting fire access road widths; or

6. Single entrance roads providing a dedicated emergency lane separating each drive lane; or

7. Additional fire apparatus access road which is permitted to be a roadway or approved surface not accessible to motor vehicles, designed by a registered design professional to meet the loading requirements and minimum specifications of Appendix D; and this surface provides all weather conditions capabilities for emergency fire department access; or

8. Statement by Fire Code Official that the Plans submitted meet the requirements of Exception 3 or Appendix D for access by local responding fire department:

Pursuant to O.C.G.A. § 25-2-12(e)(4) the local fire official, building official, or developer may obtain a waiver when adequate access appropriate for the fire apparatus of the local responding fire department is not met or provided by using alternative methods on a waiver form designed and prescribed by the Safety Fire Commissioner. The State Fire Marshal or designated representative shall respond within 30 days for the decision for approval or disapproval or recommendations for modifications to the Plan. If the 30-day time frame is not met, the Plans submitted shall be deemed to be approved.

Add a new section, Appendix D 107.2, as follows:

Where two fire apparatus access roads are required, they shall be placed a distance apart equal to not less than one-half of the length of the maximum overall diagonal dimension of the property or area to be served, measured in a straight line between accesses.

(f) **Modifications to Chapter 6:**

1. Add exception number 3 to 603.4 to read as follows:

3. In emergency conditions, when approved by the authority having jurisdiction, equipment designed to be portable may be used for a specified time provided such equipment is properly protected and separated from combustibles as specified by the manufacturer's instructions and the authority having jurisdiction. Such devices shall be supervised

during their period of operation by the establishment of a fire watch system based on the definition of *"Fire Watch"* in Chapter 2 of this Code. Persons assigned to perform fire watch duties shall be instructed as to their duties.

2. Delete section 604.4 in its entirety and substitute in its place the following:

604.4 **Multiplug adapters & Relocatable Power Taps (RPTs).**

604.4.1 Multiplug adapters. The use of multiplug electrical outlet adapters, such as but not limited to cube adapters or plug strips, or any other similar device that is not UL listed and is not equipped with overcurrent protection shall be prohibited. Such devices that are UL listed and are equipped with overcurrent protection shall only be used in accordance with the UL listing and in accordance with the manufacturer's instructions. Such listed devices shall not be used where specifically prohibited by a provision of NFPA 70, National Electrical Code. Where there is any conflict between the UL listing and the manufacturer's instructions, the UL listing provisions shall prevail. The suitability for the use of RTP's shall be based, by the user, on 110.3(A)(1) of the National Electrical Code.

604.4.2 **Relocatable Power Taps (RPT's):**

604.4.2.1 Relocatable Power Taps (RPT's) shall be UL listed and labeled in accordance with UL1363. They shall be of the polarized or grounded type, and be equipped with overcurrent protection. RPT's shall be used in accordance with their UL listing and the manufacturer's instructions. [NEC, 110.3(B)] Where there is any conflict between the UL listing and the manufacturer's instructions, the UL listing provisions shall prevail. Such listed devices shall not be used where specifically prohibited by a provision of NFPA 70, National Electrical Code.

604.4.2.2 **RPT power supply.** RPT's shall be directly connected to a permanently installed electrical receptacle. An RPT shall not be plugged into another RPT or into an extension cord or flexible cord. A UL listed extension cord or flexible cord having only one outlet and serving only one device may be plugged into an RPT so long as the arrangement does not cause an overcurrent condition in the RPT.

604.4.2.3 **RPT power cords.** Power cords of RPT's shall not be extended through holes in walls, structural ceilings, or floors. Such cords shall not be run under doors or floor coverings. They shall not be run through doorways, windows, or similar openings.

604.4.2.4 **Protection from physical damage.** RPT's shall be mounted off floors to a wall or fixture so as to be protected against physical damage. The method of mounting shall not be permanent so that the devices may be easily relocated as need dictates.

604.4.2.5 **Restricted use in Health Care Occupancies.** Hospital grade RPT's listed, based on UL 1363A, for use in "patient care" or "patient sleeping rooms" of a hospital, limited care facility, nursing home, hospice, or ambulatory health care facility may be used in such locations, unless such use is specifically prohibited by this Code, NFPA 70, National Electrical Code, NFPA 101, *Life Safety Code*, NFPA 99, Health Care Facilities Code, or other applicable State or Federal rule or regulation.

3. Insert an Informational Note following section 604.4.2.4 to read as follows:

Informational Note: Based on UL1363, RPT's are intended for indoor use as an extension of a grounding alternating-current branch circuit for general use. Where such devices are used or intended to be used for voltage surge suppression, the RPT is also required by UL1363 to meet the provisions of UL1449 for Transient Voltage Surge Suppressors. UL1363 incorporates this compliance. Such devices may be utilized for the protection of personal or laptop computers, computer related devices, word processors, memory typewriters, and other low load devices. They are not intended for use with high load equipment such as, but not limited to, refrigerators, coffee pots, microwave ovens, toasters, toaster ovens, space heaters, and other high power load devices. The labeling and manufacturer's information and instructions need to be consulted to determine if the RPT is also listed for transient voltage suppression. In addition, some RPT devices have additional options included in the device such as "electrical noise" filtration. UL1363 would also require and ensure that component would meet UL1283. The safety requirements relative RPT's regardless of the various extras that may be included in a device covered by UL1363 and the RPT manufacturer's instructions. RPT's have also been referred to as "Temporary Power Taps (TPT's)", "power strips",

"Surge/Spike Protectors", or "Portable Outlets" among other designations. NFPA 70, *National Electrical Code* (NEC), 2011 edition, does not utilize the term "Relocatable Power Tap or RPT", however, for safety provisions similar to those utilized by UL, reference can be made to NEC Article 400, Flexible Cords and Cables, Article 406, Receptacles, Cord Connectors, and Attachment Plugs (CAPS), and Article 517 Health Care Facilities.

4. Delete section 604.10 and the exception thereto, and substitute in its place the following: Sections 604.10.1 through 604.10.4 remain unchanged.

604.10 Portable, electric space heaters. Portable, electric heaters are prohibited in all portions of occupancies in Groups A, E (including day care), I-1, I-3, R-1, R-2, and R-4. Where not prohibited by other chapters of this Code, or by provisions of NFPA 101, Life Safety Code, as adopted by Subject 120-3-3 of the Rules and Regulations of the Safety Fire Commissioner, portable, electrical space heaters shall be permitted to be used in all other occupancy groups. Where use is permitted, portable electric space heaters shall comply with Sections 604.10.1 through 604.10.5 and 604.10.6 where applicable.

5. Add a new section 604.10.6 to read as follows:

604.10.6 Oil filled radiator type, portable electric space heaters that have a maximum surface temperature restriction of 250º F, may be permitted to be used in staff and employee areas that are located on floors not occupied by patient or staff sleeping areas and that are totally sprinkler protected in I-2 occupancies as defined in Chapter 2 of this Code. For single story I-2 occupancies, such devices may be used in staff and employee non-sleeping areas that are totally sprinkler protected and that are separated from staff and patient sleeping room areas by 1-hour fire rated construction. Such space heaters shall comply with 604.10.1 through 604.10.5.

6. Add a new 604.12 to read as follows:

604.12 **Separation from Transformers.** Space separation for transformers shall be as follows:

(1) Transformer pad locations shall be a minimum of 10 feet (3 m) from any building, building overhangs, canopies, exterior walls, balconies, exterior stairs or walkways connected to the building.

(2) Transformer pad edges shall be not less than 14 feet (4.3 m) from any doorway.

(3) Transformer pad edges shall be not less than 10 feet (3 m) from any window or other opening.

(4) If the building has an overhang, the 10 foot (3 m) clearance shall be measured from a point below the edge of the overhang only if the building is three stories or less. If the building is four stories or more, the 10 foot (3 m) clearance shall be measured from the outside building wall.

(5) Fire escapes, outside stairs, and covered walkways attached to or between buildings, shall be considered as part of the building.

604.12.1 Transformer pads may be located closer to noncombustible walls than the above required minimum clearances in 605.12(1) upon written approval of the authority having jurisdiction, however, in no case shall the transformer location be less than 3 feet (0.9 m) from the building.

604.12.2 Transformer pads existing prior to December 31, 1994, are exempted from the requirements of 605.11. When buildings are modified, reductions in space separations may be less than the above required minimum clearances upon written approval of the authority having jurisdiction.

7. Delete section 607 in its entirety and substitute in its place the following:

607.1 **General.** Commercial kitchen exhaust hoods and residential cooking appliances in commercial and public buildings shall comply with the requirements of NFPA 96, *Standard for Ventilation Control and Fire Protection of Commercial Cooking Operations*, as adopted by this Subject 120-3-3.

8. Delete section 609.2 in its entirety and substitute in its place the following:

607.2 **Where required.** A commercial hood complying with NFPA 96, as adopted by this Subject 120-3-3, shall be installed in any occupancy at or above all commercial cooking appliances, and domestic cooking appliances used for commercial purposes and which produce grease laden vapors.

607.2.1 The provisions of 607.2 shall not apply where provided for in the scoping provisions of subsection 1.1.4 of NFPA 96, as adopted by this Subject 120-3-3.

9. Delete 607.3 in its entirety and substitute in its place the following:

607.3 **Operations and maintenance.** Commercial cooking appliances, and domestic cooking appliances used for commercial purposes and which produce grease laden vapors, and all components of ventilation systems serving such appliances shall be installed, operated and maintained in accordance with the provisions of NFPA 96 as adopted by this Subject 120-3-3.

(g) **Modifications to Chapter 7:**

1. Add a new 701.2.2 to read as follows:

701.2.2 **Barrier Identification**. All fire or smoke barriers or walls shall be effectively and permanently identified with signs or stenciling above a decorative ceiling or in concealed spaces with letters a minimum of 2 inches (51 mm) high on a contrasting background spaced a maximum of 12 feet (3.7m) on center with a minimum of one per wall or barrier. The hourly rating shall be included on all rated barriers or walls. Suggested wording is, (_) Hour Fire and Smoke Barrier-Protect All Openings.

(h) **Modifications to Chapter 8:**

1. Delete section 801.1 in its entirety and substitute in its place the following:

SECTION 801. GENERAL.

801.1 **Scope.** The provisions of this *Code*, as adopted by this Chapter shall govern furniture, furnishings, decorative vegetation, and decorative materials, as defined in Chapter 2 of this *Code*, in buildings and structures. Section 803 shall be applicable to all existing buildings, structures, or spaces constructed and issued the required certificate of occupancy prior to the effective date of this Subject 120-3-3. Sections 804 through 808 shall be applicable to such existing buildings, structures, and or spaces, and to proposed (new) buildings, structures, or spaces. For the purposes of this *Code*, wall padding, wall mounted gym pads, crash pads, or other pads mounted or secured to walls shall meet the provisions of this NFPA 101, Life Safety Code applicable to interior finish materials. Gym pads or other pads used on floors shall be considered as furnishings. Interior finish and trim in proposed (new) buildings shall be regulated by NFPA 101, *Life Safety Code*, as adopted by Subject 120-3-3 of the Rules and Regulations of the Safety Fire Commissioner.

(i) **Modifications to Chapter 9:**

1. Delete section 901.3 in its entirety and substitute in its place the following:

901.3 **Approvals and Permits.** Fire protection systems shall be approved as set forth by the authority having jurisdiction. Local authorities having jurisdiction may require permits as required and set forth in 105.6 and 105.7 of this Code.

2. Delete section 901.4.1 in its entirety and substitute in its place the following:

901.4.1 **Required fire protection systems.** Fire suppression systems required by this Code, the International Building Code, the Life Safety Code, or other codes and standards adopted by the Rules and Regulations of the

Georgia Safety Fire Commissioner, shall be installed, operated, tested, repaired and maintained in accordance with this Code and applicable standards adopted by the Rules and Regulations of the Georgia Safety Fire Commissioner.

3. Delete section 901.4.2 in its entirety and substitute in its place the following:

901.4.2 Provisions in excess of the minimum code requirements shall, as a minimum, be installed to meet the provisions of the currently adopted code(s) or standard(s) which may be applicable to the provision at the time of its installation. Any non-required fire protection system which is added onto, interconnected with, any required fire protection system (of a similar type), shall be designed, installed, and maintained in accordance with the provisions of the currently adopted code(s) or standard(s) which may be applicable to the provision at the time of its installation.

901.4.2.1 The provisions of 901.4.2 shall not apply to other installations not conforming with the provisions of the currently adopted code(s) or standard(s) applicable to the provision at the time of its installation if such installations are reported and filed with the local responding fire department and the authority having jurisdiction. In addition such systems shall be identified as required by the authority having jurisdiction.

901.4.2.2 The provisions of 901.4.2 shall not apply for non-required systems designed, reviewed, installed and approved in accordance with local codes or ordinances.

4. Delete section 903.2 in its entirety and substitute in its place the following:

903.2 **Where required.**

(a) Approved automatic sprinkler systems for proposed (new) buildings and structures approved for construction as set forth in 103.3.1 of this Code, or where specifically required for existing buildings and structures, shall as the minimum level of protection, be that required by the applicable provisions of NFPA 101, Life Safety Code and applicable provisions of other codes and standards adopted by Subject 120-3-3 of the Rules and Regulations of the Georgia Safety Fire Commissioner, and this Code section; provided, however, the *International Building Code (IBC)* shall govern the requirements for sprinkler protection that are related to minimum building construction types, or to increases in building area and height limitations imposed by the *IBC.* (Refer to Table 102.13, CODES REFERENCE GUIDE)

(b) Where a new automatic sprinkler system is required by this Code or other code, standard, rule or regulation, the system shall be designed and installed in accordance with the requirements applicable to systems in proposed (new) buildings and structures.

(c) In addition, an automatic sprinkler system may be required for new or existing buildings, structures, spaces, or conditions by other NFPA standards adopted by this Subject 120-3-3, or other Rules and Regulations of the Safety Fire Commissioner.

(d) The requirements for the installation, design, and testing of automatic sprinkler systems shall be as applicable, NFPA 13, Standard for the Installation of Sprinkler Systems, NFPA 13R, Standard for the Installation of Sprinkler Systems in Residential Occupancies up to and Including Four Stories in Height; and NFPA 13D, Standard for the Installation of Sprinkler Systems in One- and Two-Family Dwellings and Manufactured Homes, or as adopted and modified by this Subject 120-3-3.

903.2.1 The sprinkler protection provision of 903.2 shall not be mandatory for spaces or areas in telecommunications buildings used exclusively for telecommunications equipment, associated electrical power distribution equipment, batteries and standby engines, provided those spaces or areas are equipped throughout with a supervised automatic fire alarm system, and are separated from the remainder of the building by fire barriers consisting of walls and floor/ceiling assemblies having a fire resistance rating of not less than 2-hours.

NOTE: NFPA 76, Fire Protection of Telecommunications Facilities, should be consulted. Refer to the edition adopted by this Subject 120-3-3.

5. Delete section 903.3.7 of this Code in its entirety and substitute in its place the following:

903.3.7 **Fire department connections.** The location of fire department connections shall be approved by the Fire Chief as set forth in subsection 501.5 of this *Code*, adopted by Subject 120-3-3 of the Rules and Regulations of the Safety Fire Commissioner.

6. Delete section 904.2.2 in its entirety and substitute in its place the following:

904.2.2 **Commercial hood and duct systems.** Each required commercial kitchen exhaust hood and duct system required by Section 607 to have a commercial hood complying with NFPA 96, shall be protected with an approved automatic fire-extinguishing system installed in accordance with this Code and applicable provisions of NFPA 96.

7. Delete section 904.12 in its entirety and substitute in its place the following:

904.12 Fire Protection for Commercial Cooking Operations.

904.12.1 The requirements for, as well as the design, installation, protection and maintenance of cooking equipment, shall be as required by NFPA 101, *Life Safety Code* and NFPA 96, Standard for the Ventilation Control and Fire Protection of Commercial Cooking Operations, as adopted by this Subject 120-3-3. (Refer to Table 102.13, CODES REFERENCE GUIDE)

904.12.2 Fire suppression systems approved for the protection of commercial cooking appliances shall be designed, installed, and maintained in accordance with the applicable standards adopted in this Chapter.

904.12.3 **Portable fire extinguishers for commercial cooking appliances.** Portable fire extinguishers shall be installed in kitchens or other commercial cooking areas in accordance with NFPA 10 and NFPA 96, as adopted by this Subject 120-3-3 of the Rules and Regulations of the Georgia Safety Fire Commissioner. Class K portable fire extinguishers and the required operation sequence signage required by NFPA 10, shall be located between 5 feet and 10 feet from the manual release device(s) of the kitchen exhaust hood fire suppression system(s).

8. Delete section 905.1 in its entirety and substitute in its place the following:

905.1 **General.** The State's minimum requirements for standpipe systems shall be as required by the International Building Code (IBC) or This Code. Standpipe systems shall be designed, installed and tested in accordance with NFPA 14, Standard for the Installation of Standpipe, and Hose Systems as adopted by this Subject 120-3-3. (Refer to Table 102.13, CODES REFERENCE GUIDE)

9. Insert a new subsection 905.13 to read as follows:

905.13 **Fire department connections.** The location of fire department connections shall be approved by the Fire Chief as set forth in subsection 501.5 of this Code, as adopted by Subject 120-3-3 of the Rules and Regulations of the Safety Fire Commissioner.

10. Delete section 906.1 in its entirety and substitute in its place the following:

906.1 **Portable Fire Extinguishers - General.** Portable fire extinguishers shall be installed in all buildings, structures and facilities falling under this Code and Title 25, Chapter 2. For any other building, structure, facility, or condition or special hazard, portable fire extinguishers shall be provided as may be required by this Code in Table 906.1, or by various codes and standards adopted by this Subject 120-3-3. Refer to **Table 102.13, CODES REFERENCE GUIDE**.

11. Delete section 906.2 in its entirety and substitute in its place the following:

906.2 **General requirements.** The selection, distribution, installation, and maintenance of portable fire extinguishers shall comply with NFPA 10, Standard for Portable Fire Extinguishers, as adopted by this Subject 120-3-3.

906.2.1 The maximum travel distance to reach an extinguisher shall not apply to the spectator seating portions of Group A-5 occupancies.

906.2.2 Thirty-day inspections shall not be required and maintenance shall be allowed to be once every three years for dry-chemical or halogenated agent portable fire extinguishers that are supervised by a listed and approved electronic monitoring device, provided that all of the following conditions are met:

(a) Electronic monitoring shall confirm that extinguishers are properly positioned, properly charged and unobstructed.

(b) Loss of power or circuit continuity to the electronic monitoring device shall initiate a trouble signal.

(c) The extinguishers shall be installed inside of a building or cabinet in a noncorrosive environment.

(d) Electronic monitoring devices and supervisory circuits shall be tested every three years when extinguisher maintenance is performed.

(e) A written log of required hydrostatic test dates for extinguishers shall be maintained by the owner to ensure that hydrostatic tests are conducted at the frequency required by NFPA 10.

906.2.3 In Group E - Educational occupancies, in lieu of locating fire extinguishers in corridors and normal paths of travel as specified in NFPA 10, Standard for Portable Fire Extinguishers, fire extinguishers may be located in rooms that open directly onto such corridors and pathways provided all of the following are met:

(a) The room in which such extinguishers are placed are located in close proximity to that portion of the corridor where a fire extinguisher would otherwise be placed in accordance with NFPA 10; Standard for Portable Fire Extinguishers,

(b) A sign which states in white letters at least one inch in height on a red background, 'FIRE EXTINGUISHER LOCATED IN THIS ROOM,' is placed on the corridor wall immediately adjacent to the entrance way of each such room so that it can be clearly seen at all times;

(c) The rooms in which such extinguishers are placed shall be constantly supervised during school hours; and,

(d) Those rooms cannot be subject to being locked at any time the building is occupied.

12. Delete sections 906.3 through 906.10 without substitution. Refer to NFPA 10.

13. Delete section 907.1 in its entirety and substitute in its place the following, while retaining existing subsections:

907.1 **Fire Alarm Systems - General.**

(a) The State's minimum requirements for fire alarm systems in proposed (new) buildings and structures approved as set forth in 103.3.1 of this Code shall be as required by NFPA 101, Life Safety Code, as adopted by this Subject 120-3-3. Fire alarm systems shall be designed, installed, tested, and maintained in accordance with NFPA 72, National Fire Alarm and Signaling Code, as adopted by this Subject 120-3-3.

(b) New fire alarm systems to be installed in existing buildings shall be designed, installed, and maintained in accordance with NFPA 72, as adopted by this Subject 120-3-3. Refer to **Table 102.13 CODES REFERENCE GUIDE**.

14. Delete sections 907.2 through 907.6.6.2 in their entirety and without substitution.

15. Delete section 909.1 in its entirety and substitute in its place the following:

909.1 **Scope and purpose.** This section applies to mechanical or passive smoke control systems when they are required for proposed (new) buildings or portions thereof by provisions of the *Life Safety Code (LSC)* or this Code, as adopted by this Subject 120-3-3, or by provisions of the *International Building Code (IBC),* as adopted by the Department of Community Affairs. The purpose of this section is to establish minimum requirements for the design, installation, and acceptance testing of smoke control systems that are intended to provide a tenable environment for the evacuation or relocation of occupants. These provisions are not intended for the preservation of contents, the timely restoration of operations, or for assistance in fire suppression or overhaul activities. Smoke control systems regulated by this section serve a different purpose than the smoke and heat venting provisions found in Section 910. Mechanical smoke control systems shall not be considered exhaust systems under Chapter 5 of the *International Mechanical Code (IMC).*

16. Delete section 909.2 in its entirety and substitute in its place the following:

909.2 **General design requirements.** Buildings, structures, or portions thereof required by provisions of the *Life Safety Code (LSC)* or this Code, as adopted by this Chapter, or by provisions of the *International Building Code,* as adopted by the Department of Community Affairs, to have a smoke control system or systems shall have such systems designed in accordance with the applicable requirements of Section 909 of this Code and the generally accepted and well established principles of engineering relevant to the design. The construction documents shall include sufficient information and detail to describe adequately the elements of the design necessary for the proper implementation of the smoke control systems. These documents shall be accompanied with sufficient information and analysis to demonstrate compliance with these provisions.

17. Add a new section 909.2.1 to read as follows:

909.2.1 **Smoke Control.** For the purposes of 909.2 the following publications shall be considered as providing the generally accepted and well established principals of engineering relevant to design of required smoke control systems.

(1) NFPA 92*, Standard for Smoke Control Systems*

(2) NFPA SPP-53*, Smoke Control in Fire Safety Design*

(3) ASHRAE/SFPE*, Design of Smoke Management Systems*

(4) ASHRAE, Guideline 5*: Guideline for Commissioning Smoke Management Systems*

(5) NFPA 101*, Life Safety Code (For non-mandatory guidance involving systems for existing detention and correction facilities refer to A.23.3.1.3 of the 2012 Edition).*

18. Add a new section 909.2.1 to read as follows:

909.2.1 **Deactivation of Mechanical Pressurization Systems.** The design of pressurization systems shall ensure that smoke is not introduced into the pressurized enclosure so as to result in the untenable contamination of the fresh air. Approved smoke detectors shall be installed at each intake in such approved manner that the operation of the fan providing mechanical pressurization to the enclosure where smoke is detected shall be deactivated upon detection of smoke.

19. Add a new subsection 912.2.3 to read as follows:

912.2.3 **Location of fire department connections.** The location of fire department connections for automatic sprinkler systems shall be as approved by the Fire Chief as set forth in accordance with Section 912 and Section 501.5 of this Code, as adopted by 120-3-3 of the Rules and Regulations of the Safety Fire Commissioner.

20. Add a new section 914.7.3 to read as follows:

914.7.3 **Limited Use Special Amusement Buildings.** Special amusement buildings which are not open to the public in excess of 45 days in a twelve month period shall be permitted, provided all of the following conditions are met:

1. Portable fire extinguishers with a minimum of a 2A:10B:C rating are placed within 25 feet of each activity or viewing station, so as to be readily accessible and visible to staff;

2. A smoke detection system is placed throughout the facility with a smoke detector located at each activity or viewing station and located throughout corridors and halls not to exceed a spacing more than 15 feet (4.6 m) from a wall or more than 30 feet (9.1 m) on center. Where there is no ceiling or cover over activity or viewing stations, or over exit access routes, other than the standard ceiling, smoke detectors shall be placed so that their area of coverage does not exceed the approval listing of the detectors;

3. Emergency lighting shall be provided which will cause illumination of the means of egress upon loss of power to lighting circuits for the means of egress routes serving the special amusement building. In addition, all staff shall be provided with flashlights;

4. Personnel dedicated for the sole purpose of performing fire watch duties as defined in Chapter 2 of the International Fire Code and as be deemed necessary for specific circumstances by the authority having jurisdiction, shall be provided in such numbers to ensure the entire special amusement space is surveyed at least every 30 minutes starting 30 minutes prior to public occupancy. Such personnel shall be provided with a direct communication device for communication with all viewing or activity stations throughout the facility. In addition such personnel shall be provided with appropriate training for the operation of portable fire extinguishing equipment;

5. Communication to the responding fire department or emergency dispatch center is available from the facility (a regular telephone or at least two cell phones are acceptable);

6. "NO SMOKING" signs shall be posted at entrances to the building. Receptacles for the discard of smoking material shall be located a minimum of 15 feet (9.1 m) from the structure and shall be clearly identified by applicable signage;

7. Documentation of fire watch tours required by item 4 above is maintained. The documentation, at the minimum, shall note the time when the tour was conducted the name of personnel conducting the tour, and information about any hazards identified and actions taken to remove such hazards. Such documentation shall be readily available to the code official upon request.

21. Delete Section 915 in its entirety and replace it with the following

Section 915 - Carbon Monoxide (CO) Detection

915.1 **General.** Carbon monoxide detection shall be installed in accordance with NFPA 72 where required by the applicable occupancy chapters of NFPA 101. Carbon monoxide detection systems shall be tested and maintained in accordance with NFPA 72.

(j) **Modifications to Chapter 10:**

1. Delete sections 1001 through 1030 in their entirety and substitute in their place the following:

1001.1 **General.**

(A) Proposed (new) buildings or portions thereof approved for construction as set forth in 103.3 of this Code, shall be provided with means of egress and related safeguards as set forth by NFPA 101, Life Safety Code, as adopted this Chapter. (Refer to Table 102.13, CODES REFERENCE GUIDE)

(B) Buildings and structures existing and approved prior the effective date of this Subject 120-3-3, as set forth in 103.3 of this Code, having means of egress and related safeguards conforming to NFPA 101, Life Safety Code,

under which they were approved and constructed shall be considered as complying with this Code. Means of egress and related safeguards in existing buildings constructed without approval, may be considered as complying with this code section if, in the judgment of the authority having jurisdiction, they do not constitute a distinct hazard to life. Where, in the judgment of the authority having jurisdiction, the means of egress or related safeguards provided constitute a distinct hazard to life, the hazardous condition or conditions shall be remedied based on the provisions for existing buildings of the Life Safety Code as adopted by this Subject 120-3-3.

(C) Exit discharge termination dispersal areas may be utilized where authorized and designed in accordance with 7.7.1.5 of the Life Safety Code, as adopted by Subject 120-3-3 of the Rules and Regulations of the Safety Fire Commissioner.

2. Add the following section 1001.2 to read as follows:

1001.2 **Overcrowding and Life Safety Hazard Prevention.** Overcrowding or admittance of any person beyond the approved capacity of a building or a portion thereof shall not be allowed. It is the responsibility of the manager and the person in charge of a building, structure, or portion thereof not to allow an overcrowded condition or any condition which constitutes a life safety hazard to exist, and to take prompt action to remedy an overcrowded condition or life safety hazard when evidence of such a condition is noted, or when advised or ordered by the Fire Code Official or his or her representative. (Refer to 107.6)

1001.2.1 **Decreases in the Occupant Load.** For authorized decreases in the occupant load approved by the fire code authority having jurisdiction, the actual number of occupants for whom each occupied space, floor or building is designed, although less than those determined by calculation, shall be permitted to be used in the determination of the design occupant load.

1001.2.2 **Increases in the Occupant Load.** For approved increases in the occupant load by the fire code authority having jurisdiction, refer to 7.3.1.5 of Subsection 7.3.1 of NFPA 101, Life Safety Code, as adopted by the Rules and Regulations of the Safety Fire Commissioner.

1001.2.3 **Overcrowded Condition or Life Safety Hazard Determined.** The fire code official, upon finding any overcrowded conditions or obstructions in aisles, passageways or other means of egress, or upon finding any condition which constitutes a life safety hazard, shall be authorized to cause the event to be stopped until such condition or obstruction is corrected. In addition, a structure, building, room or designated portion thereof shall be deemed overcrowded if the total of occupants exceeds the exit capacity of the structure, building, room or area involved.

(k) **Modifications to Chapter 11:**

1. Delete 1101.1 and substitute in its place the following:

1101.1 **Scope.** The provisions of this chapter shall apply to existing buildings constructed prior to the effective date of this Subject 120-3-3.

2. Delete 1101.2 and substitute in its place the following:

1101.2 **Intent.** The intent of this chapter is to provide a minimum degree of fire and life safety to persons occupying buildings by providing for existing building rehabilitation activities including repair, renovation, modification, reconstruction, change of use or occupancy classification, and additions to such buildings.

3. Delete 1101.3 and substitute in its place the following:

1101.3 **Permits.** Construction permits for buildings falling under State jurisdiction, as set forth in O.C.G.A. § 25-2.13, shall be required for the activities noted in 4601.1 when the criteria of O.C.G.A. § 25-2-14(d) for an existing building to be classified as a proposed (new) building or structure are met. For local jurisdictions, permits shall be required as set forth in Section 105.7 of this Code and the International Building Code.

4. Delete Sections 1102 through 1104 and substitute in their place a new 1102 to read as follows:

SECTION 1102 **FIRE AND LIFE SAFETY REQUIREMENTS FOR EXISTING BUILDINGS AND STRUCTURES**

1102.1 **General.** The intents and purposes of this section shall be met through the application of the applicable provisions of this Code, the Life Safety Code, and other codes and standards as adopted by Subject 120-3-3 of the Rules and Regulations of the Georgia Safety Fire Commissioner, as they apply to existing conditions and routine maintenance of fire and life safety protection systems and devices. For building rehabilitation activities, including repair, renovation, modification, reconstruction, change of use or occupancy classification, and additions to such buildings, the definitions and requirements of Chapter 43, of the Life Safety Code, adopted by Subject 120-3-3 of the Rules and Regulations of the Georgia Safety Fire Commissioner shall apply.

5. Delete Section 1103.9 and replace it with the following:

11003.9 **Carbon monoxide detection.** Carbon monoxide detection shall be installed in existing buildings in accordance with NFPA 72 where required by the applicable occupancy chapters of NFPA 101. Carbon monoxide detection systems shall be tested and maintained in accordance with NFPA 72.

(l) **Modifications to Chapter 20:**

1. Delete section 2003.5 in its entirety and substitute in its place the following:

2003.5 **Dispensing of flammable and combustible liquids.** No dispensing, transfer or storage of flammable or combustible liquids shall be permitted inside any building or structure.

Exceptions:

1. As provided in Chapter 57 of this Code, provided, the provisions are not less protective than the provisions of any applicable Codes and standards adopted by the Rules and Regulations of the Safety Fire Commissioner.

2. When the procedures used follow the guidelines and requirements set forth in NFPA 410 - Standard for Aircraft Maintenance, adopted by this Subject 120-3-3.

2. Delete sections 2006.1 through 2006.21.1 in their entirety and substitute in their place a new paragraph 2006.1 to read as follows:

2006.1 **Aircraft motor vehicle fuel-dispensing stations and Airport Fuel Systems.** All aircraft motor vehicle fuel-dispensing stations and airport fuel systems shall be in accordance with Subject 120-3-11.

3. Delete section 2007.1 in its entirety and substitute in its place the following:

2007.1 **General.** Helistops and heliports shall be maintained in accordance with Section 2007. Helistops and heliports on buildings or structures shall be constructed in accordance with the International Building Code and the requirements set forth by NFPA 418, Standard for Heliports, adopted by this Subject 120-3-3.

(m) **Modifications to Chapter 23.**

1. Delete sections 2301.1 through 2301.6 in their entirety and substitute in their place a new paragraph 2301.1 to read as follows:

2301.1 **Scope.** Automotive motor fuel-dispensing facilities, marine motor fuel dispensing facilities, fleet vehicle motor fuel-dispensing facilities and repair garages shall be in accordance with Subject 120-3-11.

Exception: This chapter shall apply to hydrogen motor fuel-dispensing and generation facilities as specified in section 2309 and repair garages where referenced by subsection 406.6, entitled, 'Repair Garages,' of the International Building Code.

2. Delete sections 2303 through 2308 and all other paragraphs there-under, and section 2310 and all other paragraphs thereunder in their entirety without substitution.

(n) **Modification to Chapter 31:**

1. Delete 3106.5.2 in its entirety and substitute in it's place the following:

3106.5.2 **Cooking Operations.** Cooking operations shall be evaluated and comply with NFPA 96, Standard for Ventilation Control and Fire Protection of Commercial Cooking Operations, as adopted by Subject 120-3-3 of the Rules and Regulations of the Safety Fire Commissioner.

(o) **Modification to Chapter 50:**

1. Add two new exceptions 12 and 13 to section 5001.1 to read as follows:

12. Storage, transportation, use, dispensing, mixing and handling of' Flammable and combustible liquids as outlined in Subject 120-3-11.

13. Storage, handling, and transportation of liquefied petroleum gas (LP-Gas) and the installation of LP-gas equipment pertinent to systems for such use as outlined Subject 120-3-16 Rules and Regulations of the Safety Fire Commissioner entitled, Rules and Regulations for Liquefied Petroleum Gases.

2. In Table 5003.11.1, add superscript "k" to Oxidizers in the Material column and add the following footnote "k" to read as follows:

k. Group M occupancies with Class 2 and Class 3 oxidizers exceeding these quantities shall comply with the applicable provisions of NFPA 400, Hazardous Materials Code as adopted by this Subject 120-3-3.

(p) **Modifications to Chapter 56:**

2. Delete sections 5601 through 5607 and all related paragraphs there under in their entirety and substitute in their place the following:

5601. **Explosives and blasting.** The provisions of Subject 120-3-10 Rules and Regulations of the Safety Fire Commissioner entitled, "Rules and Regulations for Explosives and Blasting Agents" shall govern the possession, manufacture, storage, handling, sale and use of explosives, explosive materials and small arms ammunitions.

3. Delete section 5608.1 in its entirety and substitute in its place the following:

5608.1 **GENERAL PROVISIONS.** In addition to the requirements of this Section for the display of fireworks the provisions of Title 25, Chapter 2, and Subject 120-3-22, Rules and Regulations of the Safety Fire Commissioner, shall apply. Where there may be a conflict between a provision of this Section and a provision of the above referenced law or regulation, the provision of the above referenced law or regulation shall apply. Nothing in this chapter shall be construed to prohibit the use of fireworks by railroads or other transportation agencies for the signal purposes or illumination, or the sale or use of blank cartridges for a show or theater, or for signal or ceremonial purposes in athletics or sports or for the use by military organizations.

2. Insert a new section 5608.11 to read as follows:

5608.11 **Retail display and sale.**

(a) Fireworks as defined in O.C.G.A. § 25-10-1(a)(1) shall not be made available for sale at retail or wholesale, except as provided in O.C.G.A. § 25-10.

(b) Non-explosive sparkling devices as defined in O.C.G.A. § 25-10-1(b) are permitted for retail sales to the public, provided, however, it is unlawful for any such devices to be sold to any person under 18 years of age (O.C.G.A. § 25-10-2(b)(1)). In addition, it is unlawful to sell such items to any person by any means other than an in-person, face-to-face sale. Further, such person shall provide proper identification to the seller at the time of such purchase. The term 'proper identification' means any document issued by a governmental agency containing a description of the person, such person's photograph, or both, and giving such person's date of birth and includes without being limited to, a passport, military identification card, driver's license, or an identification card authorized under O.C.G.A. §§ 40-5-100 through 40-5-104.

(c) In areas where devices are stored or displayed for retail sales, at least one pressurized-water type portable fire extinguisher complying with NFPA 10, as adopted by this Chapter shall be located not more than 20 feet and not closer than 15 feet from the storage or display location. In addition, "NO SMOKING" signs complying with Section 310 shall be conspicuously posted in areas of such storage or display, unless in a building where smoking is clearly marked as prohibited.

(q) **Modification to Chapter 57:**

1. Add a new non-applicability paragraph number 12 to section 5701.2 to read as follows:

12. The storage, transportation, use, dispensing, mixing and handling of Flammable and Combustible Liquids as outlined in Subject 120-3-11.

(r) **Modifications to Chapter 61:**

1. Delete Chapter 61 in its entirety and substitute in its place the following:

CHAPTER 61 LIQUEFIED PETROLEUM GASES. The provisions relating to the storage and handling of liquefied petroleum gases shall be those in NFPA 58, Liquefied Petroleum Gas Code, as adopted by Subject 120-3-16, Rules and Regulations of the Safety Fire Commissioner. Refer to **Table 102.13, CODES REFERENCE GUIDE**.

(s) **Modifications to Chapter 80:**

1. Add an Explanatory Note at the start of the Chapter to read:

Replace the NFPA Standard Reference numbers with the year edition with the same NFPA Standard Reference numbers and titles however; each year edition shall be those as adopted by Subject 120-3-3, 120-3-10, 120-3-11 and 120-3-12.

(4) **NFPA 2, 2023 Edition Hydrogen Technologies Code.**

No modifications.

(5) **NFPA 3, 2024 Standard for Commissioning of Fire Protection and Life Safety Systems:**

(a) **Modifications to Chapter 1:**

1. Add a new subsection 1.1.1 to read as follows:

1.1.1 This document is recognized strictly as a recommended practice for fire prevention and fire protection. Recommendations may be based on the document where deemed appropriate by the authority having jurisdiction. The document is not in the form of a stand-alone enforceable code or standard, and it is not adopted as a minimum

state code or standard. It may be used in conjunction with and in the support of applicable provisions of other adopted codes or standards, or it may be adopted and enforced by a local jurisdiction under local ordinance.

(6) **NFPA 10, 2022 Edition, Standard for Portable Fire Extinguishers.**

(a) **Modifications to Chapter 6:**

1. Delete 6.1.3.8.1 in its entirety and insert in its place the following (6.1.3.8.2 and 6.1.3.8.3 remain unchanged:

6.1.3.8.1 Portable fire extinguishers having a gross weight not exceeding 40 lb. (18.14 kg) shall be installed so that the top of the extinguisher is not more than 48 in (1.19 m) above the floor.

2. Delete 6.1.3.10.5 in its entirety and substitute in its place the following:

6.1.3.10.5 Cabinets or wall recesses for fire extinguishers shall be installed that the top of the opening for the fire extinguisher is at 50 in. (1.27 m) above the finished floor.

6.1.3.10.5.1 The provisions of 6.1.3.10.5 shall not apply to existing installations.

(b) **Modifications to Chapter 7:**

1. Delete 7.1.2.1 in its entirety and insert in its place the following:

7.1.2.1 Persons performing maintenance and recharging of extinguishers shall be licensed or permitted in accordance with Chapter 12 of Title 25 of the Official Code of Georgia Annotated.

2. Delete subparagraphs 7.1.2.1.1 thru 7.1.2.1.5 in their entirety without substitution.

3. Delete subparagraph 7.1.2.3 in its entirety without substitution.

4. Delete subsection 7.3.4.1.1 in its entirety and substitute in its place the following:

7.3.4.1.1 Tags shall comply the requirements of Subject 120-3-23 Rules and Regulations of the Safety Fire Commissioner.

5. Delete subsection 7.3.4.2 in its entirety and substitute in its place the following:

7.3.4.2 **Verification-of-Service Collar (Maintenance or Recharging).** Verification-of-Service Collars shall comply with the requirements of Subject 120-3-23 Rules and Regulations of the Safety Fire Commissioner.

6. Delete subsection 7.3.6.5.3 in its entirety and substitute in its place the following:

7.3.6.5.3 The 6 year Maintenance internal examination label shall be blue in color and shall comply with the requirements of Subject 120-3-23 Rules and Regulations of the Safety Fire Commissioner.

7. Delete subsection 7.11.3 in its entirety and substitute in its place the following:

7.11.3 Verification-of-Service Collars shall comply with the requirements of Subject 120-3-23 Rules and Regulations of the Safety Fire Commissioner.

(c) **Modifications to Chapter 8:**

1. Delete subsection 8.1.2.1 in its entirety and substitute in its place the following:

8.1.2.1 Hydrostatic testing shall be performed by persons who are, licensed or permitted in accordance with Chapter 12 of Title 25 of the Official Code of Georgia Annotated, trained in pressure testing procedures and safeguards

complying with 7.1.2, who have testing equipment, facilities, and an appropriate manufacturer's service manual(s) available.

2. Delete subsection 8.1.2.1.2 in its entirety without substitution.

3. Delete subsection 8.1.2.1.3 in its entirety and substitute in its place the following:

8.1.2.1.3 Where hydrostatic testing is subcontracted to a facility described in 8.1.2.1.1, the secondary firm actually performing the hydro testing must be listed on the primary firms license(s) application on file in the Georgia State Fire Marshal's Office.

4. Delete subsection 8.7.2.2 in its entirety and substitute in its place the following:

8.7.2.2 The label shall comply with the requirements of Subject 120-3-23 Rules and Regulations of the Safety Fire Commissioner.

(7) **NFPA 11, 2024 Edition, Standard for Low-, Medium-, and High-Expansion Foam.**

No modifications.

(8) **NFPA 12, 2022 Edition, Standard on Carbon Dioxide Extinguishing Systems.**

No modifications.

(9) **NFPA 12A, 2022 Edition, Standard on Halon 1301 Fire Extinguishing Systems.**

No modifications.

(10) **NFPA 13, 2022 Edition, Standard for the Installation of Sprinkler Systems.**

(a) **Modifications to Chapter 4:**

1. Add a new Section 4.10 to read as follows:

4.10 **Modification of Existing Sprinkler Systems.** In existing sprinkler systems, heads may be relocated from original installation locations. All alterations or modifications to existing branch lines shall be submitted with hydraulic calculations if work is outside of scope of subsections 4.4.1 through 4.4.4. New hydraulic data nameplate shall be placed on any modified system at the riser or sectional valve along with the existing hydraulic data nameplate.

4.10.1. One additional sprinkler may be added to an original installation location if the additional sprinkler is in a remotely located or non-communicating compartment from the existing or relocated sprinkler.

4.10.2 Two sprinklers may be added to an existing branch line if the additional sprinklers are in remotely located or non-communicating compartments from the existing or relocated sprinkler.

4.10.3 New branch lines added to existing cross mains shall be sized the same as the existing branch lines.

4.10.4 No more than two heads shall be supplied from 1 inch (25.4 mm) pipe unless the existing system was calculated to supply more than two heads. In such case, the calculated maximum for 1 inch (25.4 mm) pipe shall take precedence.

(b) **Modifications to Chapter 5:**

1. Add a new paragraph 5.2.2.3 to read as follows:

5.2.2.3 A water test taken to determine the period of highest demand and made not more than six months prior to plan submittal shall be submitted to the authority having jurisdiction with all new system designs.

(c) **Modifications to Chapter 16:**

1. Delete paragraph 16.12.5.7 in its entirety and substitute in its place the following. The annex note shall remain.

16.12.5.7 FDC Locations. The location of fire department connections shall be approved by the Fire Chief as set forth in subsections 501.5 and 912 of the International Fire Code (IFC), as adopted by Subject 120-3-3 of the Rules and Regulations of the Safety Fire Commissioner. Where there may be conflict between subsection 501 or 912 of the IFC and section 8.17.2 of this Code, the provisions of 501 and 912 of the IFC shall prevail**.**

(d) **Modifications to Chapter 28:**

1. Add a new 28.1.2.1 to read as follows:

28.1.2.1 Where plan review notes returned with submitted plans or comments on submitted plans by the authority having jurisdiction (AHJ), indicating the need for corrections, such corrections shall be made by the Fire Protection Sprinkler Designer. Only after the needed corrections are made and shown on corrected plans shall changes by installation personnel be allowed. Corrected plans shall be kept at the project site and shall be firmly attached to the set of plans stamped as approved with comments by the AHJ. Submitted plans returned without the approval stamp of the AHJ shall have corrections made and be resubmitted to the AHJ for review and approval. The installation of a system shall not be allowed where plans have been returned without an approval stamp until corrected plans have been submitted, reviewed, and stamped as approved by the AHJ.

2. Add new items (24) through (26) to subsection 28.1.3 to read as follows:

(24) Type of construction, (i.e., obstructed or unobstructed as defined in Section 3.7), and the distance between the sprinkler deflector and the structure in exposed structure areas.

(25) Indicate the system is a NFPA 13 designed system.

(26) Name, number and signature of the Certificate of Competency holder & Designer.

3. Add a new subsection 28.2.4.11.2.1 to read as follows:

27.2.4.11.2.1 There shall be a minimum 10 psi (0.69 bar) cushion between the hydraulically calculated sprinkler system demand and supply when there is a backflow prevention device present, measured at the supply side of the backflow prevention device.

28.2.4.11.2.1.1 The 10 psi (0.69 bar) cushion may be lowered with written approval of the Fire Chief of the fire department which has fire suppression responsibility.

28.2.4.11.2.1.2 A minimum cushion may not be required where the system is supplied by a fixed water source providing water to fire pumps holding no supply side pressure. Such an arrangement shall have written approval of the Fire Chief of the fire department having fire suppression jurisdiction.

4. Add a new subparagraph 28.2.4.11.3 to read as follows:

28.2.4.11.3 There shall be a minimum 15 psi (1.03 bar) cushion between the hydraulically calculated sprinkler system demand and supply in systems that do not have a backflow prevention device.

28.2.4.11.3.1 The 15 psi (1.05 bar) cushion may be lowered to not less than 7 psi with approval of the authority having jurisdiction based on the capability of the fire department to provide support to the system within 10 minutes of the receipt of notification of the alarm of fire in the building.

(e) **Modifications to Chapter 29:**

1. Add a new item (5) to 28.1 to read as follows:

(5) Attach an initial "GREEN" inspection tag to the sprinkler system riser.

After installation, acceptance testing, and inspection, at the time the system is initially accepted as being in a state of operational readiness, an Inspection Tag shall be completed and attached to the system at a conspicuous location so as to permit convenient inspection, and not hamper system activation. Tags shall comply with 29.1.1.

29.1.1 Inspection Tag Requirements. Inspection tags shall conform with the following requirements:

(a) Inspection Tags must be GREEN in color and have a minimum dimension of 51/4 inches (133 mm) in length and 2 inches (67 mm) in width.

(b) Inspection tags shall bear at least the following information in an easy to read format:

1. **DO NOT REMOVE BY ORDER OF THE STATE FIRE MARSHAL.** This order shall be in a minimum of 10pt capital letters.

2. The license number, name, and physical address of the licensed Fire Sprinkler Contractor.

3. The license number, printed name, and signature of the licensed Fire Sprinkler Inspector.

4. The properly punched day, month and year the system was inspected and placed in a state of operational readiness.

5. The name and physical address, including tenant space designation, as applicable of the facility.

2. Add a new Section 29.7 Document Accessibility.

29.7.1 With every new system, a documentation cabinet shall be installed in the system riser room or at another approved location at the protected premises.

29.7.2 The documentation cabinet shall be sized so that it can contain all necessary documentation.

29.7.3 Required minimum documentation shall include copies of Approved Hydraulic calculations, Approved Plans, Above and Below ground contractors test, and Inventory of sprinkler heads.

29.7.4 Where the documentation cabinet is not in the sprinkler riser room, its location shall be identified at the system control valve.

29.7.5 The documentation cabinet shall be prominently labeled SPRINKLER SYSTEM DOCUMENTS.

29.7.6 The contents of the cabinet shall be accessible by authorized personnel only.

(11) **NFPA 13D, 2022 Edition, Standard for the Installation of Sprinkler Systems in One- and Two-Family Dwellings and Manufactured Homes.**

No modifications.

(12) **NFPA 13R, 2022 Edition, Standard for the Installation of Sprinkler Systems in Residential Occupancies up to and Including Four Stories in Height**

(a) **Modifications to Chapter 1:**

1. Delete Section 1.1 in its entirety and substitute in its place the following. Subsection 1.1.1 and 1.1.2 shall remain.

1.1 **Scope.** This standard deals with the design and installation of automatic sprinkler systems for protection against fire hazards in residential occupancies, personal care homes, day-care centers and group day-care homes, up to and including four stories in height. When a single-story open-air parking structure of fire-restrictive construction having a rating greater than 2-hours is below a four-story residential occupancy, the structure is considered within this scope.

2. Add a new Subsection 1.2.4 to read as follows:

1.2.4 This standard shall not apply to new assisted living communities or new memory care units as defined by Rule 120-3-3-.03.

(b) **Modifications to Chapter 3:**

1. Delete subsection 3.3.10 in its entirety and substitute in its place the following:

3.3.10 **Residential Occupancies.** Residential Occupancies, as specified in the scope of this standard and for the purposes of this standard, include the following, as defined by State law, or by the Rules and Regulations of the Georgia Safety Fire Commissioner:

(1) Apartment buildings,

(2) Lodging and rooming houses,

(3) Board and care facilities,

(4) Hotels, motels, and dormitories,

(5) Personal care homes (prompt and slow evacuation type only),

(6) Day-care centers and group day-care homes.

2. Add a new paragraph 3.3.10.1 to read as follows:

3.3.10.1 **Day-care Center** - For purposes of NFPA 13R, a day-care facility subject to licensure or commission by the Georgia Department of Early Care and Learning where more than 12 clients receive care. A day-care center is within the definition of a dwelling unit.

3. Add a new paragraph 3.3.10.2 to read as follows:

3.3.10.2 **Group Day-care Home** - For purposes of NFPA 13R, a day-care facility subject to licensure or commission by the Georgia Department of Early Care and Learning where at least seven but not more than 12 clients receive care. A group day-care home is within the definition of a dwelling unit.

4. Add a new paragraph 3.3.10.3 to read as follows:

3.3.10.3 **Dwelling** - For purposes of NFPA 13R, any building which contains not more than one or two 'dwelling units' intended to be used, rented, leased, hired out to be occupied for habitation purposes, or for use as a day-care center, a group day-care home, or as a personal care home or community living arrangement.

5. Add a new paragraph 3.3.10.4 to read as follows:

3.3.10.4 **Outside Dwelling Unit** - Any area such as, but not limited to, storage, mechanical and equipment rooms or other area(s) that, in the opinion of the authority having jurisdiction, constitutes a fire hazard in excess of the hazards normally found within the dwelling unit.

6. Add a new paragraph 3.3.10.5 to read as follows:

3.3.10.5 **Personal Care Home** - For the purposes of NFPA 13R, any building or part thereof that is used as defined in Rule 120-3-3-.03(11).

(c) **Modifications to Chapter 4:**

1. Add a new Section 4.6 to read as follows:

4.6 **Minimum Pipe Sizes.** Minimum pipe sizes shall be 3/4 inch (19.1 mm) for copper and 1-inch (25.4 mm) for steel. For other approved pipe or tubing used, a minimum size of 3/4 inch (19.1 mm) for those with a Hazen-Williams 'C' value of 150 or more and 1 inch (19.1 mm) for those less than 150.

(d) **Modifications to Chapter 6:**

1. Delete paragraph 6.6.1 in its entirety and substitute in its place the following:

6.6.1 Sprinklers shall be installed in all areas except where omission is permitted by 6.6.2 through 6.6.9 excluding day-care facilities. Sprinklers shall be installed in all areas of day-care facilities except where omission is permitted by 6.6.4 and 6.6.5.

2. Add a new paragraph 6.8.11 to read as follows:

6.8.11 A non-multipurpose piping system shall be isolated from the domestic water system by not less than two spring-loaded check valves or equivalent.

3. Add a new paragraph 6.8.12 to read as follows:

6.8.12 All valves controlling water supplies for sprinkler systems or portions thereof, including floor control valves, shall be easily accessible to authorized persons. Water supply connections shall not extend into or through a building unless such connection is under control of an outside listed indicating valve or an inside listed indicating valve located near an outside wall of the building.

(e) **Modifications to Chapter 10:**

1. Add a new subsection 10.1.5 to read as follows:

10.1.5 Upon completion of the acceptance test as set forth in this section, the installer shall attach an initial "GREEN" inspection tag to the sprinkler system riser.

(a) After installation, testing, and inspection, at the time the system is initially accepted as being in a state of operational readiness, an Inspection Tag shall be completed and attached to the system at a conspicuous location so as to permit convenient inspection, and not hamper system activation.

(1) Inspection tags shall comply with NFPA 13 Subsection 29.1.1.

(13) **NFPA 14, 2024 Edition, Standard for the Installation of Standpipe, and Hose Systems.**

(a) **Modifications to Chapter 1:**

1. Delete Section 1.1.1 in its entirety and substitute in its place the following:

1.1.1 **Scope**. The State's minimum requirements for standpipes shall be established by the IBC (Refer to Table 102.13, CODES REFERENCE GUIDE) of the International Fire Code, as adopted by Subject 120-3-3 of the Rules and Regulations of the Safety Fire Commissioner. In addition, the requirements for occupant hoses are eliminated

for new and existing buildings subject to the approval of the authority having jurisdiction. Where the installation of standpipes or hose systems is required, this standard covers the minimum requirements for the installation of standpipes and hose systems for buildings and structures. This standard does not cover requirements for periodic inspection, testing, and maintenance of standpipe systems. (See NFPA 25, Standard for the Inspection, Testing, and Maintenance of Water-Based Fire Protection Systems.)

(b) **Modifications to Chapter 10:**

1. Add a new subparagraph 10.2.6.1.3 to read as follows:

10.2.6.1.3 Where the local Fire Chief or local Fire Code Official having fire suppression jurisdiction permits lower than 100 psi (6.9 bar) for 2-1/2 inch (65 mm) hose connections, based upon local suppression tactics, the pressure shall be permitted to be reduced to not less than 65 psi (4.5 bar).

10.2.6.1.3.1 Existing high-rise buildings, as defined in 3.3.5, that are protected throughout by a supervised automatic sprinkler system shall be permitted a reduction of the minimum residual pressure requirement of 100 psi (6.9 bar) at the hydraulically most remote 2-1/2 inch (63.5 mm) hose connection to 65 psi (4.5 bar).

2. Insert a new **subsection** 10.7.2.3 to read as follows:

10.7.2.3 **Location.** The location of fire department connections shall be approved by the Fire Chief as set forth in subsection 501.5 of the International Fire Code, as adopted by Subject 120-3-3 of the Rules and Regulations of the Safety Fire Commissioner.

(c) **Modifications to Chapter 12:**

1. Add a new subsection 12.1.3 to read as follows:

12.1.3 A letter certifying that all pressure restricting and pressure reducing equipment is installed and set per NFPA requirements and manufacturer's instructions shall be presented to the inspector along with test certificates at the time of final inspection.

(14) **NFPA 15, 2022 Edition, Standard for Water Spray Fixed Systems for Fire Protection.**

No modifications.

(15) **NFPA 16, 2019 Edition, Standard for the Installation of Foam-Water Sprinkler and Foam-Water Spray Systems.**

No modifications.

(16) **NFPA 17, 2024 Edition, Standard for Dry Chemical Extinguishing Systems.**

(a) **Modifications to Chapter 1:**

1. Delete Section 1.6 in its entirety and substitute in its place the following:

1.6 Qualifications. Only persons who are properly trained and licensed or permitted in accordance with Chapter 12 of Title 25 of the Official Code of Georgia Annotated, shall be considered competent to design, install, and service dry chemical systems.

(b) **Modifications to Chapter 9:**

1. Add a new subsection 9.3.6 to read as follows:

9.3.6 Nonoperational or Impaired Systems

9.3.6.1 Cooking equipment shall not be operated while its fire extinguishing system protecting a commercial kitchen hood, duct, or appliances is nonoperational or impaired.

(c) **Modifications to Chapter 11:**

1. Delete subsection 11.1.3 in its entirety and substitute in its place the following:

11.1.3 Only persons trained and licensed or permitted in accordance with Chapter 12 of Title 25 of the Official Code of Georgia Annotated, shall be considered competent to design, install, and service dry chemical extinguishing systems, in accordance with this standard and the manufacturer's instructions.

2. Delete paragraph 11.1.3.1 in its entirety without substitution.

3. Delete subparagraph 11.3.1.2.4 in its entirety and substitute in its place the following:

11.3.1.2.4 The label shall comply with the requirements of Subject 120-3-23 Rules and Regulations of the Safety Fire Commissioner.

4. Delete subparagraph 11.3.1.2.7 in its entirety and substitute in its place the following:

11.3.1.2.7 The collar shall comply with the requirements of Subject 120-3-23 Rules and Regulations of the Safety Fire Commissioner.

5. Delete paragraph 11.3.1.10 in its entirety and substitute in its place the following:

11.3.1.10 Each dry chemical system shall have the required tags or labels complying with the requirements of Subject 120-3-23 Rules and Regulations of the Safety Fire Commissioner after each service has been conducted on the system. Only the current applicable tag or label shall remain on the system.

6. Delete subsection 11.4.2 in its entirety and substitute in its place the following:

11.4.2 Systems shall be recharged by persons who are properly trained and licensed under the requirements of Subject 120-3-23 in accordance with the manufacturer's listed installation and maintenance manual.

(17) **NFPA 17A, 2024 Edition, Standard for Wet Chemical Extinguishing Systems.**

(a) **Modifications to Chapter 1:**

1. Delete Section 1.7 in its entirety and substitute in its place the following:

1.7 **Qualifications.** Only persons who are properly trained and licensed or permitted in accordance with Chapter 12 of Title 25 of the Official Code of Georgia Annotated, shall be considered competent to design, install, and service wet chemical systems.

(b) **Modifications to Chapter 8:**

1. Delete subsection 8.3.1 in its entirety and substitute in its place the following:

8.3.1 A service technician who performs maintenance on an extinguishing system shall be trained and shall possess a licensed or permitted in accordance with Chapter 12 of Title 25 of the Official Code of Georgia Annotated.

2. Delete paragraph 8.3.1.1 in its entirety without substitution.

3. Add a new subparagraph 8.3.3.5.3 to read as follows:

8.3.3.5.3 Cooking equipment shall not be operated while its fire extinguishing system protecting a commercial kitchen hood, duct, or appliances is nonoperational or otherwise impaired.

4. Delete subparagraph 8.3.3.6.1 in its entirety and substitute in its place the following:

8.3.3.6.1 The owner or owner's representative shall retain all maintenance reports for a period of 3 years after the next maintenance of that type required by the standard.

5. Delete paragraph 8.3.3.7 in its entirety and substitute in its place the following:

8.3.3.7 Each wet chemical system shall have a tag or label securely attached, complying with the requirements of Subject 120-3-23 Rules and Regulations of the Safety Fire Commissioner. Only the current tag or label shall remain in place.

6. Add a new paragraph 8.5.2.4 to read as follows:

8.5.2.4 Each stored pressure system agent cylinder that has undergone maintenance or hydrostatic testing that includes internal examination, or that has been recharged shall have 'Verification of Service' collar located around the neck of the cylinder. The collar shall contain a single circular piece of uninterrupted material forming a hole of a size that will not permit the collar assembly to move over the neck of the cylinder unless the valve is completely removed. The collar shall not interfere with the operation and actuation of the system cylinder. The 'Verification of Service' collar shall comply with the requirements of NFPA 10, Standard for Portable Fire Extinguishers, as adopted by Subject 120-3-3.

8.5.2.4.1 The provisions of 7.5.2.4 do not apply to stored pressure system cylinders undergoing maintenance before March 1, 2002.

8.5.2.4.2 Non-stored pressure cylinders such as cartridge cylinders for cartridge-operated systems do not require a 'Verification of Service' collar for the cartridge.

(18) **NFPA 18, 2021 Edition, Standard on Wetting Agents.**

No modifications.

(19) **NFPA 18A, 2022 Edition, Standard on Water Additives for Fire Control and Vapor Mitigation.**

No modifications.

(20) **NFPA 20, 2022 Edition, Standard for the Installation of Stationary Pumps for Fire Protection.**

(a) **Modification to Chapter 4:**

1. Add new paragraphs 4.6.2.3.5 and 4.6.2.3.6 to read as follows:

4.6.2.3.5 At 150% rated capacity or below, the pump suction supply shall not drop below 20 psi (1.38 bar).

4.6.2.3.6 Suction supply pressure may be lowered upon approval of the authority having jurisdiction.

(21) **NFPA 22, 2023 Edition, Standard for Water Tanks for Private Fire Protection.**

No modifications.

(22) **NFPA 24, 2025 Edition, Standard for the Installation of Private Fire Service Mains and Their Appurtenances.**

(a) **Modifications to Chapter 4:**

1. Delete 4.1.3 (10) in its entirety and substitute in its place the following:

(10) Size, location, and piping arrangement of fire department connections as approved by the local Fire Chief having jurisdiction as set forth in 501.5 of the International Fire Code, as adopted by Subject 120-3-3 of the Rules and Regulations of the Safety Fire Commissioner.

(b) **Modifications to Chapter 13:**

1. Delete Section 13.1 in its entirety and substitute in its place the following:

13.1 **Private Service Mains.**

13.1.1 No pipe smaller than a nominal 8 inches (203 mm) in diameter shall be used to supply more than one hydrant or one hydrant on dead end mains over 500 feet (152 m).

13.1.2 No pipe smaller than a nominal 8 inches (203 mm) in diameter shall be used to supply one hydrant and automatic extinguishing systems.

13.1.3 No pipe smaller than a nominal 8 inches (203 mm) in diameter shall be used to supply more than one hydrant and automatic extinguishing systems on looped mains over 1,000 feet (305 m).

13.1.4 Pipe sizes other than those specified in Subparagraphs

13.1.1 through 13.1.3 may be acceptable in new or existing installations with the written approval of the Fire Chief of the fire department having fire suppression jurisdiction.

2. Add the following in Annex A, A13.1:

A.13.1 Pipe sizing should be based upon good engineering practices based on the projected water demand, firefighting capabilities and water supply characteristics.

(23) **NFPA 25, 2023 Edition, Standard for the Inspection, Testing, and Maintenance of Water-Based Fire Protection Systems.**

(a) **Modifications to Chapter 4:**

1. Add a new Subsection 4.3.1.2 to read as follows:

4.3.1.2 On non-compliant or impaired systems, a copy of the inspection report shall be forwarded to the authority having jurisdiction by the owner or the occupant.

2. Delete 4.3.3 in its entirety and substitute in its place the following:

4.3.3 Records shall be maintained by the property owner for a period of at least three years.

3. Delete Section 4.3.5 and replace with the following:

4.3.5 Subsequent records shall be retained for a period of 3 years after the next inspection of that type required by the standard.

4. Add a new subsection 4.3.6 to read as follows:

4.3.6 **Tagging.**

4.3.6.1 **Inspection Tag.**

(a) After inspection and testing, an Inspection Tag shall be completed indicating all work that has been done, and then attached to the system in such a position as to permit convenient inspection and not hamper its activation or operation. A new Inspection Tag shall be attached to each system each time an inspection and test service is performed.

(b) Inspection Tags must be GREEN in color.

(c) Inspection Tags may be printed and established for any period of time. After each printing, a minimum of three sample tags must be forwarded to the State Fire Marshal's office.

(d) An Inspection Tag shall only be removed by an authorized representative of a licensed fire sprinkler contractor.

(e) Should impairments or noncompliance items be found, the licensed inspector shall notify the building owner or his representative and the authority having jurisdiction in writing of all noncompliance items or impairments found. A fire sprinkler system compliance Inspection Tag shall not be installed on each system until the impairments or noncompliance items have been corrected and each system has been re-inspected and found to be in a state of operational readiness.

4.3.6.2 **Noncompliance Tag.**

(a) If a fire sprinkler system is found in noncompliance with the applicable NFPA standards, a completed Noncompliance Tag shall be attached to the main control valve of each system to indicate that corrective action is necessary.

(b) Noncompliance Tags must be YELLOW in color

(c) Noncompliance Tags may be printed and established for any period of time. After each printing, a minimum of three sample tags must be forwarded to the State Fire Marshal's office.

(d) The signature of the licensee on a Noncompliance Tag certifies the impairments listed on the label cause the system to be out of compliance with NFPA standards.

(e) A Noncompliance Tag shall only be removed by an authorized representative of a licensed fire sprinkler contractor upon re-inspection of the fire sprinkler system.

(f) A letter of noncompliance conditions shall be sent to the building owner or authorized representative within five working days of the date of the inspection.

4.3.6.3 **Impairment Tag.**

(a) Should impairments constitute an emergency impairment as defined in this standard, then the inspector shall complete and attach an Impairment Tag to the main control valve of each system and the fire department connection to indicate that corrective action is necessary.

(b) Impairment Tags must be RED in color.

(c) Impairment Tags may be printed and established for any period of time. After each printing, a minimum of three sample tags must be forwarded to the State Fire Marshal's office.

(d) The signature of the licensee on an Impairment Tag certifies the impairments listed on the label cause the system to be out of compliance with NFPA standards.

(e) An Impairment Tag shall only be removed by an authorized representative of a licensed fire sprinkler contractor upon re-inspection of the fire sprinkler system.

(f) A letter of emergency impairment conditions shall be sent to the building owner or authorized representative and to the occupant within 24 hours of the time of the inspection. The building owner or occupant shall notify the authority having jurisdiction within 24 hours of the time of the impairment notification.

(b) **Modifications to Chapter 6:**

1. Add a new 6.1.1.1.1 to read as follows:

6.1.1.1.1 In new and existing buildings, the requirements for hoses for occupant use are eliminated, subject to the approval of the local Fire Chief or local Fire Code Official having fire suppression jurisdiction.

(24) **NFPA 30, Flammable and Combustible Liquids Code.**

(a) Refer to Subject 120-3-11 for adopted edition and any modifications.

(25) **NFPA 30A, Code for Motor Fuel Dispensing Facilities and Repair Garages.**

(a) Refer to Subject 120-3-11 for adopted edition and any modifications.

(26) **NFPA 30B, Code for the Manufacture and Storage of Aerosol Products.**

(a) Refer to Subject 120-3-11 for adopted edition and any modifications.

(27) **NFPA 31, Standard for the Installation of Oil-Burning Equipment.**

(a) Refer to Subject 120-3-11 for adopted edition and any modifications.

(28) **NFPA 32, Standard for Drycleaning Plants.**

(a) Refer to Subject 120-3-11 for adopted edition and any modifications.

(29) **NFPA 33, Standard for Spray Application Using Flammable or Combustible Materials.**

(a) Refer to Subject 120-3-11 for adopted edition and any modifications.

(30) **NFPA 34, Standard for Dipping, Coating and Printing Processes Using Flammable or Combustible Liquids.**

(a) Refer to Subject 120-3-11 for adopted edition and any modifications.

(31) **NFPA 35, Standard for the Manufacture of Organic Coatings.**

(a) Refer to Subject 120-3-11 for adopted edition and any modifications.

(32) **NFPA 36, Standard for Solvent Extraction Plants.**

(a) Refer to Subject 120-3-11 for adopted edition and any modifications.

(33) **NFPA 37, Standard for the Installation and Use of Stationary Combustion Engines and Gas Turbines.**

(a) Refer to Subject 120-3-11 for adopted edition and any modifications.

(34) **NFPA 40, 2025 Edition, Standard for the Storage and Handling of Cellulose Nitrate Film.**

No modifications.

(35) **NFPA 45, 2024 Edition, Standard on Fire Protection for Laboratories Using Chemicals.**

(a) **Modification to Chapter 10:**

1. Delete paragraph 10.2.3.4 in its entirety and substitute in its place the following:

10.2.3.4 Emergency shutoff valves for laboratories. In addition to point of use manual shutoff valves required by 10.2.3, each laboratory space containing two or more gas outlets installed on tables, benches, or in hoods in business, educational, healthcare, research, commercial, and industrial occupancies shall have a single valve through which all such gas outlets are supplied. This emergency shutoff valve shall be accessible, located within the laboratory or adjacent to the laboratory's primary egress door, and clearly identified by approved signage stating at the least, GAS SHUTOFF.

(36) **NFPA 51, Standard for the Design and Installation of Oxygen-Fuel Gas Systems for Welding, Cutting, and Allied Processes.**

(a) Refer to Subject 120-3-13, Rules and Regulations of the Safety Fire Commissioner, for adopted edition and any modifications.

(37) **NFPA 51B, Standard for Fire Prevention During Welding, Cutting, and Other Hot Work.**

(a) Refer to Subject 120-3-13, Rules and Regulations of the Safety Fire Commissioner, for adopted edition and any modifications.

(38) **NFPA 52, Gaseous Vehicular Fuel Systems Code.**

(a) Refer to Subject 120-3-14, Rules and Regulations of the Safety Fire Commissioner, for adopted edition and any modifications.

(39) **NFPA 53, 2021 Edition, Materials, Equipment, and Systems Used in Oxygen-Enriched Atmospheres.**

(a) Modifications to Chapter 1:

1. Add a new subsection 1.3.1 to read as follows:

1.3.1 This document is recognized strictly as a recommended practice that may be used in evaluating fire hazards in oxygen-enriched atmospheres. Recommendations may be based on the document where deemed appropriate by the authority having jurisdiction. The document is not in the form of a stand-alone code or standard, however, it may be used in conjunction with and in the support of the applicable provisions of other adopted codes or standards.

(40) **NFPA 54, National Fuel Gas Code.**

(a) Refer to Subject 120-3-14, Rules and Regulations of the Safety Fire Commissioner, and Subject 120-3-16, Rules and Regulations of the Safety Fire Commissioner, for the adopted edition and any modifications.

(41) **NFPA 55 2023 Edition, Compressed Gases and Cryogenic Code.**

No modifications.

(42) **NFPA 56, 2023 Edition, Standard for Fire and Explosion Prevention During Cleaning and Purging of Flammable Gas Piping Systems.**

No modifications.

(43) **NFPA 58, 2017 Edition, Liquefied Petroleum Gas Code.**

(a) Refer to Subject 120-3-16, Rules and Regulations of the Safety Fire Commissioner, for adopted edition and any modifications.

(44) **NFPA 59, Utility LP-Gas Plant Code (LNG).**

(a) Refer to Subject 120-3-16, Rules and Regulations of the Safety Fire Commissioner, for adopted edition and any modifications.

(45) **NFPA 59A, 2019 Edition, Standard for the Production, Storage, and Handling of Liquefied Natural Gas.**

(a) Refer to Subject 120-3-16, Rules and Regulations of the Safety Fire Commissioner, for adopted edition and any modifications.

(46) **NFPA 61, 2017 Edition, Standard for the Prevention of Fires and Dust Explosions in Agricultural and Food Processing Facilities.**

(a) Refer to Subject 120-3-24, Rules and Regulations of the Safety Fire Commissioner, for adopted edition and any modifications.

(47) **NFPA 68, 2018 Edition, Standard on Explosion Protection by Deflagration Venting.**

(a) Refer to Subject 120-3-24, Rules and Regulations of the Safety Fire Commissioner, for adopted edition and any modifications.

(48) **NFPA 69, 2024 Edition, Standard on Explosion Prevention Systems.**

No modifications.

(49) **NFPA 70, 2020 Edition, National Electrical Code.**

(a) **Modifications to Article 110:**

1. Add a new section 110.29 to read as follows:

110.29 Relocatable Power Tap's (RPT's. Relocatable power taps (RPT's) shall comply with the provisions of 605.4.2 of the International Fire Code (IFC).

(50) **NFPA 70B, 2019 Edition, Electrical Equipment Maintenance.**

(a) **Modifications to Chapter 1:**

1. Add a new subsection 1.1.3 to read as follows:

1.1.3 This document is recognized strictly as a recommended practice that may be used in evaluating the effectiveness of electrical equipment within its scope. Recommendations may be based on the document where deemed appropriate by the authority having jurisdiction. The document is not in the form of a stand-alone enforceable code or standard, however, it may be used in conjunction with and in the support of applicable provisions of other adopted codes or standards.

(51) **NFPA 70E, 2024 Edition, Standard for Electrical Safety Requirements for Employee Workplaces.**

(a) **Modifications to Article 90 Introduction:**

1. Add a new Subsection 90.1.1 to read as follows:

90.1 This document is recognized strictly as a recommended practice that may be used in evaluating electrical safety requirements for employee workplaces. Recommendations may be based on the document where deemed appropriate by the authority having jurisdiction. The document is not in the form of a stand-alone enforceable code or standard, however, it may be used in conjunction with and in the support of applicable provisions of other adopted codes or standards.

(52) **NFPA 72, 2022 Edition, National Fire Alarm and Signaling Code.**

(a) **Modifications to Chapter 1:**

1. Delete Section 1.1.1 in its entirety and substitute in its place the following:

1.1.1 **Scope.** This Code covers the application, installation, location, performance, inspection, testing, and maintenance of fire alarm systems, supervising station alarm systems, public emergency alarm reporting systems, fire and carbon monoxide detection and warning equipment, and emergency communications systems (ECS), and their components, whether such system or component is required or not.

1.1.1.1 Where the requirements of this Code have technical differences and requirements from those established, as applicable, by Subject 120-3-20 or 120-3-20A, of the Safety Fire Commissioner's Rules and Regulations for Accessibility to Buildings and Facilities, the technical provisions and requirements of Subject 120-3-20 and 120-3-20A shall take precedence over the requirements of this Code where applicable.

(b) **Modifications to Chapter 10:**

1. Add a new subparagraph (3) to subsection 10.4.5 to read as follows:

(3) Protection shall not be required in Existing building installations acceptable to the authority having jurisdiction.

(c) **Modifications to Chapter 17:**

1. Add a new subparagraph 17.7.4.1.4 to read as follows:

17.7.4.1.4 Alternate locations of smoke detectors as allowed by the International Fire Code, or where applicable, the Life Safety Code, and acceptable to the authority having jurisdiction, may be utilized and may be considered to be in compliance with this Code.

(d) **Modifications to Annex A:**

1. Add a new Annex note A.18.4.4.2 to read as follows:

A.18.4.4.2 For example, in critical care patient areas, it is often desirable to not have an audible fire alarm even at reduced private mode levels. Another example would be classrooms for small children in day care or educational occupancies, where verbal communication is vital between caregivers or teachers and children during drills or during an actual fire or other emergency condition. Audible alarms often frighten small children and valuable time may be lost while trying to calm such children. Also, audible alarms at or near locations, where clear communications is required, may present a problem. A school office or a receptionist desk common to various occupancies are examples. An additional example of where an audible fire alarm could be a problem would be high noise level work areas where an audible signal needed to overcome background noise at one time of the day would be excessively loud and potentially dangerous at another time of lower ambient noise. A sudden increase of more than 30 dB over 0.5 seconds is considered to cause sudden and potentially dangerous fright. Each case requires individual consideration by the authority having jurisdiction.

(53) **NFPA 75, 2024 Edition, Standard for the Protection of Electronic Computer/Data Processing Equipment.**

No modification.

(54) **NFPA 76, 2024 Edition, Standard for Fire Protection of Telecommunications Facilities.**

No modification.

(55) **NFPA 77, 2024 Edition, Recommended Practice on Static Electricity.**

(a) **Modifications to Chapter 1:**

1. Add a new subsection 1.1.9 to read as follows:

1.1.9 This document is recognized strictly as a recommended practice that may be used in evaluating systems or devices installed for the purposes of safeguarding life or property against the hazards of static electricity. Recommendations may be based on the document where deemed appropriate by the authority having jurisdiction. The document is not in the form of a stand-alone enforceable code or standard, however, it may be used in conjunction with and in the support of applicable provisions of other adopted codes or standards.

(56) **NFPA 78, 2024 Edition, Guide on Electrical Inspections.**

(a) **Modifications to Chapter 1:**

1. Add a new subsection 1.1.1 to read as follows:

1.1.1 This document is recognized strictly as a recommended practice that may be used in evaluating electrical/electronic equipment, apparatus, or systems of industrial machines within its scope. Recommendations may be based on the document where deemed appropriate by the authority having jurisdiction. The document is not in the form of a stand-alone enforceable code or standard, however, it may be used in conjunction with and in the support of applicable provisions of other adopted codes or standards. This standard is not meant to add any requirements not found in the NEC, nor change the intent of the intent of the requirements found in the NEC. If any conflict occurs between this standards and the NEC, the NEC shall control.

(57) **NFPA 79, 2019 Edition, Electrical Standard for Industrial Machinery.**

(a) Modifications to Chapter 1:

1. Add a new subsection 1.1.3 to read as follows:

1.1.3 This document is recognized strictly as a recommended practice that may be used in evaluating electrical/electronic equipment, apparatus, or systems of industrial machines within its scope. Recommendations may be based on the document where deemed appropriate by the authority having jurisdiction. The document is not in the form of a stand-alone enforceable code or standard, however, it may be used in conjunction with and in the support of applicable provisions of other adopted codes or standards. This standard is not meant to add any requirements not found in the NEC, nor change the intent of the requirements found in the NEC. If any conflict occurs between this standards and the NEC, the NEC shall control.

(58) **NFPA 80, 2022 Edition, Standard for Fire Doors and Other Opening Protectives.**

No modifications.

(59) **NFPA 80A, 2022 Edition, Protection of Buildings from Exterior Fire Exposures.**

(a) **Modifications to Chapter 1:**

1. Add a new subsection 1.1.5 to read as follows:

1.1.5 This document is recognized strictly as a recommended practice that may be used in evaluating the exterior fire exposure risks of buildings. Recommendations may be based on the document where deemed appropriate by the authority having jurisdiction. The document is not in the form of a stand-alone enforceable code or standard, however, it may be used in conjunction with and in the support of applicable provisions of other adopted codes or standards.

(60) **NFPA 82, 2024 Edition, Standard on Incinerators and Waste and Linen Handling Systems and Equipment.**

No modifications.

(61) **NFPA 85, 2023 Edition, Boiler and Combustion Systems Hazards Code.**

No modifications.

(62) **NFPA 86, 2023 Edition, Standard for Ovens and Furnaces.**

No modifications.

(63) **NFPA 87, 2024 Edition, Standard for Fluid Heaters.**

No modifications.

(64) **NFPA 88A, 2023 Edition, Standard for Parking Structures.**

No modifications.

(65) **NFPA 90A, 2024 Edition, Standard for the Installation of Air-Conditioning and Ventilating Systems.**

The International Mechanical Code, as adopted by the Georgia Department of Community Affairs (DCA), shall be the applicable code replacing 90A with the exception of its application to Hospitals, hospices, ambulatory surgical centers, nursing homes, assisted living homes or other health care type facilities that are regulated by the federal Centers for Medicare and Medicaid Services (CMS) shall comply with the fire and life safety rules and regulations imposed by that agency even though codes and standards adopted by that agency may not be specifically included herein. The codes and standards adopted and modified herein shall also apply where applicable and shall be deemed to be the minimum state fire and life safety standards where they are at least as protective as the CMS rules and regulations. (Refer to Table 102.13, CODES REFERENCE GUIDE)

(66) **NFPA 90B, 2024 Edition, Standard for the Installation of Warm Air Heating and Air-Conditioning Systems.**

The International Mechanical Code, as adopted by the Georgia Department of Community Affairs (DCA), shall be the applicable code replacing 90B with the exception of its application to Hospitals, hospices, ambulatory surgical centers, nursing homes, assisted living communities or other health care type facilities that are regulated by the federal Centers for Medicare and Medicaid Services (CMS) shall comply with the fire and life safety rules and regulations imposed by that agency even though codes and standards adopted by that agency may not be specifically included herein. The codes and standards adopted and modified herein shall also apply where applicable and shall be deemed to be the minimum state fire and life safety standards where they are at least as protective as the CMS rules and regulations. (Refer to Table 102.13, CODES REFERENCE GUIDE)

(67) **NFPA 91, 2020 Edition, Standard for Exhaust Systems for Air Conveying of Vapors, Gases, Mists, and Noncombustible Particulate Solids.**

No modifications.

(68) **NFPA 92, 2020 Edition, Standard for Smoke Control Systems.**

No modifications. Also see 909.2.1 (1) of the International Fire Code.

(69) **NFPA 96, 2024 Edition, Standard for Ventilation Control and Fire Protection of Commercial Cooking Operations.**

(a) **Modifications to Chapter 1:**

1. Delete subsection 1.1.4 in its entirety and substitute in its place the following:

1.1.4 This standard shall apply to all commercial cooking equipment used for commercial cooking operations.

2. Delete subsection 1.1.5 in its entirety and substitute in its place the following:

1.1.5 This standard shall not apply to residential cooking equipment located in a single dwelling unit or to cooking equipment in facilities where all of the following are met:

(1) Only residential cooking equipment such as: stoves, ranges or cooking surfaces traditionally used in dwelling units are being utilized.

(2) The defined residential equipment is used for food warming, limited cooking, rehabilitation training or in a home economic education classroom setup.

(3) The residential cooking equipment is protected by a listed self-contained residential fire suppression system located in an approved residential hood which is vented directly to the outside and providing protection to each cooking surface The self-contained fire suppression system for the defined residential cooking equipment need not be provided where protection is provided by an approved automatic sprinkler system protecting the cooking surface, subject to approval of the authority having jurisdiction. The self-contained residential fire suppression system shall automatically disconnect electric power to electric stoves, and shut off the gas supply and electric power to gas fueled stoves, provided, however, this provision shall not be retroactive for installations approved prior to the effective adoption date of this standard.

(4) The facility is not an assembly occupancy, provided, this shall not apply to church facilities with a single residential stove or range complying with (2) above.

(5) Fire Extinguishers are located in all kitchen areas in accordance with NFPA 10, Standard for Portable Fire Extinguishers, and this Code, as adopted with modifications.

1. Add a new subsection 1.1.6 to read as follows:

1.1.6 This standard, except for operational and maintenance provisions, shall not apply for conditions existing prior to March 9, 2010, subject to the approval of the authority having jurisdiction, and where a notarized statement that no frying operations will be performed is provided. This approval shall be void for cause when the authority having jurisdiction finds cooking operations involve frying operations. (See also 1.4.1)

(b) **Modifications to Chapter 4:**

1. Add a new paragraph 4.1.5.3 to read as follows:

4.1.5.3 In mobile cooking operations, the AHJ, or a Firm required to be licensed in accordance with the Rules and Regulations of The Safety Fire Commissioner Chapter 120-3-23 shall not be responsible for ensuring compliance with Sections 4.2, 4.4, and 4.5.

2. Add a new paragraph 4.6.1.1 to read as follows:

4.6.1.1 Subsection 4.6.1 shall not apply to mobile or temporary cooking operations, but rather 4.6.5 shall apply.

(c) **Modifications to Chapter 5:**

1. Add a new Section 5.7 to read as follows:

5.7 **Compliance.** In mobile and temporary cooking operations, the AHJ, or a Firm required to be licensed in accordance with the Rules and Regulations of The Safety Fire Commissioner Chapter 120-3-23 shall not be responsible for ensuring compliance with the requirements of Chapter 5.

(d) **Modifications to Chapter 6:**

1. Add a new Section 6.3 to read as follows:

6.3 **Compliance.** In mobile and temporary cooking operations, the AHJ, or a Firm required to be licensed in accordance with the Rules and Regulations of The Safety Fire Commissioner Chapter 120-3-23 shall not be responsible for ensuring compliance with the requirements of Chapter 6.

(e) **Modifications to Chapter 7:**

1. Add a new Section 7.9 to read as follows:

7.9 Compliance. In mobile and temporary cooking operations, the AHJ, or a Firm required to be licensed in accordance with the Rules and Regulations of The Safety Fire Commissioner Chapter 120-3-23 shall not be responsible for ensuring compliance with the requirements of Chapter 7.

2. Add a new Section 8.5 to read as follows:

8.5 Compliance. In mobile and temporary cooking operations, the AHJ, or a Firm required to be licensed in accordance with the Rules and Regulations of The Safety Fire Commissioner Chapter 120-3-23 shall not be responsible for ensuring compliance with the requirements of Chapter 8.

3. Add a new Section 9.4 to read as follows:

9.4 Compliance. In mobile and temporary cooking operations, the AHJ, or a Firm required to be licensed in accordance with the Rules and Regulations of The Safety Fire Commissioner Chapter 120-3-23 shall not be responsible for ensuring compliance with the requirements of Sections 9.1 and 9.2.

(f) **Modifications to Chapter 10:**

1. Delete subsection 10.2.6 in its entirety and substitute in its place the following:

10.2.6 Automatic fire extinguishing systems shall be installed by competent personnel meeting Subject 120-3-23, Rules and Regulations of the Safety Fire Commissioner, licensing and permit requirements. In addition, such systems shall be installed in accordance with the terms of their listing, the manufacturer's instructions, and the following applicable standard(s):

(1) NFPA 12, Standard on Carbon Dioxide Extinguishing Systems

(2) NFPA 13, Standard for the Installation of Sprinkler Systems

(3) NFPA 17, Standard for Dry Chemical Extinguishing Systems

(4) NFPA 17A, Standard for Wet Chemical Extinguishing Systems

(5) NFPA 750, Standard on Water Mist Fire Protection Systems

(6) NFPA 770, Standard on Hybrid (Water and Inert Gas) Fire Extinguishing Systems

2. Add a New Subsection 10.4.4.2 to read as follows:

10.4.4.2 Shut off devices shall be located below any ceiling and be accessible.

(g) **Modifications to Chapter 11:**

1. Delete subsection 11.5.2 in its entirety without substitution.

2. Delete subsection 11.6.1 and replace with the following:

11.6.1 Complete drawings of the system installation, including the hood(s), exhaust duct(s), and appliances, along with the interface of the fire-extinguishing system detectors, piping, nozzles, fuel and electric power shutoff devices, agent storage container(s), and manual actuation device(s), shall be located within the mobile cooking operation.

3. Add a new paragraph 11.6.2.3 and replace with the following:

11.6.2.3 For mobile and temporary cooking operations the certification shall be maintained on the mobile cooking unit or temporary cooking operation and made available to the AHJ on request.

(h) **Modifications to Chapter 12:**

1. Add a new paragraph 12.1.6.2 to read as follows:

12.1.6.2 The owner or owner's representative shall notify the AHJ in writing within 24 hours when a fire extinguishing system is tagged as non-compliant.

(i) **Modifications to Chapter 14:**

1. Delete Section 14.2 in its entirety and substitute in its place the following:

14.2 **Design Restrictions**. All recirculating systems shall comply with the requirements of Chapter 14.

14.2.1. Recirculating systems shall be limited to outdoor vending areas or rooms that are fully sprinklered.

(j) **Add a New Chapter 16:**

Chapter 16: Mobile and Temporary Cooking Operations

16.1 **General Requirements**

16.1.1 Annex B shall be adopted as mandatory requirements for mobile and temporary cooking operations.

16.1.2 Cooking equipment used in fixed, mobile, or temporary concessions, such as trucks, buses, trailers, pavilions, tents or any form of roofed enclosure shall comply with this chapter.

(k) **Modifications to Chapter 17:**

1. Add new paragraphs 17.1.1.1 and 17.1.1.2 to read as follows:

17.1.1.1 The AHJ shall not be responsible for ensuring compliance with the requirements of Sections 17.4 through 17.9 and 17.11 through 17.12 of this chapter.

17.1.1.2 Compliance with Sections 17.4 through 17.9 and 17.11 through 17.12 of this chapter shall be the sole responsibility of the owner of the mobile or temporary cooking operation.

2. Delete subsection 17.3.1 and replace with the following:

17.3.1 Temporary cooking operations conducted in tents shall comply with the International Fire Code as adopted in Chapter 120-3-3 of the Rules and Regulations of The Safety Fire Commissioner.

(70) **NFPA 99, 2024 Edition, Standard for Health Care Facilities.**

Hospitals, hospices, ambulatory surgical centers, nursing homes, or other health care type facilities that are regulated by the federal Centers for Medicare and Medicaid Services (CMS) shall comply with the fire and life safety rules and regulations imposed by that agency even though codes and standards adopted by that agency may not be specifically included herein. The codes and standards adopted and modified herein shall also apply where applicable and shall be deemed to be the minimum state fire and life safety standards where they are at least as protective as the CMS rules and regulations. Refer to Rule 120-3-3-.03 for definitions of "assisted living communities" and "memory care units". Such facilities are regulated, as appropriate by Chapters 34 or 35 of the Life Safety Code.

(71) **NFPA 99B, 2024 Edition, Standard for Hypobaric Facilities.**

No modifications.

(72) **NFPA 101, 2024 Edition, Life Safety Code.**

The 2018 Edition of the Life Safety Code is adopted with modifications so as to be applicable to proposed (new) and existing buildings and structures. Unless noted otherwise herein, operational provisions such as fire drills, emergency egress and relocation drills, development of fire or emergency plans, and regulation of decorations and contents of building and structures of the various provisions of NFPA 101, Life Safety Code shall not be applicable to proposed (new) or existing buildings, structures, facilities, or conditions. The operational provisions of the International Fire Code (IFC), as adopted by Subject 120-3-3, shall apply to proposed and existing buildings, structures, facilities, and conditions, unless such provisions are less protective than or are in conflict with the rules and regulations of the Centers for Medicare and Medicaid Services (CMS) as they apply to health care related occupancies.

(a) **Modifications to Chapter 1:**

1. Delete paragraph (1) of subsection 1.1.9 in its entirety and substitute in its place the following:

(1) General fire prevention or building construction features are normally a function of fire prevention codes and building codes. The International Fire Code (IFC), as adopted by Subject 120-3-3 of the Rules and Regulations of the Safety Fire Commissioner, and the International Building Code (IBC), as adopted by the Georgia Department of Community Affairs, are applicable, and their use along with other codes and standards shall be coordinated with this Code, as set forth in 1.4.4 and **Table 1.4.4, CODES REFERENCE GUIDE**

2. Add a new subsection 1.4.4 to read as follows:

1.4.4 **Code Coordination.** This Code shall apply to all proposed (new) and existing buildings, structures and facilities, except as herein provided, and shall be utilized in conjunction with the IBC, the IFC, the IMC, and the IFGC, to the degree provided in **Table 102.13 CODES REFERENCE GUIDE.**

1.4.4.1 This Code does not apply to one- and two-family dwellings or one-and two-family row houses (townhouses) separated by a 2-hour firewall, except as specified in Chapters 26, 30 and 31.

Table 102.13 Codes Reference Guide		
Area	**Primary**	**Supplement**
Occupancy Classification	LSC	IBC

Table 102.13 Codes Reference Guide		
Building Construction Types, including allowable height, allowable building area, and the requirements for sprinkler protection related to minimum building construction types	IBC	LSC
Means of Egress	LSC	NONE
Standpipes	IBC	IFC
Interior Finish	LSC	NONE
HVAC Systems	IMC	NONE
Vertical Openings	LSC	NONE
Sprinklers Systems minimum construction standard	LSC	NONE
Fire Alarm Systems	LSC	NONE
Smoke alarms & Smoke Detection Systems	State Statute & LSC	NONE
Portable Fire Extinguishers	IFC	NONE
Cooking Equipment	LSC & NFPA 96	NONE
Fuel Fired Appliances	IFGC	NFPA 54
Liquid Petroleum Gas	NFPA 58	NFPA 54
Compressed Natural Gas	NFPA 52	NONE

(b) **Modifications to Chapter 3:**

1. Delete 3.3.83 in its entirety and replace with a new 3.3.83 to read as follows:

3.3.83 Evacuation Capability. Refer to Rule 120-3-3-.03 for Impractical, Prompt and Slow Evacuation Capability.

(c) **Modifications to Chapter 4:**

1. Delete Section 47 Fire Drills in its entirety and replace with the following:

4.7 Fire Drills

4.7.1 Where Required. Emergency egress and relocation drills, where required by Chapters 11 through 43 or the authority having jurisdiction shall be conducted as specified by the provisions of Chapter 4 of the International Fire Code as adopted by Subject 120-3-3.

2. Delete Section 4.8 Emergency Action Plans in its entirety and replace with the following:

4.8 Emergency Action Plans

4.8.1 Where Required. Emergency action plans where required by Chapters 11 through 43 or the authority having jurisdiction shall be provided in accordance with Chapter 4 of the International Fire Code as adopted by Chapter 120-3-3 of the Rules and Regulations of the Safety Fire Commissioner.

3. Add a new 4.9 to read as follows

4.9 Employee Training and Response Procedures.

4.9.1 Employee Training and Response Procedures. Where required, employees in various occupancies of occupancies in Chapters 11 through 42 shall be trained in fire emergency procedures and evacuation procedures as

required by Section 406 the applicable provisions of Chapter 4 of the International Fire Code, as adopted by Chapter 120-3-3 of the Rules and Regulations of the Safety Fire Commissioner.

4. Add a new 4.10 to read as follows:

4.10 Occupancies Regulated By Centers for Medicare and Medicaid Services (CMS)

4.10.1 Occupancies regulated by the Centers for Medicare and Medicaid Services (CMS) shall be exempt from the requirements of Sections 4.7, 4.8 and 4.9 and shall comply with the requirements of CMS.

(d) **Modifications to Chapter 6:**

1. Delete subparagraph 6.1.14.4.1 in its entirety and substitute in its place the following:

6.1.14.4.1 Where separated occupancies are provided, each part of the building comprising a distinct occupancy as described in this chapter, shall be completely separated from other occupancies by fire resistive assemblies as specified in 6.1.14.4.2, and in Section 508 of the International Building Code, adopted by the Georgia Department of Community Affairs, as applicable to "separated occupancies", unless separation is provided by approved existing separations.

2. Delete subparagraph 6.1.14.4.3 in its entirety without substitution.

3. Delete Table 6.1.14.4.1(a) in its entirety without substitution.

4. Delete Table 6.1.14.4.1(b) in its entirety without substitution.

(e) **Modifications to Chapter 7:**

1. Add a new item (8) to subparagraph 7.2.1.4.1 to read as follows:

(8) For conditions or circumstances not covered herein, vertical fire shutters, roll down fire doors, or similar assemblies shall not be installed in means of egress, except where expressly permitted due to special hazards or circumstances by other chapters of this Code, or by approval of the Office of the State Fire Marshal for buildings coming under O.C.G.A. § 25-2-13, or by the fire authority having jurisdiction over other buildings.

2. Add a new subparagraph 7.2.1.8.2.1 to read as follows:

7.2.1.8.2.1 Where fire doors are used within the means of egress, they shall comply with the applicable provisions of 7.2.1. Spring loaded hinges or spring operated self-closing devices not listed for use with rated fire door assemblies are prohibited for use as closing devices for fire rated doors.

7.2.1.8.2.1.1 Existing applications utilizing spring loaded hinges in existing buildings may be continued in use where acceptable to the authority having jurisdiction.

7.2.1.8.2.1.2 Spring loaded hinges or spring operated self-closing devices shall not be permitted for use on fire-rated smoke doors, provided, however, spring loaded hinges may be used on non-rated doors designed and installed to resist the passage of smoke, unless otherwise specified in Chapters 11 through 43.

7.2.1.8.2.1.3 Existing installations in existing buildings of spring loaded hinges on fire-rated smoke doors may be continued in use where acceptable to the authority having jurisdiction.

3. Revise 7.2.2.2.1.1 (1) to read as follows.

(1) New stairs shall be in accordance with Table 7.2.2.2.1.1(a) and 7.2.2.2.1.2 and the following shall apply:

(a) Risers shall either be solid or have an opening no greater than 1/4 inch.

4. Revise 7.2.2.2.1.1 (3) to read as follows.

(3) Approved existing stairs shall be permitted to be rebuilt in accordance with the following:

(a) Dimensional criteria of table 7.2.2.2.1.1 (b).

(b) Other stair requirements of 7.2.2.

(c) Risers shall either be solid or have openings no greater than 1/4 inch.

5. Add a new subparagraph 7.2.3.10.3 to read as follows:

7.2.3.10.3 **Deactivation of Mechanical Pressurization Systems.** The design of pressurization systems shall ensure that smoke is not introduced into the pressurized enclosure so as to result in the untenable contamination of the fresh air. Approved smoke detectors shall be installed at each intake in such approved manner that the operation of the fan providing mechanical pressurization to the enclosure where smoke is detected shall be deactivated upon detection of smoke.

6. Add a new paragraph 7.3.1.2.1 to read as follows:

7.3.1.2.1 Where substantial evidence and documentation is provided, the authority having jurisdiction may set the occupant load for some occupancy use areas. The determined occupant load capacity shall be posted at an obvious location indicating the total occupant load capacity.

7. Add to Table 7.3.1.2 entitled "Occupant Load Factor" the additional use areas to read as follows:

Use	ft^2 per person	m^2 per person
Locker Rooms	15	(1.4)
Free Weight Rooms	20	(1.9)
Running Tracks	50	(4.7)
Art Museums	30	(2.8)
Pool Halls	75	(6.9)
Multi-Purpose room	7	(0.65)
Airport terminals	30	(2.8)
Concourse	100	(9.3)
Waiting area	15	(1.4)
Baggage Claim	20	(1.9)
Baggage Handling	300	(27.9)"

8. Add a new subparagraph 7.4.1.1.1 to read as follows:

7.4.1.1.1 Egress stairways from mezzanines shall conform to the requirements of Chapter 7 of this Code. They may be open to the floor of the room in which they are located provided all of the following conditions are met:

(1) The space beneath the mezzanine is totally open and unencumbered by partitioned rooms or spaces. The space beneath the mezzanine may be enclosed provided the enclosed space is protected throughout with a smoke detection system installed in accordance with NFPA 72, National Fire Alarm and Signaling Code, which sounds an alarm in the mezzanine.

(2) The travel distance from the most remote point on the floor of the mezzanine to the building exit or to a protected egress corridor, exit court, horizontal passageway, enclosed stair, or exterior exit balcony does not exceed the travel distance limitations of Chapters 11 through 42.

(3) The occupant load of the mezzanine is added to the occupant load of the story or room in which it is located for the purposes of determining the minimum egress requirements.

(4) The mezzanine in not occupied for sleeping purposes unless there are exterior windows accessible to the mezzanine and located not more than two stories above grade.

9. Add a new paragraph 7.7.1.5 to subsection 7.7.1 to read as follows:

7.7.1.5 Where the exit discharge termination cannot be at a public way, or the authority having jurisdiction determines it to be a significant hardship to provide the termination at a public way, the authority having jurisdiction may approve the exit discharge termination to be a safe dispersal area that complies with the following:

(1) The dispersal area shall be located on the same lot at least 50 feet (15240 mm) away from the building requiring egress. A greater distance may be required by the authority having jurisdiction based on the evaluated fire severity or other risk from the building requiring egress.)

10. Add a new subsection 7.7.7 to read as follows:

7.7.7 **Discharge from exits into fenced or walled courtyards or yards.**

7.7.7.1 For occupancies covered by Chapters 14, 15, 16, 17, 32, 33, 34, and 35 exits shall be permitted to discharge into fenced or walled courtyards or yards, provided the courtyard or yard is provided with a gate at least 32 inches (0.81 m) in clear width. Where the population served exceeds 50, two gates shall be provided. There shall be adequate exit capacity provided for the population served. The requirements of 7.4.1.2 shall apply. Gates are permitted to be locked if adequate provisions are made for the rapid removal of occupants by means such as remote control of locks, keying of all locks to keys carried by staff at all times, or other such reliable means available to the staff at all times that is approved by the authority having jurisdiction. Only one locking device shall be permitted on each gate.

7.7.7.2 The provisions of 7.7.7.1 shall not be construed as prohibiting the use of fenced or walled courtyards as components of the discharge of exits as set forth in Chapters 22 and 23.

7.7.7.3 The provisions of various occupancy chapters dealing with a "lock-up", as defined in 3.3.179, shall not be construed as applying to the exit discharge provisions of 7.7.7.1, provided, however, exits from approved lock-ups may discharge into fenced or walled areas complying with the provisions of Chapter 22 or 23 as may be applicable, and as approved by the authority having jurisdiction.

(f) **Modifications to Chapter 8:**

1. Delete paragraph 8.2.1.2 in its entirety and substitute in its place the following:

8.2.1.2 The International Building Code (IBC) as adopted by the Department of Community Affairs (DCA) shall be used to determine the requirements for the construction classification.

2. Add a new subparagraph 8.2.1.2.1 and Table 8.2.1.2.1 to read as follows:

8.2.1.2.1 **Construction Conversion Table.** The table noted herein provides a comparison of acceptable construction types as defined in NFPA Standard 220 and the International Building Code (IBC).

Table 8.2.1.2.1 Conversion Table for the IBC and NFPA 220 Construction Types

NFPA 220	Type I (443)	Type I (332)	Type II	Type II	Type II	Type III	Type III	Type IV	Type V	Type V
			(222)	(111)	(000)	(211)	(200)	(2 HH)	(111)	(000)
IBC	---	IA	IB	IIA	IIB	IIIA	IIIB	IV	VA	VB

3. Add a new to sub-paragraph 8.2.2.2.1 to read as follows:

8.2.2.2.1 Fire barriers/walls required for tenant separation by the IBC may terminate at exit access corridors with a lower fire rating including a non-rated smoke resistive barrier, if such barriers are allowed by the requirements for the protection rating of exit access corridors.

4. Add a new paragraph 8.3.1.2.1 to read follows:

8.3.1.2.1 2-hour fire barriers shall occur at the junction of new and existing construction when the existing construction does not meet the minimum requirements of the code for existing facilities. Such barriers shall not be extended into the new construction.

5. Add a new 8.3.3.6.12 to read as follows:

8.3.3.6.12 Tested and listed fire-rated glazing material installed in separately tested fire-rated frame assemblies not tested in a single unit with fire-rated glazing material may be permitted to be used subject to approval of the authority having jurisdiction in fire-rated barriers that are not part of an exit enclosure or enclosures around unsprinklered hazardous areas not containing flammable liquids or gases, combustible liquids, or other materials having the potential for rapid oxidation or explosion potential.

6. Add a new 8.3.3.6.12 to read as follows:

8.3.3.6.12 Tested and listed fire-rated glazing material installed in separately tested fire-rated frame assemblies not tested in a single unit with fire-rated glazing material may be permitted to be used subject to approval of the authority having jurisdiction in fire-rated barriers that are not part of an exit enclosure or enclosures around unsprinklered hazardous areas not containing flammable liquids or gases, combustible liquids, or other materials having the potential for rapid oxidation or explosion potential.

7. Delete 8.7.3.1 in its entirety and substitute in its place the following:

8.7.3.1 The use, handling and storage of flammable or combustible liquids, flammable gases, or other materials deemed hazardous to the safety of life shall be in accordance with the applicable provisions of the International Fire Code (IFC), as adopted by Subject 120-3-3 or in accordance with the applicable codes or standards.

(g) **Modifications to Chapter 9:**

1. Delete 9.1.1 in its entirety and insert in its place the following:

9.1.1 **Gas.** Equipment using gas and related gas piping shall be in accordance with the International Fuel Gas Code (IFGC), NFPA 54, National Fuel Gas Code, or NFPA 58, Liquefied Petroleum Gas Code, as may be applicable and as adopted by the applicable Chapters of the Rules and Regulations of the Safety Fire Commissioner. (Refer to Table 1.4.4, CODES REFERENCE GUIDE. Existing installations, subject to approval of the authority having jurisdiction, shall be permitted to be continued in service.

2. Add a new paragraph 9.1.1.1 to read as follows:

9.1.1.1 Where fuel gases are used in new buildings and facilities in Chapters 12, 14, 16, 18, 20, 22, 26, 28, 30, 32, 34, 36, 38, 40 and 42 fuel gases detection and warning equipment shall be installed in accordance with NFPA 715 Standard for the Installation of Fuel Gases Detection and Warning Equipment as adopted in Rules and Regulations of the safety Fire Commissioner Subject 120-3-3.

3. Add a new paragraph 9.1.1.2 to read as follows:

9.1.1.2 Where fuel gas equipment is replaced or installed new in existing buildings and facilities in Chapters 13, 15, 17, 19, 21, 23, 26, 29, 31, 33, 35, 37, 39, 40 and 42 fuel gases detection and warning equipment shall be installed in

accordance with NFPA 715 Standard for the Installation of Fuel Gases Detection and Warning Equipment as adopted in Rules and Regulations of the safety Fire Commissioner Subject 120-3-3.

4. Delete 9.2.1 in its entirety and substitute in its place the following:

9.2.1 Air Conditioning, Heating, Ventilating, Ductwork, and Related Equipment. Air conditioning, heating, ventilating ductwork, and related equipment shall be in accordance with the International Mechanical Code (IMC), as adopted by the Georgia Department of Community Affairs. (Refer to Table 1.4.4, CODES REFERENCE GUIDE).

5. Add Subsection 9.2.3.1 to read as follows:

9.2.3.1 Where required by Chapters 16, 26, 28, and 30 domestic cooking equipment designed for residential use shall comply with one of the following:

(a) It shall be provided with a recirculating residential hood.

(b) The ceiling above the stove shall be covered with Type X or other fire-rated gypsum board a minimum of 5/8 inch (15.88 mm) thick or a non-combustible material.

(c) Where domestic cooking equipment designed for residential use is installed and has a residential hood that is vented, the hood shall be vented directly through an outside wall to the outside of the building. The vent pipe shall not pass through any combustible or limited combustible floor, combustible or limited combustible floor/ceiling assembly, or combustible or limited combustible attic space.

6. Delete section 9.3 in its entirety and substitute in its place the following:

9.3.1 General. Smoke control systems, where required or permitted by Chapters 11 through 42, shall be designed, installed, tested, and maintained in conformance with Section 909 of the International Fire Code (IFC), as adopted by Subject 120-3-3 of the Rules and Regulations of the Safety Fire Commissioner.

7. Add a new subsection 9.3.2 to read as follows:

9.3.2 Detention, holding or processing cell(s) which are used for the containment of an individual for not more than two hours in a 12-hour period shall not be required to be provided with vent openings, smoke shafts, or an engineered smoke control system to provide ventilation provided each cell is monitored by closed circuit television or dedicated personnel located outside the holding area and which have visual supervision of the cell(s).

8. Delete subsection 9.4.2.1 in its entirety and substitute in its place the following:

9.4.2.1 New elevators, escalators, dumbwaiters, and moving walks shall be installed in accordance with the requirements of ANSI/ASME A17.1, Safety Code for Elevators and Escalators. The elevator lobby of the designated floor and the alternate floor specified by Rule 211.3(a), and determined by the Fire Chief of the fire department having emergency response jurisdiction, shall be separated from the remainder of the building by 1-hour fire-rated construction. In buildings equipped with automatic sprinkler protection, smoke partitions in accordance with Section 8.4 may be used in lieu of 1-hour fire rated construction. Except health care occupancies as approved by the AHJ, openings in the elevator lobby shall be limited to those required for access to the elevators from exit access corridors or exits only. Elevator lobbies may be used as part of the means of egress from the building.

Exception No. 1: Elevator lobbies are not required within an atrium.

Exception No. 2: Elevator lobbies are not required where elevators are installed on open exterior walls.

Exception No. 3: Elevator lobbies are not required where elevators are installed in open air parking structures.

Exception No. 4: Elevator lobbies are not required in buildings three stories or less with vertical openings protected in accordance with the applicable occupancy chapter.

Exception No. 5: Elevator lobbies are not required in mercantile occupancies that have properly protected openings for escalators or stairs.

Exception No. 6: Existing installations acceptable to the authority having jurisdiction.

Exception No. 7: Designated floor elevator lobbies are not required when pressurized hoistways are provided in accordance with the IBC.

9. Add Subparagraph (5) to 9.6.3.10.2 to read as follows:

(5) The means for transmitting live voice announcements shall not be located in a mechanical or electrical room or any other locked room. The means for transmitting live voice announcements shall be located in a constantly attended area.

10. Add a new subparagraph 9.6.2.10.8.1 to read as follows:

9.6.2.10.8.1 Existing battery-powered smoke alarms as permitted by other sections of this Code shall be permitted to remain in use provided the following criteria are met:

1. The device is no older than 10 years of the manufactures date on the device; and,

2. The device is installed in a facility that was legally permitted before July 1, 1987, as a residential occupancy; and,

3. The facility has demonstrated to the authority having jurisdiction that the testing, maintenance, and battery replacement program will ensure reliability of power to the smoke alarms.

11. Add a new subparagraph 9.6.2.10.8.2 to read as follows:

9.6.2.10.8.2 Existing battery-powered smoke alarms as permitted by other sections of this Code and which meet the provisions of subparagraph 9.6.2.10.8.1 shall be replaced with smoke alarms whose device housing is tamper resistant and is powered by a non-replaceable, non-removable energy source capable of powering the alarm for a minimum of ten years from the manufacture's date on the device when any of the following apply:

1. The device is replaced for any reason; or,

2. The provisions of subparagraph 9.6.2.10.8.1 or not met; or,

3. There is no manufactures date that exist on the device; or,

4. The device does not meet all of the provisions of subparagraph 9.6.2.10.8.1.

12. Add a new subparagraph 9.6.3.6.3 to read as follows:

9.6.3.6.3 Where occupants are incapable of evacuating themselves because of age, dependence on verbal communication with caregivers, physical or mental disabilities, or physical restraint, the private operating mode as described in NFPA 72, National Fire Alarm and Signaling Code, shall be permitted to be used. Only attendants, caregivers, and other personnel that are required to relocate or assist in the relocation occupants from a zone, area, floor, or building shall be required to be notified. The notification shall include means to readily identify the zone, area, floor, or building in need of evacuation. Where approved by the authority having jurisdiction, the requirements for audible signaling shall be permitted to be further reduced or eliminated when visible signaling is provided in accordance with NFPA 72.

13. Add an Annex Note to 9.6.3.6.3 to read as follows:

A.9.6.3.6.3 For example, in critical care patient areas, it is often desirable to not have an audible fire alarm even at reduced private mode levels. Another example would be classrooms for small children in daycare or educational occupancies, where verbal communication is vital between caregivers or teachers and children during drills or during an actual fire or other emergency condition. Audible alarms often frighten small children and valuable time may be lost while trying to calm such children. Also, audible alarms at or near locations where clear communications is required may present a problem. A school office or a receptionist desk common to various occupancies are examples. An additional example of where an audible fire alarm could be a problem would be high noise level work areas where an audible signal needed to overcome background noise at one time of the day would be excessively loud and potentially dangerous at another time of lower ambient noise. A sudden increase of more than 30 dB over 0.5 seconds is considered to cause sudden and potentially dangerous fright. Each case requires individual consideration by the authority having jurisdiction.

14. Add a new subparagraph 9.7.1.1.1 to read as follows:

9.7.1.1.1 NFPA 13R, Standard for the Installation of Sprinkler Systems in Residential Occupancies up to and Including Four Stories in Heights, shall be permitted for use as specifically referenced in Chapters 24 through 33 of this Code. This standard shall also be permitted for the design and installation of automatic sprinkler systems in personal care homes, community living arrangements, day-care centers, and day-care homes in buildings up to and including four stories. When a single-story open-air parking structure of fire-restrictive construction is below a four-story residential occupancy the structure is considered within this scope. NFPA 13R automatic sprinkler systems shall not be permitted in assisted living communities or memory care units, as defined in Rule 120-3-3-.03, unless authorized by the State Fire Marshal's Office.

15. Add a new subparagraph 9.7.2.1.3

9.7.2.1.3 Where approved by the authority having jurisdiction valves on the exterior of buildings are permitted to be supervised by one of the following methods:

(1) Valves locked in the correct position and inspected weekly as part of an approved procedure.

(2) Valves located in a fenced enclosure under the control of the owner, sealed in the open position, and inspected weekly as part of an approved procedure.

9.7.2.1.3.1 Records shall be made for all inspections required by 9.7.2.1.3 (1) and (2) and shall be made available to the authority having jurisdiction upon request. These records shall be maintained for a period of 3 years.

9.7.2.1.3.2 The valve supervision methods described in 9.7.3.1.3 shall not apply to hospitals, hospices, ambulatory surgical centers, nursing homes, assisted living communities, assisted living homes, memory care units or other health care type occupancies or facilities that are regulated by the federal Centers for Medicare and Medicaid Services (CMS).

16. Delete paragraph 9.9 in its entirety and substitute in its place the following:

9.9 Portable fire extinguishers shall be installed in all buildings, structures and facilities as set forth in this Code and as established in 906.1 of the International Fire Code, as adopted by Subject 120-3-3 of the Rules and Regulations of the Safety Fire Commissioner. (Refer to Table 1.4.4, CODES REFERENCE GUIDE)

17. Delete paragraph 9.10 in its entirety and substitute in its place the following:

9.10 Where required by either the provisions of another section of this Code, the International Building Code (IBC) as adopted by the Department of Community Affairs or the International Fire Code (IFC) as adopted by Subject 120-3-3 Rules and Regulations of the Safety Fire Commissioner, standpipe and hose systems shall be provided in accordance with NFPA 14, Standard for the Installation of Standpipe and Hose Systems. Where standpipe and hose systems are installed in combination with automatic sprinkler systems, installation shall be in accordance with the

appropriate provisions established by NFPA 13, Standard for the Installation of Sprinkler Systems, and NFPA 14, Standard for the Installation of Standpipe and Hose Systems.

(h) **Modifications to Chapter 10:**

1. Delete Subsection 10.3 in its entirety and substitute in its place the following:

SECTION 10.3 **Decorations and Furnishings.**

10.3.1 The use of decorative materials (vegetative and non-vegetative), as defined in Chapter 2 of the International Fire Code, and furnishings in proposed (new) and existing buildings shall be regulated as set forth by Sections 805, 806, 807, and 808 of the International Fire Code (IFC), as adopted by Subject 120-3-3 of the Rules and Regulations of the Safety Fire Commissioner.

(i) **Modifications to Chapter 11:**

1. Add a new Subsection 11.1.9 to read as follows:

11.1.9 Portable fire extinguishers shall be provided in accordance with Section 9.9 where the provisions of Section 11.1 are required.

2. Add a new item (4) to paragraph 11.7.3.4 to read follows:

(4) This requirement shall not apply to existing windowless or underground structures, excluding Chapter 15, with an occupant load of 100 or fewer persons in the windowless or underground portions of the structure.

3. Delete subsection 11.8.2.3 in its entirety and substitute in its place the following:

11.8.2.3 **Smoke Proof Enclosures.** High-rise buildings shall be provided with smoke proof exit enclosures in accordance with 7.2.3.

4. Delete subsection 11.11 Tents and all subsections thereunder in its entirety and substitute in its place the following:

11.11.5.1 **Tents.** Tents shall comply with all applicable requirements of Chapter 31 of the International Fire Code as adopted in the Rules and Regulations of the Safety Fire Commissioner Subject 120-3-3.

(j) **Modifications to Chapter 12:**

1. Delete paragraph 12.3.5.1 in its entirety without substitution.

2. Delete paragraphs 12.4.7.11.1, 12.4.7.11.2 and 12.4.7.11.4 in their entirety and substitute in their place a new 12.4.7.11.1, paragraph 12.4.7.11.3 remains unchanged:

12.4.7.11.1 Flame retardant requirements shall be in accordance with 12.7.4.

3. Delete 12.4.9.1.2 (3) and replace with a new 12.4.9.1.2 (3) to read as follows:

(3) Class C: Special amusement buildings not open to the public in excess of 45 days in a twelve month period or mobile special amusement buildings.

4. Add a new subparagraph 12.4.9.5.3 to read as follows:

12.4.9.5.3 Class C special amusement buildings are not required to meet 12.4.9.5.1 provided all the following conditions are met:

1. Portable fire extinguishers with a minimum of a 2A:10B:C rating are placed within 25 feet of each activity or viewing station, so as to be readily accessible and visible to staff;

2. Interconnected smoke alarms with tamper proof battery back up located at each activity or viewing station and located throughout corridors, halls and any unoccupied areas with a smoke alarm with audible and visual indication at a constantly attended location shall be allowed to meet the requirements of 12.4.9.4.1.2 and 12.4.9.4.2.2.

3. In addition to emergency lighting, all staff shall be provided with flashlights;

4. Personnel dedicated for the sole purpose of performing fire watch duties as defined in Chapter 2 of the International Fire Code and as be deemed necessary for specific circumstances by the authority having jurisdiction, shall be provided in such numbers to ensure the entire special amusement space is surveyed continuously starting 30 minutes prior to public occupancy. Such personnel shall be provided with a direct communication device for communication with all viewing or activity stations throughout the facility. In addition, such personnel shall be provided with appropriate training for the operation of portable fire extinguishing equipment;

5. Communication to the responding fire department or emergency dispatch center is available from the facility (a regular telephone or at least two cell phones are acceptable);

6. "NO SMOKING" signs shall be posted at entrances to the building. Receptacles for the discard of smoking material shall be located a minimum of 15 feet (9.1 m) from the structure and shall be clearly identified by applicable signage;

7. Documentation of fire watch tours required by item 4 above is maintained. The documentation, at the minimum, shall note the timeframe the tour was conducted the name of personnel conducting the tour, and information about any hazards identified and actions taken to remove such hazards. Such documentation shall be readily available to the code official upon request.

5. Delete subsection 12.7.3 in its entirety and substitute in its place the following:

12.7.3 Open Flame and Pyrotechnics. No open flame devices or pyrotechnic devices shall be used in any assembly occupancy, unless otherwise provided by

12.7.3.1 through 12.7.3.4.

12.7.3.1 As set forth in the exceptions to 308.3 of the IFC, as adopted by Subject 120-3-3.

12.7.3.2 This requirement shall not apply to heat-producing equipment complying with 9.2.2.

12.7.3.3 This requirement shall not apply to food service operations in accordance with 13.7.1.

12.7.3.4 Gas lights shall be permitted to be used, provided that precautions subject to the approval of the authority having jurisdiction are taken to prevent ignition of any combustible materials.

6. Delete subsection 12.7.4 in its entirety and substitute in its place the following:

12.7.4 Scenery, Decorations, and Furnishings. Combustible decorations, curtains, draperies, similar furnishings, and scenery of cloth, film, foam plastic, vegetation, and similar materials shall meet the applicable provisions of 805, 806, 807, and 808 of the International Fire Code (IFC), as set forth in SECTION 10-3 of this Code. The authority having jurisdiction shall impose additional controls, as he or she deems necessary, on the quantity and arrangement of combustible contents in assembly occupancies to provide an adequate level of safety to life from fire. (Refer to the definition for "decorative materials" in Chapter 2 of the International Fire Code.

7. Delete section 12.7.5.4 and subsections 12.7.5.4.1 through 12.7.5.4.4 and substitute in its place the following:

12.7.5.4 Vehicles. Vehicles on display indoors or within an exhibition facility shall comply with 2018 International Fire Code Section 314.4 as adopted in rules and regulations of the Safety Fire Commissioner Chapter 120-3-3.

8. Delete Subsection 12.7.7 in its entirety and replace it with the following:

12.7.7. The employees and attendants of assembly occupancies shall be trained and drilled in the duties they are to perform in accordance with Section 4.7.

9. Delete subsection 12.7.13 in its entirety and substitute in its place the following:

12.7.13 Emergency Planning and Preparedness. Assembly occupancies (Group A) shall develop policies, procedures, plans, staff training, and safety practices for the protection of life prior to and during an emergency condition in accordance with Sections 4.8 and 4.9.

(k) **Modifications to Chapter 13:**

1. Delete paragraph 13.3.5.1 in its entirety without substitution.

2. Delete paragraphs 13.4.7.11.1, 13.4.7.11.2 and 13.4.7.11.4 in their entirety and replace with a new paragraph 13.4.7.11.1 to read as follows. Paragraph 13.4.7.11..3 remains unchanged.

13.4.7.11.1 Flame retardant requirements shall be in accordance with 13.7.4.

3. Delete 13.4.9.1.2 (3) and replace with a new 13.4.9.1.2 (3) to read as follows:

13.4.9.1.2(3) Class C: Special amusement building not open to the public in excess of 45 days in a twelve month period or mobile special amusement buildings.

4. Add a new paragraph 13.4.9.5.3 to read as follows:

13.4.9.5.3 Class C special amusement buildings are not required to meet 13.4.9.5.1 provided all the following conditions are met:

1. Portable fire extinguishers with a minimum of a 2A:10B:C rating are placed within 25 feet of each activity or viewing station, so as to be readily accessible and visible to staff;

2. Interconnected smoke alarms with tamper proof battery back up located at each activity or viewing station and locted throughout corridors, halls and any unoccupied areas with a smoke alarm with audible and visual indication at a constant attended location shall be allowed to meet the requirements of 13.4.9.4.1.2 and 13.4.9.4.2.2.;

3. In addition to emergency lighting, all staff shall be provided with flashlights;

4. Personnel dedicated for the sole purpose of performing fire watch duties as defined in Chapter 2 of the International Fire Code and as be deemed necessary for specific circumstances by the authority having jurisdiction, shall be provided in such numbers to ensure the entire special amusement space is surveyed continuously starting 30 minutes prior to public occupancy. Such personnel shall be provided with a direct communication device for communication with all viewing or activity stations throughout the facility. In addition such personnel shall be provided with appropriate training for the operation of portable fire extinguishing equipment;

5. Communication to the responding fire department or emergency dispatch center is available from the facility (a regular telephone or at least two cell phones are acceptable);

6. "NO SMOKING" signs shall be posted at entrances to the building. Receptacles for the discard of smoking material shall be located a minimum of 15 feet (9.1 m) from the structure and shall be clearly identified by applicable signage;

7. Documentation of fire watch tours required by item 4 above is maintained. The documentation, at the minimum, shall note the timeframe the tour was conducted the name of personnel conducting the tour, and information about any hazards identified and actions taken to remove such hazards. Such documentation shall be readily available to the code official upon request.

5. Delete subsection 13.7.3 in its entirety and substitute in its place the following:

13.7.3 Open Flame and Pyrotechnics. No open flame devices or pyrotechnic devices shall be used in any assembly occupancy.

13.7.3.1 This requirement shall not apply as set forth in the exceptions to 308.3.1 of the International Fire Code (IFC), as adopted by Chapter 120-3-3 of the Rules and Regulations of the Safety Fire Commissioner.

13.7.3.2 This requirement shall not apply to heat-producing equipment complying with 9.2.2.

13.7.3.3 This requirement shall not apply to food service operations in accordance with 13.7.2.

13.7.3.4 Gas lights shall be permitted to be used, provided that precautions subject to the approval of the authority having jurisdiction are taken to prevent ignition of any combustible materials.

6. Delete subsection 13.7.4 in its entirety and substitute in its place the following:

13.7.4 Scenery, Decorations, and Furnishings. Combustible decorations, curtains, draperies, similar furnishings, and scenery of cloth, film, foam plastic, vegetation, and similar materials shall meet the applicable provisions of 805, 806, 807, and 808 of the International Fire Code (IFC), as set forth in SECTION 10-3 of this Code. The authority having jurisdiction shall impose additional controls, as he or she deems necessary, on the quantity and arrangement of combustible contents in assembly occupancies to provide an adequate level of safety to life from fire. (Refer to the definition for "decorative materials" in Chapter 2 of the International Fire Code.

7. Delete section 13.7.5.4 and subsections 13.7.5.4.1 through 13.7.5.4.4 and substitute in its place the following:

13.7.5.4 Vehicle. Vehicles on display indoors or within an exhibition facility shall comply with 2018 International Fire Code Section 314.4 as adopted in rules and regulations of the Safety Fire Commissioner Chapter 120-3-3.

8. Delete subsection 13.7.7 in its entirety and substitute in its place the following:

13.7.7. The employees and attendants of assembly occupancies shall be trained and drilled in the duties they are to perform in accordance with Section 4.7.

9. Delete Subsection 13.7.13 in its entirety and replace with the following:

13.7.13 Emergency Planning and Preparedness. Assembly occupancies (Group A) shall develop policies, procedures, plans, staff training, and safety practices for the protection of life prior to and during an emergency condition in accordance with Sections 4.8 and 4.9.

(l) **Modifications to Chapter 14:**

1. Add a new paragraph 14.1.1.6 to read as follows:

14.1.1.6 **Mobile or Portable Classrooms.** Each mobile or portable classroom shall not be occupied until the required Certificate of Occupancy has been authorized by the State Fire Marshal's Office, the proper local fire marshal, state inspector, or others authorized by O.C.G.A. § 25-2-12.

(a) For the purposes of this code the term mobile or portable classroom shall also include relocatable buildings.

2. Add a new subparagraph 14.1.1.6.1 to read as follows:

14.1.1.6.1 **Classification.** Mobile or portable classroom structures, as defined in 120-3-3-.03 of Subject 120-3-3 shall also be classified as Group E - Educational occupancies and shall comply with the provisions of this section and other sections applicable to Group E - Educational occupancies, except as may be provided otherwise elsewhere in this Code or in Subject 120-3-3.

3. Add a new subparagraph 14.1.1.6.2 to read as follows:

14.1.1.6.2 Plans and specifications for proposed mobile or portable classrooms shall be submitted to and receive approval by either the State Fire Marshal's Office, the proper local fire marshal, state inspector, or others authorized by O.C.G.A. § 25-2-12 prior to construction. A Georgia registered architect or engineer must place his or her seal on the plans submitted. Submitted plans must include a site plan that is drawn to scale and showing clearances from other mobile or portable classroom structures and other structures. Such site plan shall also show the exit discharge route(s) to a public way in accordance with this Code, or where such is not possible, to an approved area of refuge.

4. Add a new subparagraph 14.1.1.6.3 to read as follows:

14.1.1.6.3 Proposed mobile or portable classrooms shall comply with the various provisions of this Code applying to classrooms in educational occupancies (Group E - Educational), unless otherwise specified.

5. Add a new subparagraph 14.1.1.5.4 to read as follows:

14.1.1.6.4 Locating Mobile/Portable Classroom Structures. Mobile/portable classrooms shall not be installed within 30 feet (9.1 m) of any exposed building or structure, or within 30 feet (9.1 m) of another exposed mobile/portable classroom unit. The mobile/portable classroom unit shall not be connected to any other unit, or to other buildings or structures by a canopy of combustible construction. The distance between a mobile/portable classroom unit and an exposed building or structure, that is totally protected by an approved automatic sprinkler system, may be reduced to 10 feet (3.05 m), provided, the exposed exterior wall is of noncombustible construction, and there are no windows or doors in the exposed wall of the building within 30 feet (9.1 m) of the mobile/portable classroom unit. The distance may be reduced to 0 feet if the exposed wall is of noncombustible construction having a certified fire resistance rating of at least 2-hours and without openings within 30 feet (9.1 m) of the exposing mobile/portable classroom unit.

6. Add a new paragraph 14.2.1.4.1, to read as follows:

14.2.1.4.1 The provisions of 14.2.1.2 and 14.2.1.3 shall not apply to educational facilities that meet the requirements of 16.1.6.

7. Add a new subparagraph 14.2.2.2.2.1 to read as follows:

14.2.2.2.2.1 Doors serving as exits from mobile/portable classrooms shall not be less than 32 inches (0.91 m) in clear width, swing outward with exit travel onto landings at least 4 feet by 4 feet (1.2 m by 1.2 m), and have steps or ramps complying with applicable provisions of this Code. This includes guardrails and graspable handrails. Steps and ramps serving fewer than 50 persons may be 36 inches (0.91m) in clear width.

8. Add a new paragraph (5) to 14.2.11.1.1 1 to read as follows:

(5) Windows may open onto a court or an enclosed court provided all of the following criteria are met:

(a) The court shall be of sufficient width such that persons exiting through the courtyard will be at a minimum dimension not less than 10 feet (3 m) from any portion of the building that could present an exposure condition to a fire.

(b) The court has exits directly to the exterior of the building through an exit passageway that is separated out from all other parts of the building by 2-hour fire-rated construction. No space other than exit corridors protected by 'B' labeled 11/2-hour fire doors, whether normally occupied or not, shall open onto this required exit passageway.

(c) The exit capacity for the exit passageway shall be of sufficient width for the corridors connected to it as well as the enclosed court calculated at 15 square feet (1.4 sq. m) per person or minimum number of students subject to exiting into the court, whichever is the greater of the two.

(d) The travel distance from any point in a connecting classroom to the exterior of the building through the exit passageway shall not exceed 150 feet (45.7 m).

(e) The court is provided with emergency lighting to direct occupants to the exit(s) in accordance with Section 5.9.

(f) The exit(s) from the court is/are clearly marked in accordance with Section 7.10.

9. Add a new paragraph 14.2.11.4 to read as follows:

14.2.11.4 School Hallway Interior Emergency Lockdown Defense (SHIELD). The installation of a School Hallway Interior Emergency Lockdown Defense (SHIELD) shall be permitted in educational occupancies provided all of the following criteria are met:

(1) Activation shall be by means of depressing a panic button or pull station marked for emergency SHIELD available to school administration at a central location. Additional activation may be by telephone code.

(2) System activation shall automatically contact law enforcement authorities upon activation.

(3) Cross corridor doors may be provided with magnetic hold open devices to release upon activation of the system.

(4) Upon activation of the system, cross corridor doors shall be permitted to be kept in the closed position with magnetic locks.

(5) System hardware shall be provided with emergency power or battery back-up in event of loss of power.

(6) Smoke detectors shall be provided within 15 feet of cross corridor doors on the classroom egress side for each corridor zone and be identified distinctly from other required detectors. Such detectors upon activation by smoke shall release door mag locks for the locked zone to freely open. Detectors are not required to be interconnected into the building's fire alarm system. Smoke detectors for SHIELD shall not be installed on the entry side of cross corridor doors for the corridor zone.

(7) Card readers with keypad shall be installed on the ingress side of the doors requiring a PIN code and card swipe to deactivate for the activated corridor zone.

(8) Keypad shall be installed on the egress side of the doors only requiring a PIN code for deactivation of the door mag locks for the activated corridor zone.

(9) A blue light strobe and horn, distinct from that of the fire alarm may be provided to deter intruders.

(10) Staff shall be adequately trained on the intent and operation of the system with the conduction of mock drills.

10. Add a new paragraph 14.2.11.4.1 to read as follows:

14.2.11.4.1 (SHIELD) Activation. The SHIELD system shall only be activated in the following circumstances:

(1) The event of an intruder upon school premises.

(2) For the purposes of testing the system.

(3) For the purposes of conducting drills related to an intruder upon school premises.

11. Add a new subparagraph 14.3.2.2.1 to read as follows:

14.3.2.2.1 Residential type cooking equipment. Residential type cooking equipment located in food preparation areas of home economic labs may be protected by a listed self-contained residential fire suppression systems located in a residential hood over each cooking surface, with the exhaust hood vented directly to the outside of the building. The fire suppression system shall automatically disconnect electric power to electric stoves or shut off the gas supply to gas fueled stoves. Food preparation areas located in home economics labs need not be so protected where located in a fully sprinklered building or where protection is provided in accordance with 9.7.1.2, provided, however, the exhaust hood shall still be required to be vented to the outside of the building.

12. Delete subparagraph 14.3.4.3.1.1 in its entirety and substitute in its place the following:

14.3.4.3.1.1 Occupant notification shall be by means of audible and visual alarm devices in accordance with 9.6.3 and Chapter 120-2-20, Rules and Regulations of the Safety Fire Commissioner.

13. Delete item (3) from paragraph 14.3.5.2 and replace with new item (3)

(3) relocatable buildings complying with all of the following:

(a) Building contains a maximum of 2 classrooms.

(b) Each classroom has 2 independent doors remotely located in accordance with 7.5.1.3 of this code leading directly to the outside of the building. One door shall be allowed to exit through the second classroom.

(c) Building is located not less than 30 feet (9.1 m) from another building or other relocatable building.

(d) Building has a fire alarm system connected to the main school building fire alarm.

14. Add a new subparagraph 14.3.5.6 to read as follows:

14.3.5.6 Portable Fire Extinguishers. Portable fire extinguishers shall be provided in educational occupancies, including mobile/portable classrooms, in accordance with 9.9.

14.3.5.6.1 In lieu of locating portable fire extinguishers in corridors and normal paths of travel as specified in NFPA Standard 10, Standard for Portable Fire Extinguishers, portable fire extinguishers may be located in rooms that open directly onto such corridors and paths of travel, provided, all of the following are met:

(a) The rooms in which such portable fire extinguishers are placed are located in close proximity to that portion of the corridor where a portable fire extinguisher would normally be placed in accordance with NFPA Standard 10.

(b) A sign which states, in white letters at least one inch in height on a red background, "PORTABLE FIRE EXTINGUISHER LOCATED IN THIS ROOM", is placed on the corridor wall immediately adjacent to the entrance(s) of each such room so that it can be clearly seen at all times.

(c) The rooms in which such portable fire extinguishers are placed shall be constantly supervised during school hours.

(d) These rooms cannot be subject to being locked at any time the building is occupied.

15. Add a new item 6 to subsection 14.3.6 to read as follows:

6. Door closing devices are not required on doors in corridor wall openings other than those serving exits or required enclosures of hazardous areas.

16. Add paragraph 14.3.7.4 to read as follows:

14.3.7.4 Subdivision of Building Spaces For Shelter-In-Place.

14.3.7.4.1 Where the safety of educational occupants cannot be ensured adequately by dependence on evacuation of the building, their protection from fire shall be provided by appropriate arrangement of facilities; adequate, trained staff; and development of operating and maintenance procedures composed of the following:

(1) Design, construction, and compartmentation

(2) Provision for detection, alarm, and extinguishment

(3) Fire prevention procedures and planning, training, and drilling programs for the isolation of fire, transfer of occupants to areas of refuge, or evacuation of the building.

14.3.7.4.2 Total evacuation of an educational occupancy may not be required when all the following criteria are met:

(1) The building is protected throughout by an approved supervised automatic sprinkler system in accordance with 9.7 and shall be in accordance with 9.7.1.1 (1).

(2) Each smoke compartment shall have a separate flow switch on the sprinkler system to indicate water flow.

(3) The building has a fire alarm system in accordance with Section 9.6.

(4) Each smoke compartment has a separate zone indicated on the fire alarm system.

14.3.7.4.3 The building shall be subdivided into compartments by smoke barriers having not less than a 1-hour fire resistance rating and complying with Section 8.5 where one or both of the following conditions exist:

(1) The maximum floor area, including the aggregate area of all floors having a common atmosphere, exceeds 30,000 ft^2 (2800 m^2).

(2) The length or width of the building exceeds 300 ft (91 m).

14.3.7.4.4 The requirements of 14.3.7.3 shall apply.

14.3.7.4.5 Travel distance from any point to reach a door in the required smoke barrier does not exceed 200 ft. (61 m).

14.7.4.6 Not less than 20 net ft^2 (1.9 m^2) per person, shall be provided within the aggregate area of corridors, classrooms, lounge and dining areas, gymnasiums, auditoriums, and other low hazard areas on each side of the smoke barrier.

14.3.7.4.7 Doors in smoke barriers shall comply with Sections 18.3.7.6, 18.3.7.7, 18.3.7.8, 18.3.7.9 and 18.3.7.10.

14.3.7.4.8 Doors in smoke barriers shall be allowed to be connected to any SHIELD system installed, provided all the requirements of the SHIELD system are met.

14.3.7.4.9 The educational occupancy has developed policies, procedures, staff training and safety practices for the protection of life to relocate occupants from one smoke compartment to another in the event of an intruder or intruder alert.

14.3.7.4.10 A minimum of four drills shall be conducted each school calendar year to practice relocating from one smoke compartment to another. One of these drills shall be allowed to meet the requirements of Section 14.7.2.4.1 of this code as modified in this chapter. The remaining three drills shall be conducted separately from any other required drill.

14.3.7.4.11 The local responding Fire Department, local Law Enforcement Agency(s), local Emergency Management Agency, local E911, local Emergency Medical Service, and all other agencies that would respond in an emergency shall be invited to participate in required drills for this Section.

17. Add a new paragraph 14.4.4.6 to read as follows:

14.4.4.6 Corridor walls in flexible plan buildings shall comply with subsection 14.3.6 as modified.

18. Add a new paragraph 14.5.2.3 to read as follows:

14.5.2.3 Portable electric and liquefied petroleum gas or liquid fuel fired space heating devices designed to be portable are prohibited in all portions of educational buildings, unless such use is permitted by 603.4 of the IFC, as adopted by Chapter 120-3-3 of the Rules and Regulations of the Safety Fire Commissioner.

19. Delete subsection 14.7.1 in its entirety and substitute in its place the following:

14.7.1 Emergency Planning and Preparedness. Educational occupancies (Group E - Educational) shall develop policies, procedures, plans, staff training, and safety practices for the protection of life prior to and during an emergency situation. Such policies, procedures, plans, staff training, and safety practices shall be developed and implemented in accordance with the applicable provisions of Chapter 4 of the International Fire Code, as adopted by the Rules and Regulations of the Safety Fire Commissioner.

20. Delete14.7.1.1 in its entirety and replace with the following:

14.7.1.1 Emergency action plans shall be provided in accordance with 4.8 and 4.9.

21. Delete Section 14.7.2 in its entirety and replace with the following:

14.7.2. Emergency Egress Drills.

14.7.1 Emergency egress drills shall be conducted in accordance with Section 4.7 and 14.7.2.

14.7.2 By October 1 of each school year, every public school shall conduct an intruder alert drill for students, school administrators, teachers, and other school personnel pursuant to O.C.G.A. § 20-2-1185 (e) (2).

(m) **Modifications to Chapter 15:**

1. Add a new subparagraph 15.1.1.1.1 to read as follows:

15.1.1.1.1 **Existing Mobile or Portable Classroom Structures.**

(a) Existing mobile or portable classroom structures, which have been installed prior to the effective date of this Code, and which were deemed to be in compliance with provisions in effect at the time of their installation, shall be permitted to remain in use, if deemed to have been maintained as approved, and meet specific provisions of this chapter applicable to existing mobile/portable classroom structures.

(b) When an existing mobile or portable classroom structure is removed from a school system, the certificate of occupancy for that structure becomes void, provided, however, the structure shall retain the status of an existing structure if continued in service as a classroom structure in another school system. This shall also apply to leased or rented mobile or portable classroom structures. A new certificate of occupancy shall be required for the relocated structure, and shall be issued provided the structure meets the provisions of this Code that are applicable to existing mobile or portable classrooms.

(c) For the purposes of this Code the term mobile or portable classroom shall also include relocatable buildings.

2. Add a new paragraph 15.1.1.6 to read as follows:

15.1.1.6 Existing mobile or portable classrooms shall comply with the various provisions of this Code applying to classrooms in existing educational occupancies, unless otherwise specified in this chapter.

3. Add a new paragraph 15.1.1.7 to read as follows:

15.1.1.7 When relocated, a mobile or portable classroom structure shall not be placed within 30 feet (9.1 m) of any building or structure or within 30 feet (9.1 m) of another mobile or portable classroom structure. Such mobile or portable classroom structures shall not be connected to any building or other mobile classroom structure by a canopy of combustible construction. An existing canopy of combustible components may be continued in use provided no combustible components are within 25 feet (7.6 m) of any building or structure or within 30 feet (9.1 m) of another mobile or portable classroom structure. The distance between a mobile or portable classroom unit and an exposed building or structure, that is totally protected by an approved automatic sprinkler system, may be reduced to 10 feet (3.05 m), provided, the exposed exterior wall is of noncombustible construction, and there are no windows or doors of the exposed wall of the building within 30 feet (9.1 m) of the mobile or portable classroom unit. The distance may be reduced to 0 feet if the exposed wall is of noncombustible construction having a certified fire resistance rating of at least 2-hours and without openings within 30 feet (9.1 m) of exposing mobile or portable classroom unit.

4. Add a new paragraph 15.2.1.5 to read as follows:

15.2.1.5 The provisions of 15.2.1.2 and 15.3.2.3 shall not apply to facilities that meet the requirements of 16.1.6.

5. Add a new subparagraph 15.2.2.2.2.1 to read as follows:

15.2.2.2.2.1 Doors serving as exits from existing mobile or portable classrooms shall not be less than 32 inches (0.91 m) in clear width, unless originally approved for a clear width of not less than 28 inches. Such exit doors shall open onto landings 4 feet by 4 feet (1.2 m by 1.2 m) and have stairs and or ramps, as needed, complying with applicable provisions of this Code. Landings, stairs, ramps, guardrails, and handrails installed and approved prior to the effective date of this Code, if maintained in a state of good repair, may be continued in use. When a mobile/portable classroom structure is moved to another site at the same school or another school, landings, stairs, ramps, guardrails, and graspable handrails shall comply with the applicable requirements of this Code for new construction.

6. Add item (11) to 15.2.2.2.4.1 to read as follows:

(11) The two releasing motions allowed by 15.2.2.2.4.1(3) shall be approved by the Fire Chief of the fire department with fire suppression jurisdiction.

7. Add a new item (5) to paragraph 15.2.11.1 to read as follows:

(5) Windows may open onto a court or an enclosed court provided all of the following criteria are met:

(a) The court shall be of sufficient width such that persons exiting through the courtyard will be at a minimum dimension not less than 10 feet (3 m) from any portion of the building that could present an exposure condition to a fire.

(b) The court has exits directly to the exterior of the building through an exit passageway that is separated out from all other parts of the building by 2-hour fire-rated construction. No space other than exit corridors protected by 'B' labeled 11/2-hour fire doors, whether normally occupied or not, shall open onto this required exit passageway.

(c) The exit capacity for the exit passageway shall be of sufficient width for the corridors connected to it as well as the enclosed court calculated at 15 square feet (1.4 sq. m) per person or minimum number of students subject to exiting into the court, whichever is the greater of the two.

(d) The travel distance from any point in a connecting classroom to the exterior of the building through the exit passageway shall not exceed 150 feet (45.7 m).

(e) The court is provided with emergency lighting to direct occupants to the exit(s) in accordance with Section 5.9.

(f) The exit(s) from the court is/are clearly marked in accordance with Section 7.10.

8. Add a new paragraph 15.2.11.4 to read as follows:

15.2.11.4 **School Hallway Interior Emergency Lockdown Defense (SHIELD).** The installation of a School Hallway Interior Emergency Lockdown Defense (SHIELD) shall be permitted in educational occupancies provided all of the following criteria are met:

(1) Activation shall be by means of depressing a panic button or pull station marked for emergency SHIELD available to school administration at a central location. Additional activation may be by telephone code.

(2) System activation shall automatically contact law enforcement authorities upon activation.

(3) Cross corridor doors may be provided with magnetic hold open devices to release upon activation of the system.

(4) Upon activation of the system, cross corridor doors shall be permitted to be kept in the closed position with magnetic locks.

(5) System hardware shall be provided with emergency power or battery back-up in event of loss of power.

(6) Smoke detectors shall be provided within 15 feet of cross corridor doors on the classroom egress side for each corridor zone and be identified distinctly from other required detectors. Such detectors upon activation by smoke shall release door mag locks for the locked zone to freely open. Detectors are not required to be interconnected into the building's fire alarm system.

(7) Card readers with keypad shall be installed on the ingress side of the doors requiring a PIN code and card swipe to deactivate for the activated corridor zone.

(8) Keypad shall be installed on the egress side of the doors only requiring a PIN code for deactivation of the door mag locks for the activated corridor zone.

(9) A blue light strobe and siren, distinct from that of the fire alarm may be provided to deter intruders.

(10) Staff shall be adequately trained on the intent and operation of the system with the conduction of mock drills.

15.2.11.3.1 **(SHIELD) Activation.** The SHIELD system shall only be activated in the following situations:

(1) The event of an intruder upon school premises.

(2) For the purposes of testing the system.

(3) For the purposes of conducting drills related to the intrusion or active shooter upon school premises.

9. Delete subparagraph 15.3.2.1(1)(a) in its entirety and substitute in its place the following:

(a) Boiler and furnace rooms, unless such rooms enclose air handling equipment, compressor equipment, furnaces or other heating equipment with a total aggregate input rating less than 200,000 BTU input. Such rooms shall not be used for any combustible storage. A minimum of 30 inches (0.76 m) unobstructed access shall be provided and maintained to equipment and electrical or emergency control panels or devices for emergency response purposes.

10. Add a new paragraph 15.3.2.2.1 to read as follows:

15.3.2.2.1 Food preparation areas located in home economic labs may be protected by listed self-contained residential fire suppression systems located in a residential hood over each cooking surface, with the exhaust hood

vented directly to the outside. Required use of automatic disconnects of fuel source or power source is subject to the approval of the authority having jurisdiction. Food preparation areas located in home economic labs need not be protected where in a fully sprinklered building or where protection is provided in accordance with 9.7.1.2. The exhaust hood is still required to be vented to the outside if installed after July 28, 1998.

11. Add items (3) and (4) to paragraph 15.3.4.2.1 to read as follows:

(3) Where each classroom in a mobile or portable classroom structure is provided with a two-way communication system that will permit initiation of the communication from the classroom as well as from a constantly attended location in the main administrative office of the school from which a general alarm can be sounded, if needed, and the fire department can be summoned. A telephone mounted in each classroom and equipped with speed dialing, or a similar function, to provide contact with the constantly attended location noted above, shall be acceptable as a two-way communication system for purposes of this provision. The procedure for using the system for emergency alerting shall be clearly posted near the system actuation device in each classroom and at the constantly attended location.

(4) Fire alarm alerting provisions for existing mobile or portable classroom structures approved prior to the effective date of this Code, and which are in a state of operational readiness. At the minimum, such provisions shall provide alerting of a fire condition in each mobile or portable classroom structure. Where alerting is by an alarm bell or horn, the sound or signal shall be distinctive from other bells or horns.

12. Add a new paragraph 15.3.5.6 to read as follows:

15.3.5.6 Portable Fire Extinguishers. Portable fire extinguishers shall be provided in educational occupancies, including mobile or portable classrooms, in accordance with 9.9.

15.3.5.6.1 In lieu of locating portable fire extinguishers in corridors and normal paths of travel as specified in NFPA 10, Standard for Portable Fire Extinguishers, portable fire extinguishers may be located in rooms that open directly onto such corridors and normal paths of travel provided all of the following are met:

(a) The room in which such portable fire extinguishers are placed are located in close proximity to that portion of the corridor where a fire extinguisher would otherwise be placed in accordance with NFPA 10; Standard for Portable Fire Extinguishers,

(b) A sign which states in white letters at least one inch in height on a red background, "**PORTABLE FIRE EXTINGUISHER LOCATED IN THIS ROOM** ", is placed on the corridor wall immediately adjacent to the entrance way of each such room so that it can be clearly seen at all times;

(c) The rooms in which such portable fire extinguishers are placed shall be constantly supervised during school hours; and

(d) Those rooms cannot be subject to being locked at any time the building is occupied.

13. Add a new item (6) to subsection 15.3.6 to read as follows:

(6) Door closing devices are not required on doors in corridor wall openings other than those serving exits or required enclosures of hazardous areas.

14. Add new paragraph 15.5.2.3 to read as follows:

15.5.2.3 Portable electric and liquefied petroleum gas or liquid fuel fired space heating devices designed to be portable are prohibited in all portions of educational buildings.

15. Delete 15.7.1.1 in its entirety and replace with the following:

15.7.1.1 Emergency action plans shall be provided in accordance with Sections 4.8 and 4.9

16. Delete Section 15.7.2. in its entirety and replace it with the following:

15.7.2 **Emergency Drills.**

15.7.1 Emergency drills shall be conducted in accordance with Sections 4.7 and 15.7.2

15.7.2 By October 1 of each school year, every public school shall conduct an intruder alert drill for students, school administrators, teachers, and other school personnel pursuant to O.C.G.A. § 20-2-1185(e) (2).

(n) **Modifications to Chapter 16:**

1. Add a new 16.1.1.2.1 to read as follows:

16.1.1.2.1 Pursuant to O.C.G.A. 25-2-13(b)(1)(I) the term Group Day-Care Home applies to day-care facilities where at least seven (7) but not more than twelve (12) children receive care. Further, the term Day Care Center applies where more than twelve (12) children receive care. Where such facilities are required to be licensed or commissioned as set forth by O.C.G.A. 25-2-13(b)(1)(I), the facilities are also required to comply with the Rules and Regulations of the Safety Fire Commissioner and to obtain a Certificate of Occupancy pursuant to O.C.G.A. 25-2-14(c).

2. Add a new subparagraph 16.1.3.1.1 to paragraph 16.1.3.1 to read as follows:

16.1.3.1.1 The provisions of 6.1.14 shall not apply to one- and two-family dwellings.

3. Add a new subparagraph 16.1.6.1.1 to read as follows:

16.1.6.1.1 Day-Care occupancies with exits directly to the outside from each room normally occupied by clients may be of any construction type without being protected throughout by an automatic sprinkler system.

4. Add a new paragraph 16.1.6.3 to read as follows:

16.1.6.3 Day-Care Facilities Located Below the LED. The story below the level of exit discharge shall be permitted to be used in buildings of any construction type, other than Type II(000), Type III(200) and Type V(000) provided, the building is protected throughout by an approved automatic sprinkler system.

5. Add a new subparagraph 16.1.6.3.1 to read as follows:

16.1.6.3.1 Where the story below the level of exit discharge is occupied as a day-care center, both of the following shall apply:

(1) One means of egress shall be an outside or interior stair in accordance with 7.2.2. An interior stair, if used, shall only serve the story below the level of exit discharge. The interior stair shall be permitted to communicate with the level of exit discharge; however, the required exit route from the level of exit discharge shall not pass through the stair enclosure.

(2) The second means of egress shall be permitted to be via an unenclosed stairway separated from the level of exit discharge in accordance with 8.6.5. The path of egress travel on the level of exit discharge shall be protected in accordance with 7.1.3.1.

6. Add a new subparagraph 16.2.2.3.1 to rea as follows:

16.2.2.3.1 Handrails in accordance with A. 7.2.2.4.5.4 shall be required.

7. Add a new item (6) to 16.2.9 to read as follows:

(6) All spaces normally occupied by children.

8. Add an item (4) to paragraph 16.3.2.1 to read as follows:

(4) In areas where documentation is provided indicating an unreliable water source, the authority having jurisdiction may accept separation of these areas from the remainder of the building by fire barriers having not less than a 2-hour fire-resistance rating.

9. Add new subparagraph 16.3.2.5.1 to read as follows:

16.3.2.5.1 The requirements of 9.2.3.1 shall apply.

10. Delete subparagraphs 16.3.5.1 and 16.3.5.2 in their entirety and substitute in their place the following:

16.3.5.1. Required sprinkler systems shall be installed in accordance with 9.7.1.1 (1) or (3) and supervised in accordance with Section 9.7, unless otherwise permitted by Subparagraph 16.1.6.1.1.

11. Add a new paragraph 16.3.5.1 to read as follows:

16.3.5.1 Portable Fire Extinguishers. Portable fire extinguishers shall be provided in all daycare occupancies in accordance with 9.9.

12. Add new paragraph 16.5.2.4 to read as follows:

16.5.2.4 Portable electric and liquefied petroleum gas or liquid fuel fire space heating devices designed to be portable are prohibited in all portions of day-care facilities.

16.5.2.4.1 In emergency conditions when approved by the authority having jurisdiction, equipment designed to be portable may be used for a specified time provided such equipment is properly protected and separated from combustibles as specified by the manufacturer's instructions and the authority having jurisdiction.

13. Delete paragraph 16.6.1.6 in its entirety and substitute in its place the following:

16.6.1.6 Minimum Construction Requirements. The minimum construction requirements for new day-care homes shall be limited to the types of building construction permitted by the IBC as specified in 8.2.1. Clients of a group day-care home in a multi-story building shall be restricted to the level of exit discharge, unless the provisions of 16.1.6 are met.

14. Add a new paragraph 16.6.3.6 to read as follows:

16.6.3.6 Portable Fire Extinguishers. Portable fire extinguishers shall be provided in all daycare home occupancies in accordance with 9.9.

15. Delete subsections 16.7.1 and 16.7.2 in their entirety and substitute in their place the following:

16.7.1 Emergency Action Plans and Emergency Egress and Relocation Drills. Day-care occupancies (Group E and I-4) shall develop policies, procedures, plans, staff training, safety practices, and emergency egress and relocation drills for the protection of life prior to and during an emergency condition in accordance with Sections 4.7, 4.8 and 4.9.

(o) **Modifications to Chapter 17:**

1. Delete paragraph 17.1.1.4 in its entirety and substitute in its place the following:

17.1.1.4 Pursuant to O.C.G.A. § 25-2-13(b)(1)(I) the term Group Day-Care Home applies to daycare facilities where at least seven (7) but not more than twelve (12) children receive care. Further, the term Day Care Center applies

where more than twelve (12) children receive care. Where such facilities are required to be licensed or commissioned as set forth by O.C.G.A. § 25-2-13(b)(1)(I), the facilities are also required to comply with the Rules and Regulations of the Safety Fire Commissioner and to obtain a Certificate of Occupancy pursuant to O.C.G.A. § 25-2-14(c).

2. Delete paragraph 17.1.1.5 in its entirety and substitute in its place the following:

17.1.1.5 This section establishes life safety requirements for existing day-care occupancies, adult day-care facilities, and head start facilities in which more than 12 clients receive care, maintenance, and supervision by other than their relative(s) or legal guardian(s) for less than 24 hours per day. An existing day-care occupancy shall be allowed the option of meeting the requirements of Chapter 16 in lieu of Chapter 17. Any day-care occupancy that meets the requirements of Chapter 16 shall be judged to meet the requirements of Chapter 17.

3. Add a new subparagraph 17.1.3.1.1 to read as follows:

17.1.3.1.1 The provisions of 6.1.14 shall not apply to one- and two-family dwellings.

4. Add a new subparagraph 17.1.4.1.1 to read as follows:

17.1.4.1.1 Existing day-care centers that include part-day preschools, head-start programs, kindergartens, and other schools whose purpose involves education primarily for a group of children may continue to meet the requirements of this section or may be allowed the option of meeting the requirements of Chapter 15.

5. Add new subparagraphs 17.1.6.1.1 and 17.1.6.1.2

17.1.6.1.1 Day-Care occupancies with exits directly to the outside from each room normally occupied by clients may be of any construction type without being protected throughout by an automatic sprinkler system.

17.1.6.1.2 For centers existing prior to April 12, 1985, where direct access to the outside of the building is not possible from interior rooms, and such interior rooms are normally subject to occupancy by children, the interior room may continue to be used provided there are two remote exits from the rooms that provide access to two separate and distinct exits to the outside.

6. Add (11) to 17.2.2.2.6.1 to read as follows:

(11) The two releasing motions allowed by 17.2.2.2.6.1 (3) shall be approved by the Fire Chief of the local responding fire department.

7. Add a new subparagraph 17.2.2.3.1 to read as follows:

17.2.2.3.1 Where existing stairs or handrails are replaced handrails in accordance with A. 7.2.2.4.5.4 shall be required.

8. Add(6) to 17.2.9 to read as follows:

(6) All spaces normally occupied by children.

9. Delete paragraph 17.3.2.3 in its entirety and substitute in its place the following:

17.3.2.3 Where domestic cooking equipment is used for food warming or limited cooking, a listed self-contained residential fire suppression system may be installed in a residential hood to cover the cooking surface, with the exhaust hood vented directly to the outside. Required use of automatic disconnects of the fuel source or power source is subject to the authority having jurisdiction. Upon receipt of a sworn affidavit, no protection is required for existing domestic cooking equipment used for limited cooking or warming of foods with no frying producing grease laden vapors.

17.3.2.3.1 Subject to the approval of the authority having jurisdiction, where domestic cooking equipment is used for food warming or limited cooking with no frying producing grease laden vapors, the requirements for a residential fire suppression system may be waived if the room is protected by approved automatic sprinkler protection. The provisions of 9.7.1.2 may be permitted. Where automatic sprinkler protection is used to protect the cooking equipment a sprinkler head shall be located to protect the cooking equipment. The exhaust hood is still required to be vented to the outside unless the ceiling is covered in accordance with 16.3.2.3 (3).

17.3.2.3.2 When existing domestic cooking equipment is replaced the requirements of 16.3.2.3 shall apply.

10. Add a new paragraph 17.3.5.3.1 to read as follows:

17.3.5.3.1 Portable Fire Extinguishers. Portable fire extinguishers shall be provided in all day-care occupancies in accordance with 9.9.

11. Delete subsection 17.4.1 in its entirety and substitute in its place the following:

17.4.1 Windowless or Underground Buildings. Windowless or underground buildings or structures shall comply with the applicable provisions of Section 11.7. All such buildings and structures housing a day-care occupancy shall be protected throughout by an approved automatic sprinkler system.

17.4.1.1 Buildings or structures existing prior to January 28, 1993, and housing day-care occupancies with an occupant load not greater than 100 may remain in use without being protected throughout by an automatic sprinkler system.

12. Add a new paragraph 17.5.2.4 to read as follows:

17.5.2.4 Portable electric and liquefied petroleum gas or liquid fuel fire space heating devices designed to be portable are prohibited in all portions of day-care facilities.

17.5.2.4.1 In emergency conditions when approved by the authority having jurisdiction, equipment designed to be portable may be used for a specified time provided such equipment is properly protected and separated from combustibles as specified by the manufactures instructions and the authority having jurisdiction.

13. Delete subparagraph 17.6.1.4.1.2 in its entirety and substitute in its place the following:

17.6.1.4.1.2 This section establishes life safety requirements for group day-care homes, adult daycare homes and head start facilities in which at least seven but not more than 12 clients receive care, maintenance, and supervision by other than their relative(s) or legal guardian(s) for less than 24 hours per day (generally within a dwelling unit). An existing day-care home shall be allowed the option of meeting the requirements of Section 16.6 in lieu of Section 17.2. Any day-care home that meets the requirements of Chapter 16 shall be judged to meet the requirements of Chapter 17.

14. Add an exception to subsection 17.6.1.4.1 to read as follows:

17.6.1.4.1 Existing day-care homes that include part-day preschools, head-start programs, kindergartens, and other schools whose purpose involves education primarily for a group of children may continue to meet the requirements of this section or may be allowed the option of meeting the requirements of Chapter 15.

15. Delete paragraph 17.6.1.6 in its entirety and substitute in its place the following:

17.6.1.6 Clients of a group day-care home in a multi-story building shall be restricted to the level of exit discharge, unless the provisions of 17.1.6.1 are met.

16. Add a new paragraph 17.6.3.6 to read as follows:

17.6.3.6 Portable Fire Extinguishers. Portable fire extinguishers shall be provided in all daycare home occupancies in accordance with 9.9.

17. Delete subsections 17.7.1 and 17.7.2 in their entirety and substitute in their place the following:

17.7.1 Emergency Action Plans and Emergency Egress and Relocation Drills. Day-care occupancies (Group E and I-4) shall develop policies, procedures, plans, staff training, safety practices, and emergency egress and relocation drills for the protection of life prior to and during an emergency condition in accordance with Sections 4.7, 4.8 and 4.9.

(p) **Modifications to Chapter 18:**

1. Delete subsection 18.1.1.1.8 in its entirety and in its place substitute the following:

18.1.1.1.8 Buildings, or sections of buildings, that house older persons and that provide activities that foster continued independence but that do not include services distinctive to health care occupancies (see 18.1.4.2), as defined in 3.3.196.7, shall be permitted to comply with the requirements of other chapters of this Code, such as Chapters 30, 32 or 34 based upon appropriate licensing if required.

2. Add a new subparagraph 18.1.1.4.3.4.1 to read as follows:

18.1.1.4.3.4.1 Minor renovations, alterations, modernizations or repairs as used in 18.1.1.4.3.4 shall mean that construction is less than 40% of the floor area within a smoke compartment.

3. Add the following to the list of hazardous areas in Subparagraph 18.3.2.1.2 to read as follows:

(8) Soiled utility rooms also used for combustible storage - 1 hour.

(q) **Modifications to Chapter 19:**

1. Delete subsection 19.1.1.1.8 in its entirety and in its place substitute the following:

19.1.1.1.8 Buildings, or sections of buildings, that house older persons and that provide activities that foster continued independence but do not include services distinctive to health care occupancies (see 19.1.4.2), as defined in 3.3.196.7, shall be permitted to comply with the requirements of other chapters of this Code, such as Chapters 31, 33 or 35 based upon appropriate licensing if required.

2. Add the following to the list of hazardous areas in subparagraph 19.3.2.1.5 to read as follows:

(9) Soiled utility rooms used for combustible storage.

3. Add subparagraphs 19.3.2.5.2.1 to read as follows:

19.3.2.5.2.1 Where residential stove cooking is used for food warming, limited cooking, or rehabilitation training, a residential style hood system ducted to the outside and equipped with a listed self-contained residential fire suppression system shall be installed to cover each cooking surface. Required use of automatic disconnects of fuel source or power source is subject to the approval of the authority having jurisdiction.

19.3.2.5.2.1.1 Other installations acceptable to the authority having jurisdiction shall be acceptable.

4. Add a new subparagraph 19.3.4.3.1.1 to read as follows:

19.3.4.3.1.1 A Zoned, coded systems shall be permitted.

(r) **Modifications to Chapter 22:**

1. Add new subparagraphs 22.2.11.1.2.1, 22.2.11.1.2.2 and 22.2.11.1.2.3 to read as follows:

22.2.11.1.2.1 Padlocks or similar locking devices are not permitted on housing unit doors or any other door located in the interior means of egress.

22.2.11.1.2.2 Padlocks or similar locking devices are permitted on gates and doors located on exterior fencing, and in exterior walls, which are not part of the building, from areas of refuge located outside the building.

22.2.11.1.2.3 Keys used to unlock locks allowed by 22.2.11.1.2.1 and 22.2.11.1.2.2 shall be identifiable by both sight and touch.

2. Delete the words 'fuel fired' from Table 22.3.2.1.

3. Add a note to Table 22.3.2.1 to read as follows:

Note: Areas incidental to resident housing will mean any areas that exceed 10% of the resident housing area. This includes sleeping areas, dayrooms, group activity space, or other common spaces for customary access of residents.

4. Delete subsection 22.7.1 and substitute in its place the following:

22.7.1 Emergency Planning and Preparedness. Detention and correctional facilities (Group I-3 occupancies) shall develop policies, procedures, plans, staff training, and safety practices for the protection of life prior to and during an emergency condition in accordance with Sections 4.7, 4.8 and 4.9.

(s) **Modifications to Chapter 23:**

1. Add new subparagraphs 23.2.11.1.2.1, 23.2.11.1.2.2 and 23.2.11.1.2.3 to read as follows:

23.2.11.1.2.1 Padlocks are not permitted on housing unit doors or any other door located in the means of egress.

23.2.11.1.2.2 Padlocks are permitted on gates and doors located on exterior fencing and walls from areas of refuge located outside the building.

23.2.11.1.2.3 Keys used to unlock locks allowed by 23.2.11.1.2.1 and 23.2.11.1.2.2 shall be identifiable by both sight and touch.

2. Delete the words 'fuel fired' from Table 23.3.2.1.

3. Add a note to Table 23.3.2.1 to read as follows:

Note: Areas incidental to resident housing will mean any areas that exceed 10% of the resident housing area. This includes sleeping areas, dayrooms, group activity space, or other common spaces for customary access of residents.

4. Delete subsection 23.7.1 in its entirety and substitute in its place the following:

23.7.1 Emergency Planning and Preparedness. Detention and correctional facilities (Group I-3 occupancies) shall develop policies, procedures, plans, staff training, and safety practices for the protection of life prior to and during an emergency condition in accordance with Sections 4.7, 4.8 and 4.8.

(t) **Modifications to Chapter 24:**

1. Delete the Title of Chapter 24 and retitle it to read as follows:

Chapter 24 One and Two-Family Dwellings or Community Living Arrangements

2. Add a new subparagraph 24.1.1.1.1 to read as follows:

24.1.1.1.1 In addition, this chapter establishes life safety requirements for facilities licensed by the State of Georgia as a 'Community Living Arrangement' for one to four individuals not related to the owner or administrator by blood or marriage whether the facility is operated for profit or not. Community Living Arrangements for five or more residents shall comply with the applicable requirements of Chapter 32.

3. Add a new paragraph 24.1.1.6 to read as follows:

24.1.1.6 The use of a one- and two-family dwelling for the purposes of a Community Living Arrangement as licensed by the State, for one to four residents, shall constitute a change of occupancy sub-classification. The new sub-classification shall meet the requirements established in this Chapter for the One- and Two-Family Dwelling and the additional requirements specified under Section 24.4.

4. Add a new subparagraph 24.1.1.6.1 to read as follows:

24.1.1.6.1 The use of a one- and two-family dwelling for the purposes of a Community Living Arrangement as licensed by the State, for one to four residents shall not require automatic sprinkler protection.

5. Delete 24.2.2.1.2(2) in its entirety and substitute in its place the following:

(2) The dwelling unit is protected throughout by an approved automatic sprinkler system in accordance with 24.3.5. This sprinkler provision shall not apply to a community living arrangement.

6. Add a new subparagraph to 24.2.4.1.1 to read as follows:

24.2.4.1.1 Doors in the path of travel of a means of escape in Community Living Arrangement facilities shall be not less than 32 in. (81 cm) wide.

7. Add a new subparagraph 24.3.4.1.3.1 to read as follows:

24.3.4.1.3.1 The provisions of 9.6.2.10.8.1 and 9.6.2.10.8.2 shall apply.

8. Delete Section 24.4 in its entirety and substitute in its place the following:

24.4 **Community Living Arrangements.**

24.4.1 General. The following shall be provided in addition to the requirements of this Chapter for facilities subject to being licensed as a Community Living Arrangement. Where there are conflicts in requirements specified elsewhere in this Chapter, the requirements specified under Section 24.4 shall prevail.

24.4.2 Address identification. New and Existing Community Living Arrangement structures shall have approved address numbers, building numbers or approved building identification placed in accordance with the provisions of the International Fire Code.

24.4.3 **Means of Egress.**

24.4.3.1 A Community Living Arrangement serving a resident dependent upon a wheelchair or other mechanical device for mobility shall provide at least two (2) exits from the Community Living Arrangement, remote from each other, and that are accessible to the residents.

24.4.3.2 Bedrooms for residents shall be separated from halls, corridors and other rooms by floor to ceiling walls. capable of resisting fire for not less than 1/2-hour, which is considered to be achieved if the partitioning is finished on both sides with lath and plaster or materials providing a 15-minute thermal barrier. Sleeping room doors shall be substantial doors, such as those of 13/4 in. (4.4-cm) thick, solid-bonded wood core construction or other construction of equal or greater stability and fire integrity. Any vision panels shall be fixed fire window assemblies

in accordance with 8.3.3 or shall be wired glass not exceeding 1296 sq. in (0.84 m2) each in area and installed in approved frames.

24.4.3.3 A room shall not be used as a bedroom where more than one-half the room height is below ground level.

24.4.3.4 Bedrooms which are partially below ground level shall have adequate natural light and ventilation and be provided with two useful means of egress.

24.4.3.5 Bedrooms occupied by residents shall have doors that can be closed. Doors shall be not less than 32 in. (81 cm) wide.

24.4.3.6 Any door in the path of travel of a means of means of egress or escape shall be not less than 32 in. (81 cm) wide.

24.4.3.7 Residents who need assistance with ambulation shall be provided bedrooms that have access to a ground-level exit to the outside or be provided bedrooms above ground level that have access to exits with easily negotiable ramps or easily accessible lifts.

24.4.3.8 **Locks.**

24.4.3.8.1 Bedrooms may have locks on doors provided both the occupant and staff are provided with keys to ensure easy entry. Double-cylinder locks (locks requiring a key on both sides) are prohibited to be used on the bedroom door of a resident.

24.4.3.8.2 Exterior doors shall be equipped with locks that do not require keys to open the door from the inside.

24.4.4 **Detection and Alarm Systems.**

24.4.4.1 A fire alarm system meeting the minimum requirements for Single- and Multiple Station Alarms and Household Fire Alarm Systems per NFPA 72 shall be installed.

24.4.4.2 **Smoke Detection.**

24.4.4.2.1 Smoke alarms shall be installed in accordance with the provisions of 9.6.2.10 of this Code. Any additional detection/alarm devices shall be as established by O.C.G.A. § 25-2-40.

24.4.4.2.2 Smoke alarms shall be installed on all levels, including basements but excluding crawl spaces and unfinished attics.

24.4.4.2.3 Additional smoke alarms shall be installed for all living areas as defined in 3.3.22.5 of this Code.

24.4.4.2.4 Strobe alarms shall be used when required by the needs of the resident, e.g., for hearing impaired persons.

24.4.4.3 **Carbon Monoxide Detectors.**

24.4.4.3.1 Carbon monoxide detectors shall be provided in the residence where natural gas, LP gas or heating oil is used to heat the residence.

24.4.4.3.2 Carbon monoxide detectors shall be provided in the residence if a solid fuel-burning fireplace or fixed heating device is installed the residence.

24.4.5 **Protection.**

24.4.5.1 Portable Fire Extinguishers. Portable fire extinguishers in accordance with Section 9.9 shall be provided near hazardous areas.

24.4.5.1.1 At least one 5 lb. 2A rated multipurpose ABC portable fire extinguisher shall be provided on each occupied floor, and, where applicable, in the basement. The extinguishers shall be installed so as to be readily accessible in accordance with NFPA 10.

24.4.5.1.2 Required portable fire extinguishers shall be inspected and maintained annually by a State licensed fire extinguisher technician in accordance with NFPA 10.

24.4.5.1.3 Monthly quick check inspections shall be conducted by the staff of the Community Living Arrangement to ensure they are charged and in operable condition.

24.4.6 **Heating, Ventilation and Air Conditioning.**

24.4.6.1 Portable space heaters shall not be used. The use of heating devices and equipment shall be regulated by the International Fire Code, as adopted by the Rules and Regulations of the Safety Fire Commissioner.

24.4.6.2 Fire screens and protective devices shall be used with fireplaces, stoves, and fixed heaters.

24.4.6.3 A water temperature monitor or a scald valve shall be installed where necessary to ensure the safety of the residents. Heated water provided for use of residents shall not exceed 120 degrees Fahrenheit at the hot water fixture, unless a cooler temperature is required by the needs of the individual.

24.4.7 **Operating Features.**

24.4.7.1 **Staffing.** The Community Living Arrangement shall have as many qualified and trained employees on duty as shall be needed to safeguard properly the health, safety, and welfare of residents and ensure the provision of services the residents require to be delivered in the Community Living Arrangement.

24.4.7.1.1 Before working independently with residents, each staff member shall be trained and show continuing evidence of competence in fire safety and emergency evacuation procedures. A resident shall not be considered a staff person in the residence in which they live. Also, training of management and staff shall comply with Chapter 4 of the adopted International Fire Code.

24.4.7.2 **Evacuation Capabilities.** Community Living Arrangement shall maintain a staffing ratio sufficient to ensure that all residents can meet a prompt evacuation capability as defined in 12-3-3-.03 of Subject 120-3-3 Rules and Regulations of the Safety Fire Commissioner. Residents who cannot meet the prompt evacuation capability provision shall be provided with a minimum of one dedicated employee whose primary responsibility is to provide evacuation of the resident in the event of a fire or other emergency. The dedicated employee/employees shall be in close attendance at all times.

24.4.7.3 Drills. Fire drills shall be conducted at least quarterly on each shift at alternating times. At least two drills per calendar year shall be during sleeping hours. All fire drills shall be documented and include the names of staff involved. Also, refer to Chapter 4 of the International Fire Code, as adopted by Subject 120-3-3 of the Rules and Regulations of the Safety Fire Commissioner.

24.4.7.4 **Procedures.** There shall be established procedures and mechanisms for alerting and caring for residents in case of emergencies and for evacuating them to safety. An evacuation plan with clear instructions shall be available within each residence. Also, refer to Chapter 4 of the International Fire Code, as adopted by Subject 120-3-3 of the Rules and Regulations of the Safety Fire Commissioner.

(u) **Modifications to Chapter 26:**

1. Add a new subparagraph 26.3.4.5.4 to read as follows:

26.3.4.5.4 The provisions of 9.6.2.10.8.1 and 9.6.2.10.8.2 shall also apply.

2. Add a new paragraph 26.3.6.4 to read as follows:

26.3.6.2.7 **Portable Fire Extinguishers.** Portable fire extinguishers shall be provided in all lodging or rooming house occupancies in accordance with 9.9 of this Code.

(v) **Modifications to Chapter 28:**

1. Add new subparagraph 28.3.2.2.4 to read as follows:

28.3.2.2.4 Cooking Facilities In Guest Rooms. The requirements of 9.2.3.1 shall apply.

2. Add a new subparagraph 28.3.4.5.1 to read as follows:

28.3.4.5.1 Dormitory facilities shall be required to be provided with a corridor smoke detection system in accordance with O.C.G.A. §§ 25-2-13(d) and 25-2-40.

3. Delete subsections 28.7.1, 28.7.2, 28.7.3, and 28.7.5 in their entirety and substitute the following in their place:

28.7.1 Emergency Planning and Preparedness. Hotels and dormitories (Group R-2 occupancies) shall develop policies, procedures, plans, staff training, and safety practices for the protection of life prior to and during an emergency condition in accordance with Sections 4.7, 4.8 and 4.9.

(w) **Modifications to Chapter 29:**

1. Add a new subparagraph 29.3.4.5.3 to read as follows:

29.3.4.5.3 The provisions of 9.6.2.10.8.1 and 9.6.2.10.8.2 shall also apply.

2. Add a new subparagraph 29.3.4.5.4 to read as follows:

29.3.4.5.4 A corridor smoke detection system in accordance with O.C.G.A. §§ 25-2-13(d) and 25-2-40 shall be provided in all interior corridors, halls and passageways.

29.3.4.5.4.1 The provisions of 29.3.4.5.4 do not apply in hotels and motels protected throughout by an approved supervised automatic sprinkler system installed in accordance with 28.3.5.

29.3.4.5.4.2 Dormitory facilities shall be required to provide a corridor smoke detection system in accordance with O.C.G.A. §§ 25-2-13(d) and 25-2-40.

3. Delete subsections 29.7.1, 29.7.2, 29.7.3, and 29.7.5 in their entirety and substitute in their place the following:

29.7.1 Emergency Planning and Preparedness. Hotels and dormitories (Group R-2 occupancies) shall develop policies, procedures, plans, staff training, and safety practices for the protection of life prior to and during an emergency condition in accordance with Sections 4.7, 4.8 and 4.9.

(x) **Modifications to Chapter 30:**

1. Delete paragraph 30.2.1.3 in its entirety and replace with the following new 30.2.1.3 to read as follows:

30.2.1.3 Bathtub, Bathtub-Shower Combinations and Shower Grab Bars.

30.2.1.3.1 Where bathtubs, bathtub-shower combinations, or showers are present in apartments marketed as senior apartments or apartments designated as 55 or older communities, grab bars shall be provided in accordance with the provisions of 24.2.8.

30.2.1.3.2 In apartments not marketed as senior apartments or apartments designated as 55 or older communities sufficient structural supporting shall be installed so that bathtubs, bathtub-shower combinations, or showers are adaptable to meet the provisions of 24.2.8.

30.2.1.3.3 Where requested by a tenant, the apartment owner shall install grab bars in accordance with 24.2.8 at no cost to the tenant.

2. Delete item (2) of subsection 30.2.4.4 in its entirety and substitute in its place the following:

(2) The dwelling unit has direct access to an outside stair complying with 7.2.2 that serves a maximum of two units where both of which are located on the same floor. This does not preclude two stairs serving a floor level with a maximum of four units with an open breezeway connecting and allowing access to either exit stair.

3. Delete the words 'fuel fired' from Table 30.3.2.1.1.

4. Add subparagraph 30.3.2.1.3 to read as follows:

30.3.2.1.3 Cooking Facilities. The requirements of 9.2.3.1 shall apply.

(y) **Modifications to Chapter 31:**

1. Delete item (2) of subsection 31.2.4.4 in its entirety and substitute in its place the following:

(2) The dwelling unit has direct access to an outside stair complying with 7.2.2 that serves a maximum of two units where both units are located on the same floor. This does not preclude two stairs serving a floor level with a maximum of four units with an open breezeway connecting and allowing access to either exit stair.

2. Add a new subparagraph 31.3.4.5.2.1 to read as follows:

31.3.4.5.2.1 The provisions of 9.6.2.10.8.1 and 9.6.2.10.8.2 shall also apply.

3. Add a new subparagraph 31.3.4.5.4.1 to read as follows:

31.3.4.5.4.1 The provisions of 9.6.2.10.8.1 and 9.6.2.10.8.2 shall also apply.

(z) **Modifications to Chapter 32:**

1. Delete paragraph 32.1.1.1 in its entirety and substitute in its place the following:

32.1.1.1 General. The requirements of this chapter shall apply to new buildings or portions thereof used as residential board and care occupancies (See 3.3.205.12* and 3.3.223* and their Annex A notes). This designation shall include, but is not be limited to, a personal care home or community living arrangement, as defined in Rule 120-3-3-.03.

32.1.1.1.1 Additions, Conversions, Modernizations, Renovations, and Construction Operations. Additions shall be separated from any existing structure not conforming to the provisions of Chapter 32 by a fire barrier having not less than a 2-hour fire resistance rating and constructed of materials as required for the addition. (See 4.6.5 and 4.6.7) Doors in fire barriers shall normally be kept closed, however, doors shall be permitted to be held open if they meet the requirements of 7.2.1.8.2, and such doors shall be released upon activation of the building fire alarm system.

32.1.1.1.1.2. Conversion. For purposes of this chapter, exceptions for conversions shall apply only for a change of occupancy from an existing residential or health care occupancy.

32.1.1.1.1.3 Change of Occupancy. A change from a licensed personal care home to an assisted living community or memory care unit shall be considered a change of occupancy or subclassification and would be required to meet the provisions of Chapter 35 for existing construction. Such changes in occupancy classification or subclassification are

considered as proposed (new) buildings and shall be subject to the applicable administrative provisions of Section 103 of the International Fire Code, as adopted by Chapter 120-3-3 of the Rules and Regulations of the Safety Fire Commissioner.

32.1.1.1.4. Renovations, Alterations, and Modernizations. (See 4.6.7)

32.1.1.1.5. Construction, Repair, and Improvement Operations. (See 4.6.10)

2. Delete paragraph 32.1.1.4 in its entirety and substitute in its place the following:

32.1.1.4 Personal Care Homes and Community Living Arrangements with Five or More Residents. A personal care home or community living arrangement with five or more residents, as defined in Rule 120-3-3-.03 shall comply with the general provisions of 32.1 of this Chapter 32, and with the applicable provisions for residential board and care occupancies as defined in 3.3.205.12 of this Code. The provisions of Chapter 32 for large facilities are deemed to provide for the use of "defend in place" fire response strategies should self-preservation measures not be deemed successful.

32.1.1.4.1 Goals and Objectives. See paragraph 18.1.1.2 for goals and objectives.

32.1.1.4.2 Total Concept. All new personal care homes, and community living arrangements with five or more residents shall be constructed, maintained, and operated to minimize the possibility of a fire emergency requiring the evacuation of occupants. Subparagraphs 18.1.1.3.1 and 18.1.1.3.2 of this code also apply.

3. Delete paragraph 32.1.1.5 in its entirety and substitute in its place the following:

32.1.1.5 All new facilities classified as residential board and care occupancies shall conform to the requirements of this chapter. This chapter is divided into six sections as follows:

(1) Section 32.1 - General Requirements.

(2) Section 32.2 - Small Facilities (Sleeping accommodations for not more than six residents. (Includes Personal Care Homes and Community Living Arrangements for five or six residents)

(3) Section 32.3 - Large Facilities (Sleeping accommodations for seven or more residents. This includes Personal Care Homes, as defined in section 120-3-3-.03 of Chapter 120-3-3, Rules and Regulations of the Safety Fire Commissioner. It also includes Community Living Arrangements with seven or more residents.)

(4) Section 32.4 - Additional minimum requirements for an Apartment Building Housing a Board and Care Occupancy.

(5) Section 32.5 - Community Living Arrangement Facilities (small and large) (As defined in 120-3-3-.03 of Chapter 120-3-3 of the Rules and Regulations of the Safety Fire Commissioner)

(6) Section 32.7 Operating Features.

4. Delete subsection 32.1.2 in its entirety and substitute in its place the following:

32.1.2 Classification of Occupancy. See 6.1.9 and provisions of this Chapter 32, and the applicable definitions in Rule 120-3-3-.03.

5. Delete subparagraph 32.2.1.1.1 in its entirety and substitute in its place the following:

32.2.1.1.1 Scope. This section applies to a community living arrangement with five to six residents and to residential board and care occupancies, including a personal care home, providing sleeping accommodations for not more than six residents. Where there are sleeping accommodations for more than six residents of a residential board and care occupancy, including a personal care home or community living arrangement, the occupancy shall be classed as a

large facility. The requirements for large facilities are found in Section 32.3. The provisions of 32.5 also apply to community living arrangements. (Also see 3.3.205/12.)

6. Add a new paragraph 32.1.8 to read as follows:

32.1.8 Classification of Hazards of Contents. Contents of Residential Board and Care occupancies shall be classified in accordance with the provisions of Section 6.2.

7. Add a new subparagraph 32.2.3.2.6 to read as follows:

32.2.3.2.6 Residential cooking appliances such as stoves (a maximum of four surface burners or cooking elements) and griddles shall be protected by a listed self-contained residential fire suppression systems located in residential hoods over each cooking surface, with the exhaust hood vented directly to the outside. Automatic disconnects of the fuel source or power source shall be provided. Commercial cooking appliances including fryers shall be protected in accordance with 9.2.3, and shall not be required to have openings protected between food preparation areas and dining areas.

32.2.3.2.6.1 Subject to the approval of the authority having jurisdiction, the protection of residential cooking equipment shall not be required in buildings protected by an automatic sprinkler system as provided in 32.2.3.5 with a sprinkler head positioned to cover the cooking appliance. The protection authorized by 32.2.3.5.5 is acceptable for purposes of this section, provided, however, exhaust hood shall still be required to be vented to the outside.

8. Add new subparagraph 32.2.3.4.5.5 to read as follows:

32.2.3.4.5.5 Strobe alarms shall be used when required by the needs of the resident, e.g., for hearing impaired persons.

9. Delete subparagraph 32.2.3.5.2 in its entirety and substitute in its place the following:

32.2.3.5.2 In conversions, sprinklers shall not be required in small board and care homes, including personal care homes and community living arrangements serving six or fewer residents when all occupants have the ability as a group to move reliably to a point of safety within three minutes.

10. Delete (3) from sub-subparagraph 32.2.3.5.3.2 without substitution.

11. Add a new subsection 32.2.3.5.9 to read as follows:

32.2.3.5.9 Portable Fire Extinguishers. Portable fire extinguishers shall be provided in all residential board and care occupancies, personal care home or community living arrangement facility in accordance with 9.9.

12. Add (4) to subparagraph 32.2.3.6.1 to read as follows:

(4) Corridor walls may terminate at a ceiling which has a minimum 1/2-hour fire resistant rating

13. Add new subparagraph 32.2.5.2.4 to read as follows:

32.2.5.2.4 Portable electric and liquefied petroleum gas or liquid fuel fired space heating devices designed to be portable are prohibited in all portions of small residential board and care occupancies, including personal care homes and community living arrangements.

32.2.5.2.4.1 In emergency conditions when approved by the authority having jurisdiction, equipment designed to be portable may be used for a specified time provided such equipment is properly protected and separated from combustibles as specified by the manufacturer's instructions and the authority having jurisdiction. Extension cords or power strips shall not be used with portable electric heating devices.

14. Delete subparagraph 32.3.1.1.1 and 32.3.1.1.2 in their entirety and substitute in their place the following:

32.3.1.1.1 This section applies to residential board and care occupancies, including licensed personal care homes and community living arrangements with more than six residents, as defined in Rule 120-3-3-.03. Where there are sleeping accommodations for six or less residents, or a community living arrangement for five to six residents, the occupancy shall be classed as a small facility. The requirements for small facilities are found in Section 32.2.

32.3.1.1.2 Assisted Living Communities and Memory Care Units. This chapter shall not apply to any building, or portion thereof, newly constructed, or substantially renovated, as defined in O.C.G.A. § 25-2-14(d), so as to be designated and licensed by the Georgia Department of Community Health as an assisted living community or memory care unit, as defined in Rule 120-3-3-.03. Refer to Chapter 34 or 35 for the applicable requirements for such facilities.

15. Add 32.3.1.2 to read as follows:

32.3.1.2 Requirements Based on Evacuation Capability. Definitions for the classifications of evacuation capability are defined in 120-3-3-.03 of Chapter 120-3-3 of the Rules and Regulations of the Safety Fire Commissioner. For purposes of Section 32.3, large facilities are assumed to have an impractical evacuation capability.

16. Add a new item 9 to subparagraph 32.3.2.2.2 to read as follows:

(9) Doors to resident rooms may be subject to being locked by the occupant, if they can be unlocked from the opposite side and keys are carried by staff at all times. Additional keys must be available and accessible to the staff.

17. Add a new subparagraph 32.3.2.6.1 to read as follows:

32.3.2.6.1 Travel distance shall not exceed 35 feet (10.7 m) in any story below the level of exit discharge occupied for public purposes.

18. Add a new subparagraph 32.3.2.6.2 to read as follows:

32.3.2.6.2 Travel distance shall not exceed 75 feet (22.9 m) in any story below the level of exit discharge not occupied for public purposes.

19. Add a new subparagraph 32.3.2.6.3 to read as follows:

32.3.2.6.3 Any story below the level of exit discharge occupied for public purposes shall have at least two separate exits provided from each story with a maximum dead-end corridor of 20 feet (6.1 m). Any floor below the level of exit discharge not open to the public and used only for mechanical equipment, storage, and service operations (other than kitchens which are considered part of the residential board and care occupancies) shall have exits appropriate to its actual occupancy in accordance with other applicable sections of this Code.

20. Delete paragraph 32.3.2.9 in its entirety and substitute in its place the following:

32.3.2.9 Emergency lighting in accordance with Section 7.9 of this Code, and shall be provided in means of egress and common areas in all residential board and care occupancies, unless each sleeping room has a direct exit to the outside at finished ground level.

21. Add a new subparagraph 32.3.2.11.1 to read as follows:

32.3.2.11.1 Every stairwell door shall allow re-entry from the stairwell to the interior of the building or an automatic release shall be provided to unlock all stairwell doors to allow re-entry. Such automatic release shall be actuated with the initiation of the building fire alarm system or upon loss of power.

22. Add a new subparagraph 32.3.3.1.4 to read as follows:

32.3.3.1.4 Stairway enclosures shall not be required where a one-story stair connects two levels within a single dwelling unit, resident room or suite.

23. Add a new subparagraph 32.3.3.4.7.1 to read as follows:

32.3.3.4.7.1 Strobe alarms shall be used when required by the needs of the resident, such as for hearing impaired residents in personal care homes or Community Living Arrangements.

24. Add a new subparagraph 32.3.5.2.5 to read as follows:

32.3.5.2.5 Portable electric and liquefied petroleum gas or liquid fuel fired space heating devices designed to be portable are prohibited in all portions of large residential board and care occupancies.

32.3.5.2.1 In emergency conditions when approved by the authority having jurisdiction, equipment designed to be portable may be used for a specified time provided such equipment is properly protected and separated from combustibles as specified by the manufactures instructions and the authority having jurisdiction. Extension cords or power strips shall not be used with portable electric heating devices.

25. Delete section 32.5 in its entirety and substitute in its place the following:

32.5 Community Living Arrangement Facilities.

32.5.1 General. The following shall be provided in addition to the requirements of this Chapter for facilities subject to being licensed as a Community Living Arrangement. Where there are conflicts in requirements specified elsewhere in this Chapter, the requirements specified under Section 32.5 shall prevail.

32.5.2 Address identification. Community Living Arrangement structures shall have approved address numbers, building numbers or approved building identification placed in accordance with the provisions of the International Fire Code.

32.5.3 Means of Egress.

32.5.3.1 Number of Means of Escape. In any dwelling or dwelling unit of two rooms or more, every sleeping room and every living area shall have not less than one primary means of escape and one secondary means of escape.

32.5.3.1.1 A secondary means of escape shall not be required where the bedroom or living area has a door leading directly to the outside of the building at or to grade level.

32.5.3.1.2 Subsection 24.4.3 of this code as modified in this Subject 120-3-3 shall apply to Community Living Arrangement facilities.

32.5.3.2 Locks.

32.5.3.2.1 Subparagraphs 24.4.3.8.1 and 24.4.3.8.2 of this code as modified in this Subject 120-3-3 shall apply to Community Living Arrangement facilities.

32.5.4 Detection and Alarm Systems.

32.5.4.1 Detection and alarm systems shall comply with paragraphs 24.4.4.1 and 24.4.4.2 of this code as modified in this chapter 120-3-3 shall apply to Community Living Arrangement facilities.

32.5.4.2 Carbon Monoxide Detectors.

32.5.4.2.1 Carbon monoxide detectors shall be provided in accordance with 32.3.3.4.9.

32.5.5 Protection.

32.5.5.1 Portable fire extinguishers shall be provided and maintained in Community Living Arrangement facilities in accordance with subsection 24.4.5 of this code as modified in this chapter 120-3-3.

32.5.6 Heating, Ventilation and Air Conditioning.

32.5.6.1 The requirements of subsection 24.4.6 of this code as modified in this chapter 120-3-3 shall apply to Community Living Arrangement facilities.

32.5.7 Operating Features.

32.5.7.1 Staffing. The Community Living Arrangement shall have as many qualified and trained employees on duty as shall be needed to safeguard properly the health, safety, and welfare of residents and ensure the provision of services the residents require to be delivered in the Community Living Arrangement.

32.5.7.1.1 Before working independently with residents, each staff member shall be trained and show continuing evidence of competence in fire safety and emergency evacuation procedures. A resident shall not be considered a staff person in the residence in which they live. (Refer to Chapter 4 of the International Fire Code regarding care-giver minimum training requirements.)

32.5.7.2 Evacuation Capabilities. Community Living Arrangement shall maintain a staffing ratio sufficient to ensure that all residents can successfully respond to a fire or other emergency using self-preservation or assisted preservation measures as defined by Rule 120-3-3-.03. Residents who cannot successfully respond shall be provided with a minimum of one dedicated employee whose primary responsibility is to provide evacuation of the resident in the event of a fire or other emergency. The dedicated employee or employees shall be in close attendance to the affected resident at all times.

32.5.7.3 Drills. Fire drills shall be conducted at least quarterly on each shift. At least two drills per calendar year shall be during sleeping hours. All fire drills shall be documented with staffing involved. (See Chapter 4 of the International Fire Code regarding fire and emergency evacuation drills.)

32.5.7.4 Procedures. There shall be established procedures and mechanisms for alerting and caring for residents in case of emergencies and for evacuating them to safety. An evacuation plan with clear instructions shall be available within each resident room. Each sleeping room shall have a secondary exit, which may be a door or a window usable for escape.

26. Delete subsections 32.7.1, 32.7.2, and 32.7.3 in their entirety and substitute in their place the following:

32.7.1 Emergency Planning and Preparedness. Residential board and care facilities (Group I-1 and R-4 occupancies), including personal care homes and community living arrangements shall develop policies, procedures, plans, staff training, safety practices, and emergency egress and relocation drills for the protection of life prior to and during an emergency condition in accordance with Sections 4.7, 4.8 and 4.9.

27. Delete subsection 32.7.4 in its entirety and substitute in its place the following:

32.7.4 Smoking regulations shall be adopted in accordance with subsection 18.7.4 (1) (3) (4) (5) (6) of this Code.

28. Add a new paragraph 33.7.5.4 to read as follows:

32.7.5.4 Wastebaskets and other waste containers shall be of noncombustible or other approved materials.

(aa) **Modifications to Chapter 33:**

1. Delete 3.1.1.1 in its entirety and substitute in its place the following:

33.1.1.1 General. The requirements of this chapter shall apply to existing buildings or portions thereof used as residential board and care occupancies (see 3.3.205.12 and 3.3.223 and their Annex notes). This designation shall include, but is not be limited to, a personal care home or community living arrangement, as defined in Rule 120-3-3-.03.

2. Add a new subparagraph 33.1.1.4.1 and 33.1.1.4.2 to read as follows:

33.1.1.4.1 Personal care Homes and Community Living Arrangements with Five or More Residents. A personal care home or community living arrangement with five or more residents, as defined in 120-3-3-.03 of the Rules and Regulations of the Safety Fire Commissioner, shall comply with the general requirements of 33.1 of this chapter, and with the applicable provisions of residential board and care occupancies as defined in 3.3.205.12 of this code. The provisions of Chapter 33 for large facilities are deemed to provide for the use of "defend in place" fire response strategies should self-preservation measures not be deemed successful.

33.1.1.4.2 Existing large personal care homes with 25 or more residents desiring to be licensed as an Assisted Living Community or as a Memory Care Unit, both as defined in Rule 120-3-3-.03 shall meet the requirements for a conversion to a large residential board and care occupancy and the applicable provisions for assisted living communities or memory care units as set forth by Chapter 35 of this Code.

3. Delete paragraph 33.1.1.5 in its entirety and substitute in its place the following:

33.1.1.5 All existing facilities classified as residential board and care occupancies shall conform to the requirements of this chapter. This chapter is divided into six sections as follows:

(1) Section 33.1 - General Requirements.

(2) Section 33.2 - Small Facilities sleeping accommodations for not more than six residents. (Includes small personal care homes it also includes community living arrangements for five or six residents.)

(3) Section 33.3 - Large Facilities (sleeping accommodations for seven or more residents. This includes existing "personal care homes" as defined in section 120-3-3-.03 of Chapter 120-3-3, Rules and Regulations of the Safety Fire Commissioner, and not licensed as an "Assisted Living Community" or "Memory Care Unit" and also includes Community living arrangements with seven or more residents.

(4) Section 33.4 - Additional minimum requirements for an Apartment Building Housing a Board and Care Occupancy.

(5) Section 33.5 - Community Living Arrangement Facilities (small and large) as defined in Rule 120-3-3-.03.

(6) Section 33.7 - Operating Features.

4. Add a new subsection 33.1.10 to read as follows:

33.1.10 Classification of Hazards of Contents. Contents of Residential Board and Care occupancies shall be classified in accordance with the provisions of Section 6.2.

5. Delete paragraph 33.2.1.1 in its entirety and substitute in its place the following:

33.2.1.1 Scope. This section applies to residential board and care occupancies, including community living arrangements with five to six residents and personal care homes providing sleeping accommodations for not more than six residents. Where there are sleeping accommodations for more than six residents of a residential board and care occupancy or a community living arrangement more than six, the occupancy shall be classed as a large facility. The requirements for large facilities are found in Section 33.3.

6. Add a new subparagraph 33.2.3.2.6 to read as follows:

33.2.3.2.6 Residential cooking appliances such as stoves and griddles shall be protected by listed self-contained residential fire suppression systems located in residential hoods over each cooking surface, with the exhaust hood vented directly to the outside. Automatic disconnects of the fuel source or power source shall be provided. Commercial cooking appliances including fryers shall be protected in accordance with 9.2.3 and shall not be required to have openings protected between food preparation areas and dining areas.

33.2.3.2.6.1 Subject to the approval of the authority having jurisdiction, the protection of residential cooking equipment shall not be required in buildings protected by an automatic sprinkler system as provided in 33.2.3.5. The exhaust hood is still required to be vented to the outside.

33.2.3.2.6.2 No protection is required over residential cooking appliances such as grills and stoves in facilities which have prompt evacuation capability and have a licensed capacity as determined by the Department of Community Health of six or less residents.

7. Add new subparagraph 33.2.3.4.3.1 to read as follows:

33.2.3.4.3.1 Strobe alarms shall be used when required by the needs of the resident, e.g., for hearing impaired persons.

8. Add a new subparagraph 33.2.3.4.3.1 to read as follows:

33.2.3.4.3.1 The provisions of 9.6.2.10.8.1 and 9.6.2.10.8.2 shall also apply.

9. Add a new subparagraph 33.2.3.4.5 to read as follows.

33.2.3.4.5 Carbon monoxide detectors shall be provided in accordance with subparagraph 32.3.3.4.9 of this code.

10. Delete subparagraph 33.2.3.5.2 in its entirety and substitute in its place the following:

33.2.3.5.2 Impractical and Slow Evacuation Capability. All slow and impractical evacuation capability facilities shall be protected throughout by an approved, supervised automatic sprinkler system installed in accordance with 33.2.3.5.3.

11. Delete (3) from 32.2.3.5.3.2 without substitution.

12. Add new subparagraph 33.2.5.2.4 to read as follows:

33.2.5.2.4 Portable electric and liquefied petroleum gas or liquid fuel-fired space heating devices designed to be portable are prohibited in all portions of small residential board and care occupancies, including personal care homes and community living arrangements.

33.2.5.2.4.1 In emergency conditions when approved by the authority having jurisdiction, equipment designed to be portable may be used for a specified time provided such equipment is properly protected and separated from combustibles as specified by the manufactures instructions and the authority having jurisdiction. Extension cords or power strips shall not be used with portable electric heating devices.

13. Add a new subsection 33.2.6 to read as follows:

33.2.6 Portable Fire Extinguishers. Portable fire extinguishers shall be provided in all residential board and care occupancies, personal care homes or community living arrangement facility in accordance with 9.9.

14. Delete paragraph 33.3.1.1.1 and 33.3.1.1.2 in their entirety and substitute in their place the following:

33.3.1.1.1 Scope. This section applies to residential board and care occupancies, including personal care homes and community living arrangements providing sleeping accommodations for 7 or more residents. Where there are

sleeping accommodations for six or less residents or a community living arrangement for five to six residents, the occupancy shall be classed as a small facility. The requirements for small facilities are found in Section 33.2.

15. Delete 33.3.1.2.2 in its entirety and substitute in its place the following:

33.3.1.2.2 Impractical. Large facilities classified as impractical evacuation capability shall meet the requirements of 33.3 for impractical evacuation capability, or the requirements for new large facilities in Chapter 32, unless the authority having jurisdiction has determined equivalent safety is provided in accordance with Section 1.4.

16. Add a new subparagraph 33.3.3.1.1.4 to read as follows:

33.3.3.1.1.4 Enclosure of stairs, smoke proof towers and exit passageways in buildings existing prior to April 15, 1986, shall be fire barriers of at least 20-minute fire-resistance rating with all openings protected in accordance with paragraph 8.3.3 of this Code in buildings less than three stories in height. In buildings existing prior to April 15, 1986, more than three stories in height, the enclosure shall not be less than a 1-hour fire-resistance rating with all openings protected in accordance with paragraph 8.3.4.4 of this Code.

17. Add a new exception to subparagraph 33.3.2.2.2(10) to read as follows:

33.3.2.2.2(10) Doors to resident rooms may be subject to being locked by the occupant, if they can be unlocked from the opposite side and keys are carried by staff at all times. Additional keys must be available to and accessible by the staff.

18. Delete subparagraph 33.3.2.5.4 in its entirety and substitute in its place the following:

33.3.2.5.4 No dead-end corridor shall exceed 35 feet (10.7 m).

19. Delete subparagraph 33.3.2.6.3.3 in its entirety and substitute in its place the following:

33.3.2.6.3.3 Travel distance to exits shall not exceed 150 feet (45.7 m) if the exit access and any portion of the building that is tributary to the exit access are protected throughout by approved automatic sprinkler systems. In addition, the portion of the building in which the 150 feet (45.7 m) travel distance is permitted shall be separated from the remainder of the building by construction having not less than a 1-hour fire-resistance rating for buildings not greater than three stories in height and 2-hour for buildings greater than three stories in height.

20. Add a new subparagraph 3 3.3.2.6.3.4 to read as follows:

33.3.2.6.3.4 No residents shall be located on floors below the level of exit discharge.

33.3.2.6.3.4.1 In facilities existing prior to April 15, 1986, any floor below the level of exit discharge occupied for public purposes shall have exits arranged such that it will not be necessary to travel more than 100 feet (30.5 m) from the door of any room to reach the nearest exit.

21. Add a new subparagraph 33.3.2.6.4 to read as follows:

33.3.2.6.4 Any floor below the level of exit discharge not open to the public and used only for mechanical equipment, storage, and service operations (other than kitchens which are considered part of the residential board and care occupancies) shall have exits appropriate to its actual occupancy in accordance with other applicable sections of this Code.

22. Add a new subparagraph 33.3.2.7.1 to read as follows:

33.3.2.7.1 At least half of the required exit capacity of upper floors, exclusive of horizontal exits, shall lead directly to the street or through a yard, court, or passageway with protected openings and separated from all parts of the interior of the building.

23. Delete paragraph 33.3.2.9 in its entirety and substitute in its place the following:

33.3.2.9 Emergency Lighting. Emergency lighting in accordance with Section 7.9 of the Code shall be provided in means of egress and common areas in all residential board and care occupancies. unless each sleeping room has a direct exit to the outside at finished ground level.

24. Delete 33.3.2.11.1 and insert a new subparagraph 33.3.2.11.1 to read as follows:

33.3.2.11.1 Every stairwell door shall allow re-entry from the stairwell to the interior of the building or an automatic release shall be provided to unlock all stairwell doors to allow re-entry. Such automatic release shall be actuated with the initiation of the building fire alarm system or upon loss of power.

25. Add a new subparagraph 33.3.2.11.3 to read as follows:

33.3.2.11.3 Stairway enclosures shall not be required where a one-story stair connects two levels within a single dwelling unit, resident room or suite.

26. Add a new subparagraph 33.3.3.1.4 to read as follows:

33.3.3.1.4 Any required exit stair which is so located such that it is necessary to pass through the lobby or other open space to reach the outside of the building shall be continuously enclosed down to the lobby level, or to a mezzanine within the lobby.

33.3.3.1.4.1 In existing two-story buildings only, the second floor level may be fire stopped with a fire barrier having at least a 1-hour fire-resistance rating. Vision panels not exceeding 1,296 square inches (8361 cu cm) and installed in steel frames shall be provided in the doors of the fire barrier.

27. Add a new subparagraph 33.3.3.2.2.1 to read as follows.

33.3.3.2.2.1 The provisions of 33.3.3.2.2 shall not apply in existing residential board and care occupancies constructed prior to April 15, 1986, with regard to the location of the equipment only.

28. Delete section 33.3.3.8 to read as follows:

33.3.3.8.1 A personal care home having a licensed capacity as determined by the Department of Community Health of 16 or less residents shall have residential cooking appliances such as stoves and griddles protected by a listed self-contained residential fire suppression system located in residential hood over each cooking surface, with the exhaust hood vented directly to the outside. Automatic disconnects of the fuel source or power source shall be provided. Commercial cooking appliances including fryers shall be protected in accordance with 9.2.3 and shall not be required to have openings protected between food preparation areas and dining areas.

33.3.3.8.2 A personal care home constructed prior to January 28, 1993, and having a licensed capacity as determined by the Department of Community Health of 16 or less residents may have food preparation facilities in accordance with NFPA 91, Standard for Exhaust Systems for Conveying of Vapors, Gases, Mists, and Noncombustible Particulate Solids, 1983 edition.

33.3.3.8.3 A personal care home constructed prior to January 28, 1993, and having a licensed capacity as determined by the Department of Community Health of 16 residents or less may have food preparation facilities which have a ventilating hood meeting the provisions of NFPA 54, National Fuel Gas Code, as specified in Chapters 120-3-14 and 120-3-16, of the Rules and Regulations of the Safety Fire Commissioner, and NFPA 91, Standard for Exhaust Systems for Conveying of Vapors, Gases, Mists, and Noncombustible Particulate Solids, as specified in Chapter 120-3-3, Rules and Regulations of the Safety Fire Commissioner.

33.3.3.8.4 Subject to the approval of the authority having jurisdiction, the protection of residential cooking equipment shall not be required in buildings protected by an automatic sprinkler system as provided in 32.2.3.5. The exhaust hood is still required to be vented to the outside.

29. Add a new subparagraph 33.3.3.4.7.1.1 to read as follows:

33.3.3.4.7.1.1 Strobe alarms shall be used when required by the needs of the resident, e.g., for hearing impaired persons located in Community Living Arrangements.

30. Delete subparagraph 33.3.3.4.7.2 in its entirety and substitute in its place the following:

33.3.3.4.7.2 The provisions of 9.6.2.10.8.1 and 9.6.2.10.8.2 shall also apply.

31. Delete subparagraphs 33.3.3.4.8.1 and 33.3.3.4.8.2 in their entirety and substitute in their place the following:

33.3.3.4.8 Smoke Detection Systems. All corridors and common spaces shall be provided with smoke detectors in accordance with NFPA 72, as adopted by Chapter 120-3-3 of the Rules and Regulations of the Safety Fire Commissioner, arranged to initiate the fire alarm such that it is audible in all sleeping areas. Detectors shall be located in corridors or hallway so there is a detector within 15 feet (4.6 m) of the wall and at least every 30 feet (9.1 m) thereafter. Where a building has more than one floor level, a detector shall be located at the top of each stair and inside each enclosure.

33.3.3.4.8.2 Smoke detection systems may be excluded from crawl spaces beneath the building and unused and unfinished attics.

32. Delete subparagraph 33.3.3.5.1.3 in its entirety and substitute in its place the following:

33.3.3.5.1.3.3 Automatic sprinklers installed in accordance with NFPA 13D, Standard for the Installation of Sprinkler Systems in One- and Two-Family Dwellings and Manufactured Homes, 1991 edition, as modified by Chapter 120-3-3, Rules and Regulations of the Safety Fire Commissioner, which were in effect shall be acceptable as a complying sprinkler system.

33. Add a new subparagraph 33.3.3.5.1.4 to read as follows:

33.3.3.5.1.4 Automatic sprinkler systems installed in existing facilities prior to November 1, 1987, may be continued in use subject to the approval of the authority having jurisdiction as defined in paragraph 3.2.2 of the Code.

34. Add new subparagraph 33.3.3.4.9 to read as follows:

33.3.3.4.9 Carbon Monoxide Detectors. Carbon monoxide detectors shall be provided in all residential board and care occupancies in accordance with 32.3.3.4.9.

35. Add a new sub-subparagraph 33.3.3.6.3.4 to read as follows:

33.3.3.6.3.4 The provisions of 33.3.3.6.3 shall not apply where the resident room has a door providing direct exiting at grade or to an open air balcony leading to exiting at grade.

36. Add new subparagraph 33.3.5.2.4 to read as follows:

33.3.5.2.4 Portable electric and liquefied petroleum gas or liquid fuel fire space heating devices designed to be portable are prohibited in all portions of large residential board and care occupancies.

33.3.5.2.4.1 In emergency conditions when approved by the authority having jurisdiction, equipment designed to be portable may be used for a specified time provided such equipment is properly protected and separated from combustibles as specified by the manufacturer's instructions and the authority having jurisdiction. Extension cords and power strips shall not be used with portable electric heating devices.

37. Delete subsection 33.5 in its entirety and substitute in its place the following:

33.5 Community Living Arrangement Facilities.

33.5.1 General. The following shall be provided in addition to the requirements of this Chapter for facilities subject to being licensed as a Community Living Arrangement. Where there are conflicts in requirements specified elsewhere in this Chapter, the requirements specified under Section 33.5 shall prevail.

33.5.2 Address identification. Community Living Arrangement structures shall have approved address numbers, building numbers or approved building identification placed in accordance with the provisions of the International Fire Code.

33.5.3 Means of Egress.

33.5.3.1 Subsection 24.4.3 of this code as modified in this chapter 120-3-3 shall apply to Community Living Arrangement facilities.

33.5.3.2 Locks.

33.5.3.2.1 Subparagraphs 24.4.3.8.1 and 24.4.3.8.2 of this code as modified in this Subject 120-3-3 shall apply to Community Living Arrangement facilities.

33.5.3.3 Number of Means of Escape. In any dwelling or dwelling unit of two rooms or more, every sleeping room and every living area shall have not less than one primary means of escape and one secondary means of escape.

33.5.3.3.1 A secondary means of escape shall not be required where the bedroom or living area has a door leading directly to the outside of the building at or to grade level.

33.5.4 Detection and Alarm Systems

33.5.4.1 Detection and alarm systems shall comply with paragraphs

24.4.4.1 and 24.4.4.2 of this code as modified in this chapter 120-3-3.

33.5.4.2 Carbon Monoxide Detectors.

33.5.4.2.1 Carbon monoxide detectors shall be provided in accordance with 32.3.3.4.9.

33.5.5 Protection.

33.5.5.1 Portable fire extinguishers shall be provided and maintained in Community Living Arrangement facilities in accordance with subsection 24.4.5 of this code as modified in this chapter 120-3-3.

33.5.6 Heating, Ventilation and Air Conditioning.

33.5.6.1 The requirements of subsection 24.4.6 of this code as modified in this Subject 120-3-3 shall apply to Community Living Arrangement facilities.

33.5.7 Operating Features.

33.5.7.1 Staffing. The Community Living Arrangement shall have as many qualified and trained employees on duty as shall be needed to safeguard properly the health, safety, and welfare of residents and ensure the provision of services the residents require to be delivered in the Community Living Arrangement.

33.5.7.1.1 Before working independently with residents, each staff member shall be trained and show continuing evidence of competence in fire safety and emergency evacuation procedures. A resident shall not be considered a staff person in the residence in which they live. (See Chapter 4 of the International Fire Code, as adopted by Chapter 120-3-3 of the Rules and Regulations of the Safety Fire Commissioner.)

33.5.7.2 Evacuation Capabilities. Community Living Arrangement shall maintain a staffing ratio sufficient to ensure that all residents can meet a prompt evacuation capability as defined in 120-3-3-.03 of Chapter 120-3-3 of the Rules and Regulations of the Safety Fire Commissioner. Residents who cannot meet a prompt evacuation capability classification shall be provided with a minimum of one dedicated employee whose primary responsibility is to provide evacuation of the resident in the event of a fire or other emergency. The dedicated employee/employees shall be in close attendance at all times.

33.5.7.3 Drills. Fire drills shall be conducted at least quarterly on each shift. At least two drills per calendar year shall be during sleeping hours. All fire drills shall be documented with staffing involved. (See Chapter 4 of the International Fire Code).

33.5.7.4 Procedures. There shall be established procedures and mechanisms for alerting and caring for residents in case of emergencies and for evacuating them to safety. An evacuation plan with clear instructions shall be available within each residence. Each sleeping room shall have a secondary exit, which may be a door or a window usable for escape.

38. Delete subsections 33.7.1, 33.7.2, and 33.7.3 in their entirety and substitute in their place the following:

33.7.1 Emergency Planning and Preparedness. Residential board and care facilities (Group I1 and R-4 occupancies), including community living arrangements and personal care homes, shall develop policies, procedures, plans, staff training, safety practices, and emergency egress and relocation drills for the protection of life prior to and during an emergency condition in accordance with Sections 4.7, 4.8 and 4.9.

39. Delete subsection 33.7.4 in its entirety and substitute in their place the following:

33.7.4 Smoking regulations shall be adopted in accordance with subsection 19.7.4 (1) (3) (4) (5) (6) of this code.

40. Add a new paragraph 33.7.5.4 to read as follows:

33.7.5.4 Waste Containers. Wastebaskets and other waste containers shall be of noncombustible or other approved materials.

(bb) **Modifications to reserved Chapter 34:**

1. Insert a new Chapter 34 to read as follows:

Chapter 34 New Assisted Living Community Occupancies

34.1 **General Requirements.**

34.1.1 **Application.**

34.1.1.1 **General.**

34.1.1.1.1 The requirements of this chapter shall apply to new buildings or portions thereof used as assisted living community occupancies. New buildings or portions thereof used as assisted living community occupancies shall be permitted to meet all the requirements for a limited health care occupancy as prescribed in chapter 18 of this Code in lieu of this chapter. See 1.3.1.

34.1.1.1.2 **Administration.** The provisions of Chapter 1, Administration, shall apply.

34.1.1.1.3 **General.** The provisions of Chapter 4, General, shall apply.

34.1.1.1.4 Buildings, or sections of buildings, that primarily house residents who, in the opinion of the governing body of the facility and the governmental agency having jurisdiction, are capable of exercising judgment and

appropriate physical action for self-preservation under emergency conditions shall be permitted to comply with the provisions of Chapter 32 provided they are separated by a fire barrier having not less than a 1-hour fire resistance rating and constructed of materials as required for the addition.

34.1.1.1.5 It shall be recognized that, in buildings providing care for certain types of residents or having a security section, it might be necessary to lock doors and bar windows to confine and protect building inhabitants. In such instances, the authority having jurisdiction shall require appropriate modifications to those sections of this Code that would otherwise require means of egress to be kept unlocked.

34.1.1.1.6 The requirements of this chapter shall apply based on the assumption that staff is available in all resident-occupied areas to perform certain fire safety functions as required in other paragraphs of this chapter.

34.1.1.2 **Goals and Objectives.** The goals and objectives of Sections 4.1 and 4.2 shall be met with due consideration for functional requirements, which are accomplished by limiting the development and spread of a fire to the room of fire origin and reducing the need for occupant evacuation, except from the room of fire origin.

34.1.1.3 **Total Concept.**

34.1.1.3.1 All assisted living community facilities shall be designed, constructed, maintained, and operated to minimize the possibility of a fire emergency requiring the evacuation of occupants.

34.1.1.3.2 Because the safety of assisted living community occupants cannot be ensured adequately by dependence on evacuation of the building, their protection from fire shall be provided by appropriate arrangement of facilities; adequate, trained staff; and development of operating and maintenance procedures composed of the following:

(1) Design, construction, and compartmentation;

(2) Provision for detection, alarm, and extinguishment;

(3) Fire prevention and planning, training, and drilling programs for the isolation of fire, transfer of occupants to areas of refuge, or evacuation of the building.

34.1.1.4 **Additions, Conversions, Modernization, Renovation, and Construction Operations.**

34.1.1.4.1 **Additions.**

34.1.1.4.1.1 Additions shall be separated from any existing structure not conforming to the provisions within Chapter 34 by a fire barrier having not less than a 2-hour fire resistance rating and constructed of materials as required for the addition. (See 4.6.5 and 4.6.7.)

34.1.1.4.1.2 Doors in barriers required by 34.1.1.4.1.1 shall normally be kept closed, unless otherwise permitted by 34.1.1.4.1.3.

34.1.1.4.1.3 Doors shall be permitted to be held open if they meet the requirements of 34.2.2.4.

34.1.1.4.2 **Conversion.** For the purposes of this chapter, exceptions for conversions shall apply only for a change of occupancy from an existing health care occupancy to an assisted living community occupancy.

34.1.1.4.3 **Changes of Occupancy.** A change from a personal care home to an assisted living community occupancy shall be considered a change in occupancy or occupancy sub-classification and would be required to meet the provisions of this Chapter for new construction.

34.1.1.4.4 Renovations, Alterations, and Modernizations. See 4.6.7.

34.1.1.4.5 **Construction, Repair, and Improvement Operations.** See 4.6.10.

34.1.2 **Classification of Occupancy.** See Rules 120-3-3.03(4), (14), and 34.1.4.2.

34.1.3 **Multiple Occupancies.**

34.1.3.1 Multiple occupancies shall comply with 6.1.14 in buildings other than those meeting the requirement of 34.1.3.2.

34.1.3.2 Sections of assisted living community facilities shall be permitted to be classified as other occupancies, provided that they meet both of the following conditions:

(1) They are not intended to serve assisted living community occupants or have customary access by assisted living community residents who are incapable of self-preservation.

(2) They are separated from areas of assisted living community occupancies by construction having a minimum 2-hour fire resistance rating.

34.1.3.3 The requirement of 34.1.3.1 shall not apply to apartment buildings housing assisted living community occupancies in conformance with Section 34.4. In such facilities, any safeguards required by Section 34.4 that are more restrictive than those for other housed occupancies shall apply only to the extent prescribed by Section 34.4.

34.1.3.4 No assisted living community occupancy shall be located above a nonresidential or non-health care occupancy, unless the assisted living community occupancy and exits therefrom are separated from the nonresidential or non-health care occupancy by construction having a minimum 2-hour fire resistance rating.

34.1.3.5 Any area with a hazard of contents classified higher than that of the assisted living community occupancy and located in the same building shall be protected as required in 34.2.

34.1.3.6 Non-residential-related occupancies classified as containing high hazard contents shall not be permitted in buildings housing assisted living community occupancies.

34.1.4 **Definitions**.

34.1.4.1 General. For definitions, see Chapter 3, Definitions.

34.1.4.2 Special Definitions. A list of special terms used in this chapter is as follows:

(1) Point of Safety. See 3.3.211 of this Code.

(2) Thermal Barrier. See 3.3.31.3 of this Code.

34.1.5 **Classification of Hazard of Contents.** The classification of hazard of contents shall be as defined in Section 6.2.

34.1.6 **Minimum Construction Requirements.** Assisted living community facilities shall be limited to the building construction types specified in Table 34.1.6 (see 8.2.1), based on the number of stories in height as defined in 4.6.3.

Table 34.1.6	Number of Stories - *See Note b*					
Construction Type	Sprinklered *See Note a*	1	2	3	4-12	12
Type I(442) *a c d*	YES	X	X	X	X	X
	NO	N.P.	N.P.	N.P.	N.P.	N.P.
Type I(332) *a c d*	YES	X	X	X	X	X
	NO	N.P.	N.P.	N.P.	N.P.	N.P.
Type II(222) *a c d*	YES	X	X	X	X	N.P.

Table 34.1.6	Number of Stories - *See Note b*					
	NO	N.P.	N.P.	N.P.	N.P.	N.P.
Type II(111) *a c d*	YES	X	X	X	N.P.	N.P.
	NO	N.P.	N.P.	N.P.	N.P.	N.P.
Type II(000) *a*	YES	X	X	N.P.	N.P.	N.P.
	NO	N.P.	N.P.	N.P.	N.P.	N.P.
Type III(211) *a*	YES	X	X	N.P.	N.P.	N.P.
	NO	N.P.	N.P.	N.P.	N.P.	N.P.
Type III(200) *a*	YES	X	N.P.	N.P.	N.P.	N.P.
	NO	N.P.	N.P.	N.P.	N.P.	N.P.
Type IV(2HH) *a*	YES	X	X	N.P.	N.P.	N.P.
	NO	N.P.	N.P.	N.P.	N.P.	N.P.
Type V(111) *a*	YES	X	X	N.P	N.P.	N.P.
	NO	N.P.	N.P.	N.P.	N.P.	N.P.
Type V(000) *a*	YES	X	N.P.	N.P.	N.P.	N.P.
	NO	N.P.	N.P	N.P.	N.P.	N.P.

X = Permitted if sprinklered as required by 32.3.3.5.

NP = Not permitted.

a Building shall be protected throughout by an approved supervised automatic sprinkler system installed in accordance with 9.7.1.1(1), and provided with quick response or residential sprinklers throughout. (See requirements of 34.3.5).

b See requirements of 4.6.3.

c See requirements of 34.1.6.2.1.

d See requirements of 34.1.6.2.2.

34.1.6.1 **Fire Resistance-Rated Assemblies.** Fire resistance-rated assemblies shall comply with Section 8.3.

34.1.6.2 **Construction Type Limitations.**

34.1.6.2.1 Any building of Type I(442), Type I(332), Type II(222), or Type II(111) construction shall be permitted to include roofing systems involving combustible supports, decking, or roofing, provided that all of the following criteria are met:

(1) The roof covering shall meet Class A requirements in accordance with ASTM E 108, Standard Test Methods for Fire Tests of Roof Coverings, or ANSI/UL 790, Test Methods for Fire Tests of Roof Coverings.

(2) The roof shall be separated from all occupied portions of the building by a noncombustible floor assembly having not less than a 2-hour fire resistance rating that includes not less than 2 1/2 in. (63 mm) of concrete or gypsum fill.

(3) The structural elements supporting the 2-hour fire resistance-rated floor assembly specified in 34.1.6.2(2) shall be required to have only the fire resistance rating required of the building.

34.1.6.2.2 Any building of Type I(442), Type I(332), Type II(222), or Type II(111) construction shall be permitted to include roofing systems involving combustible supports, decking, or roofing, provided that all of the following criteria are met:

(1) The roof covering shall meet Class A requirements in accordance with ASTM E 108, Standard Test Methods for Fire Tests of Roof Coverings, or ANSI/UL 790, Test Methods for Fire Tests of Roof Coverings.

(2) The roof/ceiling assembly shall be constructed with fire-retardant-treated wood meeting the requirements of NFPA 220, Standard on Types of Building Construction.

(3) The roof/ceiling assembly shall have the required fire resistance rating for the type of construction.

34.1.6.2.3 Any level below the level of exit discharge shall be separated from the level of exit discharge by not less than Type II(111), Type III(211), or Type V(111) construction (see 8.2.1), unless both of the following criteria are met:

(1) Such levels are under the control of the assisted living community facility.

(2) Any hazardous spaces are protected in accordance with Section 8.7.

34.1.6.3 All buildings with more than one level below the level of exit discharge shall have all such lower levels separated from the level of exit discharge by not less than Type II(111) construction.

34.1.6.4 Interior nonbearing walls in buildings of Type I or Type II construction shall be constructed of noncombustible or limited-combustible materials, unless otherwise permitted by 20.1.6.4.

34.1.6.5 Interior nonbearing walls required to have a minimum 2-hour fire resistance rating shall be permitted to be fire-retardant-treated wood enclosed within noncombustible or limited-combustible materials, provided that such walls are not used as shaft enclosures.

34.1.6.6 Fire-retardant-treated wood that serves as supports for the installation of fixtures and equipment shall be permitted to be installed behind noncombustible or limited-combustible sheathing.

34.1.7 **Occupant Load.** The occupant load, in number of persons for whom means of egress and other provisions are required, shall be determined on the basis of the occupant load factors of Table 7.3.1.2 that are characteristic of the use of the space, or shall be determined as the maximum probable population of the space under consideration, whichever is greater.

34.2 **Means of Egress Requirements.**

34.2.1 **General.**

34.2.1.1 Means of egress from resident rooms and resident dwelling units to the outside of the building shall be in accordance with Chapter 7 and this chapter.

34.2.1.2 Means of escape within the resident room or resident dwelling unit shall comply with Section 24.2 for one- and two-family dwellings.

34.2.1.3 No means of escape or means of egress shall be considered as complying with the minimum criteria for acceptance, unless emergency evacuation drills are regularly conducted using that route in accordance with the requirements of 34.7.3.

34.2.1.4 No assisted living community occupancy shall have its sole means of egress or means of escape pass through any nonresidential or non-health care occupancy in the same building.

34.2.1.5 All means of egress from assisted living community occupancies that traverse non-assisted living community spaces shall conform to the requirements of this Code for assisted living community occupancies, unless otherwise permitted by 34.2.1.6.

34.2.1.6 Exit through a horizontal exit into other contiguous occupancies that does not conform to assisted living community egress provisions but do comply with requirements set forth in the appropriate occupancy chapter of this Code shall be permitted, provided that the occupancy does not contain high hazard contents.

34.2.1.7 Egress provisions for areas of assisted living community facilities that correspond to other occupancies shall meet the corresponding requirements of this Code for such occupancies, and, where the clinical needs of the residents necessitate the locking of means of egress, staff shall be present for the supervised release of occupants during all times of use.

34.2.2 **Means of Egress Components.**

34.2.2.1 **Components Permitted.** Components of means of egress shall be limited to the types described in 34.2.2.2 through 34.2.2.10.

34.2.2.2 Doors. Doors in means of egress shall meet all of the following criteria:

(1) Doors complying with 7.2.1 shall be permitted.

(2) Doors within individual rooms and suites of rooms shall be permitted to be swinging or sliding.

(3) No door in any means of egress, other than those meeting the requirement of 34.2.2.2.1 or 34.2.2.2.2, shall be equipped with a lock or latch that requires the use of a tool or key from the egress side.

34.2.2.2.1 Delayed-egress locks in accordance with 7.2.1.6.1 shall be permitted.

34.2.2.2.2 Access-controlled egress doors in accordance with 7.2.1.6.2 shall be permitted.

34.2.2.2.3 Doors that are located in the means of egress from individual resident bedrooms or private living units shall be permitted to have locks where the clinical needs of a resident require specialized protective security measures provided that staff can readily unlock doors at all times in accordance with 34.2.2.2.4.

34.2.2.2.4 Doors that are located in the means of egress and are permitted to be locked under other provisions of 34.2.2.2.3 shall comply with both of the following:

(1) Provisions shall be made for the rapid removal of occupants by means of one of the following:

(a) Remote control of locks from within the locked smoke compartment

(b) Keying of all locks to keys carried by staff at all times

(c) Other such reliable means available to the staff at all times

(2) Only one locking device shall be permitted on each door.

34.2.2.2.5 Doors located in the means of egress that are permitted to be locked under other provisions of Chapter 34, other than those meeting the requirement of 34.2.2.2.1 or 34.2.2.2.2, shall have adequate provisions made for the rapid removal of occupants by means such as remote control of locks, keying of all locks to keys carried by staff at all times, or other such reliable means available to staff at all times.

34.2.2.2.6 Only one such locking device, as described in 34.2.2.2.5, shall be permitted on each door.

34.2.2.3 **Stairs.** Stairs complying with 7.2.2 shall be permitted.

34.2.2.4 Smokeproof enclosures complying with 7.2.3 shall be permitted.

34.2.2.5 Horizontal exits complying with 7.2.4 shall be permitted.

34.2.2.6 Ramps complying with 7.2.5 shall be permitted.

34.2.2.7 Exit passageways complying with 7.2.6 shall be permitted.

34.2.2.8 Fire escape ladders complying with 7.2.9 shall be permitted.

34.2.2.9 Alternating Tread Devices. Alternating tread devices complying with 7.2.11 shall be permitted.

34.2.2.10 Areas of Refuge. Areas of refuge complying with 7.2.12 shall be permitted.

34.2.3 **Capacity of Means of Egress.**

34.2.3.1 The capacity of means of egress shall be in accordance with Section 7.3.

34.2.3.2 Street floor exits shall be sufficient for the occupant load of the street floor plus the required capacity of stairs and ramps discharging onto the street floor.

34.2.3.3 The width of corridors shall be sufficient for the occupant load served but shall be not less than 60 in. (1525 mm).

34.2.4 **Number of Means of Egress.**

34.2.4.1 Means of egress shall comply with the following, except as otherwise permitted by 34.2.4.2:

(1) The number of means of egress shall be in accordance with Section 7.4.

(2) Not less than two separate exits shall be provided on every story.

(3) Not less than two separate exits shall be accessible from every part of every story.

34.2.4.2 Exit access, as required by 34.2.4.1(3), shall be permitted to include a single exit access path for the distances permitted as common paths of travel by 34.2.5.2.

34.2.5 **Arrangement of Means of Egress.**

34.2.5.1 **General.** Access to all required exits shall be in accordance with Section 7.5.

34.2.5.2 Dead-end Corridors. Dead-end corridors shall not exceed 30 ft. (9.1 mm).

34.2.5.3 Common Path. Common paths of travel shall not exceed 75 ft. (23 m).

34.2.6 **Travel Distance to Exits.**

34.2.6.1 Travel distance from any point within a room, suite, or living unit to a corridor door shall not exceed 125 ft. (38 m) in buildings protected throughout by an approved automatic sprinkler system in accordance with 34.3.5.

34.2.6.2 Travel distance from the corridor door of any room to the nearest exit shall be in accordance with 34.26.2.1 or 34.2.6.2.2.

34.2.6.3 Travel distance from the corridor door of any room to the nearest exit shall be in accordance with 34.2.6.3.1 or 34.2.6.3.2.

34.2.6.3.1 Travel distance from the corridor door of any room to the nearest exit, measured in accordance with Section 7.6, shall not exceed 150ft. (45.72m).

34.2.6.3.2 Travel distance to exits shall not exceed 200 ft. (61 m) for exterior ways of exit access arranged in accordance with 7.5.3.

34.2.7 **Discharge from Exits.** Exit discharge shall comply with Section 7.7.

34.2.8 Means of egress shall be illuminated in accordance with Section 7.8.

34.2.9 Emergency lighting in accordance with Section 7.9 shall be provided.

34.2.10 Means of egress shall be marked in accordance with Section 7.10.

34.2.11 **Special Means of Egress Features.**

34.2.11.1 Lockups in residential assisted living community occupancies shall comply with the requirements of 22.4.5.

34.3 **Protection.**

34.3.1 Protection of Vertical Openings.

34.3.1.1 Vertical openings shall be enclosed or protected in accordance with Section 8.6.

34.3.1.2 Unenclosed vertical openings in accordance with 8.6.9.1 shall be permitted.

34.3.1.3 No floor below the level of exit discharge used only for storage, heating equipment, or purposes other than residential occupancy shall have unprotected openings to floors used for residential occupancy.

34.3.2 Protection from Hazards.

34.3.2.1 Rooms containing high-pressure boilers, refrigerating machinery, transformers, or other service equipment subject to possible explosion shall not be located directly under or adjacent to exits, and such rooms shall be effectively separated from other parts of the building as specified in Section 8.7.

34.3.2.2 Hazardous areas, which shall include, but shall not be limited to, the following, shall be separated from other parts of the building by construction having a minimum 1-hour fire resistance rating, with communicating openings protected by approved self-closing fire doors and be equipped with automatic fire-extinguishing systems:

(1) Boiler and heater rooms

(2) Laundries

(3) Repair shops

(4) Rooms or spaces used for storage of combustible supplies and equipment in quantities deemed hazardous by the authority having jurisdiction

Exception to (1): Rooms enclosing air handling equipment, compressor equipment, furnaces or other heating equipment with a total aggregate input rating less than 200,000 BTU input. Such rooms shall not be used for any combustible storage. A minimum of 30 inches (0.76 m) unobstructed access shall be provided and maintained to equipment and electrical or emergency control panels or devices for emergency response purposes.

34.3.3 **Interior Finish.**

34.3.3.1 **General.** Interior finish shall be in accordance with Section 10.2.

34.3.3.2 **Interior Wall and Ceiling Finish.** Interior wall and ceiling finish materials complying with Section 10.2 shall be in accordance with the following:

(1) Exit enclosures - Class A

(2) Lobbies and corridors - Class B

(3) Rooms and enclosed spaces - Class B

34.3.3.3 **Interior Floor Finish.**

34.3.3.3.1 Interior floor finish shall comply with Section 10.2.

34.3.3.3.2 Interior floor finish in exit enclosures and exit access corridors and spaces not separated from them by walls complying with 34.3.6 shall be not less than Class II.

34.3.3.3.3 Interior floor finish shall comply with 10.2.7.1 or 10.2.7.2, as applicable.

34.3.4 **Detection, Alarm, and Communications Systems.**

34.3.4.1 **General.** A fire alarm system shall be provided in accordance with Section 9.6.

34.3.4.2 **Initiation**. The required fire alarm system shall be initiated by each of the following:

(1) Manual means in accordance with 9.6.2;

(2) Manual fire alarm box located at a convenient central control point under continuous supervision of responsible employees;

(3) Required automatic sprinkler system;

(4) Required detection system.

34.3.4.3 **Annunciator Panel.** An annunciator panel, connected to the fire alarm system, shall be provided at a location readily accessible from the primary point of entry for emergency response personnel.

34.3.4.4 **Notification.**

34.3.4.4.1 **Occupant Notification.** Occupant notification shall be provided automatically, without delay, by internal audible alarm in accordance with 9.6.3.

34.3.4.4.2 High-Rise Buildings. High-rise buildings shall be provided with an approved emergency voice communication/alarm system in accordance with 11.8.4.

34.3.4.5 **Emergency Forces Notification.** Emergency forces notification shall be accomplished in accordance with 9.6.4.

34.3.4.6 **Detection.**

34.3.4.6.1 **Smoke Alarms.** Approved smoke alarms shall be installed in accordance with 9.6.2.10 inside every sleeping room, outside every sleeping area in the immediate vicinity of the bedrooms, and on all levels within a resident unit.

34.3.4.7 **Smoke Detection Systems.**

34.3.4.7.1 Corridors, spaces open to the corridors, and other spaces outside every sleeping area in the immediate vicinity of the bedrooms other than those meeting the requirement of 34.3.4.7.2, shall be provided with smoke detectors that comply with NFPA 72, National Fire Alarm and Signaling Code, and are arranged to initiate an alarm that is audible in all sleeping areas.

34.3.4.7.2 Smoke detection systems shall not be required in unenclosed corridors, passageways, balconies, colonnades, or other arrangements with one or more sides along the long dimension fully or extensively open to the exterior at all times.

34.3.5 **Extinguishment Requirements.**

34.3.5.1 **General.** All buildings shall be protected throughout by an approved automatic sprinkler system installed in accordance with 9.7.1.1(1) and provided with quick-response or residential sprinklers throughout.

34.3.5.2 **Supervision.** Automatic sprinkler systems shall be provided with electrical supervision in accordance with 9.7.2.

34.3.5.3 **Portable Fire Extinguishers.** Portable fire extinguishers shall be provided in accordance with 9.9.

34.3.6 **Corridors and Separation of Sleeping Rooms.**

34.3.6.1 Access shall be provided from every resident use area to at least one means of egress that is separated from all sleeping rooms by walls complying with 34.3.6.3 through 34.3.6.6.

34.3.6.1.1 Sleeping rooms shall be separated from corridors, living areas, and kitchens by walls complying with 34.3.6.2 through 34.3.6.6.

34.3.6.2 Walls required by 34.3.6.1 or 34.3.6.1.1 shall be smoke partitions in accordance with Section 8.4 having a minimum 1/2-hour fire resistance rating.

34.3.6.3 Hazardous areas shall be separated from corridors in accordance with 34.3.2.

34.3.6.4 Doors protecting corridor openings other than from resident sleeping rooms and hazardous areas shall not be required to have a fire protection rating, but shall be constructed to resist the passage of smoke.

34.3.6.4.1 Doors protecting resident sleeping rooms shall have a minimum 20-minute fire protection rating.

34.3.6.5 Door-closing devices shall not be required on doors in corridor wall openings, other than those serving exit enclosures, smoke barriers, enclosures of vertical openings, and hazardous areas.

34.3.6.6 No louvers, transfer grilles, operable transoms, or other air passages, other than properly installed heating and utility installations, shall penetrate the walls or doors specified in 34.3.6.

34.3.7 **Subdivision of Building Spaces.** Buildings shall be subdivided by smoke barriers in accordance with 34.3.7.1 through 34.3.7.21.

34.3.7.1 Every story shall be divided into not less than two smoke compartments, unless it meets the requirement of 34.3.7.4.

34.3.7.2 Each smoke compartment shall have an area not exceeding 22,500 ft2 (2100 m2).

34.3.7.3 The travel distance from any point to reach a door in the required smoke barrier shall be limited to a distance of 200 ft. (61 m).

34.3.7.3.1 Additional smoke barriers shall be provided such that the travel distance from a sleeping room corridor door to a smoke barrier shall not exceed 150 ft. (46 m).

34.3.7.4 Smoke barriers shall not be required on stories that do not contain an assisted living community occupancy located above the assisted living community occupancy.

34.3.7.5 Smoke barriers shall not be required in areas that do not contain an assisted living community occupancy and that are separated from the assisted living community occupancy by a fire barrier complying with Section 8.3.

34.3.7.6 Smoke barriers shall not be required on stories that do not contain an assisted living community occupancy and that are more than one story below the assisted living community occupancy.

34.3.7.7 Smoke barriers shall not be required in open parking structures protected throughout by an approved, supervised automatic sprinkler system in accordance with 34.3.5.

34.3.7.8 Smoke barriers shall be constructed in accordance with Section 8.5 and shall have a minimum 1-hour fire resistance rating, unless they meet the requirement of 34.3.7.9 or 34.3.7.10.

34.3.7.9 Where an atrium is used, smoke barriers shall be permitted to terminate at an atrium wall constructed in accordance with 8.6.7(1)(c), in which case not less than two separate smoke compartments shall be provided on each floor.

34.3.7.10 Dampers shall not be required in duct penetrations of smoke barriers in fully ducted heating, ventilating, and air-conditioning systems.

34.3.7.11 Not less than 15 net ft^2 (1.4 net m^2) per resident shall be provided within the aggregate area of corridors, lounge or dining areas, and other low hazard areas on each side of the smoke barrier.

34.3.7.12 On stories not housing residents, not less than 6 net ft^2 (0.56 net m^2) per occupant shall be provided on each side of the smoke barrier for the total number of occupants in adjoining compartments.

34.3.7.13 Doors in smoke barriers shall be substantial doors, such as 1 3/4 in. (44 mm) thick, solid-bonded wood-core doors, or shall be of construction that resists fire for a minimum of 20 minutes.

34.3.7.14 Nonrated factory or field-applied protective plates extending not more than 48 in. (1220 mm) above the bottom of the door shall be permitted.

34.3.7.15 Cross-corridor openings in smoke barriers shall be protected by a pair of swinging doors or a horizontal-sliding door complying with 7.2.1.14.

34.3.7.16 Swinging doors shall be arranged so that each door swings in a direction opposite from the other.

34.3.7.17 Doors in smoke barriers shall comply with 8.5.4 and all of the following requirements:

(1) The doors shall be self-closing or automatic-closing in accordance with 7.2.1.8;

(2) Stops shall be installed at the head and sides of door frames;

(3) Rabbets, bevels, or astragals shall be installed at the meeting edges of pairs of doors; and

(4) Center mullins shall be prohibited.

Provided however that positive latching hardware shall not be required

34.3.7.18 Vision panels consisting of fire-rated glazing or wired glass panels in approved frames shall be provided in each cross-corridor swinging door and in each cross-corridor horizontal-sliding door in a smoke barrier.

34.3.8 **Cooking Facilities.** Cooking facilities, other than those within individual residential units, shall be protected in accordance with 9.2.3.

34.3.9 **Standpipes.**

34.3.9.1 **General.** Where required, standpipe and hose systems shall be installed and maintained in accordance with 9.10.

34.3.9.2 **In High-Rise Buildings.** Class I standpipe systems shall be installed throughout all high-rise buildings.

34.3.9.3 **Roof Outlets.** Roof outlets shall not be required on roofs having a slope of 3 in 12 or greater.

34.4 **Special Provisions.**

34.4.1 **High-Rise Buildings**. High-rise buildings shall comply with Section 11.8.

34.5 **Suitability of an Apartment Building to House an Assisted living community Occupancy.**

34.5.1 **General.**

34.5.1.1 **Scope.**

34.5.1.1.1 Section 34.5 shall apply to apartment buildings that have one or more individual apartments used as an assisted living community occupancy. (See 34.1.3.2.)

34.5.1.1.2 The provisions of Section 34.5 shall be used to determine the suitability of apartment buildings, other than those complying with 34.5.1.1.4, to house an assisted living community facility.

34.5.1.1.3 The suitability of apartment buildings not used for assisted living community occupancies shall be determined in accordance with Chapter 30.

34.5.1.1.4 When a new assisted living community occupancy is created in an existing apartment building, the suitability of such a building for apartments not used for assisted living community occupancies shall be determined in accordance with Chapter 31.

34.5.1.2 **Requirements for Individual Apartments.** Requirements for individual apartments used as residential assisted living community occupancies shall be as specified in Section 34.2. Egress from the apartment into the common building corridor shall be considered acceptable egress from the assisted living community facility.

34.5.1.3 **Additional Requirements.** Apartment buildings housing assisted living community facilities shall comply with the requirements of Chapter 30 and the additional requirements of Section 34.5, unless the authority having jurisdiction has determined that equivalent safety for housing an assisted living community facility is provided in accordance with Section 1.4.

34.5.1.4 **Minimum Construction Requirements.**

34.5.1.4.1 In addition to the requirements of Chapter 30, apartment buildings, other than those complying with 34.5.1.4.2, housing assisted living community facilities shall meet the construction requirements of 34.1.3.

34.5.1.4.2 When a new assisted living community occupancy is created in an existing apartment building, the construction requirements of 19.1.6 shall apply.

34.5.2 **Means of Egress.**

34.5.2.1 The requirements of Section 30.2 shall apply only to the parts of means of egress serving the apartment(s) used as an assisted living community occupancy, as modified by 34.5.2.2.

34.5.2.2 When a new assisted living community occupancy is created in an existing apartment building, the requirements of Section 31.2 shall apply to the parts of the means of egress serving the apartment(s) used as an assisted living community occupancy.

34.5.3 **Protection.**

34.5.3.1 **Interior Finish.**

34.5.3.1.1 The requirements of 30.3.3 shall apply only to the parts of means of egress serving the apartment(s) used as an assisted living community occupancy, as modified by 34.5.3.1.2.

34.4.3.1.2 When a new assisted living community occupancy is created in an existing apartment building, the requirements of 31.3.3 shall apply to the parts of the means of egress serving the apartment(s) used as an assisted living community occupancy.

34.5.3.2 **Construction of Corridor Walls.**

34.5.3.2.1 The requirements of 30.3.6 shall apply only to corridors serving the assisted living community facility, including that portion of the corridor wall separating the assisted living community facility from the common corridor, as modified by 34.5.3.2.2.

34.5.3.2.2 If a new assisted living community occupancy is created in an existing apartment building, the requirements of 31.3.6 shall apply to the corridor serving the residential assisted living community facility.

34.6 **Building Services.**

34.6.1 Utilities shall comply with Section 9.1.

34.6.1.1 Heating, ventilating, and air-conditioning equipment shall comply with Section 9.2.

34.6.1.2 No stove or combustion heater shall be located such that it blocks escape in case of fire caused by the malfunction of the stove or heater.

34.6.1.3 Unvented fuel-fired heaters shall not be used in any assisted living community occupancy.

34.6.2 Elevators, dumbwaiters, and vertical conveyors shall comply with Section 9.4.

34.6.2.1 In high-rise buildings, one elevator shall be provided with a protected power supply and shall be available for use by the fire department in case of emergency.

34.6.4 Rubbish chutes, incinerators, and laundry chutes shall comply with Section 9.5.

34.7 **Operating Features.**

34.7.1 Emergency Planning and Preparedness. Assisted living community facilities shall develop policies, procedures, plans, staff training, safety practices, and during an emergency egress to relocation drills for the protection of life prior to and during an emergency condition as required by Sections 4.7 through 4.9.

34.7.2 **Resident Training.**

34.7.2.1 All residents participating in the emergency plan shall be trained in the proper actions to be taken in the event of fire.

34.7.2.2 The training required by 34.7.3.1 shall include actions to be taken if the primary escape route is blocked.

34.7.2.3 If a resident is given rehabilitation or habilitation training, training in fire prevention and the actions to be taken in the event of a fire shall be a part of the training program.

34.7.2.4 Residents shall be trained to assist each other in case of fire to the extent that their physical and mental abilities permit them to do so without additional personal risk.

34.7.3 **Emergency Egress and Relocation Drills.** Emergency egress and relocation drills shall be conducted in accordance with 34.7.4.1 through 34.7.4.6.

34.7.3.1 Emergency egress and relocation drills shall be conducted not less than once per quarter on each shift at alternating times. It is intended that staff and residents be trained and drilled based on fire and other emergencies that may occur during the periods of lowest staffing levels. This may require more than one drill per quarter on shifts with the lowest staffing levels.

34.7.3.2 The emergency drills shall be permitted to be announced to the residents in advance.

34.7.3.3 The drills shall involve the training of residents for the eventual actual evacuation of all residents to an assembly point, as specified in the emergency plan, and shall provide residents with experience in egressing through all exits and means of escape required by the Code.

34.7.3.3.1. The assembly point shall be a place outside of the building and shall be located a safe distance from the building being evacuated so as to avoid interference with fire department operations. A refuge area within a smoke compartment in buildings separated by smoke barriers shall be considered a temporary assembly point as part of a staged evacuation.

34.7.3.3.2. Buildings with smoke compartments shall be allowed to train residents to temporarily escape in a staged evacuation to another smoke compartment separated by smoke barriers. Residents shall be allowed to complete the training exercise on the other side of an adjacent smoke barrier. Residents shall still be trained to eventually complete building evacuation during an actual emergency evacuation. Residents shall be required to participate in one emergency egress and relocation drill per year where they continue to an assembly point outside of the building.

34.7.3.3.3. Residents, as a group, shall be required to complete the evacuation drill to an exit or across a smoke barrier in less than 13 minutes or shall be required to change its group evacuation capability and comply with Section 35.1.8.

34.7.3.4 Exits and means of escape not used in any drill shall not be credited in meeting the requirements of this Code for assisted living community facilities.

34.7.3.5 Actual exiting from windows shall not be required to comply with 34.7.4; opening the window and signaling for help shall be an acceptable alternative.

34.7.3.6 Residents who cannot meaningfully assist in their own evacuation or who have special health problems shall not be required to actively participate in the drill.

34.7.4 **Smoking.**

34.7.4.1 Smoking regulations shall be adopted by the administration of assisted living community occupancies.

34.7.4.2 Where smoking is permitted, noncombustible safety-type ashtrays or receptacles shall be provided in convenient locations.

34.7.5 **Furnishings, Mattresses, and Decorations.**

34.7.5.1. New draperies, curtains, and other similar loosely hanging furnishings and decorations in assisted living community facilities shall be in accordance with the provisions of 10.3.1.

34.7.5.2 New upholstered furniture within assisted living community facilities shall comply with 34.7.6.2.1 or 34.7.6.2.2.

34.7.5.2.1 New upholstered furniture shall be tested in accordance with the provisions of 10.3.2.1(1) and 10.3.3.

34.7.5.2.2 Upholstered furniture belonging to residents in sleeping rooms shall not be required to be tested, provided that a smoke alarm is installed in such rooms; battery-powered single-station smoke alarms shall be permitted in such rooms.

34.7.5.3 Newly introduced mattresses within assisted living community facilities shall comply with 34.7.5.3.1 or 34.7.5.3.2.

34.7.5.3.1 Newly introduced mattresses shall be tested in accordance with the provisions of 10.3.2.2 and 10.3.4.

34.7.5.3.2 Mattresses belonging to residents in sleeping rooms shall not be required to be tested, provided that a smoke alarm is installed in such rooms; battery-powered single-station smoke alarms shall be permitted in such rooms.

34.7.6 **Staff.** Staff shall be on duty and in the facility at all times when residents requiring evacuation assistance are present.

34.7.7 **Inspection of Door Openings.** Door assemblies for which the door leaf is required to swing in the direction of egress travel shall be inspected and tested not less than annually in accordance with 7.2.1.15.

(cc) **Modifications to Chapter 35:**

1. Insert a new Chapter 35 to read as follows:

Chapter 35 Existing Assisted Living Community Occupancies

35.1 **General Requirements.**

35.1.1 **Application.**

35.1.1.1 **General.**

35.1.1.1.1 The requirements of this chapter shall apply to existing buildings or portions thereof used as assisted living community occupancies or with limited applicability for a conversion as further specific specified in Section 35.1.1.4.3 entitled Change of Occupancy.

35.1.1.1.2 **Administration.** The provisions of Chapter 1 regarding Administration shall apply.

35.1.1.1.3 **General.** The provisions of Chapter 4 regarding General matters shall apply.

35.1.1.1.4 Buildings, or sections of buildings, that primarily house residents who, in the opinion of the governing body of the facility and the governmental agency having jurisdiction, are capable of exercising judgment and appropriate physical action for self-preservation under emergency conditions shall be permitted to comply with the provisions of Chapter 33 provided they are separated by a fire barrier having not less than a 1-hour fire resistance rating and constructed of materials as required for the addition.

35.1.1.1.5 It shall be recognized that, in buildings providing care for certain types of residents or having a security section, it might be necessary to lock doors and bar windows to confine and protect building inhabitants. In such instances, the authority having jurisdiction shall require appropriate modifications to those sections of this Code that would otherwise require means of egress to be kept unlocked.

35.1.1.1.6 The requirements of this chapter shall apply based on the assumption that staff is available in all resident-occupied areas to perform certain fire safety functions as required in other paragraphs of this chapter.

35.1.1.2 **Goals and Objectives.** The goals and objectives of Sections 4.1 and 4.2 shall be met with due consideration for functional requirements, which are accomplished by limiting the development and spread of a fire to the room of fire origin and reducing the need for occupant evacuation, except from the room of fire origin.

35.1.1.3 **Total Concept.**

35.1.1.3.1 All assisted living community facilities shall be designed, constructed, maintained, and operated to minimize the possibility of a fire emergency requiring the evacuation of occupants.

35.1.1.3.2 Because the safety of assisted living community occupants cannot be ensured adequately by dependence on evacuation of the building, their protection from fire shall be provided by appropriate arrangement of facilities; adequate, trained staff; and development of operating and maintenance procedures composed of the following:

(1) Design, construction, and compartmentation.

(2) Provision for detection, alarm, and extinguishment.

(3) Fire prevention and planning, training, and drilling programs for the isolation of fire, transfer of occupants to areas of refuge, or evacuation of the building.

35.1.1.4 **Additions, Conversions, Modernization, Renovation, and Construction Operations.**

35.1.1.4.1 **Additions.**

35.1.1.4.1.1 Additions shall be separated from any existing structure not conforming to the provisions within Chapter 35 by a fire barrier having not less than a 2-hour fire resistance rating and constructed of materials as required for the addition. (See 4.6.5 and 4.6.7.)

35.1.1.4.1.2 Doors in barriers required by 35.1.1.4.1.1 shall normally be kept closed, unless otherwise permitted by 35.1.1.4.1.3.

35.1.1.4.1.3 Doors shall be permitted to be held open if they meet the requirements of 35.2.2.4.

35.1.1.6 **Conversion.** For the purposes of this chapter, exceptions for conversions shall apply only for a change of occupancy from an existing personal care home occupancy or health care occupancy to an assisted living community occupancy.

35.1.1.4.3 **Changes of Occupancy.** A change from a personal care home, assisted living, or assisted living facility to an assisted living community occupancy shall be considered a change in occupancy or occupancy sub-classification. The requirements of this chapter shall be limited to only apply to a change of occupancy to an assisted living community from an existing personal care home, assisted living, or assisted living facility first occupied as such with a certificate of occupancy issued prior to March 31, 2013. Such facility may be permitted to meet all the requirements for a limited health care occupancy as prescribed in chapter 19 of this Code in lieu of this chapter.

35.1.1.4.3.1 An existing personal care home, assisted living, or assisted living facility with a certificate of occupancy dated after March 31, 2013, that is applying for a change of occupancy to an assisted living community or any other change of occupancy classification, sub-classification, shall meet the provisions of Chapter 34 New Assisted Living Community Occupancies.

35.1.1.4.4 Renovations, Alterations, and Modernizations. See 4.6.7.

35.1.1.4.5 Construction, Repair, and Improvement Operations. See 4.6.10.

35.1.2 Classification of Occupancy. See 120-3-3.03(4), (14), and 35.1.4.2.

35.1.3 Multiple Occupancies.

35.1.3.1 Multiple occupancies shall comply with 6.1.14 in buildings other than those meeting the requirement of 35.1.3.2.

35.1.3.2 *Sections of assisted living community facilities shall be permitted to be classified as other occupancies, provided that they meet both of the following conditions:

(1) They are not intended to serve assisted living community occupants or have customary access by assisted living community residents who are incapable of self-preservation.

(2) They are separated from areas of assisted living community occupancies by construction having a minimum 2-hour fire resistance rating.

35.1.3.3 The requirement of 35.1.3.1 shall not apply to apartment buildings housing assisted living community occupancies in conformance with Section 35.4. In such facilities, any safeguards required by Section 35.4 that are more restrictive than those for other housed occupancies shall apply only to the extent prescribed by Section 35.4.

35.1.3.4 No assisted living community occupancy shall be located above a nonresidential or non-health care occupancy, unless one following conditions is met:

(1) The assisted living community occupancy and exits therefrom are separated from the nonresidential or non-health care occupancy by construction having a minimum 2-hour fire resistance rating.

(2) The assisted living community occupancy is protected throughout by an approved, supervised automatic sprinkler system in accordance with Section 9.7 and is separated therefrom by construction having a minimum 1-hour fire resistance rating.

35.1.3.5 Any area with a hazard of contents classified higher than that of the assisted living community occupancy and located in the same building shall be protected as required in 35.3.2.

35.1.3.6 Non-residential-related occupancies classified as containing high hazard contents shall not be permitted in buildings housing assisted living community occupancies.

35.1.4 **Definitions.**

35.1.4.1 General. For definitions, see Chapter 3, Definitions.

35.1.4.2 Special Definitions. A list of special terms used in this chapter are as follows:

(1) Assisted Living Community Occupancy. See Rule 120-3-3-.03(4).

(2) Assisted self-preservation. See Rule 120-3-3-.03(5).

(2) Evacuation Capability, Impractical. See Rule 120-3-3-.03(7).

(3) Evacuation Capability, Prompt. See Rule 120-3-3-.03(8).

(4) Evacuation Capability, Slow. See Rule 120-3-3-.03(9).

(5) Personal Care Home. See Rule 120-3-3-.03(21).

(6) Point of Safety. See 3.3.229 of this Code.

(7) Thermal Barrier. See 3.3.32.3 of this Code.

35.1.5 Classification of Hazard of Contents. The classification of hazard of contents shall be as defined in Section 6.2.

35.1.6 Minimum Construction Requirements. Assisted living community facilities shall be limited to the building construction types specified in Table 35.1.6 (see 8.2.1), based on the number of stories in height as defined in 4.6.3.

Table 35.1.6	Number of Stories - *See Note b*						
Construction Type	Sprinkled *See Note a*	1	2	3	4	5-6	6-12
Type I(442) *c d*	YES	X	X	X	X	X	X
	NO	N.P.	N.P.	N.P.	N.P.	N.P.	N.P.
Type I(332) *c d*	YES	X	X	X	X	X	X
	NO	N.P.	N.P.	N.P.	N.P.	N.P.	N.P.
Type II(222) *c d*	YES	N.P.	X	X	X	X	X
	NO		N.P.	N.P.	N.P.	N.P.	N.P.
Type II(111) *c d*	YES	X	X	X*e*	X*e*	N.P.	N.P.
	NO	N.P.	N.P.	N.P.	N.P.	N.P.	N.P.
Type II(000) *a*	YES	X	X	N.P.	N.P.	N.P.	N.P.
	NO	N.P.	N.P.	N.P.	N.P.	N.P.	N.P.
Type III(211) *a*	YES	X	X	X*e*	X*e*	N.P.	N.P.
	NO	N.P.	N.P.	N.P.	N.P.	N.P.	N.P.
Type III(200) *a*	YES	X	N.P.	N.P.	N.P.	N.P.	N.P.
	NO	N.P.	N.P.	N.P.	N.P.	N.P.	N.P.
Type IV(2HH) *a*	YES	X	X	N.P.	N.P.	N.P.	N.P.
	NO	N.P.	N.P.	N.P.	N.P.	N.P.	N.P.
Type V(111) *See note a or e*	YES	X*a*	X*a*	X*e*	X*e*	N.P.	N.P.
	NO	N.P.	N.P.	N.P.	N.P.	N.P.	N.P.
Type V(000)*a*	YES	X*a*	N.P.	N.P.	N.P.	N.P.	N.P.
	NO	N.P.	N.P.	N.P.	N.P.	N.P.	N.P.

X = Permitted if sprinklered as required by 33.3.3.5 unless otherwise noted.

NP = Not permitted.

a) *Building shall be protected throughout by an approved supervised automatic sprinkler system installed in accordance with 35.3.5, and the interior walls are covered with lath and plaster or materials providing a 15-minute thermal barrier. (See requirements of 35.3.5).*

b) *See requirements of 4.6.3.*

c) *See requirements of 35.1.6.2.1.*

d) *See requirements of 35.1.6.2.2.*

e) *See requirements of 35.1.6.5.*

35.1.6.1 Fire Resistance-Rated Assemblies. Fire resistance-rated assemblies shall comply with Section 8.3.

35.1.6.2 **Construction Type Limitations.**

35.1.6.2.1 Any building of Type I (442), Type I (332), Type II (222), or Type II (111) construction shall be permitted to include roofing systems involving combustible supports, decking, or roofing, provided that all of the following criteria are met:

(1) The roof covering shall meet Class A requirements in accordance with ASTM E 108, Standard Test Methods for Fire Tests of Roof Coverings, or ANSI/UL 790, Test Methods for Fire Tests of Roof Coverings.

(2) The roof shall be separated from all occupied portions of the building by a noncombustible floor assembly having not less than a 2-hour fire resistance rating that includes not less than 2 1/2 in. (63 mm) of concrete or gypsum fill.

(3) The structural elements supporting the 2-hour fire resistance-rated floor assembly specified in 35.1.6.2(2) shall be required to have only the fire resistance rating required of the building.

35.1.6.2.2 Any building of Type I (442), Type I (332), Type II (222), or Type II (111) construction shall be permitted to include roofing systems involving combustible supports, decking, or roofing, provided that all of the following criteria are met:

(1) The roof covering shall meet Class A requirements in accordance with ASTM E 108, Standard Test Methods for Fire Tests of Roof Coverings, or ANSI/UL 790, Test Methods for Fire Tests of Roof Coverings.

(2) The roof/ceiling assembly shall be constructed with fire-retardant-treated wood meeting the requirements of NFPA 220, Standard on Types of Building Construction.

(3) The roof/ceiling assembly shall have the required fire resistance rating for the type of construction.

35.1.6.2.3 Any level below the level of exit discharge shall be separated from the level of exit discharge by not less than Type II (111), Type III (211), or Type V (111) construction (see 8.2.1), unless both of the following criteria are met:

(1) Such levels are under the control of the assisted living community facility.

(2) Any hazardous spaces are protected in accordance with Section 8.7.

35.1.6.3 All buildings with more than one level below the level of exit discharge shall have all such lower levels separated from the level of exit discharge by not less than Type II (111) construction.

35.1.6.4 Interior nonbearing walls in buildings of Type I or Type II construction shall be constructed of noncombustible or limited-combustible materials, unless otherwise permitted by 20.1.6.4.

35.1.6.5 Any existing building of Type II (111), Type III (211), or Type V (111) construction shall be permitted however, occupants requiring assistance with evacuation from others shall be limited to occupancy on the first and second stories), unless one of the following criteria is met:

(1) A horizontal exit in combination with a smoke barrier is provided on the third and fourth floor; or,

(2) The building is protected throughout by an approved supervised automatic sprinkler system installed in accordance with 9.7.1.1(1), and provided with quick response or residential sprinklers throughout.

35.1.6.6 Interior nonbearing walls required to have a minimum 2-hour fire resistance rating shall be permitted to be fire-retardant-treated wood enclosed within noncombustible or limited-combustible materials, provided that such walls are not used as shaft enclosures.

35.1.6.7 Fire-retardant-treated wood that serves as supports for the installation of fixtures and equipment shall be permitted to be installed behind noncombustible or limited-combustible sheathing.

35.1.6.8 **Changes in Group Evacuation Capability.** A change in evacuation capability to a slower level shall be permitted where the facility conforms to one of the following requirements:

(1) The requirements of Chapter 34 applicable to new assisted living community facilities.

(2) The requirements of Chapter 35 applicable to existing assisted living community facilities for the new evacuation capability, provided that the building is protected throughout by an approved, supervised automatic sprinkler system complying with 35.5 or an increase in staffing to achieve evacuation of all residents to a point of safety within 13 minutes.

35.1.6.9 **Requirements Based on Evacuation Capability.**

35.1.6.9.1 **Prompt and Slow.** Facilities classified as prompt or slow evacuation capability, other than those meeting the requirement of 35.1.6.9.1.1 or 35.1.6.9.1.2, shall comply with the requirements of Chapter 35, as indicated for the appropriate evacuation capability.

35.1.6.9.1.1 Facilities where the authority having jurisdiction has determined equivalent safety is provided in accordance with Section 1.4 shall not be required to comply with the requirements of Section 35, as indicated for the appropriate evacuation capability.

35.1.6.9.1.2 Facilities that were previously approved as complying with 35.1.6.9.2 shall not be required to comply with the requirements of Section 35, as indicated for the appropriate evacuation capability.

35.1.6.9.2 **Impractical.** Facilities classified as impractical evacuation capability shall meet the requirements of Chapter 35 for impractical evacuation capability, or the requirements for limited care facilities in Chapter 19, unless the authority having jurisdiction has determined equivalent safety is provided in accordance with Section 1.4.

35.1.6.9.3 **Evacuation Capability Determination.**

35.1.6.9.3.1 Facility management shall furnish to the authority having jurisdiction, upon request, an evacuation capability determination using a procedure acceptable to the authority having jurisdiction.

35.1.6.9.3.2 Where the documentation required by 35.1.6.9.3.1 is not furnished, the evacuation capability shall be classified as impractical.

35.1.7 **Occupant Load.** The occupant load, in number of persons for whom means of egress and other provisions are required, shall be determined on the basis of the occupant load factors of Table 7.3.1.2 that are characteristic of the use of the space, or shall be determined as the maximum probable population of the space under consideration, whichever is greater.

35.2 **Means of Egress Requirements.**

35.2.1 **General.**

35.2.1.1 Means of egress from resident rooms and resident dwelling units to the outside of the building shall be in accordance with Chapter 7 and this chapter.

35.2.1.2 Means of escape within the resident room or resident dwelling unit shall comply with Section 24.2 for one- and two-family dwellings.

35.2.1.3 No means of escape or means of egress shall be considered as complying with the minimum criteria for acceptance, unless emergency evacuation drills are regularly conducted using that route in accordance with the requirements of 35.6.3.

35.2.1.4 No assisted living community occupancy shall have its sole means of egress or means of escape pass through any nonresidential or non-health care occupancy in the same building.

35.2.1.5 All means of egress from assisted living community occupancies that traverse non-assisted living community spaces shall conform to the requirements of this Code for assisted living community occupancies, unless otherwise permitted by 35.2.1.6.

35.2.1.6 Exit through a horizontal exit into other contiguous occupancies that does not conform to assisted living community egress provisions but do comply with requirements set forth in the appropriate occupancy chapter of this Code shall be permitted, provided that the occupancy does not contain high hazard contents.

35.2.1.7 Egress provisions for areas of assisted living community facilities that correspond to other occupancies shall meet the corresponding requirements of this Code for such occupancies, and, where the clinical needs of the residents necessitate the locking of means of egress, staff shall be present for the supervised release of occupants during all times of use.

35.2.2 **Means of Egress Components.**

35.2.2.1 **Components Permitted.** Components of means of egress shall be limited to the types described in 35.2.2.2 through 35.2.2.10.

35.2.2.2 **Doors.** Doors in means of egress shall meet all of the following criteria:

(1) Doors complying with 7.2.1 shall be permitted.

(2) Doors within individual rooms and suites of rooms shall be permitted to be swinging or sliding.

(3) No door in any means of egress, other than those meeting the requirement of 35.2.2.2.1 or 35.2.2.2.2, shall be equipped with a lock or latch that requires the use of a tool or key from the egress side.

35.2.2.2.1 Delayed-egress locks in accordance with 7.2.1.6.1 shall be permitted.

35.2.2.2.2 Access-controlled egress doors in accordance with 7.2.1.6.2 shall be permitted.

35.2.2.2.3 Doors that are located in the means of egress from individual resident bedrooms or private living units shall be permitted to have locks where the clinical needs of a resident require specialized protective security measures provided that staff can readily unlock doors at all times in accordance with 35.2.2.2.4.

35.2.2.2.4 Doors that are located in the means of egress and are permitted to be locked under other provisions of 35.2.2.2.3 shall comply with both of the following:

(1) Provisions shall be made for the rapid removal of occupants by means of one of the following:

(a) Remote control of locks from within the locked smoke compartment.

(b) Keying of all locks to keys carried by staff at all times.

(c) Other such reliable means available to the staff at all times.

(2) Only one locking device shall be permitted on each door.

35.2.2.2.5 Doors located in the means of egress that are permitted to be locked under other provisions of Chapter 35, other than those meeting the requirement of 35.2.2.2.1 or 35.2.2.2.2, shall have adequate provisions made for the rapid removal of occupants by means such as remote control of locks, keying of all locks to keys carried by staff at all times, or other such reliable means available to staff at all times.

35.2.2.2.6 Only one such locking device, as described in 35.2.2.2.5, shall be permitted on each door.

35.2.2.3 Stairs complying with 7.2.2 shall be permitted.

35.2.2.4 Smokeproof enclosures complying with 7.2.3 shall be permitted.

35.2.2.5 Horizontal exits complying with 7.2.4 shall be permitted.

35.2.2.6 Ramps complying with 7.2.5 shall be permitted.

35.2.2.7 Exit passageways complying with 7.2.6 shall be permitted.

35.2.2.8 Fire escape ladders complying with 7.2.9 shall be permitted.

35.2.2.9 Alternating tread devices complying with 7.2.11 shall be permitted.

35.2.2.10 Areas of refuge complying with 7.2.12 shall be permitted.

35.2.3 **Capacity of Means of Egress.**

35.2.3.1 The capacity of means of egress shall be in accordance with Section 7.3.

35.2.3.2 Street floor exits shall be sufficient for the occupant load of the street floor plus the required capacity of stairs and ramps discharging onto the street floor.

35.2.3.3 The width of corridors serving an occupant load of 50 or more in facilities having prompt or slow evacuation capability, and all facilities having impractical evacuation capability, shall be sufficient for the occupant load served but shall be not less than 60 in. (1525 mm).

35.2.3.4 The width of corridors serving an occupant load of less than 50 in facilities having prompt or slow evacuation capability shall be not less than 44 in. (1120 mm).

35.2.4 **Number of Means of Egress.**

35.2.4.1 Means of egress shall comply with the following, except as otherwise permitted by 35.2.4.2:

(1) The number of means of egress shall be in accordance with 7.4.1.1 and 7.4.1.3 through 7.4.1.5.

(2) Not less than two separate exits shall be provided on every story.

(3) Not less than two separate exits shall be accessible from every part of every story.

35.2.4.2 Exit access, as required by 35.2.4.1(3), shall be permitted to include a single exit access path for the distances permitted as common paths of travel by 35.2.5.2 and 35.2.5.3.

35.2.5 **Arrangement of Means of Egress.**

35.2.5.1 **General.** Access to all required exits shall be in accordance with Section 7.5.

35.2.5.2 Dead-end corridors shall not exceed 35 ft. (15 m).

35.2.5.3 Common paths of travel shall not exceed 110 ft. (35.5 m).

35.2.6 **Travel Distance to Exits.**

35.2.6.1 Travel distance from the door within a room, suite, or living unit to a corridor door shall not exceed 75 ft. (23 m) in buildings not protected throughout by an approved automatic sprinkler system in accordance with 35.3.5.

35.2.6.2 Travel distance from any point within a room, suite, or living unit to a corridor door shall not exceed 125 ft. (38 m) in buildings protected throughout by an approved automatic sprinkler system in accordance with 35.3.5.

35.2.6.3 Travel distance from the corridor door of any room to the nearest exit shall be in accordance with 35.2.6.2.1 or 35.2.6.2.2.

35.2.6.3.1 Travel distance from the corridor door of any room to the nearest exit, measured in accordance with Section 7.6, shall not exceed 200 ft. (61 m).

35.2.6.3.2 Travel distance to exits shall not exceed 200 ft. (61m) for exterior ways of exit access arranged in accordance with 7.5.3.

35.2.7 Exit discharge shall comply with Section 7.7.

35.2.8 Means of egress shall be illuminated in accordance with Section 7.8.

35.2.9 Emergency lighting in accordance with Section 7.9 shall be provided.

35.2.10 Means of egress shall be marked in accordance with Section 7.10

35.2.11 **Special Means of Egress Features.** Lockups in residential assisted living community occupancies shall comply with the requirements of 23.4.6.

35.3 **Protection.**

35.3.1 **Protection of Vertical Openings.**

35.3.1.1 Vertical openings shall be enclosed or protected in accordance with Section 8.6.

35.3.1.2 Unenclosed vertical openings in accordance with 8.6.9.1 shall be permitted.

35.3.1.3 No floor below the level of exit discharge and used only for storage, heating equipment, or purposes other than residential occupancy shall have unprotected openings to floors used for residential occupancy.

35.3.2 **Protection from Hazards.**

35.3.2.1 Rooms containing high-pressure boilers, refrigerating machinery, transformers, or other service equipment subject to possible explosion shall not be located directly under or adjacent to exits, and such rooms shall be effectively separated from other parts of the building as specified in Section 8.7.

35.3.2.2 Hazardous areas, which shall include, but shall not be limited to, the following, shall be separated from other parts of the building by construction having a minimum 1-hour fire resistance rating, with communicating openings protected by approved self-closing fire doors and be equipped with automatic fire-extinguishing systems:

(1) Boiler and heater rooms

(2) Laundries

(3) Repair shops

(4) Rooms or spaces used for storage of combustible supplies and equipment in quantities deemed hazardous by the authority having jurisdiction

Exception to (1): Rooms enclosing air handling equipment, compressor equipment, furnaces or other heating equipment with a total aggregate input rating less than 200,000 BTU input. Such rooms shall not be used for any combustible storage. A minimum of 30 inches (0.76 m) unobstructed access shall be provided and maintained to equipment and electrical or emergency control panels or devices for emergency response purposes.

35.3.3 **Interior Finish.**

35.3.3.1 **General.** Interior finish shall be in accordance with Section 10.2.

35.3.3.2 Interior wall and ceiling finish materials complying with Section 10.2 shall be in accordance with the following:

(1) Exit enclosures - Class A

(2) Lobbies and corridors - Class B

(3) Rooms and enclosed spaces - Class B

35.3.3.3 **Interior Floor Finish.**

35.3.3.3.1 Interior floor finish shall comply with Section 10.2.

35.3.3.3.2 Interior floor finish in exit enclosures and exit access corridors and spaces not separated from them by walls complying with 35.3.6 shall be not less than Class II.

35.3.3.3.3 Interior floor finish shall comply with 10.2.7.1 or 10.2.7.2, as applicable.

35.3.4 **Detection, Alarm, and Communications Systems.**

35.3.4.1 **General.** A fire alarm system shall be provided in accordance with Section 9.6.

34.3.4.2 **Initiation.** The required fire alarm system shall be initiated by each of the following:

(1) Manual means in accordance with 9.6.2.

(2) Manual fire alarm box located at a convenient central control point under continuous supervision of responsible employees.

(3) Required automatic sprinkler system.

(4) Required smoke and heat detection systems, other than sleeping room smoke alarms.

35.3.4.3 **Annunciator Panel.** An annunciator panel, connected to the fire alarm system, shall be provided at a location readily accessible from the primary point of entry for emergency response personnel.

35.3.4.4 **Notification.**

35.3.4.4.1 **Occupant Notification.** Occupant notification shall be provided automatically, without delay, by internal audible alarm in accordance with 9.6.3.

35.3.4.4.2 **High-Rise Buildings.** High-rise buildings shall be provided with an approved emergency voice communication/alarm system in accordance with 11.8.4.

35.3.4.5 **Emergency Forces Notification.**

35.3.4.5.1 Fire department notification shall be accomplished in accordance with 9.6.4.

35.3.4.5.2 Where the existing fire alarm system does not provide for automatic emergency forces notification in accordance with 9.6.4, provisions shall be made for the immediate notification of the public fire department by either telephone or other means.

35.3.4.5.3 Where a new fire alarm system is installed, or the existing fire alarm system is replaced, emergency forces notification shall be provided in accordance with 9.6.4.

35.3.4.6 **Detection.**

35.3.4.6.1 **Smoke Alarms.** Smoke alarms shall be provided in accordance with 35.3.4.6.1.1, 35.3.4.6.1.2, or 35.3.4.6.1.3.

35.3.4.6.1.1 Each sleeping room shall be provided with an approved smoke alarm in accordance with 9.6.2.10 that is powered from the building electrical system.

35.3.4.6.1.2 Existing battery-powered smoke alarms, rather than building electrical service-powered smoke alarms, shall be accepted where, in the opinion of the authority having jurisdiction, the facility has demonstrated that testing, maintenance, and battery replacement programs ensure the reliability of power to the smoke alarms.

35.3.4.6.1.3 The provisions of 9.6.8.10.1 and 9.6.8.10.2.2 shall also apply.

35.3.4.7 **Smoke Detection Systems.**

35.3.4.7.1 All living areas, as defined in 3.3.24.5, and all corridors shall be provided with smoke detectors that comply with NFPA 72, National Fire Alarm and Signaling Code, and are arranged to initiate an alarm that is audible in all sleeping areas, as modified by 35.3.4.7.2.

35.3.4.7.2 Smoke detection systems shall not be required in unenclosed corridors, passageways, balconies, colonnades, or other arrangements with one or more sides along the long dimension fully or extensively open to the exterior at all times.

35.3.5 **Extinguishment Requirements.**

35.3.5.1 **General.** An automatic sprinkler system shall be installed in accordance with Section 9.7, as modified by 35.3.5.1.1.

35.3.5.1.1 In buildings four or fewer stories above grade plane, systems in accordance with NFPA 13R, Standard for the Installation of Sprinkler Systems in Residential Occupancies up to and Including Four Stories in Height, shall be permitted.

35.3.5.1.1.1 The exemptions found in NFPA 13R for the sprinkling all closets and bathrooms regardless of size or construction shall not be applicable to assisted living community occupancies under this chapter.

35.3.5.2 **Impractical Evacuation Capability.** All facilities having impractical evacuation capability shall be protected throughout by an approved, supervised automatic sprinkler system in accordance with 9.7.1.1(1) (full NFPA 13 System) or increase staffing to achieve evacuation of all residents to a point of safety within 13 minutes.

35.3.5.3 **High-Rise Buildings.** All high-rise buildings shall be protected throughout by an approved, supervised automatic sprinkler system in accordance with 35.3.5. Such systems shall initiate the fire alarm system in accordance with Section 9.6.

35.3.5.4 Attics shall be protected in accordance with 35.3.5.4.1 or 35.3.5.4.2

35.3.5.4.1 Attics or areas within attics used for living purposes, storage, or fuel-fired equipment shall be protected with automatic sprinklers that are part of the required, approved automatic sprinkler system in accordance with 9.7.1.1.

35.3.5.4.2 Attics not used for living purposes, storage, or fuel-fired equipment shall meet one of the following criteria:

(1) Attics shall be protected throughout by a heat detection system arranged to activate the building fire alarm system in accordance with Section 9.6.

(2) Attics shall be protected with automatic sprinklers that are part of the required, approved automatic sprinkler system in accordance with 9.7.1.1.

35.3.5.5 Automatic sprinkler systems shall be supervised in accordance with Section 9.7.

35.3.5.6 Portable fire extinguishers shall be provided in accordance with 9.9.

35.3.6 **Corridors and Separation of Sleeping Rooms.**

35.3.6.1 Access shall be provided from every resident use area to not less than one means of egress that is separated from all other rooms or spaces by walls complying with 35.3.6.1.1, 35.3.6.1.3 or 35.3.6.1.4.

35.3.6.1.1 Sleeping rooms shall be separated from corridors, living areas, kitchens and all other areas by walls having a minimum 1/2-hour fire resistance rating.

35.3.6.1.2 Prompt evacuation capability facilities in buildings two or fewer stories in height, where not less than one required means of egress from each sleeping room provides a path of travel to the outside without traversing any corridor or other spaces exposed to unprotected vertical openings, living areas, and kitchens, shall not be required to comply with 35.3.6.1.1.

35.3.6.1.3 Rooms or spaces, other than sleeping rooms and hazardous areas, shall be separated from corridors by smoke partitions in accordance with Section 8.4, and the provisions of 8.4.3.5 shall not apply.

35.3.6.2 Except for Hazardous areas, in buildings protected throughout by an approved automatic sprinkler system in accordance with 9.7.1.1(1), walls may be smoke partitions in accordance with Section 8.4, and the provisions of 8.4.3.5 shall not apply.

35.3.6.3 Hazardous areas shall be separated from corridors in accordance with 35.3.2.

35.3.6.4 Doors in walls required by 35.3.6.1 or 35.3.6.2 shall comply with 35.3.6.4.1 or 35.3.6.4.2.

35.3.6.4.1 Doors shall have a minimum 20-minute fire protection rating.

35.3.6.4.2 Solid-bonded wood-core doors of not less than 1 3/4 in. (44 mm) thickness shall be permitted to continue in use.

35.3.6.5 Doors in walls required by 35.3.6.1 and 35.3.6.2 shall comply with 35.3.6.5.1 and 35.3.6.6.

35.3.6.5.1 Door-closing devices shall not be required on doors in corridor wall openings, other than those serving exit enclosures, smoke barriers, enclosures of vertical openings, and hazardous areas.

35.3.6.6 No louvers, transfer grilles, operable transoms, or other air passages, other than properly installed heating and utility installations, shall penetrate the walls or doors specified in 34.3.6.

35.3.7 Subdivision of Building Spaces. The requirements of

35.3.7.1 through 35.3.7.6 shall be met for all sleeping floors, unless otherwise permitted by 35.3.7.7.

35.3.7.1 Every sleeping room floor shall be divided into not less than two smoke compartments of approximately the same size, with smoke barriers in accordance with Section 8.5, unless otherwise indicated in 35.3.7.4.

35.3.7.1.1 Smoke barriers shall not be required in buildings having prompt or slow evacuation capability where each sleeping room is provided with exterior ways of exit access arranged in accordance with 7.5.3.

35.3.7.2 Each smoke compartment shall have an area not exceeding 22,500 ft2 (2100 m2).

35.3.7.3 The travel distance from any point to reach a door in the required smoke barrier shall be limited to a distance of 200 ft. (61 m).

35.3.7.3.1 Additional smoke barriers shall be provided such that the travel distance from a sleeping room corridor door to a smoke barrier shall not exceed 150 ft. (46 m).

35.3.7.4 Smoke barrier subdivision requirements shall not apply to any of the following:

(1) Stories that do not contain an assisted living community occupancy located above the assisted living community occupancy.

(2) Stories that do not contain an assisted living community occupancy and that are separated from the assisted living community occupancy by a 2-hour fire barrier complying with Section 8.3.

(3) Stories that do not contain an assisted living community occupancy and that are more than one story below the assisted living community occupancy.

(4) open parking structures protected throughout by an approved, supervised automatic sprinkler system in accordance with 9.7.1.1(1).

35.3.7.5 Smoke barriers shall be constructed in accordance with Section 8.5 and shall have a minimum 1-hour fire resistance rating, unless they meet the requirement of 35.3.7.9 or 35.3.7.10.

35.3.7.6 Where an atrium is used, smoke barriers shall be permitted to terminate at an atrium wall constructed in accordance with 8.6.7(1)(c), in which case not less than two separate smoke compartments shall be provided on each floor.

35.3.7.7 Dampers shall not be required in duct penetrations of smoke barriers in fully ducted heating, ventilating, and air-conditioning systems.

35.3.7.8 Not less than 15 net ft^2 (1.4 net m^2) per resident shall be provided within the aggregate area of corridors, lounge or dining areas, and other low hazard areas on each side of the smoke barrier.

35.3.7.9 On stories not housing residents, not less than 6 net ft^2 (0.56 net m^2) per occupant shall be provided on each side of the smoke barrier for the total number of occupants in adjoining compartments.

35.3.7.10 Doors in smoke barriers shall be substantial doors, such as 1 3/4 in. (44 mm) thick, solid-bonded wood-core doors, or shall be of construction that resists fire for a minimum of 20 minutes, and shall meet all the following requirements:

(1) Nonrated factory- or field-applied protective plates, unlimited in height, shall be permitted.

(2) Cross-corridor openings in smoke barriers shall be protected by a pair of swinging doors or a horizontal-sliding door complying with 7.2.1.13.

(3) Swinging doors shall be arranged so that each door swings in a direction opposite from the other.

35.3.7.11 Doors in smoke barriers shall comply with 8.5.4 and all of the following:

(1) The doors shall be self closing or automatic closing in accordance with 7.2.1.8.

(2) Positive latching hardware shall not be required.

(3) Stops shall be required at the head and sides of door frames in smoke barriers.

(4) Rabbets, bevels, or astragals shall be required at the meeting edges of pairs of doors.

(5) Center mullions shall be prohibited

35.3.7.12 Vision panels consisting of fire rated glazing or wired glass panels in approved frames shall be provided in each cross-corridor swinging door and in each cross-corridor horizontal-sliding door in a smoke barrier.

35.3.8 Cooking Facilities. Cooking facilities, other than those within individual residential units, shall be protected in accordance with 9.2.3.

35.3.9 **Standpipes.**

35.3.9.1 **General.** Where required, standpipe and hose systems shall be installed and maintained in accordance with 9.10.

35.4 **Special Provisions.**

35.4.1 **High-Rise Buildings.** High-rise buildings shall comply with Section 11.8.

35.5 **Building Services.**

35.5.1 Utilities shall comply with 9.1.

35.5.1.1 Existing installations shall be permitted to be continued in service, provided the system does not present a serious hazard to life.

35.5.1.2 Heating, ventilating, and air-conditioning equipment shall comply with Section 9.2.

35.5.1.3 No stove or combustion heater shall be located such that it blocks escape in case of fire caused by the malfunction of the stove or heater.

35.5.1.4 Unvented fuel-fired heaters shall not be used in any assisted living community occupancy.

35.5.2 Elevators, Dumbwaiters, and Vertical Conveyors. Elevators, dumbwaiters, and vertical conveyors shall comply with Section 9.4.

35.6.2.1 In high-rise buildings, one elevator shall be provided with a protected power supply and shall be available for use by the fire department in case of emergency.

35.5.3 Rubbish Chutes, Incinerators, and Laundry Chutes. Rubbish chutes, incinerators, and laundry chutes shall comply with Section 9.5.

35.7 Operating Features.

35.7.1 Emergency Planning and Preparedness and Emergency Egress and Relocation Drills. Assisted living community facilities shall develop policies, procedures, plans, staff training, safety practices, and emergency egress and relocation drills for the protection of life prior to and during an emergency condition accordance with Sections 4.7, 4.8 and 4.9.

35.7.3 **Resident Training.**

35.7.3.1 All residents participating in the emergency plan shall be trained in the proper actions to be taken in the event of fire.

35.7.3.2 The training required by 35.7.3.1 shall include actions to be taken if the primary escape route is blocked.

35.7.3.3 If the resident is given rehabilitation or habilitation training, training in fire prevention and the actions to be taken in the event of a fire shall be a part of the training program.

35.7.3.4 Residents shall be trained to assist each other in case of fire to the extent that their physical and mental abilities permit them to do so without additional personal risk.

35.7.4 Emergency Egress and Relocation Drills. Emergency egress and relocation drills shall be conducted in accordance with 35.7.4.1 through 35.7.4.6.

35.7.4.1 Emergency egress and relocation drills shall be conducted not less than once per quarter on each shift at alternating times. It is intended that staff and residents be trained and drilled based on fire and other emergencies that may occur during the periods of lowest staffing levels. This may require more than one drill per quarter on shifts with the lowest staffing levels.

35.7.4.2 The emergency drills shall be permitted to be announced to the residents in advance.

35.7.4.3 The drills shall involve the training of residents for the eventual actual evacuation of all residents to an assembly point, as specified in the emergency plan, and shall provide residents with experience in egressing through all exits and means of escape required by this Code.

35.7.4.3.1. The assembly point shall be a place outside of the building and shall be located a safe distance from the building being evacuated so as to avoid interference with fire department operations. A refuge area within a smoke compartment in buildings separated by smoke barriers shall be considered a temporary assembly point as part of a staged evacuation.

35.7.4.3.2. Buildings with smoke compartments shall be allowed to train residents to temporarily escape in a staged evacuation to another smoke compartment separated by smoke barriers. Residents shall be allowed to complete the training exercise on the other side of an adjacent smoke barrier. Residents shall still be trained to eventually complete building evacuation during an actual emergency evacuation. Residents shall be required to participate in one emergency egress and relocation drill per year where they continue to an assembly point outside of the building.

35.7.4.3.3. Residents, as a group, shall be required to complete the evacuation drill to an exit or across a smoke barrier in less than 13 minutes or shall be required to change its group evacuation capability and comply with Section 35.1.6.8.

35.7.4.4 Exits and means of escape not used in any drill shall not be credited in meeting the requirements of this Code for assisted living community facilities.

35.7.4.5 Actual exiting from windows shall not be required to comply with 35.7.3; opening the window and signaling for help shall be an acceptable alternative.

35.7.4.6 If the assisted living community facility has an evacuation capability classification of impractical, those residents who cannot meaningfully assist in their own evacuation or who have special health problems shall not be required to actively participate in the drill, or be moved during the drill to safe areas or to the exterior of the building.

35.7.5 Smoking.

35.7.5.1 Smoking regulations shall be adopted by the administration of assisted living community occupancies.

35.7.5.2 Where smoking is permitted, noncombustible safety-type ashtrays or receptacles shall be provided in convenient locations.

35.7.6 Furnishings, Mattresses, and Decorations.

35.7.6.1 New draperies, curtains, and other similar loosely hanging furnishings and decorations in common areas of assisted living community facilities shall be in accordance with the provisions of 10.3.1.

35.7.6.2 New upholstered furniture within assisted living community facilities shall comply with 35.7.6.2.1 or 35.7.6.2.2.

35.7.6.2.1 New upholstered furniture shall be tested in accordance with the provisions of 10.3.2.1(1) and 10.3.3.

35.7.6.2.2 Upholstered furniture belonging to residents in sleeping rooms shall not be required to be tested, provided that a smoke alarm is installed in such rooms; battery-powered single-station smoke alarms shall be permitted in such rooms.

35.7.6.3 Newly introduced mattresses within assisted living community facilities shall comply with 35.7.6.3.1 or 35.7.6.3.2.

35.7.6.3.1 Newly introduced mattresses shall be tested in accordance with the provisions of 10.3.2.2 and 10.3.4.

35.7.6.3.2 Mattresses belonging to residents in sleeping rooms shall not be required to be tested, provided that a smoke alarm is installed in such rooms; battery-powered single-station smoke alarms shall be permitted in such rooms.

35.7.7 Staff. Staff shall be on duty and in the facility at all times when residents requiring evacuation assistance are present.

35.7.8 Inspection of Door Openings. Door assemblies for which the door leaf is required to swing in the direction of egress travel shall be inspected and tested not less than annually in accordance with 7.2.1.15.

(dd) **Modification to Chapter 36:**

1. Add a new subparagraph 36.3.5.1.1. to read as follows:

36.3.5.1.1 Individual tenant spaces located in covered mall buildings shall be provided with electrically supervised control valves. Such control valves shall be located off supply mains to control each individual tenant space.

36.3.5.1.1.1 Multiple tenant spaces shall be permitted to be controlled by one control valve provided the total area covered by the single valve does not exceed 7,500 square feet (696.8 sq. m).

2. Delete subparagraph 36.4.5.6 in its entirety and substitute in its place the following:

36.4.5.6 **Emergency Planning and Preparedness.** Bulk merchandising shall comply with Section 36.7.1.

4. Delete subsections 36.7.1 in its entirety and substitute in their place the following:

36.7.1 **Emergency Planning and Preparedness.** Mercantile occupancies (Group M) shall develop policies, procedures, plans, staff training, and safety practices for the protection of life prior to and during an emergency condition in accordance with Sections 4.7, 4.8, and 4.9.

(ee) **Modification to Chapter 37:**

1. Delete Subsection 37.4.5.6 in its entirety and substitute in its place the following:

37.4.5.6 Emergency Planning and Preparedness. Bulk merchandising retail buildings shall comply with 37.7.1.

2. Delete subsections 37.7.1 and 37.7.2, 37.7.3 in their entirety and substitute in their place the following:

37.7.1 **Emergency Planning and Preparedness.** Mercantile occupancies (Group M) shall develop policies, procedures, plans, staff training, and safety practices for the protection of life prior to and during an emergency condition in accordance with 4.7, 4.8, and 4.9.

(ff) **Modification to Chapter 38:**

1. Delete subparagraph 3 8.2.2.2.6 in its entirety and substitute in its place the following:

38.2.2.2.6 Delayed egress locks complying with 7.2.1.6.1 shall be permitted, provided, however, not more than one such device shall be permitted in the means of egress path involved.

2. Delete subsection 38.7.1 in its entirety and substitute in its place the following:

38.7.1 **Emergency Planning and Preparedness**. Business occupancies (Group B) shall develop policies, procedures, plans, staff training, and safety practices for the protection of life prior to and during an emergency condition. Such policies, procedures, plans, staff training, and safety practices shall be developed and implemented in accordance with applicable provisions of Chapter 4 of the International Fire Code.

(gg) **Modification to Chapter 39:**

1. Delete subsection 39.7.1 in its entirety and substitute in its place the following:

39.7.1 **Emergency Planning and Preparedness.** Business occupancies (Group B) shall develop policies, procedures, plans, staff training, and safety practices for the protection of life prior to and during an emergency condition. Such policies, procedures, plans, staff training, and safety practices shall be developed and implemented in accordance with applicable provisions of Chapter 4 of the International Fire Code.

(hh) **Modification to Chapter 40:**

1. Delete subsection 40.3.5 in its entirety and insert in its place the following:

40.3.5 Extinguishment Requirements.

40.3.5.1 **Portable Fire Extinguishers.** Portable fire extinguishers shall be provided in all industrial occupancies classified as Group F or Group H occupancies as in the International Fire Code, as adopted by Subject 120-3-3 of the Rules and Regulations of the Safety Fire Commissioner, on each floor in accordance with 9.9 of this Code.

40.3.5.2 **Automatic fire suppression systems.** Automatic fire suppression systems shall be installed in industrial occupancies as required by the International Building Code, adopted by the Georgia Department of Community Affairs, with regard to construction type, area and height requirements, and other features as set forth in Table 1.4.4, CODES REFERENCE GUIDE. In addition, automatic fire suppression systems, or specialized automatic fire suppression systems, as required by the fire code authority having jurisdiction in accordance with the International Fire Code or other codes and standards adopted by the Georgia Safety Fire Commissioner, shall be installed and maintained in accordance with the provisions of the applicable codes and standards.

2. Add new section 40.8 to read as follows:

40.8 **Emergency Planning and Preparedness.** Industrial occupancies otherwise classified under Group F or Group H in the International Fire Code, shall develop policies, procedures, plans, staff training, and safety practices for the protection of life prior to and during an emergency condition. Such policies, procedures, plans, staff training, and safety practices shall be developed and implemented in accordance with applicable provisions of Chapter 4 of the International Fire Code, as adopted by Subject 120-3-3 of the Rules and Regulations of the Safety Fire Commissioner.

40.8.1 **Employee Training and Response Procedures.** Employees in the occupancies listed in Section 404.2 of the International Fire Code as adopted by Subject 120-3-3 of the Rules and Regulations of the Safety Fire

Commissioner, shall be trained in the fire emergency procedures described in their fire evacuation and life safety plans. Training shall be based on these plans and as described in Section 404.3 of the noted International Fire Code.

(ii) **Modification to Chapter 42:**

1. Delete subsection 42.3.5 in its entirety and substitute in its place the following:

42.3.5 Extinguishment Requirements.

42.3.5.1 **Portable Fire Extinguishers.** Portable fire extinguishers shall be provided in all storage occupancies in accordance with 9.9.

42.3.5.2 **Automatic fire suppression systems.** Automatic fire suppression systems shall be installed in storage occupancies as required by the International Building Code, adopted by the Georgia Department of Community Affairs, with regard to construction type, area and height requirements, and other features as set forth in Table 1.4.4, CODES REFERENCE GUIDE. In addition, automatic fire suppression systems, or specialized automatic fire suppression systems, as required by the fire code authority having jurisdiction in accordance with the International Fire Code or other codes and standards adopted by the Georgia Safety Fire Commissioner, shall be installed and maintained in accordance with the provisions of the applicable codes and standards.

2. Add a new Section 42.10 to read as follows:

42.10 Emergency Planning and Preparedness. Storage occupancies (Group S) and High Hazard occupancies (Group H) shall develop policies, procedures, plans, staff training, and safety practices for the protection of life prior to and during an emergency condition in accordance with Sections 4.7 through 4.9.

(jj) **Modifications to Chapter 43:**

1. Add a new subparagraph 43.1.4.5.1 to read as follows:

43.1.4.5.1 The provisions of 43.1.4.5 shall specifically apply to compliance with the International Fire Code (IFC) and other codes and standards promulgated and adopted with modifications by Subject 120-3-3 of the Rules and Regulations of the Safety Fire Commissioner. Accessibility issues shall be addressed in accordance with Subject 120-3-20 of the Rules and Regulations of the Safety Fire Commissioner. Where any of the provisions of this Code chapter require compliance with a building code, it shall be construed that compliance is required as applicable with the International Building Code (IBC), as adopted by the Georgia Board of Community Affairs.

2. Add a new paragraph 43.7.2.6 to read as follows:

43.7.2.6 The provisions of 43.7.2.4 and 43.7.2.5 shall be permitted to be modified by the authority having jurisdiction provided the intents and purposes of 102.3, 102.4, and 102.6 of the International Fire Code (IFC).

3. Delete subsections 43.10.1 and 43.10.2 in their entirety and substitute in their place the following:

43.10.1 **General Requirements.** Table 43.7.3 Hazard Categories and Classifications in 43.7.3 of this Code may be utilized as may be deemed appropriate by the authority having jurisdiction in the evaluation of historic buildings.

43.10.2 **Application.** The provisions of Chapter 43 shall be deemed as advisory and may be applied to buildings designated as historic to the degree deemed appropriate by the authority having jurisdiction, provided, however, the application of Chapter 43 and 43.10 provisions shall be coordinated as needed to ensure compliance with the requirements, intents, and purposes of 103.3, 102.4, and 102.6 of the International Fire Code (IFC) as adopted with modifications by Subject 120-3-3.

(kk) **Modifications to Annex A:**

1. Add a new (4) to A.3.3.196.7 to read as follows:

(4) Assisted Living Communities

2. Delete (5) from A.3.3.205.12 in its entirety and substitute in its place the following:

(5) Community Living Arrangements with five or more residents

3. Delete (1) from A.3.3.205.13 in its entirety and substitute in its place the following:

(1) One- and two-family dwellings and Community Living Arrangements with fewer than five residents (Chapter 24)

4. Add a new (4) to A.6.1.5.1 to read as follows:

(4) Assisted Living Communities

5. Delete (5) from A.6.1.9.1 in its entirety and substitute in its place the following:

(5) Community Living Arrangements with five or more residents

(73) **NFPA 101A, 2025 Edition, Guide on Alternative Approaches to Life Safety.**

(a) **Modifications to Chapter 1:**

1. Add a new Section 1.4 to read as follows:

1.4 This document is recognized strictly as a guide that may be used in evaluating systems or methods to determine equivalent compliance alternatives for buildings, structures and facilities which do not conform to the minimum requirements of the LSC adopted by this Chapter. Recommendations may be based on the document where deemed appropriate by the authority having jurisdiction. The document is not in the form of a stand-alone enforceable code or standard, however, it may be used in conjunction with and in the support of applicable provisions of other adopted codes or standards including the IFC adopted by this Chapter.

(74) **NFPA 102, 2021 Edition, Standard for Grandstands, Folding and Telescopic Seating, Tents, and Membrane Structures.**

1. The 2016 edition of NFPA 102 is NOT adopted. The basic provisions of this standard have been incorporated into the 2018 Edition of NFPA 101, Life Safety Code as adopted by this Subject 120-3-3. The provisions of the adopted Life Safety Code shall apply, as appropriate, to new and existing bleachers, grandstands, folding and telescopic seating. The Life Safety Code in coordination with the applicable provisions of the adopted edition of the International Fire Code shall apply to tents and membrane structures.

2. The following apply to facilities constructed prior to the effective date of the current Chapter of 120-3-3 Rules and regulations of the Safety Fire Commissioner.

(a) Facilities constructed after April 1, 1968 but before January 1, 1991, shall be permitted to comply with the 1978 edition of NFPA 102, Standard for Grandstands, Folding, and Telescopic Seating, Tents, and Membrane Structures.

(b) Facilities constructed after January 1, 1991, but before January 28, 1993, shall be permitted to comply with the 1986 edition of NFPA 102, Standard for Grandstands, Folding, and Telescopic Seating, Tents, and Membrane Structures.

(c) Facilities constructed after January 28, 1993, but before March 09, 2010, shall be permitted to comply with the 1992 edition of NFPA 102, Standard for Grandstands, Folding, and Telescopic Seating, Tents, and Membrane Structures.

(d) Facilities constructed after March 09, 2010, but before January 1, 2014, shall be permitted to comply with the 2006 edition of NFPA 102, which had been previously adopted.

(75) **NFPA 105, 2022 Edition, Smoke Door Assemblies and Other Opening Protectives.**

(a) **Modifications to Chapter 1:**

1. Add a new subsection 1.6 to read as follows:

1.6 This document is recognized strictly as a recommended practice that may be used in evaluating the use of door assemblies in openings where the passage of smoke is to be governed. Recommendations may be based on the document where deemed appropriate by the authority having jurisdiction. The document is not in the form of a stand-alone enforceable code or standard, however, it may be used in conjunction with and in the support of applicable provisions of other adopted codes or standards.

(76) **NFPA 110, 2025 Edition, Standard for Emergency and Standby Power Systems.**

No modifications.

(77) **NFPA 111, 2025 Edition, Standard on Stored Electrical Energy Emergency and Standby Power Systems.**

No modifications.

(78) **NFPA 115, 2020 Edition, Recommended Practice on Laser Fire Protection.**

(a) **Modifications to Chapter 1:**

1. Add a new subsection 1.1.3 to read as follows:

1.1.3 This document is recognized strictly as a recommended practice that may be used in evaluating the minimum fire protection criteria for the design, manufacture, installation, and use of lasers and associated equipment. Recommendations may be based on the document where deemed appropriate by the authority having jurisdiction. The document is not in the form of a stand-alone enforceable code or standard, however, it may be used in conjunction with and in the support of applicable provisions of other adopted codes or standards.

(79) **NFPA 120, Standard for Coal Preparation Plants.**

(a) Refer to Subject 120-3-24 for the application of this Standard and the adopted edition and any modifications.

(80) **NFPA 122, 2023 Edition, Standard for Fire Prevention and Control in Metal / Nonmetal Mining and Metal Mineral Processing Facilities.**

No modifications.

(81) **NFPA 130, 2023 Edition, Standard for Fixed Guideway Transit and Passenger Rail Systems.**

No modifications.

(82) **NFPA 140, 2024 Edition, Standard for Motion Picture and Television Production Studio Soundstages and Approved Facilities.**

No modifications.

(83) **NFPA 150, 2022 Edition, Standard on Fire and Life Safety in Animal Housing Facilities.**

No modifications.

(84) **NFPA 160, 2021 Edition, Standard for Flame Effects Before an Audience.**

No modifications.

(85) **NFPA 170, 2024 Edition, Standard for Fire Safety Symbols.**

No modifications.

(86) **NFPA 204, 2024 Edition, Standard for Smoke and Heat Venting.**

No modifications.

(87) **NFPA 211, 2024 Edition, Standard for Chimneys, Fireplaces, Vents, and Solid Fuel Burning Appliances.**

No modifications.

(88) **NFPA 214, 2021 Edition, Standard on Water-Cooling Towers.**

No modifications.

(89) **NFPA 220, 2024 Edition, Standard on Types of Building Construction.**

No modifications.

(90) **NFPA 221, 2024 Edition, Standard for Fire Walls and Fire Barrier Walls.**

No modifications.

(91) **NFPA 232, 2022 Edition, Standard for the Protection of Records.**

No modifications.

(92) **NFPA 241, 2022 Edition, Standard for Safeguarding Construction, Alteration, and Demolition Operations.**

No modifications.

(93) **NFPA 252, 2022 Edition, Standard Methods of Fire Tests of Door Assemblies.**

No modifications.

(94) **NFPA 253, 2023 Edition, Standard Method of Test for Critical Radiant Flux of Floor Covering Systems Using a Radiant Heat Energy Source.**

No modifications.

(95) **NFPA 257, 2022 Edition, Standard on Fire Test for Window and Glass Block Assemblies.**

No modifications.

(96) **NFPA 259, 2023 Edition, Standard Test Method for Potential Heat of Building Materials.**

No modifications.

(97) **NFPA 260, 2024 Edition, Standard Methods of Tests and Classification System for Cigarette Ignition Resistance of Components of Upholstered Furniture.**

No modifications.

(98) **NFPA 261, 2023 Edition, Standard Method of Test for Determining Resistance of Mock-Up Upholstered Furniture Material Assemblies to Ignition by Smoldering Cigarettes.**

No modifications.

(99) **NFPA 262, 2023 Edition, Standard Method of Test for Flame Travel and Smoke of Wires and Cables for Use in Air-Handling Spaces.**

No modifications.

(100) **NFPA 265, 2023 Edition, Standard Methods of Fire Tests for Evaluating Room Fire Growth Contribution of Textile Coverings on Full Height Panels and Walls.**

No modifications.

(101) **NFPA 268, 2022 Edition, Standard Test Method for Determining Ignitability of Exterior Wall Assemblies Using a Radiant Heat Energy Source.**

No modifications.

(102) **NFPA 269, 2022 Edition, Standard Test Method for Developing Toxic Potency Data for Use in Fire Hazard Modeling.**

No modifications.

(103) **NFPA 270, 2023 Edition, Standard Method of Test for Measurement of Smoke Obstruction Using a Conical Radiant Source in a Single Closed Chamber.**

No modifications.

(104) **NFPA 274, 2024 Edition, Standard Test Method to Evaluate Fire Performance Characteristics of Pipe Insulation.**

No modifications.

(105) **NFPA 275, 2022 Edition, Standard Test Method of Fire Tests for the Evaluation of Thermal Barriers Used Over Foam Plastic Insulation.**

No modifications.

(106) **NFPA 276, 2023 Edition, Standard Method of Fire Test for Determining the Heat Release Rate of Roofing Assemblies with Combustible Above-Deck Roofing Components.**

No modifications.

(107) **NFPA 285, 2023 Edition, Standard Method of Test for the Evaluation of Flammability Characteristics of Exterior Non-Load-Bearing Wall Assemblies Containing Combustible Components Using the Intermediate-Scale, Multistory Test Apparatus.**

No modifications.

(108) **NFPA 286, 2024 Edition, Standard Method of Fire Tests for Evaluating Contribution of Wall and Ceiling Interior Finish to Room Fire Growth.**

No modifications.

(109) **NFPA 287, 2022 Edition, Standard Methods for Measurement of Flammability of Materials in Cleanrooms Using a Fire Propagation Apparatus (FPA).**

No modifications.

(110) **NFPA 288, 2022 Edition, Standard Methods of Fire Tests of Floor Fire Door Assemblies Installed Horizontally in Fire Resistance-Rated Floor Systems.**

No modifications.

(111) **NFPA 289, 2023 Edition, Standard Method of Fire Test for Individual Fuel Packages.**

No modifications.

(112) **NFPA 291, 2025 Edition, Recommended Practice for Fire Flow Testing and Marking of Hydrants.**

(a) **Modifications to Chapter 1:**

1. Add a new subsection 1.1.1 to read as follows:

1.1.1 This document is recognized strictly as a recommended practice that may be used in evaluating the design of facilities for the emergency venting of products of combustion. Recommendations may be based on the document where deemed appropriate by the authority having jurisdiction. The document is not in the form of a stand-alone enforceable code or standard, however, it may be used in conjunction with and in the support of applicable provisions of other adopted codes or standards.

(113) **NFPA 302, 2025 Edition, Fire Protection Standard for Pleasure and Commercial Motor Craft.**

No modifications.

(114) **NFPA 303, 2021 Edition, Fire Protection Standard for Marinas and Boatyards.**

No modifications.

(115) **NFPA 306, 2024 Edition, Standard for the Control of Gas Hazards on Vessels.**

No modifications.

(116) **NFPA 307, 2021 Edition, Standard for the Construction and Fire Protection of Marine Terminals, Piers, and Wharves.**

No modifications.

(117) **NFPA 312, 2021 Edition, Standard for Fire Protection of Vessels During Construction, Repair, and Lay-Up.**

No modifications.

(118) **NFPA 318, 2022 Edition, Standard for the Protection of Semiconductor Fabrication Facilities.**

No modifications.

(119) **NFPA 326, Standard for the Safeguarding of Tanks and Containers for Entry, Cleaning or Repair.**

(a) Refer to Subject 120-3-11 for the adopted edition and any modifications.

(120) **NFPA 329, Recommended Practice for Handling Releases of Flammable and Combustible Liquids and Gases.**

(a) Refer to Subject 120-3-11 for adopted edition and any modifications.

(121) **NFPA 385, Standard for Tank Vehicles for Flammable and Combustible Liquids.**

(a) Refer to Subject 120-3-11 for the adopted edition and any modifications.

(122) **NFPA 400, 2025 Edition, Hazardous Materials Code.**

No modifications.

(123) **NFPA 407, Standard for Aircraft Fuel Servicing.**

(a) Refer to Subject 120-3-11 for the adopted edition and any modifications.

(124) **NFPA 408, 2022 Edition, Standard for Aircraft Hand Portable Fire Extinguishers.**

No modifications.

(125) **NFPA 409, 2022 Edition, Standard on Aircraft Hangars.**

No modifications.

(126) **NFPA 410, 2020 Edition, Standard on Aircraft Maintenance.**

No modifications.

(127) **NFPA 415, 2022 Edition, Standard on Airport Terminal Buildings, Fueling Ramp Drainage, and Loading Walkways.**

No modifications.

(128) **NFPA 418, 2024 Edition, Standard for Heliports.**

No modifications.

(129) **NFPA 423, 2022 Edition, Standard for Construction and Protection of Aircraft Engine Test Facilities.**

No modifications.

(130) **NFPA 440, 2024 Edition, Guide for Aircraft Rescue and Firefighting Operations and Airport/Community Emergency Planning.**

(a) **Modifications:**

1. Delete Subsection 1.3(1) in its entirety without substitution.

(131) **NFPA 484, Standard for Combustible Metals.**

(a) Refer to Subject 120-3-24 for the application of this standard and the adopted edition and any modifications.

(132) **NFPA 495, Explosive Materials Code.**

(a) Refer to Subject 120-3-24 for adopted edition and any modifications.

(133) **NFPA 496, Standard for Purged and Pressurized Enclosures for Electrical Equipment.**

(a) Refer to Subject 120-3-10 for adopted edition and any modifications.

(134) **NFPA 497, 2024 Edition, Recommended Practice for the Classification of Flammable Liquids, Gases, or Vapors and of Hazardous (Classified) Locations for Electrical Installations in Chemical Process Areas.**

(a) **Modifications to Chapter 1:**

1. Add a new paragraph 1.1.6 to read as follows:

1.1.6 This document is recognized strictly as a recommended practice for locations where flammable gases or vapors, flammable liquids, or combustible liquids are processed or handled and where their release into the atmosphere may result in their ignition by electrical systems or equipment. Recommendations may be based on the document where deemed appropriate by the authority having jurisdiction. The document is not in the form of a stand-alone enforceable code or standard, however, it may be used in conjunction with and in the support of applicable provisions of other adopted codes or standards.

(135) **NFPA 498, Standard for Safe Havens and Interchange Lots for Vehicles Transporting Explosives.**

(a) Refer to Subject 120-3-10 for adopted edition and any modifications.

(136) **NFPA 501A, 2021 Edition, Standard for Fire Safety Criteria for Manufactured Home Installations, Sites, and Communities.**

No modifications.

(137) **NFPA 502, 2023 Edition, Standard for Road Tunnels, Bridges, and Other Limited Access Highways.**

(a) **Modifications to Chapter 1:**

1. Add a new subsection 1.1.5 to read as follows:

1.1.5 This document is recognized strictly as a recommended practice for the evaluation of the design, construction, operation, maintenance, and fire protection of limited access highways, tunnels, bridges, elevated roadways, depressed roadways and air-right structures. Recommendations may be based on the document where deemed appropriate by the authority having jurisdiction. The document is not in the form of a stand-alone enforceable code or standard, however, it may be used in conjunction with and in the support of applicable provisions of other adopted codes or standards.

(138) **NFPA 505, 2024 Edition, Fire Safety Standard for Powered Industrial Trucks Including Type Designations, Areas of Use, Conversions, Maintenance, and Operations.**

No modifications.

(139) **NFPA 520, 2021 Edition, Standard on Subterranean Spaces.**

No modifications.

(140) **NFPA 551, 2021 Edition, Standard on Evaluation of Fire Risk Assessments.**

No modifications.

(141) **NFPA 555, 2021 Edition, Guide on Methods for Evaluating Potential for Room Flashover.**

(a) **Modifications to Chapter 1:**

1. Add a new paragraph 1.1.3 to read as follows:

1.1.3 This document is recognized strictly a guide for evaluating the potential for room flashover from fire involving the contents, furnishings, and the interior finish of a room. Recommendations may be based on the document where deemed appropriate by the authority having jurisdiction. The document is not in the form of a stand-alone enforceable code or standard, however, it may be used in conjunction with and in the support of applicable provisions of other adopted codes or standards.

(142) **NFPA 557, 2023 Edition, Standard for Determination of Fire Loads for Use in Structural Fire Protection Design.**

No modifications.

(143) **NFPA 600, 2020 Edition, Standard on Industrial Fire Brigades.**

(a) **Modifications to Chapter 1:**

1. Add a new Subsection 1.1.3 to read as follows:

1.1.3 This document is recognized as a recommended practice for the establishment of the minimum requirements for organizing, operating, training and equipping industrial fire brigades. Recommendations may be based on the document where deemed appropriate by the authority having jurisdiction. The document is not in the form of a stand-alone enforceable code or standard, however, it may be used in conjunction with and in the support of applicable provisions of other adopted codes or standards.

(144) **NFPA 652, Standard on Fundamentals of Combustible Dust.**

(a) Refer to Subject 120-3-24 for the application of this Standard and the adopted edition and any modifications.

(145) **NFPA 654, Standard for the Prevention of Fire and Dust Explosions from Manufacturing, Processing, and Handling of Combustible Particulate Solids.**

(a) Refer to Subject 120-3-24 for the application of this Standard and the adopted edition and any modifications.

(146) **NFPA 655, Standard for Prevention of Sulfur Fires and Explosions.**

(a) Refer to Subject 120-3-24 for the application of this Standard and the adopted edition and any modifications.

(147) **NFPA 664, Standard for the Prevention of Fires and Explosions in Wood Processing and Woodworking Facilities.**

(a) Refer to Subject 120-3-24 for the application of this Standard and the adopted edition and any modifications if Standard industry code is specified in paragraph 1(b) of Rule 120-3-24-.02. All other applications shall be as specified in the 2007 edition of this standard without modification.

(148) **NFPA 701, 2023 Edition, Standard Methods of Fire Tests for Flame Propagation of Textiles and Films.**

No modifications.

(149) **NFPA 703, 2024 Edition, Standard for Fire-Retardant-Treated Impregnated Wood and Fire-Retardant Coatings for Building Materials.**

No modifications.

(150) **NFPA 704, 2022 Edition, Standard System for the Identification of the Hazards of Materials for Emergency Response.**

No modifications.

(151) **NFPA 705, 2023 Edition, Recommended Practice for a Field Flame Test for Textiles and Films.**

No modifications.

(152) **NFPA 715, 2023 Edition, Standard for the Installation of Fuel Gases Detection and Warning Equipment**

No modifications.

(153) **NFPA 750, 2023 Edition, Standard on Water Mist Fire Protection Systems.**

No modifications.

(154) **NFPA 770, 2021 Edition, Standard on Hybrid (Water and Inert Gas) Fire Extinguishing Systems.**

No modifications.

(155) **NFPA 780, 2023 Edition, Standard for the Installation of Lighting Protection Systems.**

No modifications.

(156) **NFPA 790, 2024 Edition, Standard for Competency of Third Party Field Evaluation Bodies.**

No modifications.

(157) **NFPA 791, 2024 Edition, Recommended Practice and Procedures for Unlabeled Electrical Equipment Evaluation.**

No modifications.

(158) **NFPA 801, 2025 Edition, Standard for Fire Protection for Facilities Handling Radioactive Materials.**

No modifications.

(159) **NFPA 804, 2020 Edition, Standard for Fire Protection for Advanced Light Water Reactor Electric Generating Plants.**

No modifications.

(160) **NFPA 805, 2020 Edition, Performance-Based Standard for Fire Protection for Light Water Reactor Electric Generating Plants.**

No modifications.

(161) **NFPA 806, 2020 Edition, Performance-Based Standard for Fire Protection for Advanced Nuclear Reactor Electric Generating Plants Change Process.**

No modifications.

(162) **NFPA 820, 2024 Edition, Standard for Fire Protection in Wastewater Treatment and Collection Facilities.**

No modifications.

(163) **NFPA 850, 2020 Edition, Recommended Practice for Fire Protection for Electric Generating Plants and High Voltage Direct Current Converter Stations.**

(a) **Modifications to Chapter 1:**

1. Add a new subsection 1.1.1 to read as follows:

1.1.1 This document is recognized strictly a recommended practice for fire prevention and fire protection for electric generating plants and high voltage direct current converter stations except as specified in 1.1. Recommendations may be based on the document where deemed appropriate by the authority having jurisdiction. The document is not in the form of a stand-alone enforceable code or standard, however, it may be used in conjunction with and in the support of applicable provisions of other adopted codes or standards.

(164) **NFPA 851, 2010 Edition, Recommended Practice for Fire Protection for Hydroelectric Generating Plants.**

(a) **Modifications to Chapter 1:**

1. Add a new subsection 1.1.1 to read as follows:

1.1.1 This document is recognized strictly a recommended practice for fire prevention and fire protection for hydroelectric generating plants. Recommendations may be based on the document where deemed appropriate by the authority having jurisdiction. The document is not in the form of a stand-alone enforceable code or standard, however, it may be used in conjunction with and in the support of applicable provisions of other adopted codes or standards.

(165) **NFPA 853, 2020 Edition, Standard for the Installation of Stationary Fuel Cell Power Systems.**

(a) **Modifications to Chapter 1:**

1. Add new subsection 1.1.3 to read as follows:

1.1.3 Where the requirements of this standard are in conflict with the International Building Code as adopted by the Georgia Department of Community Affairs or the International Fire Code as adopted and modified by this Chapter, the most restrictive requirements shall apply unless otherwise approved by the State Fire Marshal.

(166) **NFPA 855, 2023 Edition, Standard for Installation for Stationary Energy Storage Systems.**

(a) **Modifications to Chapter 1:**

1. Add a new subsection 1.1.1 to read as follows:

1.1.1 Where the requirements of this standard are in conflict with the International Building Code as adopted by the Georgia Department of Community Affairs or the International Fire Code as adopted and modified by this Chapter, the most restrictive requirements shall apply unless otherwise approved by the State Fire Marshal.

(167) **NFPA 909, 2021 Edition, Code for the Protection of Cultural Resource Properties - Museums, Libraries, and Places of Worship.**

(a) **Modifications to Chapter 1:**

1. Add a new subsection 1.1.5 to read as follows:

1.1.5 This document is recognized strictly as a recommended practice for fire prevention and fire protection for various cultural resources. Recommendations may be based on the document where deemed appropriate by the authority having jurisdiction. The document is in the form of a stand-alone enforceable code or standard, however, it is not adopted as a minimum state code or standard. It may be used in conjunction with and in the support of applicable provisions of other adopted codes or standards, or it may be adopted and enforced by a local jurisdiction under local ordinance.

(b) **Modifications to Chapter 3:**

1. Delete the definition 3.3.25 for Fire Hazard and substitute in its place the following:

3.3.25 "Fire Hazard" means for the intents and purposes of this Code, an activity, circumstance, condition, situation, combination of materials, material process, use or improper use of heat sources, or that on the basis of applicable documentation, data, or information sources deemed reliable by the authority having jurisdiction, can cause an unwanted fire, a fire out of control, an explosion, or a related condition, such as panic from a fear of smoke, fire, or explosion, that the authority having jurisdiction determines to be a risk to persons, to property, or to the health, safety, and or welfare of the jurisdiction.

(168) **NFPA 914, 2023 Edition, Code for Fire Protection of Historic Structures.**

(a) **Modifications to Chapter 1:**

1. Add a new subsection 1.1.3 to read as follows:

1.1.3 This document is recognized strictly as a recommended practice for fire prevention and fire protection of historic structures. Recommendations may be based on the document where deemed appropriate by the authority having jurisdiction. The document is in the form of a stand-alone enforceable code or standard, however, it is not adopted as a minimum state code or standard. It may be used in conjunction with and in the support of applicable provisions of other adopted codes or standards, or it may be adopted and enforced by a local jurisdiction under local ordinance.

(169) **NFPA 1122, Code for Model Rocketry.**

(a) Refer to Subject 120-3-22 for adopted edition and any modifications.

(170) **NFPA 1123, Code for Fireworks Display.**

(a) Refer to Subject 120-3-22 for adopted edition and any modifications.

(171) **NFPA 1124, Code for the Manufacture, Transportation, Storage and Retail Sales of Fireworks and Pyrotechnic Articles.**

(a) Refer to Subject 120-3-22 for adopted edition and any modifications.

(172) **NFPA 1125, Code for the Manufacture of Model Rocket and High Power Rocket Motors.**

(a) Refer to Subject 120-3-22 for adopted edition and any modifications.

(173) **NFPA 1126, Standard for the Use of Pyrotechnics before a Proximate Audience.**

(a) Refer to Subject 120-3-22 for adopted edition and any modifications.

(174) **NFPA 1127, Code for High-Power Rocketry.**

(a) Refer to Subject 120-3-22 for adopted edition and any modifications.

(175) **NFPA 1142, 2022 Edition, Standard on Water Supplies for Suburban and Rural Fire Fighting.**

No modifications.

(176) **NFPA 1225, 2022 Edition, Standard for Emergency Services Communications.**

(a) **Modifications to Chapter 1:**

1. Add a new subsection 1.3.1 to read as follows:

1.3.1 Chapters 1 through 3 and Chapter 18 shall be the standard for In-Building Emergency Responder Communications Enhancement Systems.

2. Add a new section 1.6 Enforcement Requirement:

1.6 **Enforcement Requirement**. Except for 1.3.1 it is intended that this standard shall be administered and enforced by the authority having jurisdiction designated by the local governing authority.

(b) **Modifications to Chapter 2:**

1. Add a new subsection 2.2.1 to read as follows:

2.2.1 Refer to Subject 120-3-3 for the NFPA publication editions that apply to Chapter 18.

(c) **Modifications to Chapter 18:**

1. Add a new paragraph 18.2.1.1 to read as follows:

18.2.1.1 Where buildings or facilities fall under the jurisdiction of the Georgia Safety Fire Commissioner as set forth in Title 25, Chapter 2, and for State owned facilities and State occupied facilities that are not provided with a facility fire department, it is intended that the provisions of chapter 18 and subsection 20.3.10 and subparagraph 20.3.10.1 be administered by the local Fire Chief or Fire Code Official responsible for providing fire or other emergency response to the buildings or facilities and the frequency license holder(s).

2. Delete subsection 18.8.3 in its entirety and replace with a new subsection 18.8.3 to read as follows:

18.8.3 Critical areas, including fire command centers complying with Section 508 of the International Fire Code as adopted in the Rules and Regulations of the Safety Fire Commissioner Subject 120-3-3, fire pump rooms, exit stairs, exit passageways, elevators, elevator lobbies, standpipe cabinets, sprinkler sectional valve locations, and other areas deemed critical by the AHJ, shall be provided with 99 percent floor area radio coverage.

(177) **NFPA 1961, 2020 Edition, Standard on Fire Hose.**

No modifications.

(178) **NFPA 1962, 2018 Edition, Standard for the Inspection, Care, and Use of Fire Hose, Couplings, and Nozzles and the Service Testing of Fire Hose.**

No modifications.

(179) **NFPA 1963, 2019 Edition, Standard for Fire Hose Connections.**

No modifications.

(180) **NFPA 2001, 2022 Edition, Standard on Clean Agent Fire Extinguishing Systems.**

(a) **Modifications to Chapter 11:**

1. Delete subsection 11.1.2 in its entirety and substitute in its place the following:

11.1.2 All persons who could be expected to inspect, test, or maintain, fire extinguishing systems shall be licensed or permitted in accordance with Chapter 12 of Title 25 of the Official Code of Georgia Annotated and thoroughly trained and kept thoroughly trained in the functions they are expected to perform.

2. Delete subsection 11.4 in its entirety and substitute in its place the following:

11.4 At least annually, all systems shall be thoroughly inspected and tested for proper operation by personnel qualified in the installation and testing of clean agent extinguishing systems and licensed or permitted in accordance with Chapter 12 of Title 25 of the Official Code of Georgia Annotated. Discharge tests shall not be required

(181) **NFPA 2010, 2020 Edition, Fixed Aerosol Fire Extinguishing Systems.**

No modifications.

(182) **International Wildland-Urban Interface Code (IWUIC), 2012 Edition.**

(a) **Modifications to Chapter 1:**

1. Delete section 101.1 in its entirety and substitute in its place the following:

101.1 **Title.** The International Fire Code, 2012 edition, published by the International Code Council, shall be known as a Georgia State Wildland-Urban Interface Code, hereafter referred to as this Code.

2. Delete section 101.2 in its entirety and substitute in its place the following:

101.2 **Scope.** The provisions of this Code shall apply to the construction, alteration, movement, repair, maintenance and use of any building, structure or premises within the wildland-urban interface areas designated by local jurisdictions by ordinance. See sample Ordinance on page xi of this Code for application and designated fire area. Buildings or conditions in existence at the time of the adoption of this Code are allowed to have their use or occupancy continued, if such condition, use or occupancy was legal at the time of the adoption of this Code, provided such continued use does not constitute a distinct danger to life or property. Buildings or structures moved into or within the jurisdiction shall comply with the provisions of this Code for new buildings or structures.

101.2.1 **Appendices.** Provisions in the appendices shall not apply unless specifically adopted by local ordinance.

Cite as Ga. Comp. R. & Regs. R. 120-3-3-.04

AUTHORITY: O.C.G.A. §§ 25-2-4**,** 33-2-9**,** 50-13-21.

HISTORY: Original Rule entitled "Notes" adopted. F. Feb. 8, 1979; eff. Mar. 1, 1979, as specified by the Agency.

Repealed: New Rule entitled "Request for Modification of Specific Requirements" adopted. F. Nov. 10, 1980; eff. Nov. 30, 1980.

Amended: F. July 7, 1983; eff. August 1, 1983, as specified by the Agency.

Repealed: New Rule entitled "Fire Safety Information to Be furnished in Hotels, Motels, Apartments and Dormitories" adopted. F. Sept. 30, 1987; eff. Nov. 1, 1987, as specified by the Agency.

Repealed: New Rule of same title adopted. F. Dec. 3, 1990; eff. Jan. 1, 1991, as specified by the Agency.

Amended: F. Jan. 8, 1993; eff. Jan. 28, 1993.

Amended: F. July 9, 1998; eff. July 29, 1998.

Amended: F. Dec. 21, 1999; eff. Jan. 10, 2000.

Amended: ER. 120-3-3-0.1-.04 entitled "State Minimum Fire Safety Standards With Modifications" adopted. F. and eff. May 14, 2003, the date of adoption.

Amended: Permanent Rule of same title adopted. F. Aug. 21, 2003; eff. Sept. 10, 2003.

Repealed: New Rule of same title adopted. F. Jan. 12, 2007; eff. Feb. 1, 2007.

Repealed: New Rule of same title adopted. F. Feb. 17, 2010; eff. Mar. 9, 2010.

Repealed: New Rule of same title adopted. F. Jan. 10, 2014; eff. Jan. 30, 2014.

Amended: F. Dec. 12, 2014; eff. Jan. 1, 2015.

Amended: F. Dec. 28, 2017; eff. Jan. 1, 2018, as specified by the Agency.

Amended: F. Dec. 13, 2019; eff. Jan. 1, 2020, as specified by the Agency.

Amended: F. Jan. 13, 2022; eff. Jan. 1, 2022, as specified by the Agency.

Amended: F. June 10, 2022; eff. July 1, 2022, as specified by the Agency.

Note: Correction of non-substantive typographical errors in amendment filed June 10, 2022 (i.e., deleted extra space after quotation marks and hyphens, corrected "O.O.G.A." to "O.C.G.A," and "120-3-3.03" to " 120-3-3-.03"), as requested by Agency. Effective August 12, 2022.

Amended: F. Aug. 31, 2022; eff. Sep. 1, 2022, as specified by the Agency.

Amended: F. Feb. 1, 2023; eff. Feb. 1, 2023, as specified by the Agency.

Amended: F. May 7, 2025; eff. May 27, 2025.

120-3-3-.05 Obstruction of and Access to Fire Hydrants

(1) It shall be unlawful for any person in any manner to obstruct the use of any fire hydrant or place any material or objects as to obstruct its access or view from the roadway, thoroughfare, or other approach.

(2) Hydrant locks shall not be permitted on hydrant valves unless approved in writing by the Fire Chief of the fire department with fire suppression jurisdiction.

(3) Fire hydrants shall be accessible to fire service personnel at all times. No person shall place or maintain any post, fence, vehicle, vegetation, growth, trash, or storage of any other materials that would obstruct the view of or access to a fire hydrant or otherwise hinder or prevent its immediate use by fire service personnel.

(4) A minimum clearance of 36 inches to and around the requirements shall be maintained for the safe and efficient operation of the fire hydrant. The front of the hydrant shall be open to the roadway, thoroughfare, or approach and the minimum clearance in the rear of the hydrant from discharge nozzle to discharge nozzle shall be no less than

three feet. The minimum clearance of three feet out from the hydrant shall be maintained out to the roadway or approach.

(5) Any roadway in front of the hydrant shall be kept clear of vehicles for fifteen feet in either direction in accordance with O.C.G.A. § 40-6-203.

(6) No person shall change the paint color of a fire hydrant from that established or set by the authority having fire suppression jurisdiction.

(7) Existing non-movable obstructions such as a pre-existing buildings power poles or other non-movable obstructions located within three feet of the hydrant may remain if in existence prior to the implantation of this regulation. Such obstruction approval shall be documented and records kept on file by the local authority having fire suppression jurisdiction.

Cite as Ga. Comp. R. & Regs. R. 120-3-3-.05

AUTHORITY: O.C.G.A. §§ 25-2-4**,** 33-2-9**,** 50-13-21.

HISTORY: Original Rule entitled "Notes" adopted. F. Nov. 10, 1980; eff. Nov. 30, 1980.

Repealed: New Rule entitled "Fire Safety Information to Be Furnished in Hotels, Motels and Dormitories" adopted. F. Apr. 1, 1981; eff. Aug. 1, 1981, as specified by the Agency.

Amended: Rule retitled "Fire Safety Information to Be Furnished in Hotels, Motels, Apartments and Dormitories". F. July 7, 1983; eff. August 1, 1983, as specified by the Agency.

Repealed: New Rule entitled "Application" adopted. F. Sept. 30, 1987; eff. Nov. 1, 1987, as specified by the Agency.

Repealed: New Rule of same title adopted. F. Dec. 3, 1990; eff. Jan. 1, 1991, as specified by the Agency.

Amended: F. July 9, 1998; eff. July 29, 1998.

Amended: F. Dec. 21, 1999; eff. Jan. 10, 2000.

Repealed: New Rule entitled "Request for Modification of Specific Requirements" adopted. F. Aug. 21, 2003; eff. Sept. 10, 2003.

Repealed: New Rule of same title adopted. F. Jan. 12, 2007; eff. Feb. 1, 2007.

Repealed: New Rule of same title adopted. F. Feb. 17, 2010; eff. Mar. 9, 2010.

Repealed: New Rule entitled "Obstruction of and Access to Fire Hydrants" adopted. F. Jan. 10, 2014; eff. Jan. 30, 2014.

Amended: F. Dec. 13, 2019; eff. Jan. 1, 2020, as specified by the Agency.

Amended: F. May 7, 2025; eff. May 27, 2025.

120-3-3-.06 Request for Modification of Specific Requirements

Upon receipt of a sworn affidavit stating all relevant facts and circumstances and such other information as may be required, the Commissioner may order or direct that specific requirements of this Subject and the codes and standards adopted herein be modified to allow alternative arrangements that will secure as nearly equivalent measures as practical for the prevention of injury to persons and property.

Cite as Ga. Comp. R. & Regs. R. 120-3-3-.06

AUTHORITY: O.C.G.A. §§ 25-2-4**,** 33-2-9**,** 50-13-21.

HISTORY: Original Rule entitled "Notes" adopted. F. Apr. 1, 1981; eff. Aug. 1, 1981, as specified by the Agency.

Amended: F. July 7, 1983; eff. August 1, 1983, as specified by the Agency.

Repealed: New Rule entitled "Day Care Centers and Group Day Care Homes" adopted. F. Apr. 23, 1986; eff. May 15, 1986, as specified by the Agency.

Repealed: New Rule entitled "Severability" adopted. F. Sept. 30, 1987; eff. Nov. 1, 1987, as specified by the Agency.

Repealed: New Rule of same title adopted. F. Dec. 3, 1990; eff. Jan. 1, 1991, as specified by the Agency.

Amended: F. July 9, 1998; eff. July 29, 1998.

Amended: F. Dec. 21, 1999; eff. Jan. 10, 2000.

Repealed: New Rule entitled "Fire Safety Information to Be Furnished in Hotels, Motels, Dormitories, Apartments and Personal Care Homes" adopted. F. Aug. 21, 2003; eff. Sept. 10, 2003.

Repealed: New Rule of same title adopted. F. Jan. 12, 2007; eff. Feb. 1, 2007.

Repealed: New Rule of same title adopted. F. Feb. 17, 2010; eff. Mar. 9, 2010.

Repealed: New Rule entitled "Request for Modification of Specific Requirements" adopted. F. Jan. 10, 2014; eff. Jan. 30, 2014.

Amended: F. Dec. 13, 2019; eff. Jan. 1, 2020, as specified by the Agency.

Amended: F. May 7, 2025; eff. May 27, 2025.

120-3-3-.07 Fire Safety Information to be Furnished in Hotels, Motels, Dormitories, Apartments, Community Living Arrangements and Personal Care Homes

(1) This Rule shall apply to every new and existing hotel, motel and dormitory that comes within O.C.G.A. § 25-2-13(b); and every apartment building three or more stories in height that comes within O.C.G.A. § 25-2-13(b); and every personal care home licensed for seven or more persons. Provided, however, that nothing herein shall apply to condominiums or any individually owned residential unit within any of the aforesaid buildings.

(a) Every sleeping room located in any such hotel, motel, dormitory, apartment or personal care home shall contain the following fire safety information on a placard or decal language meeting the requirements of paragraph (2) herein, which shall be prominently affixed on the inside of every exit access door contained in any of the aforesaid rooms. When affixed, said placard or decal shall be unobstructed by curtains, shades or other materials.

Exception: Single story hotels and motels where each guestroom has a door opening directly outside at street or ground level.

SAFETY TIPS

1. Never smoke in bed.

2. Locate fire exits on this floor. (Note: Do NOT consider elevators as exits.)

3. Count the number of doors to the nearest exit, and check for any possible obstructions.

4. When applicable: Locate fire alarm pull stations on this floor.

5. When applicable: Locate fire extinguishers on this floor.

6. Check any windows to see if they can be opened; if so determine how they open.

7. Keep your room key on a table next to your bed.

8. If you leave your room, keep door closed and take your key.

9. Write down the number for the local fire department and keep it next to the phone.

THE LOCAL FIRE DEPARTMENT NUMBER IS_____.

IN CASE OF FIRE DON'T PANIC; remain calm.

1. Report fire to front desk or fire department as appropriate.

2. If room is smoky, get on hands and knees (or stomach) and crawl to door.

3. Feel door knob; If **HOT**, do **NOT** open door; if cool, open slowly.

4. If hallway is smoky, stay next to wall and count the doors as you crawl to exit.

5. Do **NOT** use any elevators.

6. Do **NOT** prop open doors to exit staircase.

7. Hang on to handrail and **WALK DOWN** exit staircase.

8. When applicable: Pull fire alarm as you evacuate.

IF YOU CANNOT LEAVE THIS ROOM

1. Notify (or Call) front desk (or manager, fire department, or other appropriate person) and let them know where you are.

2. Wet sheets, towels or clothing and stuff them in all cracks around doors and vents.

3. When applicable: Turn on bathroom fan.

4. Check to see if there is smoke **OUTSIDE** window; if **NO** smoke and if any window can be opened, hang a sheet or light colored material outside.

5. When applicable: Fill bathtub (or sink) with cold water for firefighting.

6. Using ice bucket or other container, keep doors and walls wet.

7. If room is smoky, fold a wet towel in a triangle and tie over your nose and mouth; stay low.

8. Make yourself visible to rescue personnel through any window or balcony; **DO NOT JUMP!**

9. Keep fighting fire until help arrives; **DON'T GIVE UP!**

FOR YOUR SAFETY, THIS BUILDING HAS THE FOLLOWING:

(List all of the following and any additional items as applicable.)

1. Automatic sprinkler protection in every room.

2. Automatic sprinkler protection in every hallway.

3. Automatic smoke detectors in every room.

4. Automatic smoke detectors in every hallway.

5. Fire extinguishers on every floor.

6. Fire alarm pull stations at every exit.

7. Posted evacuation plans in every room.

8. Pressurized staircase with self-closing doors. (NOTE: In case of fire, do **NOT** prop doors open.)

9. Fire safety staircase with self-closing doors. (NOTE: In case of fire, do **NOT** prop doors open.)

10. Emergency lighting and exit lights.

11. Fire resistant drapery and bedding.

12. An alternative fire exit to the roof. **NOTE**: To be used **ONLY** if heavy smoke is encountered when walking **DOWN** the exit staircase.

(b) Every owner or manager of any such apartment building shall furnish to all tenants therein the fire safety information specified in subparagraph (a) herein on a placard or decal meeting requirements of paragraph

(2) The information specified in subparagraph (a) of main paragraph (1) herein shall be contained on a placard or decal at least 8-1/2 inches by 14 inches (215.9 mm by 355.6 mm) in size. The text shall be legibly printed in a minimum of twelve-point bold type. The headings contained therein shall be legibly printed in a minimum of 48-point type and the wording shall be in the English language.

Exception No. 1: Fire safety information placards or decals are not required on resident sleeping room doors in personal care homes and apartments provided there are records, signed by the individual residents of the facility, which indicates that they have received the same information as required above in the facilities operations, policy or similar manual. Fire safety information shall be reviewed during Fire Drills performed in accordance with the appropriate occupancy chapter of NFPA 101, Life Safety Code, as adopted by this Chapter.

Exception No. 2: Existing fire safety information placards or decals at least 8-1/2 inches by 14 inches (215. mm by 355.6 mm) in size with legibly printed text in a minimum of twelve-point leaded, one-point type and whose headings are legibly printed in a minimum of 48-point type in the English language.

Example of 48-point type:

SAFETY TIPS

Example of 12-point type: Emergency lighting and exit lights.

(3) The information specified in subparagraph (a) of paragraph (1) herein is intended to be a minimum list of fire safety tips and emergency procedures. The owner or manager of the building may modify the text of the information specified in subparagraph (a) of paragraph (1) herein as follows:

(a) To correspond with the structural features of any such building, or any room located therein;

(b) To facilitate the communication of such information upon consideration of the age or primary language of the guests, residents or students occupying any such building; and

(c) To add other appropriate information to the extent deemed necessary by local fire safety personnel.

(4) A placard or decal shall be affixed above the call button for every elevator located in any such hotel, motel, dormitory or apartment building which shall state in bold and conspicuous type: **IN THE EVENT OF FIRE, DO NOT USE THIS ELEVATOR.** In conjunction with such placard or decal, an evacuation route shall be posted with arrows indicating the direction of the nearest fire exit.

Cite as Ga. Comp. R. & Regs. R. 120-3-3-.07

AUTHORITY: O.C.G.A. §§ 25-2-4**,** 33-2-9**,** 50-13-21**.**

HISTORY: Original Rule entitled "Notes" adopted. F. Apr. 23, 1986; eff. May 15, 1986, as specified by the Agency.

Repealed: New Rule of same title adopted. F. Sept. 30, 1987; eff. Nov. 1, 1987, as specified by the Agency.

Repealed: New Rule of same title adopted. F. Dec. 3, 1990; eff. Jan. 1, 1991, as specified by the Agency.

Amended: F. Jan. 8, 1993; eff. Jan. 28, 1993.

Amended: F. July 9, 1998; eff. July 29, 1998.

Amended: F. Dec. 21, 1999; eff. Jan. 10, 2000.

Repealed: New Rule entitled "Accessibility to and Use of Public Facilities by Persons with Disabilities" adopted. F. Aug. 21, 2003; eff. Sept. 10, 2003.

Repealed: New Rule of same title adopted. F. Jan. 12, 2007; eff. Feb. 1, 2007.

Repealed: New Rule of same title adopted. F. Feb. 17, 2010; eff. Mar. 9, 2010.

Repealed: New Rule entitled "Fire Safety Information to be Furnished in Hotels, Motels, Dormitories, Apartments, Community Living Arrangements and Personal Care Homes" adopted. F. Jan. 10, 2014; eff. Jan. 30, 2014.

Amended: F. Dec. 13, 2019; eff. Jan. 1, 2020, as specified by the Agency.

Amended: F. May 7, 2025; eff. May 27, 2025.

120-3-3-.08 Accessibility to and Use of Public Facilities by Persons with Disabilities

The requirements for accessibility to and use of public facilities shall be as provided in Chapter 3 of Title 30 and Subject 120-3-20.

Cite as Ga. Comp. R. & Regs. R. 120-3-3-.08

AUTHORITY: O.C.G.A. §§ 25-2-4**,** 33-2-9**,** 50-13-21.

HISTORY: Original Rule entitled "Reference to O.C.G.A. Title 30" adopted. F. Dec. 3, 1990; eff. Jan. 1, 1991, as specified by the Agency.

Amended: F. July 9, 1998; eff. July 29, 1998.

Amended: F. Dec. 21, 1999; eff. Jan. 10, 2000.

Repealed: New Rule entitled "Parking Space Designation for Persons with Disabilities" adopted. F. Aug. 21, 2003; eff. Sept. 10, 2003.

Repealed: New Rule of same title adopted. F. Jan. 12, 2007; eff. Feb. 1, 2007.

Repealed: New Rule of same title adopted. F. Feb. 17, 2010; eff. Mar. 9, 2010.

Repealed: New Rule entitled "Accessibility to and Use of Public Facilities by Persons with Disabilities" adopted. F. Jan. 10, 2014; eff. Jan. 30, 2014.

Amended: F. Dec. 13, 2019; eff. Jan. 1, 2020, as specified by the Agency.

Amended: F. May 7, 2025; eff. May 27, 2025.

120-3-3-.10 Notes

(1) The National Fire Protection Association Standards adopted in this Chapter are on file in the Office of the State Fire Marshal and are available for viewing.

(2) Copies of the National Fire Protection Association Standards may be obtained from: National Fire Protection Association

1 Batterymarch Park

Quincy, MA 02169-7471

Phone: 800-344-3555

Main 617-770-3000

www.nfpacatolog.org

(3) Copies of the International Code Council Codes are on file in the Georgia Office of the Commissioner of Insurance and Safety Fire and are available for viewing. Copies may be obtained from:

International Code Council

1-888-ICC-SAFE

(422-7233) or

www.isafe.org

(4) The editions of the codes and standards adopted under this Chapter 120-3-3 may not be the most currently available editions published by the National Fire Protection Association or the International Code Council. For the intents and purposes of O.C.G.A. § 25-2-4 and the Rules and Regulations of the Safety Fire Commissioner, it is not compliant, practical nor in the best interest of the citizens of Georgia to attempt to promulgate the most current editions of nationally recognized codes or standards when published without the required evaluation and public review. Based on various provisions of Chapter 2 of Title 25 and Article 1 of Chapter 3 of Title 25, local governing

bodies of this State are authorized to enact ordinances, regulations, or codes that may be required in order for the jurisdiction to satisfy intents and purposes that are not required of the Commissioner under Chapter 4 of Title 25. Any local ordinances, regulations, or codes enacted by a local governing body shall not be less restrictive or protective than the state minimum fire safety standards promulgated in conformity with O.C.G.A. §§ 25-2-4, 33-2-9, 50-13-21 and other provisions of Chapter 2 of Title 25.

Cite as Ga. Comp. R. & Regs. R. 120-3-3-.10

AUTHORITY: O.C.G.A. §§ 25-2-4**,** 33-2-9**,** 50-13-21.

HISTORY: Original Rule entitled "Severability" adopted. F. Aug. 21, 2003; eff. Sept. 10, 2003.

Repealed: New Rule of same title adopted. F. Jan. 12, 2007; eff. Feb. 1, 2007.

Repealed: New Rule of same title adopted. F. Feb. 17, 2010; eff. Mar. 9, 2010.

Repealed: New Rule entitled "Notes" adopted. F. Jan. 10, 2014; eff. Jan. 30, 2014.

Amended: F. Dec. 13, 2019; eff. Jan. 1, 2020, as specified by the Agency.

Amended: F. May 7, 2025; eff. May 27, 2025.

Department 120. OFFICE OF COMMISSIONER OF INSURANCE, SAFETY FIRE COMMISSIONER AND INDUSTRIAL LOAN COMMISSIONER

Chapter 120-3. RULES OF SAFETY FIRE COMMISSIONER

Subject 120-3-7. RULES AND REGULATIONS FOR MANUFACTURED HOMES

120-3-7-.01 Authority

This Regulation for manufactured and mobile homes is made and promulgated by the Georgia Safety Fire Commissioner pursuant to his authority set forth in O.C.G.A. §§ 8-2-132, 8-2-133, 25-2-4, 33-2-9, and 50-13-21.

Cite as Ga. Comp. R. & Regs. R. 120-3-7-.01

AUTHORITY: O.C.G.A. §§ 8-2-132**,** 8-2-133**,** 25-2-4**,** 33-2-9**,** 50-13-21**.**

HISTORY: Original Rule entitled "Promulgation and Purpose" adopted. F. Oct. 1, 1968; eff. Sept. 26, 1968, as specified by the Agency.

Amended: F. Aug. 8, 1974; eff. Sept. 1, 1974, as specified by the Agency.

Repealed: New Rule entitled "Authority" adopted. F. May 23, 1984; eff. July 1, 1984, as specified by the Agency.

Repealed: New Rule of same title adopted. F. Oct. 7, 1992; eff. Jan. 1, 1993, as specified by the Agency.

Amended: F. July 22, 1996; eff. August 11, 1996.

Repealed: New Rule of same title adopted. F. Aug. 6, 1998; eff. Aug. 26, 1998.

Repealed: New Rule of same title adopted. F. Nov. 30, 2004; eff. Dec. 20, 2004.

Amended: F. May 7, 2025; eff. May 27, 2025.

120-3-7-.02 Purpose

(1) To provide protection to the public against potential hazards to the safety and health of the occupants of manufactured homes.

(2) To forbid the manufacture and sale of new manufactured homes which are not constructed in compliance with The National Manufactured Housing Construction and Safety Standards Act of 1974.

(3) To regulate the installation of manufactured and mobile homes so as to provide protection to the occupants of said homes and to ensure continuing compliance with the federal standards.

Cite as Ga. Comp. R. & Regs. R. 120-3-7-.02

AUTHORITY: O.C.G.A. §§ 8-2-132**,** 8-2-133**,** 25-2-4**,** 33-2-9**,** 50-13-21**.**

HISTORY: Original Rule entitled "Definitions" adopted. F. Oct. 1, 1968; eff. Sept. 26, 1968, as specified by the Agency.

Amended: F. Aug. 8, 1974; eff. Sept. 1, 1974, as specified by the Agency.

Repealed: New Rule entitled "Purpose" adopted. F. May 23, 1984; eff. July 1, 1984, as specified by the Agency.

Amended: F. Oct. 7, 1992; eff. Jan. 1, 1993, as specified by the Agency.

Amended: F. July 22, 1996; eff. August 11, 1996.

Repealed: New Rule of same title adopted. F. Aug. 6, 1998; eff. Aug. 26, 1998.

Repealed: New Rule of same title adopted. F. Nov. 30, 2004; eff. Dec. 20, 2004.

Amended: F. May 7, 2025; eff. May 27, 2025.

120-3-7-.03 Definitions

The terms "Installation" and "Set Up" shall be used interchangeably throughout this Regulation. All other terms which are used in this Regulation shall have the same meaning as defined in O.C.G.A. §§ 8-2-131 and 8-2-160, in addition to the following:

(1) "Act" means The National Manufactured Housing Construction and Safety Standards Act of 1974 and the Rules and Regulations promulgated thereunder;

(2) "Commissioner" means the Georgia Safety Fire Commissioner;

(3) "Dispute Resolution" means a program for a timely resolution of disputes between manufactures, retailers and installers of manufactured homes regarding responsibility and for the issuance of appropriate orders for the correction or repairs of defects in the manufactured home that are reported during the 1-year period beginning on the date of installation;

(4) "Fire Safety Compliance Officer" means an employee of the Safety Fire Division, authorized by the Safety Fire Commissioner to carry out specific responsibilities, including all inspections necessary to administer and enforce O.C.G.A. §§ 8-2-130 *et seq.* and 8-2-160 *et seq.* and the Rules and Regulations promulgated thereunder;

(5) "HUD" means the United States Department of Housing and Urban Development;

(6) "In-Plant Primary Inspection Agency (IPIA)" means a state or private organization which has been accepted by the Secretary in accordance with the requirements of Subpart H of the federal regulations adopted pursuant to the Act. An IPIA evaluates the ability of manufactured home plants to follow approved quality control procedures and provides ongoing surveillance of the manufacturing process;

(7) "Installation" means the construction of a foundation system and the placement or erection of a manufactured home or mobile home on the foundation system. Such term includes, without limitation, supporting, blocking, leveling, securing, or anchoring such home and connecting multiple or expandable sections of such home. The term "set up" may be used interchangeably with the term "installation";

(8) "Installer" means a person responsible for performing an installation and who is required to obtain a license pursuant to O.C.G.A. § 8-2-160 *et seq.*;

(9) "Lending Institutions" shall have the same meaning as set forth in O.C.G.A. § 8-2-131(3).

(10) "Manufactured Housing Act" means O.C.G.A. §§ 8-2-130 *et seq.*, 8-2-160 *et seq.* and the Rules and Regulations promulgated thereunder;

(11) "Retail Broker" shall have the meaning set forth in O.C.G.A. § 8-2-131(8);

(12) "Retailer" shall have the meaning set forth in O.C.G.A. § 8-2-131(9);

(13) "Remedial Actions" means the notification and corrective measures required to be taken under Subpart I of the Procedural and Enforcement Regulations;

(14) "Safety Fire Division" means the authorized inspection and enforcement authority of the Georgia Safety Fire Commissioner. The Manufactured Housing Section is designated as having the primary responsibility;

(15) "Secretary" means Secretary of U.S. Department of Housing and Urban Development;

(16) "Set up" and "installation" means the construction of a foundation system and the placement or erection of a manufactured home or mobile home on the foundation system. Such term includes, without limitation, supporting, blocking, leveling, securing, or anchoring such home and connecting multiple or expandable sections of such home;

(17) "Standards" means the Federal Manufactured Home Construction and Safety Standards as promulgated under Section 604 of the Act;

(18) "State Administrative Agency (SAA)" means an agency of a state which has been approved by HUD to carry out the state plan for enforcement of the standards pursuant to Section 623 of the Act. The Manufactured Housing Section of the Safety Fire Division is the State Administrative Agency for Georgia.

Cite as Ga. Comp. R. & Regs. R. 120-3-7-.03

AUTHORITY: O.C.G.A. §§ 8-2-132**,** 8-2-133**,** 25-2-4**,** 33-2-9**,** 50-13-21**.**

HISTORY: Original Rule entitled "Administration" adopted. F. Oct. 1, 1968; eff. Sept. 26, 1968, as specified by the Agency.

Repealed: New Rule entitled "Powers of the Commissioner" adopted. F. Aug. 8, 1974; eff. Sept. 1, 1974, as specified by the Agency.

Repealed: New Rule entitled "Definitions" adopted. F. May 23, 1984; eff. July 1, 1984, as specified by the Agency.

Repealed: New Rule of same title adopted. F. Oct. 7, 1992; eff. Jan. 1, 1993, as specified by the Agency.

Amended: F. July 22, 1996; eff. August 11, 1996.

Repealed: New Rule of same title adopted. F. Aug. 6, 1998; eff. Aug. 26, 1998.

Repealed: New Rule of same title adopted. F. Nov. 30, 2004; eff. Dec. 20, 2004.

Amended: F. May 7, 2025; eff. May 27, 2025.

120-3-7-.06 In-Plant Primary Inspection Agency (IPIA) Inspection Procedures; Disagreements With Procedures

(1) Inspections of manufactured homes by the IPIA or the Commissioner's designee will be conducted pursuant to Subpart H of the U.S. Department of Housing and Urban Development's "Manufactured Homes Procedural and Enforcement Regulations" (24 C.F.R. 3282.351, adopted May 11, 1976, as amended).

(2) Whenever a manufacturer disagrees with a finding by an IPIA acting in accord with Subpart H, the manufacturer may request a Presentation of Views or a Hearing as hereafter provided in Rule 120-3-7-.10 of these Rules and Regulations.

(3) Fees in connection with certification or certification update of manufactured housing plants in Georgia shall be in accordance with the following schedule:

(a) Initial five-day (40-hour) inspection period..... $5,000 PER WEEK

(b) Second five-day (40-hour) inspection period..... $5,000 PER WEEK

(c) Third five-day (40-hour) inspection period..... $5,000 PER WEEK

(d) Fourth five-day (40-hour) inspection period..... $5,000 PER DAY

(4) If certification is not completed after four five-day inspection periods, the representatives of the manufacturer and representatives of the Commissioner will arrange a meeting to evaluate the inspection process.

(5) For any inspection lasting longer than four five-day inspection periods, the manufacturer will be responsible for additional fees incurred by the inspectors, including cost lodging and per diem costs.

Cite as Ga. Comp. R. & Regs. R. 120-3-7-.06

AUTHORITY: O.C.G.A. §§ 8-2-132**,** 8-2-133**,** 25-2-4**,** 33-2-9**,** 50-13-21**.**

HISTORY: Original Rule entitled "Plans and Blueprints" adopted. F. Oct. 1, 1968; eff. Sept. 26, 1968, as specified by the Agency.

Repealed: New Rule entitled "Standards of Construction" adopted. F. Aug. 8, 1974; eff. Sept. 1, 1974, as specified by the Agency.

Repealed: New Rule entitled "In-Plant Primary Inspection Agency (IPIA) Inspection Procedures; Disagreements With Procedures" adopted. F. May 23, 1984; eff. July 1, 1984, as specified by the Agency.

Amended: F. July 22, 1996; eff. August 11, 1996.

Repealed: New Rule of same title adopted. F. Aug. 6, 1998; eff. Aug. 26, 1998.

Repealed: New Rule of same title adopted. F. Nov. 30, 2004; eff. Dec. 20, 2004.

Amended: F. Jan. 13, 2022; eff. Jan. 1, 2022, as specified by the Agency.

Amended: F. May 7, 2025; eff. May 27, 2025.

120-3-7-.07 Consumer Complaint Handling and Remedial Actions

(1) Consumer complaints and remedial actions will be administered and enforced by the Manufactured Housing Section of the Safety Fire Division in accordance with O.C.G.A. §§ 8-2-130 *et seq.*, 8-2-160 *et seq.* and with the Manufactured Homes Procedural and Enforcement Regulations, found in Title 24 C.F.R. Part 3282, Subpart F and Subpart I, 42 Fed. Reg. 2580, Jan. 12, 1977, as amended, wherever such is denoted as an SAA responsibility. Presentation of Views or Hearings will be conducted pursuant to Rule 120-3-7-.10.

(2) Consumer complaints, including remedial actions, that involve the installation of manufactured homes set up after January 1, 1993 will be administered and enforced by the Manufactured Housing Section of the Safety Fire Division in accordance with O.C.G.A. § 8-2-160 *et seq.* and the Rules and Regulations promulgated thereunder. Presentation of Views and Hearings will be conducted pursuant to Rule 120-3-7-.10 of the Rules and Regulations.

(3) A Manufacturer, Retailer, Retail Broker, or Installer issued a notification of any violation by the Commissioner or Safety Fire Division shall rectify such violation and provide documentation of the modification or correction to the Manufactured Housing Section of the Safety Fire Division within thirty (30) days of delivery of such notification. An extension may be granted by the Manufactured Housing Section of the Safety Fire Division if submitted and approved by the Manufactured Housing Section of the Safety Fire Division within the thirty (30) day period.

(4) A reinspection will be conducted after thirty (30) days of delivery of such notification, and if such violations are not corrected and documented as required by subsection (c) the Manufacturer, Retailer, Retail Broker, or Installer issued the notification of violation shall be fined not less than $250.00. A reinspection violation shall constitute a discrete notification of violation and shall require a Manufacturer, Retailer, Retail Broker, or Installer to rectify such violation and provide documentation of the modification or correction to the Manufactured Housing Section of the Safety Fire Division within thirty (30) days of delivery of such reinspection violation notification. If a reinspection violation is not cured within thirty (30) days, the Manufacturer, Retailer, Retail Broker, or Installer shall pay an additional fine of not less than $500.00.

Cite as Ga. Comp. R. & Regs. R. 120-3-7-.07

AUTHORITY: O.C.G.A. §§ 8-2-132**,** 8-2-133**,** 25-2-4**,** 33-2-9**,** 50-13-21**.**

HISTORY: Original Rule entitled "Inspection Procedures" adopted. F. Oct. 1, 1968; eff. Sept. 26, 1968, as specified by the Agency.

Repealed: New Rule entitled "Plans and Specifications" adopted. F. Aug. 8, 1974; eff. Sept. 1, 1974, as specified by the Agency.

Repealed: New Rule entitled "Consumer Complaint Handling and Remedial Actions" adopted. F. May 23, 1984; eff. July 1, 1984, as specified by the Agency.

Repealed: New Rule of same title adopted. F. Oct. 7, 1992; eff. Jan. 1, 1993, as specified by the Agency.

Amended: F. July 22, 1996; eff. August 11, 1996.

Repealed: New Rule of same title adopted. F. Aug. 6, 1998; eff. Aug. 26, 1998.

Repealed: New Rule of same title adopted. F. Nov. 30, 2004; eff. Dec. 20, 2004.

Amended: F. May 7, 2025; eff. May 27, 2025.

120-3-7-.08 Annual License

(1) Every manufacturer who manufactures manufactured homes in Georgia and every manufacturer who manufactures manufactured homes outside the State of Georgia and who sells or offers for sale said manufactured homes in Georgia shall apply for and obtain a license from the Manufactured Housing Section of the Safety Fire Division on the prescribed form and accompanied by the fee as provided in O.C.G.A. §§ 8-2-135(1) and (2). For licensing purposes, each plant location shall be treated as a separate entity and shall adhere to all licensing requirements. The applicant for licensure shall specify the actual physical location where manufactured homes are built or assembled. Every manufacturer receiving a license shall display the license in the place of business and shall make such license available upon request for verification by an authorized representative of the Commissioner.

(2) Every retailer and retail broker, including any out of state retailer and retail broker, who sells or offers for sale to consumers three (3) or more new or previously owned manufactured or mobile homes in a twelve (12) month period in Georgia shall apply for and obtain a license from the Manufactured Housing Section of the Safety Fire Division on the prescribed form and accompanied by the fee as provided in O.C.G.A. §§ 8-2-135(3) and (5). For licensing purposes, each retailer lot or location and retail broker location shall be treated as a separate entity and shall adhere

to all licensing requirements. The applicant for licensure shall specify the actual physical address where manufactured or mobile homes are located. Every retailer or retail broker receiving a license shall keep the license in the place of business and shall make such license available upon request for verification by an authorized representative of the Commissioner. The application for said license shall include a complete authorization form prescribed by the Commissioner of Insurance which allows the verification of criminal history by the department.

(3) Every installer who installs new or previously owned manufactured or mobile homes anywhere within the State of Georgia in accordance with O.C.G.A. § 8-2-161(1) shall apply for and obtain a license from the Manufactured Housing Section of the Safety Fire Division, to operate as a licensed installer, on the prescribed form and accompanied by the fee as provided in O.C.G.A. § 8-2-161(1). The applicant shall specify an actual physical location where the installer's business is based and where records are maintained. The application for said license shall include a completed authorization form as prescribed by the Commissioner of Insurance which allows the verification of criminal history by the department.

(a) The application for licensure for each installer shall be accompanied by proof of successful completion of an installation training course and corresponding examination, authorized or approved by the Commissioner, and designated for licensure. The course must have been taken within 12 months prior to the initial application for licensure. Continuing education courses approved by the Commissioner shall be taken every 24 months thereafter.

(b) After all licensing requirements for an installer's license are completed, a provisional installer's license will be issued. A provisional installer's license shall only be required for a new installer's licensure application and not a renewal application. The first three installations by a provisional installer's licensee shall be monitored by the Commissioner or the Commissioner's designee. If all three installations are found not to violate the Act, Code, or any rule, regulation, order, directive, or bulletin of the Commissioner, then an installer's license shall be issued to the installer. If a violation of the Act, Code, or any rule, regulation, order, directive, or bulletin of the Commissioner is found in the first three installations, then two additional installations shall be monitored by the Commissioner or the Commissioner's designee. If the Commissioner or his designee finds a violation of the Act, Code, or any rule, regulation, order, directive, or bulletin of the Commissioner on the subsequent two installations, then the installers license shall be denied, the provisional license shall be revoked, and the installer shall be required to reapply as a new applicant and pay all required fees thereof.

(c) A licensed installer may employ or contract with other authorized accountable personnel to assist with the installations of manufactured or mobile homes. The licensee shall be required to be at the installation site at all times, unless at least one authorized accountable personnel is continually at the installation site while the installation work is in progress and is accountable to the licensee. The licensee shall be responsible for ensuring that any installation performed under said license be in compliance with the applicable instructions and the licensee shall be responsible for providing remedial action when required. Proof of licensure and authorization of accountable personnel shall be maintained at the installation site at all times for verification by local code officials and authorized representatives of the Commissioner. The proof may be in the form of the original license, copy of the original license or on a form prescribed by the Commissioner. Local jurisdictions are authorized to require proof of licensure prior to issuing any permits necessary to perform installations of manufactured and mobile homes. "Authorized accountable personnel" is defined as a person or persons who have successfully completed the installation training course, and any applicable continuing education courses, and their corresponding examinations, approved by the Commissioner. A certificate of Completion will be provided by the Manufactured Housing Section of the Safety Fire Division to these individuals upon proof of successful completion of these courses and examinations. Any retailer or retail broker licensed under the provisions of the Manufactured Housing Act who uses the services of or otherwise employs a person, partnership, corporation, entity, etc. that is not licensed as an installer in the State of Georgia shall be subject to the revocation of said retailer's and retail broker's license or other penal measures as prescribed by this Regulation. Any failure to comply with the provisions contained herein shall be considered a violation of the Manufactured Housing Act and be subject to penal measures prescribed by the Commissioner of Insurance, including but not limited to, the revocation of any applicable license.

(d) An individual who transports a manufactured or mobile home to the site of installation shall be excluded from licensure as an installer provided he or she performs only such temporary blocking as is necessary to stabilize the home and shall not, under these circumstances, be considered to be an installer. However, any further blocking of the home by the carrier shall be considered to be an installation of the unit, and the carrier shall comply with

licensure requirements of an installer and the installation must be performed in compliance with O.C.G.A. § 8-2-160 *et seq.* and the applicable rules of the Commissioner. A partial installation of a manufactured or mobile home is not allowed under the Manufactured Housing Act.

(e) Any installer who is discovered by a state or local inspector to have performed an installation in a manner contrary to the methods indicated by the manufacturers installation instruction manual and Rule 120-3-7-.18, as applicable, shall be deemed to be in violation of the Manufactured Housing Act and shall be subject to revocation of his or her license or other penal measures as prescribed by the Commissioner of Insurance, this Regulation or other applicable Georgia law.

(f) In all cases in which the installation is arranged by or paid for by the retailer or retail broker, the retailer and retail broker shall assume responsibility for the proper set up of the mobile or manufactured home. Failure to comply with the requirements of this subsection shall be deemed a violation of the Manufactured Housing Act and shall be subject to the revocation of the retailer's or retail broker's license or other penal measures as prescribed by this Regulation or other applicable Georgia law. This subsection shall apply to any third party or subcontractor that is arranged for or paid by any retailer or retail broker. This subsection shall not relieve any installer from any responsibilities and applicable penalties.

(4) Applications for licensure must be approved by the Commissioner or his or her delegate before engaging in any activities contemplated by the Manufactured Housing Act and requiring licensure for manufacturers, retailers, retail brokers or installers. Each license shall be valid from January 1 through December 31 of the year in which the license is issued. License fees shall not be prorated for the remainder of the year in which the application is made but shall be paid for the entire year regardless of the date of application. All licenses are non-transferable regarding ownership. Any licensed entity changing the business name, or any other information not referenced herein, presented on the original application for licensure shall notify the Manufactured Housing Section of the Safety Fire Division of any change of information contained in the original application for licensure within twenty (20) days and shall complete a revised application. Any installer, retailer, or retail broker shall notify the Manufactured Housing Section of the Safety Fire Division within 20 calendar days of changing their physical address.

(5) Applications for renewal licenses for manufacturers, retailers, retail brokers and installers shall be obtained and submitted to the Manufactured Housing Section of the Safety Fire Division on or before January 1 of each year and shall be accompanied by a completed consent form allowing a criminal history background check by the Safety Fire Commissioner's Office. On or before December 1 of each year, the Manufactured Housing Section of the Safety Fire Division shall forward a Notice of Renewal by electronic mail to each licensee at the last known email address on the records of the Safety Fire Commissioner. After sending the Notice of Renewal by electronic mail, the Manufactured Housing Section shall have no further duty or obligation to notify the licensee of the expiration of annual license. The fee for delinquent renewal applications received after January 10 of each year shall be double the regular annual fee, provided that no delinquent renewal applications shall be allowed after January 31 of each year and a new application for a license shall be required.

(6) A license may be refused or a license duly issued may be suspended or revoked or the renewal of such license may be refused by the Commissioner if he or she finds that the applicant or the holder of a license:

(a) has violated any provision of the Act, the Standards, the Manufactured Homes Act or these Rules and Regulations;

(b) has intentionally made any misstatement or misrepresented or concealed any material fact in the application for the license;

(c) has obtained or attempted to obtain a license by fraud or misrepresentation;

(d) has been determined to have engaged in, or to be engaging in, a fraudulent or dishonest practice or to have demonstrated a lack of trustworthiness or lack of competence;

(e) has been convicted by final judgment in any state or federal court of a felony; or

(f) has willfully failed to comply with or has willfully violated any proper order, rule or regulation issued by the Commissioner or the Secretary.

(g) in the case of a license application, if any person having control of the applicant is subject to any of the grounds for refusal stated in subparagraphs (a) through (f) above, the license may be refused. For purposes of this subparagraph, control shall be presumed if the person owns ten percent or more of the applicant, or if the person owns ten percent or more of the voting securities of a corporate applicant.

(7) Before any license application shall be refused or any license shall be suspended or revoked or the renewal thereof refused as provided for in this Rule, the Commissioner shall give notice of his or her intention to do so to the applicant or the holder of a license in accordance with O.C.G.A. § 50-13-21, and O.C.G.A. § 25-2-29, and applicable Rules and Regulations of the Safety Fire Commissioner.

(8) In situations where persons otherwise would be entitled to a hearing prior to an order, the Commissioner may issue an order to become effective within twenty (20) days from the date of the order, unless persons subject to the order request a hearing within ten (10) days after receipt of the order. Failure to make a request shall constitute a waiver of any provision contained herein for the hearing.

(9) Any person who engages in any activities identified by the Manufactured Housing Act as requiring licensure as a manufacturer, retailer, retail broker or installer without having first obtained the appropriate license or who conducts said business without proper licensure or with an expired license shall be deemed to be in violation of the Manufactured Housing Act and shall be subject to the penalties prescribed in O.C.G.A. §§ 8-2-141 or 8-2-166 after notice and hearing as prescribed by this Regulation.

(10) Lists of licensees shall be made available to the general public upon request pursuant to the provisions of O.C.G.A. § 50-18-70 et seq.

Cite as Ga. Comp. R. & Regs. R. 120-3-7-.08

AUTHORITY: O.C.G.A. §§ 8-2-133, 8-2-161, 8-2-164, 25-2-4, 25-2-29, 33-2-9, 33-2-17, 50-13-21.

HISTORY: Original Rule entitled "Reciprocity" adopted. F. Oct. 1, 1968; eff. Sept. 26, 1968, as specified by the Agency.

Repealed: New Rule entitled "Certification of Mobile Homes" adopted. F. Aug. 8, 1974; eff. Sept. 1, 1974, as specified by the Agency.

Repealed: New Rule entitled "Annual License" adopted. F. May 23, 1984; eff. July 1, 1984, as specified by the Agency.

Amended: F. Oct. 7, 1992; eff. Jan. 1, 1993, as specified by the Agency.

Amended: F. July 22, 1996; eff. August 11, 1996.

Repealed: New Rule of same title adopted. F. Aug. 6, 1998; eff. Aug. 26, 1998.

Repealed: New Rule of same title adopted. F. Nov. 30, 2004; eff. Dec. 20, 2004.

Repealed: New Rule of same title adopted. F. Dec. 4, 2020; eff. Dec. 29, 2020, as specified by the Agency.

Amended: F. May 7, 2025; eff. May 27, 2025.

120-3-7-.10 Procedures for the Presentation of Views or Hearings

(1) Request. Upon receipt of a written request for a Presentation of Views or Hearing, the Commissioner shall either grant the relief for which the Presentation of Views or Hearing is requested or shall issue a notice under

subparagraph (2) of this Rule. A hearing shall be held only if the Commissioner finds that the request is made in good faith, that the applicant would be aggrieved and that such grounds otherwise justify holding such hearing.

(2) Notice. When the Commissioner decides to conduct a Presentation of Views or Hearing, the Commissioner shall provide notice as follows:

(a) Notice shall be given at least ten (10) days prior to the date of the proceeding. Notice shall be provided to interested persons to the maximum extent practicable. Direct notice shall be sent by certified mail to the parties involved in the proceeding.

(b) The notice shall include a statement of the time, place and nature of the proceeding; reference to the authority under which the proceeding will be held; a statement of the subject matter of the proceeding; the parties and issues involved; and a statement of the manner in which interested persons shall be afforded the opportunity to participate in the proceeding.

(c) The notice shall designate the official who shall preside over the proceedings and to whom all inquiries should be directed concerning such proceedings.

(d) The notice shall state whether the proceedings shall be held in accordance with the provisions of paragraph (4) "Presentation of Views" or paragraph (5) "Hearings" of this Rule.

(e) Notwithstanding any other provision, in situations where persons otherwise would be entitled to notice or hearing prior to an order, the Commissioner may issue an order to be effective immediately if the Commissioner has reasonable cause to believe that an act, practice, or transaction is occurring or is about to occur; that the situation constitutes a situation of imminent peril to the public health, safety or welfare; and that the situation therefore imperatively requires emergency action. The emergency order shall contain findings to this effect and reasons for the determination. The order shall contain or be accompanied by a notice of opportunity for hearing which may provide that a hearing will be held if and only if a person subject to the order requests a hearing within ten (10) days of receipt of the order and notice.

(3) Reporting and transcription. Oral proceedings shall be recorded and transcribed, unless the Commissioner and the parties otherwise agree, in which case a summary approved by the presiding officer shall be kept. The original transcript or summary shall be a part of the record and the sole official transcript or summary. The cost of such recording and transcription may, in the discretion of the Commissioner, be charged to the party seeking a Presentation of Views or Hearing. A copy of the transcript or summary shall be available to any person at a fee established by the Commissioner.

(4) Presentation of Views.

(a) A Presentation of Views may be written or oral, and may include an opportunity for oral presentation, whether requested or not, whenever the Commissioner concludes that an oral presentation would be in the public interest, and so states in the notice. The purpose of such presentations shall be to gather information to allow fully informed decision making.

(b) Presentation of Views shall not be adversary proceedings. Oral presentations shall be conducted in an informal but orderly manner. The presiding officer shall have the duty and authority to conduct a fair proceeding, to take all necessary action to avoid delay, and to maintain order.

(c) In the absence of extraordinary circumstances, an oral Presentation of Views shall not require that testimony be given under oath or affirmation and shall not permit either cross-examination of witnesses by other witnesses or their representatives, or the presentation of rebuttal testimony by persons who have already testified. The rules of evidence prevailing in courts of law or equity shall not control the conduct of oral Presentation of Views.

(d) Within ten (10) days after a Presentation of Views, the presiding officer shall refer to the Commissioner all documentary evidence submitted, the transcript, if any, a summary of issues involved and the information presented in the Presentation of Views and the presiding officer's recommendations.

(e) The Commissioner shall issue a Final Determination concerning the matters at issue within thirty (30) days of receipt of the presiding officer's summary.

(5) Hearings. A Hearing is an adversary proceeding and includes an opportunity for the oral and documentary presentation of evidence in accordance with the Georgia Administrative Procedure Act, the Georgia Insurance Code and Subject 120-2-2 of the Rules and Regulations of Commissioner of Insurance; except where such provisions are in direct conflict with the Act and the Rules and Regulations promulgated in Title 24 C.F.R. Part 3282, Subpart D.

(6) Decision or Final Determination. A Decision or Final Determination, issued by the Commissioner in accordance with paragraphs (f) and (g) of 24 C.F.R. Part 3292.152, shall include:

(a) A written statement of findings of fact, with specific references to principal supporting items of evidence in the record and conclusions, as well as the reasons or basis therefore, upon all of the material issues of law or discretion presented on the record; and

(b) An appropriate order.

Cite as Ga. Comp. R. & Regs. R. 120-3-7-.10

AUTHORITY: O.C.G.A. §§ 8-2-130**,** 8-2-132**,** 8-2-133**,** 8-2-137**,** 8-2-160**,** 8-2-166**,** 25-2-1**,** 25-2-4**,** 25-2-29**,** 33-2-9**,** 33-2-17**,** 50-13-21**.**

HISTORY: Original Rule entitled "Alterations, Changes, and Modifications of Newly Certified Mobile Homes" adopted. F. Aug. 8, 1974; eff. Sept. 1, 1974, as specified by the Agency.

Repealed: New Rule entitled "Procedures for the Presentation of Views and Hearings" adopted. F. May 23, 1984; eff. July 1, 1984, as specified by the Agency.

Amended: F. July 22, 1996; eff. August 11, 1996.

Repealed: New Rule of same title adopted. F. Aug. 6, 1998; eff. Aug. 26, 1998.

Repealed: New Rule of same title adopted. F. Nov. 30, 2004; eff. Dec. 20, 2004.

Amended: F. May 7, 2025; eff. May 27, 2025.

120-3-7-.13 Installation Requirements

(1) In addition to the licensure requirements of Rule 120-3-7-.08(3) of these Regulations, any installer performing any installation of a new or used manufactured or mobile home in the State of Georgia shall first purchase a permit from the Commissioner. The installation permit will include both a temporary installation permit and a permanent installation permit. The cost of each permit is prescribed in O.C.G.A. § 8-2-164(2). Each installer shall provide any information required by the Commissioner to obtain a permit. The installation permit shall be attached by the installer to the panel box of each manufactured or mobile home upon completion of the installation. The prescribed permit shall be designed by the Commissioner. A permit shall be issued only to a licensed installer, and shall not be transferable.

(a) The installation permit application for a temporary permit must be submitted at least 48 hours before the installation process is to begin. If the application is submitted less than 48 hours then a late fee ($250) will be assessed. The temporary permit must be placed on the first day of installation on the home and clearly displayed.

(b) If a home was installed or completed and an installation permit was never purchased for the installation, then the installer will have to purchase a permit, and pay a fee of $500.

(c) Date of installation completion will be defined as:

1. The date the licensed installer has certified that all the requirements have been completed from the manufacturers installation manual, all utilities are connected and the manufactured home is ready for occupancy; or

2. If no manufacturer installation manual is available then the date the licensed installer has certified that all the requirements of Rule 120-3-7-.18 are met or all utilities are connected and the manufactured home is ready for occupancy.

(d) Once the installation is completed, the application for a permanent permit must be completed. The application shall be completed no later than three calendar days after the installation is completed.

(2) Whenever the manufacturer's instructions do not stipulate certain installation requirements, or when clarification is needed, or when the manufacturer's instructions state that the issue is left to the regulatory authority having jurisdiction, then the installation instructions incorporated herein by reference in Rule 120-3-7-.18 of these Regulations shall be followed. Manufacturers of manufactured homes constructed under the provisions of the Act shall provide an installation manual with each manufactured home as required by the Act. The manual shall describe a foundation and anchorage system and provide instructions for site preparation and utility connections. O.C.G.A. § 8-2-165 requires compliance with the manufacturer's installation instructions. Pursuant to O.C.G.A. § 8-2-165, previously occupied manufactured and mobile homes which do not have the manufacturer's instructions as required by the Act shall be installed in accordance with said Rule 120-3-7-.18.

(a) Each new manufactured home shall bear a data plate to be affixed in a permanent manner near the main electrical panel or other readily accessible and visible location as required by the Act. The data plate shall contain the name of the manufacturer, the serial number and model designation, the date the home was manufactured, the design-approval agency, factory-installed equipment and the wind, roof load, and thermal zones for which the unit was constructed. Local jurisdictions shall not prohibit the placement of any manufactured home built in compliance with the design standards for the zone in effect on the date that the data plate indicates the home was constructed. Manufactured homes shall not be placed in any zone(s) which exceed the design limitation for which the manufactured home was constructed as identified by the data plate.

(b) The Installer is responsible for proper site preparation. The manufactured or mobile home shall be placed on a properly prepared stand. The site shall have a grade that will allow water to drain away from the home stand, and all organic matter, debris, grass, grass sod and other foreign matter shall be removed where footings or pier foundations are to be installed. All drainage must be diverted away from the home and must slope a minimum of one-half inch per foot away from the foundation for the first ten feet. A written contractual agreement between the homeowner, the retailer, retail broker or installer shall determine which party is to perform the site preparation which shall include proper drainage of water away from the home. The existence of said contractual agreement shall not relieve the installer of the responsibility of set up on a properly prepared stand. Installations of manufactured or mobile homes shall not be performed on improperly prepared stands. The Installer shall decline to install the home if the site is not properly prepared.

(c) Pursuant to O.C.G.A. §§ 8-2-167 and 43-14-13(k), a person licensed as a manufactured or mobile home installer pursuant to these Regulations shall not be subject to the electrical and plumbing licensure requirements of Chapter 14 of Title 43 when performing the functions specified in O.C.G.A. § 43-14-13(k).

(d) The following shall not be the responsibility of the installer unless contracted in writing by the homeowner or dealer or retailer or installer to provide for same:

1. Skirting. When required by local jurisdiction and provided pursuant to contractual agreement, skirting shall be installed in accordance with the skirting manufacturer's instructions and 24 C.F.R. Part 3285.504.

2. Masonry curtain walls. Load bearing masonry curtain walls shall not be required by local jurisdictions for manufactured or mobile homes. Non-load bearing masonry curtain walls may be provided by contractual agreement between the homeowner, the dealer or retailer, or installer and shall be constructed in accordance with drawings or instructions provided in the manufacturer's installation manual, or instructions and other drawings or procedures

approved by the Commissioner. Non-load bearing walls shall have no contact with the manufactured home or any portion thereof for the purpose of structural support.

3. Stairs and landings. When required by local jurisdiction and provided by contractual agreement, stairs and landings shall be constructed in accordance with the provisions of the State Minimum Standard Building Codes which are enforced by local jurisdiction.

(f) These installation requirements established by the Manufactured Housing Act are applicable only to manufactured and mobile homes as defined in O.C.G.A. § 8-2-131 and the Act.

Cite as Ga. Comp. R. & Regs. R. 120-3-7-.13

AUTHORITY: O.C.G.A. §§ 8-2-130, 8-2-132, 8-2-133, 8-2-137, 8-2-160, 8-2-166, 25-2-1, 25-2-4, 33-2-9, 50-13-21.

HISTORY: Original Rule entitled "Supervision of Alterations, Changes or Modifications Filing of Modification Reports With State Fire Marshal" adopted. F. Aug. 8, 1974; eff. Sept. 1, 1974, as specified by the Agency.

Repealed: New Rule entitled "Severability" adopted. F. May 23, 1984; eff. July 1, 1984, as specified by the Agency.

Amended: F. July 22, 1996; eff. August 11, 1996.

Repealed: New Rule of same title adopted. F. Aug. 6, 1998; eff. Aug. 26, 1998.

Repealed: New Rule entitled "Installation Requirements" adopted. F. Nov. 30, 2004; eff. Dec. 20, 2004.

Amended: F. May 7, 2025; eff. May 27, 2025.

120-3-7-.14 Inspections

(1) Local building code inspectors are authorized to make inspections of manufactured and mobile home installations to ensure compliance with O.C.G.A. § 8-2-160 *et seq.* and the Rules and Regulations promulgated thereunder. No political subdivision may adopt or enforce any requirement not consistent with these Rules and Regulations.

(2) The authorized representatives of the Commissioner shall perform any inspections necessary to ensure compliance with O.C.G.A. § 8-2-160 *et seq.* The Commissioner or his or her specially appointed designee is the final authority on the correctness of the installation as prescribed in O.C.G.A. § 8-2-160 *et seq.* and the Rules and Regulations promulgated thereunder.

(3) The Commissioner or Commissioner's designee shall perform random inspections on installations performed by each installer each year. If the Commissioner or designee finds violations of the Code or any Order, Directive, Bulletin, or Rule during the inspection, future inspections may be performed to ensure compliance therewith. If violations persist following an inspection, the Commissioner or Commissioner's designee may require the Installer to notify the Manufactured Housing Section of the Safety Fire Division of any future installations to be performed and require the Commissioner or Commissioner's designee to monitor any future installations until the violations are cured. The inspections required by this section shall be independent of any requirements under subpart I of Part 3282 of the Manufactured Home Procedural and Enforcement Regulations of the National Manufactured Housing Construction and Safety Standards Act of 1974, 42 U.S.C. § 5401 *et seq.*

Cite as Ga. Comp. R. & Regs. R. 120-3-7-.14

AUTHORITY: O.C.G.A. §§ 8-2-130, 8-2-132, 8-2-133, 8-2-137, 8-2-160, 8-2-166, 25-2-1, 25-2-4, 33-2-9, 50-13-21.

HISTORY: Original Rule entitled "Reciprocity" adopted. F. Aug. 8, 1974; eff. Sept. 1, 1974, as specified by the Agency.

Repealed: New Rule entitled "Effective Date" adopted. F. May 23, 1984; eff. July 1, 1984, as specified by the Agency.

Repealed: New Rule entitled "Installation Requirements" adopted. F. Oct. 7, 1992; eff. Jan. 1, 1993, as specified by the Agency.

Amended: F. July 22, 1996; eff. August 11, 1996.

Repealed: New Rule of same title adopted. F. Aug. 6, 1998; eff. Aug. 26, 1998.

Repealed: New Rule entitled "Inspections" adopted. F. Nov. 30, 2004; eff. Dec. 20, 2004.

Amended: F. May 7, 2025; eff. May 27, 2025.

120-3-7-.15 Reports of Manufactured and Mobile Home Installations

(a) Each installer licensee of manufactured and mobile homes shall report all installations performed to the Manufactured Housing Section of the Safety Fire Division as required by Rule 120-3-7-.13(1).

(b) The Commissioner may require each retailer or broker to submit reports of manufactured and mobile homes sold to consumers as he deems necessary.

Cite as Ga. Comp. R. & Regs. R. 120-3-7-.15

AUTHORITY: O.C.G.A. §§ 8-2-130, 8-2-132, 8-2-133, 8-2-137, 8-2-160, 8-2-166, 25-2-1, 25-2-4, 33-2-9, 50-13-21**.**

HISTORY: Original Rule entitled "Penalties" adopted. F. Aug. 8, 1974; eff. Sept. 1, 1974, as specified by the Agency.

Repealed: F. May 23, 1984; eff. July 1, 1984, as specified by the Agency.

Amended: New Rule entitled "Inspections" adopted. F. Oct. 7, 1992; eff. Jan. 1, 1993, as specified by the Agency.

Amended: F. July 22, 1996; eff. August 11, 1996.

Repealed: New Rule of same title adopted. F. Aug. 6, 1998; eff. Aug. 26, 1998.

Repealed: New Rule entitled "Reports of Manufactured and Mobile Home Installations" adopted. F. Nov. 30, 2004; eff. Dec. 20, 2004.

Amended: F. Jan. 13, 2022; eff. Jan. 1, 2022, as specified by the Agency.

Amended: F. May 7, 2025; eff. May 27, 2025.

120-3-7-.18 Installation Instructions

(1) Installation instructions provided with manufactured homes must be followed for installation. These instructions are designed to be applicable when certain aspects of the manufacturer's installation instructions are not explicit, not stipulated or need clarification, or when the manufacturer's instructions indicate that the requirement may be left to the authority having jurisdiction. The Federal Manufactured Home Construction and Safety Standards Program (24 C.F.R. Part 3280, 3282, 3283, 3285 and 3286) requires that all manufactured homes be provided with installation

instructions covering foundation, anchoring, utility connections, and other items. Such installation instructions shall be utilized and followed for the installation of all new manufactured homes. Previously occupied manufactured homes and mobile homes which do not have manufacturer's installation instructions shall be installed according to requirements herein. The term mobile home shall be synonymous with the term manufactured home when used herein. Manufactured homes located within rental communities shall not be required to have poured concrete or permanent foundations.

(2) Definitions:

(a) Anchoring Equipment: Straps, cables, turnbuckles and chains, including tensioning devices, that are used with ties to secure a manufactured home to ground anchors;

(b) Anchoring System: A combination of ties, anchoring equipment and ground anchors that will, when properly designed and installed, resist the overturning of the home or the moving of the home sideways by wind;

(c) Footing: That part of the support system that sits directly on the ground at, below or partly below grade to support the piers;

(d) Ground Anchor: A device at the manufactured home stand designed to transfer manufactured home anchoring loads to the ground;

(e) Pier: That portion of the support system between the footing and the manufactured home, exclusive of caps and shims. Types of piers include, but are not limited to, the following:

1. Manufactured steel stands;

2. Manufactured concrete stands;

3. Concrete blocks;

4. Other approved or listed equivalent.

(f) Radius Clips: Means or method to protect strapping from sharp edges during loading.

(g) Site, Manufactured Home: A parcel of land designed and designated for the location of one manufactured home, its accessory buildings or structures, and accessory equipment for exclusive use of the home;

(h) Stabilizing Devices: All components of the anchoring and support systems such as piers, footings, ties, anchoring equipment, ground anchors, or any other materials and methods of construction which support and secure the manufactured home to the ground;

(i) Stand, Manufactured Home: That area of a manufactured home site which has been reserved for placement of a manufactured home;

(j) Support System: A combination of footings, piers, caps and shims that will, when properly installed, support the manufactured home;

(k) Tie: Strap, cable or securing device used to connect the manufactured home to ground anchors;

(l) Vertical Tie: A tie intended to resist the uplifting and overturning forces.

(3) Foundation Systems for New Manufactured Homes.

(a) A manufactured home foundation system is one constructed in accordance with the foundation system included in the manufacturer's installation instructions.

(b) The manufacturer or homeowner shall be permitted to design for unusual installation not provided for in these regulations or in the manufacturer's standard installation directions provided the design is approved in writing by a licensed professional engineer or architect and a copy provided to the Manufactured Housing Section of the Safety Fire Division.

(c) The manufacturer's instructions include a typical foundation system designed by a registered professional engineer or architect to support the anticipated loads specified in the manufacturer's installation instructions for the design zone (including climate) of installation, and shall be deemed to meet the requirements of these regulations. These instructions shall be provided to the homeowner as required by Rule 120-3-7-.18.

(4) Foundation Systems for Previously Owned Manufactured Homes.

(a) Foundation systems for previously owned manufactured homes shall be according to requirements contained herein. Previously occupied manufactured homes can be installed according to manufacturer's installation instructions if available.

(b) Subparagraph (7) contains information for the design of manufactured home foundation systems which meet the minimum criteria established in this regulation.

(c) The manufacturer or homeowner shall be permitted to design for an unusual installation not provided for in the manufacturer's installation instructions, or these Regulations, provided that the design is approved in writing by a licensed professional engineer or architect and a copy sent to the Manufactured Housing Section of the Safety Fire Division and the manufacturer.

(5) Stabilizing Devices and Design.

(a) Each new or previously owned manufactured home being installed on a manufactured home stand shall have stabilizing devices and shall be installed on a foundation constructed in accordance with the manufacturer's installation instructions for new manufactured homes or standards included within these regulations for previously occupied manufactured homes.

(b) Stabilizing devices not provided with the manufactured home shall be listed or labeled to meet or exceed the design and capacity requirements of the manufactured home manufacturer's installation instructions and these regulations.

(6) Anchoring.

(a) Each manufactured ground anchor shall be listed and installed in accordance with the terms of its listing and the anchor manufacturer's instructions and shall include means of attachment of ties meeting the requirements of the manufacturer's installation instructions for new manufactured homes or subparagraph (6)(h) of these regulations for previously occupied manufactured homes.

(b) Ground anchor manufacturer's installation instructions shall include tensioning adjustments which may be needed to prevent damage to the manufactured home.

(c) Each ground anchor shall have the manufacturer's identification and listed model identification number marked thereon so that the number is visible after installation.

(d) Instructions shall accompany each listed ground anchor specifying the types of soil for which the anchor is suitable under the requirements of Section E.

(e) Ground anchors, including means for attaching ties, shall be located to effectively match the anchoring system instructions provided by the manufactured home manufacturer, or for previously occupied manufactured homes, in accordance with the requirements of this section.

(f) Concrete slabs or footings: If concrete slabs or continuous footings are used in lieu of ground anchors to transfer the anchoring loads to the ground, steel rods cast in concrete, or deadman, or concrete anchors shall be required and shall be capable of resisting loads as specified in subparagraph (6)(g)1.

(g) Anchors:

1. Capacity of Anchors: Each approved single head ground anchor, when installed, shall be capable of resisting an allowable working load at least equal to 3,150 pounds, plus a 50% overload (4,725 pounds), without failure when pulled in the direction of the tie. Anchors designed for connection of multiple ties shall be capable of resisting the combined working load and overload as outlined in this Section. Anchor type and size to be determined by soil probe test. Probe tests must be performed within 2 feet of each corner of unit. The lowest reading on the probe tests shall determine the anchor type and size.

2. Anchoring Equipment: Anchoring equipment shall be capable of resisting an allowable working load equal to or exceeding 3,150 pounds and shall be capable of withstanding a 50% overload (4,725 pounds) without failure of either the anchoring equipment or the attached point on the manufactured home. When the stabilizing system is designed by a qualified registered professional engineer or architect, alternative working loads may be used provided the anchoring equipment is capable of withstanding a fifty percent (50%) overload. All anchoring equipment shall be listed or labeled as being capable of meeting all the requirements of this section.

3. Selection of Helical Anchors: Anchor selection shall be based on a determination of the soil class at the depth the anchor helical plate will be installed.

4. Other Anchoring Devices: Other anchoring devices meeting requirements of this section shall be permitted if acceptable to the Manufactured Housing Section of the Safety Fire Division.

5. Depth of Anchors: All anchors shall be installed to the full depth shown in the anchor manufacturer's installation instructions.

6. Anchors installed in line with the pull must be of sufficient additional length to compensate for loss of depth.

7. Anchors are to be placed within 2 feet of each end of each section in Zone I, II and III. In addition:

(i) Zone I anchors must be placed 8 feet on center maximum along the length of both exterior sidewalls.

(ii) Zone II and III anchors must be placed 6 feet on center maximum along the length of both exterior sidewalls.

(iii) Both Zone II and III must have two longitudinal ties and anchors at each end of each section attached to the main "I" Beams. For strap angles over 45 degrees, anchors must be strapped to both "I" Beams. Zone II and III homes produced since July 1994 must have vertical ties at each diagonal tie location.

8. Anchor length or type must be determined by probe testing all four corners, within two feet of corners. Results may be averaged and used to determine anchors based on the anchor manufacturer's installation or user manual requirements.

9. Approved alternate systems of anchoring may be used.

(h) Ties:

1. Strappings or other approved methods or materials shall be used for ties. All ties shall be fastened to ground anchors and drawn tight with turnbuckles or other adjustable tensioning devices or devices supplied with the ground anchor. Strapping must be protected at sharp edges with radius clips. NOTE: Splicing for vertical ties only; overlap strap 12 inches minimum with two clips (one facing each way), double crimp each clip with proper crimping tool.

2. Tie materials shall be capable of resisting an allowable working load of 3,150 pounds and shall withstand a 50% overload (4,725 pounds total). Ties shall comply with 24 CFR 3280.306.

3. Ties shall connect the ground anchor to the top portion of the main structural steel frame (I-beam or other shape) which runs lengthwise under the manufactured home. Ties shall not connect to steel outrigger beams which fasten to and intersect the main structural frame unless specifically stated in the manufacturer's installation instructions.

4. Number of Ties: The minimum number of ties per side for various lengths of manufactured homes in Wind Zone I and Wind Zone II shall be in accordance with subparagraph (g).

5. Location of Ties: When continuous straps are provided as vertical ties, such ties shall be positioned at rafters and studs. Where a vertical tie and diagonal tie are located at the same place, both ties shall be permitted to be connected to a single ground anchor, provided that either the anchor used is capable of carrying both loadings, or that the load capacity of the total number of anchors used is equal to 3,150 pounds working load plus 50% overload (4,725 pounds) times the number of ties specified in subparagraph (g).

6. Shearwall or other provided ties or brackets must be anchored with the same anchor as probe test results required for remainder of the home.

7. When longitudinal brackets are provided, strapping material and anchors as described in Subparagraph (g) must be installed. Manufactured homes must also be stabilized against wind in the longitudinal direction in all Wind Zones. Manufactured homes located in Wind Zone II and III must have longitudinal ground anchors installed on the ends of the manufactured home transportable section(s) or be provided with alternative systems that are capable of resisting wind forces in the longitudinal direction.

8. Special Ties: Clerestory roofs and add-on sections of expandable manufactured homes shall have provisions for vertical ties at the exposed ends. When not originally installed by manufacturer, over-the-roof or vertical ties shall not be required for manufactured homes constructed with "A" Line and shingle roofs.

9. Alternate Method Using Cable Ties: Connection of the cable frame tie to the manufactured home I beam or equivalent main structural frame member may be by a 5/8 drop-forged closed eye bolt through a hole drilled in the center of the I-beam web or other approved methods. The web shall be reinforced if necessary to maintain designed I-beam strength. Cable ends shall be secured with at least three (3) U bolt-type cable clamps with the U portion of the clamp installed on the short (dead) end of the cable to assure strength equal to that required by Section E(8).

10. Tensioning Device Design: Tensioning devices such as turnbuckles or yoke-type fasteners shall be ended with a clevis or forged or welded eyes.

11. Permanency of Connections: Anchoring equipment shall be designed and installed to prevent self-disconnection, lateral deflection or failure.

(i) Resistance to Weather Deterioration: All portions of the anchor which are exposed to weathering shall have a resistance to weather deterioration. The remainder of the anchoring equipment shall have resistance at least equivalent to that provided by a coating of zinc on steel of not less than 0.30 ounces per square foot on each side of the surface coated, as determined by ASTM Standard Methods of Test for Weight of Coating on Zinc-Coated (Galvanized) Iron or Steel Articles (ASTM A90-81).

(7) Foundation Standards.

(a) Unless the entire support system is designed by a professional engineer or architect, the support system shall be designed in accordance with this standard.

(b) Footings shall be sized to support the loads shown in the manufacturer's instructions. Where no manufacturer's instructions are available, subparagraph (7) shall apply.

(c) All grass and organic material shall be removed from the pier foundation location(s), and the pier foundation placed on stable soil at a depth sufficient to protect the footings from the effects of frost heave. For purpose of the installation of a manufactured or mobile home in the State of Georgia, all footers must be protected from the effects

of frost heave. When properly designed by a registered professional engineer, a "floating slab" system may be used above the frost line. The design shall accommodate the anchorage requirements identified within this regulation or the manufacturer's installation instructions.

(d) The pier foundation shall be a 16"x16"x4" solid concrete pad, precast or poured in place, or other approved methods and materials. Where poured concrete foundations are required by local authority for multiple section homes: the footing size shall be 24"x24"x6" filled with poured concrete, or other approved materials/methods. Concrete in footings shall have an ultimate compressive strength of not less than 2500 psi at 28 days. Footer size may vary on piers used with alternate anchoring systems, when installed per system manufacturer's instructions, and marriage wall piers as required by manufacturer's instructions.

1. ABS footing pads are permitted if they are installed in accordance with the pad manufacturer's installation instructions and are certified for use in the soil classification of the installation site. All ABS footing pads must be listed or labeled for the required load capacity.

2. For the purpose of installing a manufactured/mobile home in the State of Georgia. The bases of concrete or other pad types are to be placed at or below the frost line. Other types of footings such as pans, domes, or open pans are to be placed with the topmost point that serves as the base set at or below the frost line, so as to avoid the effects of frost heave. The frost line in the State of Georgia is determined to be:

(i) 4" for the following counties and all counties to the north of these counties: Troup, Meriwether, Pike, Lamar, Monroe, Jones, Baldwin, Washington, Jefferson, and Burke;

(ii) 2" for the following counties and all counties to the south of these counties: Harris, Talbot, Upson, Crawford, Bibb, Twiggs, Wilkinson, Johnson, Emanuel, Jenkins, and Screven.

(e) Footings or pier foundations (unless approved by a registered professional engineer) when required, shall be placed level on firm undisturbed soil or on controlled fill which is free of grass or organic materials to minimum load-bearing capacity of 1000 psf.

(f) Piers and Spacing:

1. Piers or load-bearing supports or devices shall be designed and constructed to evenly distribute the loads. Piers may be offset up to six inches due to obstructions.

2. Double piers are to be placed within 2 feet of each end of each main I-beam, and remaining piers spaced no more than 6 feet on center for the remaining length of each main I-beam.

3. Piers are to be placed on each side of exterior wall opening 4 feet wide or greater (footers at these openings may be 4"x 8"x 16", or equivalent product).

4. Piers shall be placed on each side of exterior door opening, any other side wall openings of 48 inches or greater width, and under load-bearing porch posts and factory installed fireplaces and fireplace stoves. Footers may be 4"x 8"x 16", or equivalent. Openings for endwalls with full headers or cross members do not require piers and footings for the openings.

5. The marriage line of multiple section manufactured homes shall be supported by piers spaced no more than 20 feet apart and shall have piers located within 2 feet of each end of the home, under the marriage line, in conjunction with these piers, piers must be placed at each end of openings 4 feet wide or more. Piers used for perimeter support must be installed with the long dimension parallel to the perimeter rail. Due to obstructions, such perimeter piers may be recessed a no more than 10" from the perimeter rails with a 4x4 pressure treated lumber member installed above the pier that spans a minimum of two floor joists adjacent to the floor studs. Footers must be a minimum of 16"x 16"x 4" or equivalent.

6. Load-bearing supports or devices shall be listed or approved and shall be designed by a registered professional engineer or architect and shall be approved for the use intended or piers shall be constructed as follows:

(i) Frame piers less than 36 inches high.

(A) Frame piers less than 36 inches high are permitted to be constructed of single, open, or closed-cell concrete blocks, eight inches by eight inches by sixteen inches, when the design capacity of the block is not exceeded.

(B) The frame piers must be installed so that the long sides are at right angles to the supported I-beam.

(C) The concrete blocks must be stacked with their hollow cells aligned vertically and must be positioned at right angles to the footings.

(D) Horizontal offsets from the top to the bottom of the pier must not exceed one-half inch.

(E) Mortar is not required, unless specified in the installation instructions or required by a registered professional engineer or registered architect.

(ii) Frame piers 36 inches to 67 inches high and corner piers.

(A) All frame piers between 36 inches and 67 inches high and all corner piers over three blocks high must be constructed out of double, interlocked concrete blocks, when the design capacity of the block is not exceeded. Mortar is not required for concrete block piers, unless otherwise specified in the installation instructions or required by a professional engineer or registered architect.

(B) Horizontal offsets from the top to the bottom of the pier must not exceed one inch.

(iii) All piers over 67 inches high.

(A) Piers over 67 inches high must be designed by a registered professional engineer or registered architect, in accordance with acceptable engineering practice. Mortar is not required for concrete block piers, unless otherwise specified in the manufacturer installation instructions or by the design.

(iv) Perimeter piers and marriage line piers may be single stacked up to 54".

(v) Plates, Shims and Wedges: Nominal 2"x 8"x 16" pressure treated wood, hardwood, 4" concrete caps or the equivalent, shall be placed on top of the pier for the purpose of a top plate. Plate must cover cell area in both single or double stack blocks. Any gap between the top plate and the I-beam frame may be filled with pressure treated wood or hardwood, nominal minimum size of 8"x 4"x 1", fitted and driven tight. Wedges shall not occupy more than one inch of vertical space and shall be at least 3" wide and 6" long, fitted from both sides and driven tight together between the I-beam and plate or shim. Wood and wedges may occupy no more than 4" of the space between the pier and main frame.

(8) Placement of Manufactured Homes.

(a) Clearance Under Homes: A minimum clearance of 12 inches shall be maintained beneath the lowest member of the main frame (I-beam or channel-beam) in the area of utility connections. No more than 25% of the underside of the main frame of the home shall be less than 12 inches above grade.

(b) Elevated Manufactured Homes: When the manufactured home is installed on a basement or split entry type foundation over a habitable lower-level area, the foundation system shall be designed by a registered professional engineer or architect.

(9) Ventilation of Manufactured Homes.

(a) Ventilation of Underfloor Areas:

1. Vapor retarder. If the space under the home is to be enclosed with skirting or other materials, a vapor retarder must be installed to cover the ground under the home, unless the home is installed in an arid region with dry soil conditions.

2. Vapor retarder material. A minimum of six mil polyethylene sheeting or its equivalent must be used.

3. Proper installation.

(i) The entire area under the home must be covered with the vapor retarder, as noted in § 3285.204(a), except for areas under open porches, decks, and recessed entries. Joints in the vapor retarder must be overlapped at least 12 inches.

(ii) The vapor retarder may be placed directly beneath footings, or otherwise installed around or over footings placed at grade, and around anchors or other obstructions.

(iii) Any voids or tears in the vapor retarder must be repaired.

2. If combustion air for heat-producing appliance(s) is taken from within the underfloor areas, ventilation shall be adequate to assure proper operation of the appliance(s). This requirement shall take precedence over the provisions of subparagraph (9)(a)1. Note: This is in addition to the crawl space requirement.

3. A minimum of four ventilation openings totaling no less than four square feet of net free vent area, must be provided. One shall be placed at or near each corner as high as practicable. Crawl space ventilation net free requirement shall be calculated as follows:

a=A/1500 where:

A=the area of the crawl space, square foot a=the total net free vent space.

If the manufacturer's installation instructions require additional vents or openings, the manufacturer's instructions shall apply.

4. Openings shall provide cross ventilation on at least two opposite sides. The openings shall be covered with corrosion resistant wire mesh not less than 1/8 inches, and not more than 1/2 inches in any dimension or with screened louvered openings to retard entry of dry vegetation, waste materials, or rodents. As an option to individual vents, ventilation can be provided by means of vinyl material which has openings for air ventilation as provided in the minimum requirements above.

(b) Intake air for ventilation purposes shall not be drawn from underfloor spaces of the home.

(c) Moisture producing devices, such as dryers, shall be vented to the atmosphere in such a manner to insure that moisture laden air is carried beyond the perimeter of the home.

(d) Skirting: Skirting, if used, shall be installed in accordance with the manufacturer's installation instructions. It shall be secured, as necessary, to assure stability, to minimize vibrations, to minimize susceptibility to wind damage, and to compensate for possible frost heave. Skirting must not be attached in a manner that impedes the contraction and expansion characteristics of the home's exterior covering. Access opening(s) not less than 18 inches in any dimension and not less than 3 square feet in area shall be provided to allow for access and inspection of the home. Such access panel(s) or door(s) shall not be fastened in a manner requiring the use of a special tool to remove or open same. On-site fabrication of skirting shall meet the venting requirements of subparagraph (9)(a).

(10) Maintenance of Anchoring Systems: The homeowner shall be advised that tie tension should be checked and adjusted when necessary.

(11) Plumbing.

(a) Each manufactured home site shall be provided with a water supply and sewer located and arranged to permit attachment to the manufactured home in a workmanlike manner including but not limited to Housing and Urban Development regulations and standards.

(b) When the entire system has been completed, install permanent drain line supports at 4' on center.

(c) Proper slopes and connector sizes: Drain lines must slope at least 1/4" fall per foot of run.

EXCEPTION: 1/8" fall per foot is allowed when a clean out is installed at the upper end of the run. Connect the main drain line to the site sewer hookup. Plumbing drain lines must be supported so as to slope at least 1/4" fall per foot of run or 1/8" fall per foot of run when full-size clean out is located in upper end of line.

(12) Manufactured Home Electrical Connections.

(a) When a manufactured home consists of two or more sections, all electrical connections from one section to another shall be installed in accordance with the manufacturer's installation requirements. In the absence of manufacturer's instructions, electrical connections shall be made in accordance with the National Electrical Code.

(b) Manufactured homes may have the service equipment mounted on or in the unit provided such units comply with all of the following conditions:

1. Installed on a private or owner's lot;

2. Permanent utility connections provided;

3. Located on a properly constructed foundation;

4. Unit is properly anchored and tied down;

5. Unit is constructed in accordance with Housing and Urban Development Construction Standards;

6. Service equipment complies with Article 230 and 250 of the Georgia (National) Electrical Code.

(c) All manufactured home utility services shall be connected to the supply sources with only approved materials.

(d) When a manufactured home is designed to have a meter mounted on home, the electrical service supply is allowed to be installed directly on the home subject to compliance with subparagraph (12)(b), above.

(e) Temporary Electrical Service: Temporary electrical service may be utilized for the installation of the manufactured home. Local municipalities or any other authority having jurisdiction shall allow for such utilization of temporary electrical service consistent with this Rule.

(13) Retail Display.

(a) All manufactured homes and mobile homes displayed for retail sales on dealership or retailer lots shall be stabilized to such a degree as to not allow damage to occur while the home is on display.

1. Piers for multi-section homes shall consist of a minimum of twelve (12) piers and shall be located one under each I-beam in the front of each axle area and at each end of the manufactured home.

2. Piers for single section homes shall consist of a minimum of six (6) piers one located under each I-beam at each end of the home and in front of the axle area.

(14) Sites Prone to Flooding. Special elevations and anchoring techniques are required when locating a home in an area prone to flooding. Consult an engineer and the local building official to make sure that the design and construction of the foundation system conform to applicable federal, state, and local codes and regulations. The

Federal Emergency Management Agency (FEMA) publication FEMA 85, "Manufactured Home Installation in Flood Hazard Areas" contains design and anchoring systems that will allow the foundation system to resist flood forces. This publication is available from FEMA, Washington, DC 20472. Further information may be obtained from the Manufactured Housing Section of the Office of the Insurance and Safety Fire Commissioner. In areas where a community meets the eligibility requirements for the National Flood Insurance Program, the local jurisdiction having authority shall have the authority to change, delete or modify these regulations in order to comply with the National Flood Insurance Program created by the National Flood Insurance Act of 1968, as amended and Rules and Regulations of FEMA addressing the installation of manufactured and mobile homes in areas subject to flooding.

(15) Additional Installation Requirements for Previously Owned Multi-Section Manufactured Homes and Mobile Homes. The floor sections, roof sections and wall sections are to be fitted together tightly. Any gaps shall be shimmed up to one and a half inches between structural elements with dimensional lumber, plywood, or oriented strand board. Connections must be sufficiently sealed to prevent air infiltration. Connection of multi-section manufactured homes and mobile homes (two or more sections), when manufacturer's installation instructions are not available shall be as follows:

(a) Floor Connection: All floors of multi-section manufactured homes and mobile homes shall be securely fastened together with 5/16 inch lags 4 inches long and 16 inches on center entire length of home. All sections shall be leveled and aligned making sure the floors are even on top.

(b) Roof and Ridge Beams: All roof and ridge beams of multi-section manufactured homes and mobile homes shall be securely fastened together.

1. Metal roof connections to be minimum 30 gauge galvanized metal, 12 inches wide, fastened with #8 x 1 1/4 screws minimum, at 4" on center around perimeter of the entire length of the cap.

2. Wood or shingle roofs fastened with one of the following options:

(i) Minimum 30 gauge galvanized metal, 10 inches wide by length of roof. Fastened with minimum 1 1/2" fasteners at 4 inches on center along entire perimeter of the cap.

(ii) Minimum 5/16 inch by 6 inch lag screws 16 inches on center, entire length of roof.

(iii) 1 1/2 inch by 12 inch 26 gauge galvanized metal straps placed within 2 feet of each end and 8 feet on center entire length of units, fastened with #8 x 1 1/2 inch screws, 5 each side of ridge joint.

(c) End Walls: End walls of multi-section manufactured homes and mobile homes shall be securely fastened together.

1. Minimum #8 screws 8 inches on center entire height of end walls, with minimum of 1 inch penetration into the receiving member. If toe screw method is used, must have 1 1/2 inch penetration.

2. 1/4 inch lag screws 24 inches on center with minimum 1 1/2" penetration into receiving member.

3. 1 1/2" galvanized strapping placed 12 inches on center, entire height of stud, fastened with #10 nails minimum 2 each end of strap.

4. Siding and trim pieces are to be installed at the connection of the sections.

(d) Roof Covering: The joints at the ridge of the roof shall be secured and weather tight.

(e) Plumbing drain lines must be supported off the ground. Unless specified in other sections of this Rule, all lines under the manufactured home shall be supported every 4' on center.

(f) Crossover, heating, and other ducts: Heating and duct work is to be connected for proper heating/cooling operation.

1. Securely connect each end of the crossover duct underneath each section to the dropout connection;

2. Wrap/cover all seams and joints with approved UL181 tape or equivalent;

3. Wrap or cover exposed metal with insulation to reduce heat loss;

4. Strap and support crossover duct 4 feet on center minimum. Duct must be supported off the ground. Ducts must be installed in such a manner that the supports cannot slip between any two spirals and must be arranged under the floor to prevent compression or kinking in any location.

(16) Miscellaneous.

(a) Where the means of egress from a manufactured home is not substantially level, such differences in elevation shall be negotiated by stairs or ramps. This subsection is not applicable to egress windows.

(b) Auxiliary Structures: All auxiliary structures (such as porches, decks, awning, cabanas, stairs, etc., unless provided and approved by the manufacturer) shall be entirely self-supporting, unless designed and approved by a professional engineer or registered architect. All such structures shall be constructed in accordance with the Georgia State Building Codes or local authority having jurisdiction.

Cite as Ga. Comp. R. & Regs. R. 120-3-7-.18

AUTHORITY: O.C.G.A. §§ 8-2-130**,** 8-2-133**,** 8-2-160**,** 8-2-166**,** 25-2-1**,** 25-2-4**,** 33-2-9**,** 50-13-21**.**

HISTORY: Original Rule entitled "Forms" adopted. F. Oct. 7, 1992; eff. Jan. 1, 1993, as specified by the Agency.

Amended: F. July 22, 1996; eff. August 11, 1996.

Repealed: New Rule of same title adopted. F. Aug. 6, 1998; eff. Aug. 26, 1998.

Repealed: New Rule entitled "Installation Instructions" adopted. F. Nov. 30, 2004; eff. Dec. 20, 2004.

Amended: F. May 7, 2025; eff. May 27, 2025.

Department 160. RULES OF GEORGIA DEPARTMENT OF EDUCATION

Chapter 160-4.

Subject 160-4-9. INNOVATIVE PROJECTS

160-4-9-.05 Charter Schools Petition Process

(1) **CHARTER PETITION PROCESS.**

(a) **LETTERS OF INTENT**. All applicants, including renewal applicants, who intend to submit a charter petition for local board of education (local board) consideration, shall use the Office of Charter School Compliance (OCSC) template to submit a letter of intent to both the OCSC and to the appropriate local board(s) at least six (6) months prior to the date on which the petition will be submitted to the OCSC. Petitioners should consult the OCSC website and consult with the applicable local school district(s) (local district) for timelines and requirements. Failure to submit a letter of intent shall not preclude an applicant from submitting a petition provided the applicant requests and receives a waiver for the letter of intent from both the OCSC and local district(s).

(b) **CHARTER PETITION TIMELINE.** By September 1 of each year, every local district shall publish a timeline for submitting and reviewing start-up petitions on its respective website. The timeline must:

1. Establish a final petition submission deadline that is on or before January 1, unless the OCSC approves an alternative deadline in advance.

2. Identify the time frame between when the local board approves the charter petition and when the charter school is expected to begin serving students (pre-opening period). The pre-opening period shall be at least 6 months.

3. Require the local board to, by majority vote, approve or deny a petition no later than June 30.

(c) **CHARTER SCHOOL PETITION.** The OCSC shall create and publish the start-up and renewal charter petitions which must be used by local districts for the local petition process. No changes may be made to the OCSC petition by local districts or petitioners. If local districts request information not contained in the OCSC petition during the local petition process, these requests and the responses to them must be submitted to the OCSC after approval by the local board. No local district may require that assurances or agreements be made a condition of local approval other than those assurances that are part of the OCSC petition or part of the three-party charter contract issued by the OCSC.

(d) **CHARTER PETITION SUBMISSIONS TO LOCAL BOARDS.**

1. Local boards shall adopt policies and publish deadlines regarding submission of charter petitions that are consistent with the timeline and requirements for charter petitions as outlined in this Rule. The OCSC may request that a local board revise any policy that precludes the uniform application of this Rule. Such policies shall provide for an in-person panel interview by, or a meeting with, the local district to provide the local district an opportunity to hear from the petitioner directly about local district concerns or clarifications the local district needs.

2. Pursuant to O.C.G.A. § 20-2-2064(a) and (b), a local board must, by a majority vote, approve or deny a petition no later than ninety (90) days after its submission, unless the petitioner and the local board mutually agree, in writing, on a specific reasonable extension period. Extensions may only be granted for the purpose of revising or clarifying petitions already reviewed by the local district. The extension, if granted, may not extend the local board's vote to approve or deny a petition beyond June 30th without advance written approval from the OCSC.

3. If the local board denies a petition directly by a vote of the local board to deny or indirectly by failing to vote within the requisite ninety (90) day review period, it must, within sixty (60) days of the denial, provide a written statement of denial to the petitioner and to the State Board of Education. A written statement of denial shall specifically state the reasons for denial and include a list of the deficiencies in the petition relevant to O.C.G.A. § 20-2-2063. If the local board cites that approval is not in the public interest, the written statement of denial shall include a detailed description of why approval is not in the public interest.

4. Unless granted written approval by the OCSC of an alternate approach to accomplishing these robust petition review goals, within the ninety (90) days a local district has to review a charter petition, the local district shall provide a written statement to the petitioner indicating which of the following four groups the petitioner is in and, if appropriate, what they must do if they wish to revise and resubmit their petition:

(i) Rejection Group: These applications are flawed in some way that is irreparable and will be rejected for the current school year's Petition Review Cycle.

(I) The local district shall issue a rejection letter that informs such applicants that their application cannot be considered during the current school year's Petition Review Cycle.

(II) The rejection letter shall include a statement of the legal insufficiency that makes the petition irreparable.

(III) Applicants in this category are free to submit a brand new application in the following school year's Petition Review Cycle.

(ii) Revision Group: During the local district's initial internal review and panel interview with the applicant, these applicants demonstrate minimum quality and compliance or less, and would require substantial and material revisions before their petition could be recommended by the local district for approval by the local board.

(I) The local district shall issue a letter informing these applicants that they cannot receive an approval recommendation unless the required material revisions are made within thirty (30) days. This letter shall include mention of the local district's agreement to the petitioner's granting the local district ninety (90) additional days to accept or reject its petition.

(II) If an applicant chooses to make the substantial and material changes required, they shall resubmit their petition within the thirty (30) day window. Their resubmittal letter shall include mention of their granting to the district ninety (90) additional days beyond the initial 90-day review period to accept or reject their petition.

(III) Applicants will have only one opportunity to revise their application to make the substantial and material changes required.

(IV) Applicants that fail to make required revisions will have to wait until the following school year's Petition Review Cycle to submit a new application.

(iii) Clarification Group: During the local district's initial internal review and panel interview with the applicant, these applicants demonstrate moderate quality and compliance or better, but require clarification and supplemental information to be submitted before their petition could be recommended by the local district for approval by the local board.

(I) The local district shall issue a letter informing these applicants what clarification(s) and/or supplemental information is required. This letter shall include mention of the local district's agreement to the petitioner's granting the local district ninety (90) additional days to accept or reject its petition.

(II) If an applicant chooses to provide the required clarification(s) and/or supplemental information, they shall resubmit their petition within a thirty (30) day window. Their response letter shall include mention of their granting to the district ninety (90) additional days beyond the initial ninety (90) day review period to accept or reject their petition.

(III) Applicants will have only one opportunity to provide the required clarification(s) and/or supplemental information.

(IV) Applicants that fail to provide the required clarification(s) and/or supplemental information will have to wait until the following school year's petition review cycle to submit a new application.

(iv) Approval Group: During the local district's initial internal review and panel interview with the applicant, these applicants demonstrate near-perfect quality and compliance. For these applicants, the local district will make a recommendation to the local board for approval of the petition without any further action on the part of the applicant.

5. If a local board denies a petition, the local board or the petitioner may request mediation by submitting a written request to the State Board of Education within thirty (30) days of the final denial. If the other party agrees to the mediation, the State Board of Education, or Charter Advisory Committee if directed by the State Board of Education to do so, may assign a mediator to be paid by the OCSC but reimbursed equally by the local board and the petitioner to assist in resolving issues which led to the denial of the petition by the local board.

6. If a local board approves a petition, within thirty (30) days of the approval:

(i) The local board shall deliver a copy of the petition they approved to the OCSC.

(ii) The petitioner shall deliver the approved petition to the OCSC for review by the State Board of Education. The petition shall be in accordance with all OCSC requirements, including those related to formatting, as described in this Rule, on the OCSC website, and within the relevant charter school application.

(e) **CHARTER PETITION SUBMISSIONS TO THE OCSC.**

1. Charter petitioners shall ensure that petitions adhere to all application requirements and related timelines as established by the OCSC pursuant to O.C.G.A. § 20-2-2063 and as outlined in this Rule. Petitioners that have applied to a local district must also provide a copy of their petition to the OCSC within thirty (30) days of submitting their petition to the local district. Petitioners should consult the OCSC website for applicable timelines and requirements. Failure to comply with timelines or requirements may delay or prohibit consideration of the petition until the following school year's petition review cycle.

(f) **CHARTER PETITION REVIEW PROCEDURES BY THE OCSC.**

1. The OCSC shall process all charter petitions submitted to the OCSC on behalf of the State Board of Education as outlined in this Rule.

2. The OCSC shall coordinate with the Charter Advisory Committee, as applicable, to facilitate their review of petitions and their subsequent recommendations to the State Board of Education.

3. The OCSC reserves the right to reject incomplete and/or legally insufficient charter petition submissions.

4. The OCSC staff shall first review petitions to determine if they are complete and meet the legal requirements for submission, not so as to require approval but so as to allow further review.

5. If a charter petition is deemed to be deficient, the petition shall be rejected and the petitioner notified of the reasons for that rejection.

6. Those petitioners who have submitted a petition that is deemed to be complete and to meet the legal requirements for submission, shall attend an interview with OCSC staff as part of the petition review process. A majority of the members of the charter school governing board are required to be in attendance at the interview. The goal of the interview is to gauge the petitioner's overall capacity to sustain operations of a high-quality charter school with regard to academics, operations, governance, finance, and compliance with all non-waivable law, rules, and guidelines.

7. The OCSC shall make recommendations to the State Board of Education for approval or denial of a charter contract and shall specify to the State Board of Education the reasons for its recommendation.

(i) The maximum term for both initial and renewed charter contracts approved by the State Board of Education shall be five years.

8. Existing charter schools may not apply for renewal to a new authorizer. Existing charter schools seeking to switch authorizers must apply to the new authorizer as a new petitioner. Existing charter schools may petition the State Charter Schools Commission (SCSC) for approval as provided by O.C.G.A § 20-2-2063.3(b)(2) or by O.C.G.A. § 20-2-2085 and in accordance with the policies and processes of the SCSC. Existing charter schools that meet the definition of a "high quality charter school" for the past three years (or over the life of the school, if the school has been open for fewer than three years) as established by the OCSC may be eligible for an expedited review in accordance with policies developed by the OCSC.

9. The local school governing team of a system charter school may petition to become a conversion charter school, not subject to the terms of the system charter. In the event that a system charter school becomes a conversion charter, the system shall reflect that change in their annual report.

(g) **REVIEW PROCEDURES FOR OCSC REVIEW OF NEW AND RENEWAL CHARTERS GRANTED BY THE STATE CHARTER SCHOOLS COMMISSION.**

1. The OCSC shall review all approved charter contracts granted by the State Charter Schools Commission (SCSC), including both initial and renewed charters, along with the related petitions and other materials presented by SCSC staff to the SCSC members.

2. The OCSC shall make recommendations to the State Board of Education regarding the State Board of Education's affirmation or overrule of all new or renewal charters, and where the recommendation is to overrule the SCSC's decision, shall specify the reasons for its recommendation to overrule the SCSC.

(2) **CHARTER PETITION APPLICATION REQUIREMENTS FOR ALL CHARTER APPLICANTS.** All charter school petition applications, including applications for renewal, shall meet the following minimum requirements pursuant to O.C.G.A. § 20-2-2063. Additionally, Charter school petition applications shall meet all formatting requirements included in the application.

(a) **STATEMENT OF INTENT.** A description of how the proposed charter school promotes the legislative intent of the charter schools program to "increase student achievement through academic and organizational innovation," in accordance with O.C.G.A. § 20-2-2061.

(b) **STATEMENT OF GOALS AND OBJECTIVES.** A list and detailed description of the petitioner's specific performance-based goals and measurable objectives. At a minimum, the list shall include goals and objectives that are aligned with state and federal assessment standards, measurable on at least an annual basis, attainable, and reflective of the mission set forth in the petition. The petition shall demonstrate that the performance-based goals and measurable objectives will result in continuous improvement in student achievement and will comply with the Single Statewide Accountability System. Failure to meet or exceed the specific performance and measurable objectives as defined in the charter contract may result in charter termination.

(c) **DESCRIPTION OF INTENDED USE OF WAIVERS**. A description of how the school shall utilize its broad flexibility from laws, rules, and regulations as permitted by O.C.G.A. § 20-2-2065(a). Schools cannot waive any federal, state, and local rules, regulations, court orders, and statutes relating to civil rights; insurance; protecting physical and/or mental health and safety of school students, employees, and visitors; conflicts of interest; unlawful conduct; any reporting requirements of O.C.G.A.§§ 20-2-133, 20-2-210, 20-2-211.1, 20-2-320, 20-2-327(c); or virtual instruction requirements of O.C.G.A. § 20-2-167.1. The petition shall include illustrative examples of how the charter school will implement the flexibility granted by the broad flexibility waiver to meet or exceed the performance-based goals and to increase student achievement. Petitions shall explicitly describe what the increased flexibility will allow the petitioner to accomplish during the course of the charter term.

(d) **PARENTAL AND COMMUNITY INVOLVEMENT.** A description of how parents, members of the community, and other interested parties contributed to the development of the petition and how petitioner intends to secure their ongoing involvement in the school and in what capacity. A charter school shall not require parents or guardians to volunteer their time and/or contribute money or in-kind to the school as a condition of enrollment in the school. Any parent or guardian volunteer commitments must be optional to ensure open enrollment.

(e) **DESCRIPTION OF THE EDUCATIONAL PROGRAM.** A description of the following components of the school's educational program, including an explanation of how these components shall contribute to the achievement of the performance-based goals and measurable objectives:

1. The school's mission;

2. The ages and grades to be included;

3. The focus of the curriculum;

4. Instructional methods to be used, including any distinctive or unique instructional techniques or educational programs to be employed;

5. For students with disabilities, a description of how the school shall provide state and federally-mandated services; ensure individuals employed as special education teachers have a bachelor's degree and are either certified in special education or hold a special education license; and comply with all special education laws, including Section 504 of the Rehabilitation Act of 1973, Title II of the Americans With Disabilities Act, and the IDEA;

6. For English Language Learners, a description of how the school shall provide state and federally-mandated services;

7. A description of how the school intends to meet the needs of students identified as gifted and talented;

8. A description of how the school shall provide supplemental educational services as required by federal law and pursuant to State Board of Education Rule 160-4-5-.03. Supplemental Educational Services in Title I Schools, and a description of how the school shall provide remediation in required cases pursuant to State Board of Education Rule 160-4-5-.01. Remedial Education; and

9. The school's proposed annual calendar and a draft daily school schedule for a typical week.

(f) **DESCRIPTION OF ASSESSMENT METHODS**. A description of the school's student assessment plan, including the following components:

1. A statement detailing how the school shall comply with the accountability provisions of O.C.G.A. § 20-14-30 through § 20-14-41 and federal accountability requirements, including the manner in which the school shall work with the authorizer(s) to participate in statewide assessments.

2. A plan to obtain student performance data for each student, which shall include how the current baseline standard of achievement shall be determined in order to meet the petition's performance-based goals and measurable objectives. The data may include standardized assessment results from previous school years. For the charter school's first year, baseline student achievement data shall be collected within three months from the first day of school.

3. A plan to address how assessments shall measure improvement and over what period of time.

4. The school's plan for using assessment data to monitor and improve achievement for all students.

5. For charter high schools, a description of the method for determining that a student has satisfied the requirements for high school graduation as defined in SBOE Rule 160-4-2-.48 High School Graduation Requirements for Students Enrolling in the Ninth Grade for the First Time in the 2008-09 School Year and Subsequent Years.

(g) **DESCRIPTION OF SCHOOL OPERATIONS.** A description of the school's operations and management plan, including the following components:

1. The proposed duration of the charter if for a period of time less than the maximum five years.

2. The proposed attendance zone for the school, pursuant to O.C.G.A. § 20-2-2062(1.1).

3. A description of all rules and procedures that shall govern the admission of students to the charter school, including:

(i) A statement detailing whether the charter school shall utilize any enrollment priorities pursuant to O.C.G.A. § 20-2-2066(a) and (b), and if so, their rank order.

(ii) A statement detailing whether the charter school shall utilize a weighted lottery pursuant to O.C.G.A. § 20-2-2066(a) and (b) to provide an increased chance of admission for educationally disadvantaged students.

(iii) A copy of the proposed admissions application or a description of the application that demonstrates that the application conforms to the requirements of rule and law, including the requirement that charter schools have open enrollment.

(iv) A copy of the policy setting annual enrollment, re-enrollment and lottery deadlines including a description of the lottery procedures detailing how enrollment preferences will be applied and an assurance of complete transparency in its procedures. Complete transparency shall include, at a minimum, publishing the lottery date, time, place and lottery procedures at least two weeks in advance on the school's website. The policy shall ensure that only students who reside in the proposed attendance zone are eligible to participate in the lottery. The policy shall also ensure open enrollment for each grade served for which space is available and shall maintain enrollment at the levels described in the charter and approved by the State Board of Education. A charter school, except for dual language immersion charter schools, may not adopt any policy which expressly restricts enrollment to specific grade levels within the grade span served by the school. A charter school must offer at least one annual enrollment opportunity for each grade served for which space is available.

4. A description of the steps the charter school will take to ensure equitable access to the school for students, faculty, and staff who are representative of the community diversity in the school's proposed attendance zone, including students who are educationally disadvantaged as defined in State Board of Education Rule 160-4-9-.04.

5. Rules and procedures concerning student discipline and dismissal, including code of conduct and student due process procedures.

6. Rules and procedures concerning how the school will handle grievances and complaints from students, parents, and teachers.

7. The manner in which the school shall be insured, the terms and conditions thereof, and the amounts of coverage.

8. A description of the employment procedures and policies of the school. The description of employment procedures and policies shall include, at a minimum, the following:

(i) The charter school's procedures to ensure compliance with the requirement that the school shall not allow any faculty, staff, or governing board member contact with students without having annual documentation of a successful background check as well as the charter school's policies and procedures that establish the requirement that faculty, staff, and governing board members must immediately disclose to the school the occurrence of any arrests or other such occurrences which would have resulted in an unsuccessful background check if they had

occurred prior to the background check. Each school employee must have a clearance certificate from the Georgia Professional Standards Commission (GaPSC).

9. A description of the facilities to be used, their location(s), and any pending modifications necessary for utilization for educational purposes. The description must include the following components:

(i) Description, including documentation, of steps petitioner has taken relevant to the Georgia Department of Education's (DOE) facilities review process.

(ii) A Certificate of Occupancy must be obtained prior to student occupancy of the proposed facility. The latest possible date by which the Certificate of Occupancy shall be obtained must be included in the charter petition.

(iii) The school's emergency safety plan, which may be a statement that the petitioner will prepare a safety plan in accordance with O.C.G.A. § 20-2-1185 and submit and obtain approval from the Georgia Emergency Management Agency by a specified date.

(iv) A statement that any future facility used to house students will be subject to approval by the local board and the DOE prior to occupancy.

(v) Documentation of ownership or a copy of the lease of the facility. If the facility has not been obtained or the documentation is not available at the time the petition is submitted, the petitioner shall provide a timeline for obtaining such facilities or providing such documentation and shall provide such documentation to the OCSC as soon as it is available. This does not apply to conversion charter schools.

10. A statement describing whether the building is new or existing. In the case of a locally approved charter school, building plans must be approved by the facilities department of the local board. For all other charter schools, building plans only need to be approved by the DOE.

11. The manner in which the school's enrollment count will be determined for purposes of calculating charter school funding, pursuant to O.C.G.A. § 20-2-2068.1(c) or § 20-2-2090(d), as appropriate.

(h) **DEMONSTRATION OF FISCAL FEASIBILITY AND CONTROLS.** A description of the school's financial structure, including the following components:

1. Designation of a chief financial officer who shall not serve simultaneously as the school leader for the charter school and possesses the following credentials:

(i) A baccalaureate or higher degree in business, accounting, or finance from an accredited college or university and a minimum of four years experience in a field related to business or finance; or

(ii) Documented experience of ten or more years in the field of business and financial management.

2. Charter schools as defined by O.C.G.A. § 20-2-2062 are public schools, therefore the school shall comply with Governmental Accounting Standards Board (GASB) Statements and Interpretations, which constitute Generally Accepted Accounting Principles (GAAP) for financial reporting.

3. A statement that the school shall be subject to an annual financial audit conducted by an independent Georgia licensed Certified Public Accountant, in accordance with O.C.G.A. § 20-2-2065(b)(7). The financial reporting format shall comply with generally accepted government auditing standards (GAGAS).

4. A statement indicating whether the school shall utilize the local school board for fiscal management or other services; and, if so, specifics regarding what level of autonomy the school shall have over budgets and expenditures and/or any other area for which the school has contracted with the local board to provide services.

5. A statement that the school shall comply with federal monitoring and federal audits required for schools that receive federal funds.

6. A statement that at least ninety (90) percent of QBE funds earned by students in a virtual charter school whose total student enrollment is composed of more than five (5) percent of students who reside in another local school system shall be expended on virtual instruction costs in accordance with O.C.G.A. § 20-2-167.1.

7. A statement from the applicable local school system that the amount identified in the locally approved petition budget for base per-pupil funding is based upon the school system's good-faith estimate of the base per-pupil amount at which it will fund the charter school as long as the school system receives the state and local revenues upon which the approved school budget is based.

8. A statement that the school shall submit any required financial information to the local school system, in accordance with the policies and deadlines established by the system, for inclusion in the local school system's annual Financial Review Report (DE046) to the DOE.

(i) **DESCRIPTION OF GOVERNANCE STRUCTURE.** A description of the school's governance structure, including the following components:

1. A description of how the charter school shall be governed.

2. A statement that the governing board shall be subject to the provisions of O.C.G.A. § 50-14-1 *et seq.* (Open Meetings Act) and O.C.G.A. § 50-18-70 *et seq.* (Open Records Act).

3. A statement that the governing board shall be subject to the oversight of the local board.

4. A statement regarding the governing board's function, duties, composition, how and when members shall be selected, how members will be representative of the community diversity in the charter school's proposed attendance zone, how long members shall serve, how members may be removed from office, how members shall avoid conflicts of interests, and an assurance that the Governing Board will comply with all laws and State Board of Education rules and guidelines related to Charter School Governing Board training. Members of the local board and the superintendent of the local school system are prohibited from serving on the charter school's governing board, unless otherwise stipulated by the OCSC. Charter school employees are prohibited from serving on the school's governing board, unless otherwise stipulated by the OCSC. The charter school principal may serve only as an ex officio member of the charter school governing board.

5. A description of how parents, members of the community, and other interested parties will be involved in the governing board of the school.

6. A list of proposed business arrangements or partnerships with existing schools, educational programs, businesses, or nonprofit organizations and a disclosure of any potential conflicts of interest. This includes a copy of any intended contracts for the provision of educational management services or the provision of supplemental educational services and remediation, and any agreements with other local schools for the charter school students' participation in extracurricular activities such as interscholastic sports and clubs.

7. Provide a Roles and Responsibilities chart between the College and Career Academy governing board, the School System, and the CCA's higher education and business partners that includes the following:

(i) Information on the CCA's decision making authority regarding personnel decisions, financial decisions, curriculum and instruction resource allocation, establishing and monitoring the achievement of school improvement goals, and school operations,

(ii) Information on how the CCA will be funded by the District and other strategic partners; and

(iii) Information on the services and supports to be provided to the CCA by the local district.

8. A description of the method that the local board and the charter school plan to utilize for resolving conflicts with each other.

9. Evidence that the locally approved charter school has been incorporated as a Georgia nonprofit corporation pursuant to the Georgia Nonprofit Corporation Code, O.C.G.A. § 14-3-101 *et seq.*, as required by O.C.G.A. § 20-2-2065(b)(4). This evidence shall include an official copy of the certificate of incorporation from the Georgia Secretary of State and a copy of the by-laws for the Georgia nonprofit corporation. By-laws must specify the duties of governing boards' members with particularity. This requirement shall apply to both start-up and conversion charter schools.

(j) **STATEMENT ON ANNUAL REPORT.** A statement that the charter school shall provide an annual report to the OCSC, the local board of education, and parents and guardians of students enrolled in the school by November 1 of each year, in accordance O.C.G.A. § 20-2-2067.1(c) and that such report shall conform to the template provided by the OCSC.

(3) **ADDITIONAL PETITION REQUIREMENTS FOR CONVERSION APPLICANTS ONLY.** In addition to the requirements of Part 2 of this Rule, all conversion charter school petitions shall include the following components:

(a) A statement that the petitioner has held the appropriate votes by secret ballot as required pursuant to O.C.G.A. § 20-2-2064(a)(1) and (2), and a description of the procedures and outcome of those votes.

1. For purposes of the vote required pursuant to O.C.G.A. § 20-2-2064(a)(1)(A), each faculty or instructional staff member shall have a single vote.

2. For purposes of the vote required pursuant to O.C.G.A. § 20-2-2064(a)(1)(B), a student's parent(s) or guardian(s) shall collectively have one vote for each student enrolled in the school although parents of students at the school who are eligible to vote as faculty or instructional staff shall also have a single vote in the vote required pursuant to O.C.G.A. § 20-2-2064(a)(1)(B).

(b) A statement detailing the innovations that shall materially distinguish the conversion charter from the school's pre-conversion model and that require the flexibility offered through the charter model. If an innovation is already implemented at other district schools, it can still be considered innovative for the charter school applicant.

(c) A statement detailing the conversion charter's plan to operate with substantial autonomy. This statement shall include a description of how financial resources will be managed, how human resources will be managed, how personnel will be evaluated; and a description of school governance and the extent to which parents, community members, and other stakeholders will participate in the governance of the school. The petition shall describe all policies, procedures, and practices that will materially distinguish the conversion school from the school's pre-conversion model.

(d) A statement from the applicable local school system detailing the district's plan to ensure the conversion charter school will operate with substantial autonomy, and how the district will ensure its effective support of the charter school, including what, if any, changes it will make to its central office to ensure that the charter school is properly supported and operates with substantial autonomy.

(4) **CHARTER PETITION REQUIREMENTS FOR STATE CHARTERED SPECIAL SCHOOL APPLICANTS.** In addition to the petition submitted in accordance with Part 2 of this Rule, the OCSC reserves the right to request supplemental information, as needed. The content of a state chartered school petition may not be altered from the content that was submitted to the local board(s) that denied the petition. All state chartered special schools shall also submit to the OCSC:

(a) A statement regarding whether the school intends to request from the OCSC a local referendum pursuant to O.C.G.A. § 20-2-2068.1(e) and, if so, the timeline for pursuing such a request.

(b) A copy of the local board's written, specific reasons for denial of the charter petition and a written response to the local board's reasons for denial.

(c) Any supplemental documentation the OCSC may require for review and evaluation of the application.

(5) Charter Petition Requirements for Jointly Authorized Applicants.

(a) Two or more local boards may jointly authorize a local charter school pursuant to O.C.G.A. § 20-2-2063(c). The local boards may authorize the charter school by one of the following methods:

1. Each local board shall approve the charter petition before it is submitted to the State Board of Education; or

2. One local board shall submit the petition and enter into an interagency agreement with the other local board(s). Such interagency agreement must specify how local revenues shall be allocated to the charter school. The agreement shall become an attachment to the jointly authorized charter petition.

(b) The OCSC will calculate student accountability for jointly authorized charter schools and for the authorizing districts, in accordance with the Single Statewide Accountability System.

(c) Petitions involving two or more local boards shall follow the same requirements as other charter petitions, as outlined in Part 2 above, and shall also include the following components:

1. A statement specifying which entity shall be the fiscal agent for the jointly authorized charter school.

2. A statement from the applicable local boards guaranteeing that the base per-pupil amount at which it will fund the charter school is the amount identified in the locally approved petition budget as long as the school system receives the state and local revenues upon which the approved school budget is based.

3. An agreement detailing the involvement and responsibilities of each local board regarding the jointly authorized charter school.

(6) Charter Petition Requirements for Charter High School Cluster Applicants.

(a) A high school and all the middle and elementary schools whose students matriculate to that high school may act as a single charter petitioner to convert to charter school status pursuant to O.C.G.A. § 20-2-2063(b). The charter high school cluster petition may include new and existing start-up charter schools, conversion charter schools, and renewals thereof. A charter high school cluster petition must address petition requirements for each school as described in Part 2 above, as applicable. A high school cluster must be governed by a nonprofit charter school governing board. In addition, the petition must include the following components:

1. A statement that the petitioner has held the appropriate votes by secret ballot as required pursuant to O.C.G.A. § 20-2-2064(a)(1) and (2), and a description of the procedures and outcome of those votes.

(i) For purposes of the vote required pursuant to O.C.G.A. § 20-2-2064(a)(1)(A), each faculty or instructional staff member shall have a single vote.

(ii) For purposes of the vote required pursuant to O.C.G.A. § 20-2-2064(a)(1)(B), a student's parent(s) or guardian(s) shall collectively have one vote for each student enrolled in the school.

2. A statement detailing the rationale for petitioning as a high school cluster, such as innovations that will materially distinguish the charter cluster from the cluster's pre-conversion model and that require the flexibility offered through the charter model.

3. A description of how the charter high school cluster as a whole shall be held accountable for performance goals stated in the charter.

Cite as Ga. Comp. R. & Regs. R. 160-4-9-.05

AUTHORITY: O.C.G.A. §§ 20-2-161**,** 20-2-167.1**,** 20-2-240**,** 20-2-2062**,** 20-2-2063**,** 20-2-2063.1**,** 20-2-2063.3**,** 20-2-2072 **through** 20-2-2074**,** 20-2-2081**.**

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Department 290. RULES OF DEPARTMENT OF HUMAN SERVICES

Chapter 290-2. FAMILY AND CHILDREN SERVICES

Subject 290-2-3. RULES AND REGULATIONS FOR FAMILY CHILD CARE LEARNING HOMES

290-2-3-.03 Definitions

In these rules, unless the context otherwise requires, the capitalized words and phrases set forth herein shall mean the following:

(a) "Adult" means any competent individual eighteen (18) years of age or older.

(b) "Adverse Action" means any Intermediate or Closure Action issued as a result of one or more rule violations.

(c) "Child" or "Children" means any person(s) under 18 years of age for whom child care service(s) is (are) provided in a Home. For purposes of these rules, the terms shall not include Children that are related to the License Holder or applicant as defined in these rules or Children whose Parent(s) reside in the same residence as the License Holder or applicant.

(d) "Closure Action" means the most restrictive category of Enforcement Actions including emergency closure, long-term suspension and revocation.

(e) "Comprehensive Records Check Determination" means a satisfactory or unsatisfactory determination by the Department, based upon a Federal Bureau of Investigation fingerprint based criminal record check, a search of appropriate sex offender registries, repositories, or data bases, compliance with relevant state and federal law, and a search of the following registries, repositories or databases in the state where the actual or potential employee or provider resides and in each state where such individual resided during the preceding five years: criminal registry or repository; state sex offender registry or repository; and state based child abuse and neglect registry and database.

(f) "Crime" means:

1. Any felony pursuant to O.C.G.A. § 20-1A-30 and in accordance with 42 U.S.C. § 9858f(c)(1)(E);

2. A violation of O.C.G.A. § 16-5-23, relating to simple battery, where the victim is a minor;

3. A violation of O.C.G.A. § 16-5-23.1, relating to battery, where the victim is a minor;

4. A violation of O.C.G.A. § 16-21-1, relating to contributing to the delinquency of a minor;

5. A violation of O.C.G.A. § 16-6-1 et seq. relating to sexual offenses;

6. A violation of O.C.G.A. § 16-5-29, relating to battery of an unborn child;

7. A violation of O.C.G.A. § 16-5-60, relating to reckless conduct causing harm when the victim is a minor;

8. A violation of O.C.G.A. § 16-5-70, relating to cruelty to children;

9. A violation of O.C.G.A. § 16-12-1.1, relating to child care facility operators being prohibited from employing or allowing to reside or be domiciled persons with certain past criminal violations;

10. A violation of O.C.G.A. §§ 16-12-100, 16-12-100.1, 16-12-100.2, 16-12-100.3, relating to obscenity and related offenses where the victim is a minor;

11. A violation of O.C.G.A. § 40-6-391, relating to endangering a child while driving under the influence of alcohol or drugs;

12. A violation of O.C.G.A. § 19-7-5, relating to a failing to report if mandated to do so by law;

13. Child pornography, in accordance with 42 U.S.C. § 9858f(c)(1)(E);

14. Abuse of, endangerment of, or sexual assault against a child by an adult, in accordance with 42 U.S.C. § 9858f(c)(1)(E);

15. Any other violent misdemeanor against a child by an adult, in accordance with 42 U.S.C. § 9858f(c)(1)(E);

16. A violation of O.C.G.A. § 16-4-1, relating to criminal attempt when the crime attempted is any of the crimes specified by this paragraph; or

17. Any other offenses committed in another jurisdiction which, if committed in this state, would be one of the enumerated crimes listed in this paragraph.

(g) "Criminal Record" means:

1. Conviction of a crime; or

2. Arrest, charge, and sentencing for a crime where:

(i) A plea of nolo contendere was entered to the charge; or

(ii) First offender treatment without adjudication of guilt pursuant to the charge was granted; provided, however, that this division shall not apply to a violation of O.C.G.A. § 16-13-1 et seq., relating to controlled substances, or any other offense committed in another jurisdiction which, if it were committed in this state, would be a violation of O.C.G.A. § 16-13-1 et seq. if such violation or offense constituted only simple possession; or

(iii) Adjudication or sentence was otherwise withheld or not entered on the charge; provided, however, that this division shall not apply to a violation of O.C.G.A. § 16-13-1 et seq. relating to controlled substances, or any other offense committed in another jurisdiction which, if it were committed in this state, would be a violation of Chapter 13 of Title 16 if such violation or offense constituted only simple possession; or

3. Arrest and being charged for a crime if the charge is pending, unless the time for prosecuting such crime has expired pursuant to O.C.G.A. § 17-3-1 et seq.

(h) "Department" means Bright from the Start: Georgia Department of Early Care and Learning.

(i) "Employee" means any person, other than the Provider or Provisional Employee, who has submitted a Records Check Application and has received a satisfactory Comprehensive Records Check Determination and who:

1. Regardless of age, is compensated by a Home for the care of children;

2. Regardless of age, cares for, supervises or has unsupervised access to children at the Home; or

3. Is 17 years of age or older and resides at the Home; or

4. Regardless of age, performs duties for or services that benefit the Home, with or without compensation, which involve personal contact between that person and any child being cared for by the Home, including but not limited

to volunteers that perform consistent services for the Home, where services are considered consistent when provided more than once in a ninety calendar day period; or

5. Regardless of age, is a parent or legal guardian of a child in care who is deemed an employee by the Home or either resides at the Home and is age 17 or older, or is compensated in any fashion by the Home except through appropriate state or federal funds; or

6. Regardless of age, is an independent contractor hired by the Home to offer supplemental educational or physical activities for Children in care; or

7. Regardless of age, is a Student-in-Training.

(j) "Enforcement Action" means any action issued as a result of one or more rule violations ranging from technical assistance to a Closure Action.

(k) "Family Child Care Learning Home" or "Home" means a private residence operated by any person who receives therein for pay for supervision and care fewer than 24 hours per day, without transfer of legal custody, at least three but not more than six Children under 13 years of age who are not Related to such persons and whose Parent(s) are not residents in the same private residence as the Provider and which is required to be licensed; provided, however, that the total number of unrelated Children cared for in such Home, for pay and not for pay, may not exceed six Children under 13 years of age at one time, except that a Provider may care for two additional children three years of age or older for two designated one hour periods daily upon approval by the Department.

(l) "Fingerprint" means any inked fingerprint card or an electronic image of a person's fingerprint.

(m) "Fingerprint Records Check Determination" means a satisfactory or unsatisfactory determination made by the Department that is based on national criminal history record information obtained by the use of Fingerprints.

(n) "Intermediate Action" means a moderately restrictive category of Enforcement Actions including public reprimands, fines, per rule fines, per day fines, restrictions, emergency monitoring and short-term suspension.

(o) "License" means the document issued by the Department to authorize the License Holder to whom it is issued to operate a Family Child Care Learning Home in accordance with these rules.

(p) "License Holder" means the individual issued a License by the Department to operate a Home at a particular location who is responsible for the operation and maintenance of the Home and who primarily provides care in the Home in accordance with these rules.

(q) "Parent" means a person related within the second degree of consanguinity by either blood or marriage, or a person with lawful custody, or a state-regulated foster parent, or a legal guardian of a child in care. For purposes of these rules, a Parent shall not be considered an Employee unless such Parent is deemed an Employee by the Home or either resides in the Home or is compensated in any way by the Home other than through appropriate state or federal funds.

(r) "Plan of Correction" means a written plan prepared by the License Holder or applicant and submitted to and approved by the Department which states the procedure(s), method(s) and time frame(s) that will be used to correct the area(s) of noncompliance with these rules.

(s) "Prevention Action" means the least restrictive category of Enforcement Actions including technical assistance, citation, formal notice letter and office conference.

(t) "Provider" means the License Holder or applicant of a Family Child Care Learning Home who has submitted a Records Check Application and has received a satisfactory Comprehensive Records Check Determination and who is also the person that primarily provides care in the Home.

(u) "Provisional Employee" means a person other than the Provider or Employee, who has submitted a Records Check Application to become an Employee and has not received a Comprehensive Records Check Determination but who has received a satisfactory Fingerprint Records Check Determination and who must be supervised at all times by another Staff member who has a current and valid satisfactory Comprehensive Records Check Determination on file.

(v) "Records Check Application" means a document created by the Department to be completed and submitted to the Department by every actual and potential Provider, Employee and Provisional Employee of the Home that indicates such information as the Department deems appropriate and which authorizes the Department to receive any sex offender registry, child abuse and neglect registry and criminal history record information pertaining to the individual from any local, state or national agency of appropriate jurisdiction and render a Fingerprint or Comprehensive Records Check Determination.

(w) "Records Check Clearance Date" means the date upon which an individual's fingerprint report was generated.

(x) "Related" or "Related Children" means children that are related to the Provider within the third degree of consanguinity or affinity by either blood or marriage (i.e., sons, daughters, grandchildren, nieces, nephews, first cousins), or under the legal guardianship, custody or state-regulated foster care of the Provider.

(y) "Staff" or "Personnel" means all persons including the Provider, Employees and Provisional Employees.

(z) "Supervision" and "Supervised" means that the Provider or authorized Adult providing care is alert, is providing watchful oversight to the Children, is able to respond promptly to the needs and actions of the Children and can intervene promptly in the case of an emergency.

(aa) "Student-in-Training" means a student currently enrolled in either a high school recognized by the Department of Education or an early education curriculum through an accredited school of higher education which requires or permits the student to observe and participate in the care of Children at a Home during a limited period of time, i.e., one quarter, one trimester or one semester, provided that they are under the direct supervision of Home personnel at all times.

(bb) "Valid Evidence" means electronic proof of a satisfactory Fingerprint Records Check Determination or a satisfactory Comprehensive Records Check Determination as follows:

1. Providers - a valid and current satisfactory Comprehensive Records Check Determination letter issued by the Department; provided that the letter for the Provider must have a Records Check Clearance Date that is no older than the immediate preceding 12 months of the date of licensure of the Home, and the Provider has not had a lapse of employment from the child care industry that lasted for 180 days (6 months) or longer;

2. Provisional Employees - a valid and current satisfactory Fingerprint Records Check Determination issued by the Department; provided that the letter for a newly hired Provisional Employee must have a Records Check Clearance Date that is within the immediate preceding 12 months of the Provisional Employee's date of hire, and the Provisional Employee has not had a lapse of employment from the child care industry that lasted for 180 days (6 months) or longer;

3. Employees - a valid and current satisfactory Comprehensive Records Check Determination letter issued by the Department; provided that the letter for a newly hired Employee must have a Records Check Clearance Date that is within the immediate preceding 12 months of the Employee's date of hire, and the Employee has not had a lapse of employment from the child care industry that lasted for 180 days (6 months) or longer.

(cc) "Violation Class" means the category on the compliance and enforcement chart that corresponds with the level of risk of harm or actual harm as a result of a rule violation.

(dd) "Violation History Level" means the category on the compliance and enforcement chart that corresponds with the prior history of continued rule violations.

Cite as Ga. Comp. R. & Regs. R. 290-2-3-.03

AUTHORITY: O.C.G.A. § 20-1A-1 et seq., 42 U.S.C. § 9857 et seq.

HISTORY: Original Rule entitled "Other Requirements" adopted. F. Jan. 30, 1974; eff. Feb. 19, 1974.

Repealed: F. Oct. 1, 1974; eff. Oct. 21, 1974.

Amended: New Rule entitled "Staff Requirements" adopted. F. Feb. 21, 1983; eff. Mar. 23, 1983, as specified by the Agency.

Repealed: New Rule entitled "Definitions" adopted. F. Feb. 4, 1994; eff. Mar. 1, 1994, as specified by the Agency.

Amended: F. Aug. 16, 2013; eff. Sep. 5, 2013.

Amended: F. Dec. 13, 2013; eff. Jan. 2, 2014.

Amended: F. Dec. 4, 2015; eff. Dec. 24, 2015.

Amended: F. June 2, 2016; eff. June 22, 2016.

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Amended: F. Aug. 26, 2022; eff. Sep. 15, 2022.

Amended: F. May 15, 2025; eff. June 4, 2025.

290-2-3-.07 Staffing and Supervision

(1) The Provider shall be at least 21 years of age.

(2) Providers must possess and submit valid evidence/documentation of one of the following credentials/degrees issued by either the organizations listed below, an accredited educational institution, or another organization approved/recognized by the Department:

(a) Child Development Associate (CDA) credential (issued by the Council for Professional Recognition and kept current); or

(b) Technical Certificate of Credit (TCC) in Early Childhood Education; or

(c) Technical College Diploma (TCD) in Early Childhood Education; or

(d) Associate Degree in Early Childhood Education (AA, AAS, AAT); or

(e) Paraprofessional Certificate (issued by the Georgia Professional Standards Commission and kept current); or

(f) Bachelor's degree in Early Childhood Education; or

(g) Master's degree in Early Childhood Education.

(3) Providers and applicants who have submitted an application for License on or before June 30, 2009 shall be exempt from the requirement stated in (2)(a) through (g) above, except if the Family Child Care Learning Home

closes for business and then submits a new application for License on or after July 1, 2009. Any Provider who submits an application for License on or after July 1, 2009 must meet one of the education requirements listed above. Any Provider who has submitted an application for License on or before June 30, 2009 shall have a high school diploma, General Education Diploma (GED), or similar credentials and shall submit valid evidence/documentation of such credential.

(4) A Home must maintain a personnel file on the Provider, all Employees, Provisional Employees, Personnel, Staff, Students-in-Training, Volunteers, Clerical, Housekeeping, Maintenance and other Support Staff for the duration of the term of employment plus one (1) calendar year, and it shall contain the following: identifying information to include: name, date of birth, social security number, current address and current telephone number; employment history for the past ten years; as applicable to the position held: evidence of education and qualifying work experience, evidence of required program orientation including date and signature of person providing the orientation; evidence of all training required by these rules which shall include: title of training, date of training, trainer's signature, location of training and number of clock hours obtained; a statement completed by the staff member that the information provided is true and accurate; and any other records required by these rules.

(5) Program Orientation. Prior to assignment to children or task, the Provider and all Employees (i.e., Volunteers, Students-in-Training, Independent Contractors, etc.) and Provisional Employees must receive initial program orientation.

(6) The initial program orientation must include the following subjects:

(a) the Home's policies and procedures;

(b) the portions of these rules dealing with the care, health and safety of children;

(c) the Staff person's assigned duties and responsibilities;

(d) reporting requirements for suspected cases of child abuse, neglect or deprivation;

(e) communicable diseases and serious injuries;

(f) emergency weather plans;

(g) the program's emergency preparedness plan;

(h) childhood injury control;

(i) the administration of medicine;

(j) reducing the risk of Sudden Unexpected Infant Death (SUID) which includes Sudden Infant Death Syndrome (SIDS);

(k) hand washing;

(l) fire safety;

(m) water safety;

(n) and prevention of HIV/AIDS and blood borne pathogens.

(7) Health and Safety Orientation. The Provider, Employees and Provisional Employees with direct care responsibilities shall complete health and safety orientation training within the first 90 days of employment. The state-approved training hours obtained will count toward required first year training hours. The training must address the following health and safety topics:

(a) prevention and control of infectious diseases (including immunization);

(b) prevention of sudden infant death syndrome and use of safe sleeping practices;

(c) administration of medication, consistent with standards for parental consent;

(d) prevention of and response to emergencies due to food and allergic reactions;

(e) building and physical premises safety, including identification of and protection from hazards that can cause bodily injury such as electrical hazards, bodies of water, and vehicular traffic;

(f) prevention of shaken baby syndrome, abusive head trauma and child maltreatment;

(g) emergency preparedness and response planning for emergencies resulting from a natural disaster or a human-caused event (such as violence at a child care facility);

(h) handling and storage of hazardous materials and the appropriate disposal of bio contaminants;

(i) precautions in transporting children; recognition and reporting of child abuse and neglect; and

(j) child development to include all major domains: cognitive; social and emotional; physical development and motor skills; communication, language, and literacy; and approaches to play and learning.

(8) First Aid and CPR.

(a) Every Provider, Provisional Employee and Employee with direct care responsibilities shall have current evidence of successful completion of a biennial training program in pediatric cardiopulmonary resuscitation (CPR) and a triennial training program in pediatric first aid which have been offered by certified or licensed health care professionals or trainers. Such training must be completed by the Provider prior to initial licensure. Training must be completed within 45 days from the date of hire for Provisional Employees and Employees. Current and valid evidence of the successful completion of such training shall be maintained on the Home's premises.

(b) The Provider, a Provisional Employee or Employee with current evidence of successful completion of pediatric cardiopulmonary resuscitation (CPR) and pediatric first aid must always be on the Home's premises whenever any Child is present.

(c) The Provider, a Provisional Employee, or Employee with current evidence of successful completion of pediatric cardiopulmonary resuscitation (CPR) and pediatric first aid must always be present on any field trip or during the transportation of children.

(9) Annual Training.

(a) Every calendar year after the first year of employment, the Provider, Provisional Employees and Employees shall attend ten (10) clock hours of diverse training which is offered by an accredited college, university or vocational program or other Department-approved source.

(b) The annual ten (10) clock hours of training shall include the following:

1. At least two (2) hours in evidence based, developmentally appropriate language and literacy practices;

2. At least two (2) hours in on-going child development and health and safety related topics, which could include, but not be limited to:

(i) Child development (e.g., developmental domains (cognitive; social and emotional; physical development and motor skills; communication, language, and literacy; approaches to play and learning), discipline and guidance techniques, children with special needs);

(ii) Health (e.g., nutrition and the support of breast feeding, physical activity, prevention and control of illnesses and infectious diseases, immunizations, prevention of and response to emergencies due to food and allergic reactions, cleanliness, sanitation, and the appropriate disposal of bio contaminants);

(iii) Safety (e.g., prevention of Sudden Unexpected Infant Death (SUID) which includes Sudden Infant Death Syndrome (SIDS) and the use of safe sleeping practices, medication administration, injury control and prevention, transportation, handling and storage of hazardous materials, identification of and protection from hazards that can cause bodily injury such as electrical hazards, bodies of water, and vehicular traffic, and emergency preparedness planning and response);

(iv) Child abuse and neglect (e.g., identification and reporting, meeting the needs of abused and/or neglected children, prevention of shaken baby syndrome, abusive head trauma and child maltreatment).

3. No more than two (2) of the required ten (10) hours in business-related topics (e.g., parental communication, recordkeeping, management, business planning).

(10) Documentation of Training. Evidence of orientation and training shall be documented and maintained in the Personnel file and/or Georgia's workforce registry and professional development system of each Staff member which shall be available to the Department for inspection. Documentation shall include the title of the training courses, the dates, and the number of hours of the courses, and the names of the trainers or sponsoring organizations.

(11) The Provider, Employees and Provisional Employees shall never have been shown by credible evidence, e.g., a court, a department investigation or other reliable evidence to have abused, neglected, sexually exploited, or deprived a child or adult or to have subjected any person to serious injury as a result of intentional or grossly negligent misconduct. The Department may request an oral or written statement to this effect at the time of application or hire or at any other time the Department has reason to believe that a Provider, Employee or Provisional Employee is not qualified under these rules to administer or work in the Home. Upon said request, the Provider, Employee, or Provisional Employee shall provide this statement to the Department.

(12) The Provider, Employees and Provisional Employees must be able to perform adequately the job duties of providing for the care and supervision of the children in the Home in accordance with these rules.

(13) The Provider, Employees and Provisional Employees shall not have made any material false statements concerning qualifications requirements either to the Department or to the Provider.

(14) The Provider, Employees and Provisional Employees must provide additional reasonable verification of the qualifications of the Provider, Employees and Provisional Employees upon request by the Department. Reasonable verification may include, but need not be limited to any or all of the following: statement(s) from an attending physician or other health care professional attesting to the mental and/or physical health of the Provider, Provisional Employee or Employee; letters of reference from designated persons in the community where the Provider, Provisional Employee and/or Employee intend to work or is working; certified copies of court orders; and additional records checks.

(15) The Provider, Employees and Provisional Employees must comply with the background check requirements as outlined in Rule 290-2-3-.21 Criminal Records and Comprehensive Background Checks.

(16) The total number of Children not Related to the Provider in the Family Child Care Learning Home, for pay or not for pay, cannot exceed six Children, except that a Provider may care for two additional children who are three years of age or older for two designated one hour periods daily upon approval by the Department.

(17) Whenever Related Children or Children who reside in the Home are present in the Home, the total number of children present under the age of thirteen years may not exceed twelve, and the space requirement of 35 square feet per each child present must be met.

(18) At least one Staff person with a satisfactory Comprehensive Records Check Determination shall supervise Children at all times appropriate to the individual age, needs and capabilities of each child. Such supervision must include, but not be limited to, indoor and outdoor activities, mealtimes, naptime, transportation, field trips, and transitions between activities. "Supervision" means Staff members are providing watchful oversight to the children, volunteers and Students-in-Training. The person(s) supervising in the child care area must be alert, positioned to maximize their ability to hear and see the children at all times, and able to respond promptly to the needs and actions of the children being supervised, as well as the actions of the volunteers and Students-in-Training, and provide timely attention to the children's actions and needs. Staff shall be attentive and participating with all children during mealtimes and shall be seated within an arm's length away from children thirty-six (36) months of age and younger. Plans shall be made to obtain additional Staff help in cases of emergencies.

(19) An Employee or Provisional Employee, who must be at least sixteen (16) years of age, must be present to assist with supervision whenever more than three (3) children under the age of twelve (12) months are present, more than six (6) children under the age of three (3) years are present or more than eight (8) children under the age of five (5) years are present.

(20) If Children are allowed to participate in water activities where the water is over two feet in depth, the Provider or an Adult shall supervise such activities and must have successfully completed a training program in lifeguarding offered by a water-safety instructor certified by the American Red Cross or YMCA or other recognized standard setting agency for water safety instruction.

(a) For water-related activities where water is over two feet in depth, the following Staff: Child ratios shall be maintained:

Ages of Children	**Staff: Child Ratio**
Under 2 ½	1:2
2 1/2 to 4 years	1:5
4 years & older (who cannot swim a distance of 15 yds. unassisted)	1:6
4 years & older (who can swim a distance of 15 yds. unassisted)	1:8

(b) In lieu of requiring each Child four years and older to take a swimming test, the Provider may accept copies of verifications from a recognized water safety instruction organization stating that the Child has successfully completed a swimming class which required the Child to swim a distance of 15 yards unassisted.

(21) Employees. A licensed Home may hire Employees. All Employees:

(a) must comply with the background check requirements as outlined in Rule 290-2-3-.21, Criminal Records and Comprehensive Background Checks;

(b) must be informed of the rules for Family Child Care Learning Homes and the Home's policies and procedures for the age group for which they will be providing care;

(c) must be informed of the Home's policies and procedures necessary to the proper performance of their job duties in compliance with the Rules for Family Child Care Learning Homes; and

(d) must participate in the orientation and training required by these rules.

(22) Provisional Employees. A licensed Home may hire Provisional Employees. All Provisional Employees:

(a) must comply with the background check requirements as outlined in Rule 290-2-3-.21, Criminal Records and Comprehensive Background Checks;

(b) must be informed of the rules for Family Child Care Learning Homes and the Home's policies and procedures for the age group for which they will be providing care;

(c) must be informed of the Home's policies and procedures necessary to the proper performance of their job duties in compliance with the Rules for Family Child Care Learning Homes;

(d) must participate in the orientation and training required by these rules;

(e) must be supervised at all times by the Provider or an Employee with a valid and current satisfactory Comprehensive Records Check Determination; and

(f) may be hired as a permanent Employee by the Home only if the individual receives a satisfactory Comprehensive Records Check Determination by the Department and meets all other qualification requirements in these rules.

(23) Independent Contractors. A Home may have an independent contractor to offer supplemental educational or physical activities for Children in care.

(a) Such an independent contractor is considered either an Employee or Provisional Employee of the Home for the purpose of these rules and must comply with the background check requirements as outlined in Rule 290-2-3-.21, Criminal Records and Comprehensive Background Checks before being present at the Home while children are present for care or before residing in the Home.

(b) Such an independent contractor is exempted from annual training and first-aid/CPR training requirements.

(24) Parents. The Home may have Parents occasionally assist in a classroom, chaperone or accompany a group of Children from the Home on a field trip.

(a) A Parent that is this type of occasional assistant is not required to obtain a Criminal Records Check Determination; however, a Parent that is deemed to be a staff member by the Home or who is age 17 or older and resides at the Home or who is compensated in any way by the Home except through appropriate state or federal funds is considered an Employee or Provisional Employee for purposes of these rules and must comply with the background check requirements as outlined in Rule 290-2-3-.21, Criminal Records and Comprehensive Background Checks before being present at the Home while Children other than their own are present for care or before residing in the Home;

(b) No Parent shall be solely responsible for Children other than their own and must be under continuous direct supervision of the Provider or Home Employee with a valid and current satisfactory Comprehensive Records Check Determination while in the presence of Children in care other than their own; and

(c) Such Parent is exempted from annual training and first-aid/CPR training requirements.

(25) Volunteers. The Home may have volunteers other than Parents help in a classroom, chaperone or accompany a group of Children from the Home on a field trip.

(a) Volunteers that provide consistent services are considered either Employees or Provisional Employees for the purposes of these rules and must comply with the background check requirements as outlined in Rule 290-2-3-.21, Criminal Records and Comprehensive Background Checks before being present at the Home while children are present for care or before residing in the Home;

(b) No volunteer shall be solely responsible for Children other than their own and must be under continuous direct supervision of the Provider or Home Employee with a valid and current satisfactory Comprehensive Records Check Determination while in the presence of Children other than their own; and

(c) Such volunteer is exempted from annual training and first-aid/CPR training requirements.

(26) Students-in-Training. The Home may have Students-in-Training.

(a) Students-in-Training are considered either Employees or Provisional Employees for the purposes of these rules and must comply with the background check requirements as outlined in Rule 290-2-3-.21, Criminal Records and Comprehensive Background Checks before being present at the Home while children are present for care or before residing in the Home;

(b) No Student-in-Training shall be solely responsible for Children other than their own and must be under continuous direct supervision of the Provider or a Home Employee with a valid and current satisfactory Comprehensive Records Check Determination while in the presence of Children in care other than their own, and

(c) Such Student-in-Training is exempted from annual training and first-aid/CPR training requirements.

(27) Clerical, Housekeeping, Maintenance and Other Support Staff. The Home may have qualified and sufficient direct-care, clerical, housekeeping, maintenance and other support staff to ensure full compliance with these rules without neglecting the supervision of the Children.

(a) Other Staff That May Have Direct Contact With Children In Care. A Home may have additional Staff at the Home. Any Staff member that has any personal contact with any Child in care:

1. Is considered either an Employee or Provisional Employee for purposes of these rules and must comply with the background check requirements as outlined in Rule 290-2-3-.21, Criminal Records and Comprehensive Background Checks; and

2. may be exempted from annual training and first-aid/CPR training requirements.

(b) Other Staff That Must Not Have Direct Contact With Children In Care. The Home may have individuals at the Home to repair and/or maintain the Home while Children are in care. These individuals:

1. must have no contact with Children in care;

2. may not be required to obtain a Fingerprint Records Check Determination, unless they have contact with Children in care; and

3. may be exempted from annual training and first-aid/CPR training requirements.

(28) Compliance with Applicable Laws and Regulations. The Provider, Employees and Provisional Employees shall not commit any criminal act, as defined under Georgia law, in the presence of any child enrolled in the Home and shall comply with all applicable laws and regulations.

Cite as Ga. Comp. R. & Regs. R. 290-2-3-.07

AUTHORITY: O.C.G.A. § 20-1A-1 et seq., 42 U.S.C. § 9857 et seq.

HISTORY: Original Rule entitled "Health and Safety" adopted. F. Feb. 21, 1983, eff. Mar. 23, 1983, as specified by the Agency.

Repealed: New Rule entitled "Staffing and Supervision" adopted. F. Feb. 4, 1994; eff. Mar. 1, 1994, as specified by the Agency.

Repealed: New Rule of same title adopted. F. Jan. 12, 2009; eff. Feb. 1, 2009.

Amended: F. Aug. 16, 2013; eff. Sept. 5, 2013.

Amended: F. Dec. 13, 2013; eff. Jan. 2, 2014.

Amended: F. Dec. 4, 2015; eff. Dec. 24, 2015.

Amended: F. June 2, 2016; eff. June 22, 2016.

Amended: F. Sep. 26, 2016; eff. Oct. 16, 2016.

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Amended: F. Aug. 31, 2020; eff. Sept. 20, 2020.

Amended: F. May 15, 2025; eff. June 4, 2025.

290-2-3-.08 Children's Records

(1) The Home shall maintain current and updated individual records on each Child in care. The Home shall maintain the records outlined herein while the Child is in care and for a period of one (1) year after such Child is no longer in care at the Family Child Care Learning Home. Such records shall include: identifying information (Child's name, birth date, Parent's name, home and business addresses, telephone numbers); name, address and telephone number of persons, including Child's physician, to contact in emergencies; and name, address, telephone numbers, relationship to Child and to Parent(s) and other identifying information of person(s) to whom the Child may be released.

(2) Such records shall include evidence of age appropriate immunizations, or a signed affidavit certifying that the required immunizations conflict with the religious belief of the Parent or a physician statement that immunization is contraindicated. Evidence of immunizations or required documentation shall be on file for each Child upon admission to the Home or within 30 days thereafter.

(3) Such records shall include written authorization for the Child to receive emergency medical treatment when the Parent is not available.

(4) Such records shall include a record of any allergies and other known medical problems.

(5) Such records shall include documentation of any medications given as required by these rules.

(6) Such records shall include descriptions of accidents or serious illnesses occurring while the Child is in the Family Child Care Learning Home, including date, time and condition under which it occurred and the action taken.

(7) Such records shall include parental agreements for transportation, field trips, swimming and/or other activities away from the Home if the Child will be participating in these activities.

(8) Policies and Procedures. Each Family Child Care Learning Home shall establish policies and procedures, which shall be kept current, be consistent with applicable laws, including but not limited to the Americans with Disabilities Act, regulations and these rules, made available to the Parents, and used to govern the operations of the Family Child Care Learning Home.

(a) The policies and procedures shall include a written description of the services to be provided which specifies the following: ages of children served, months of operation, days of operation, hours of operation, dates the Family Child Care Learning Home will be closed, admission requirements, including parental responsibilities for supplying and maintaining accurate required record information and escorting Child to and from the Family Child Care Learning Home; standard fees, payment of fees, fees related to absences and vacations and other charges such as transportation, etc. and transportation provided, if any.

(b) The policies and procedures shall also include written procedures for the following:

1. Behavior management and discipline actions used by the Home, to include the program's practices regarding the expulsion and suspension of children enrolled for care;

2. Handling emergency medical care, including where the Children will be taken for emergency medical care;

3. Administering medication and recording noticeable adverse reactions to medication;

4. Notifying Parent(s) in writing of their Child's: illness, injury, and exposure to a notifiable communicable disease or any cases or suspected cases of viruses or illnesses (COVID-19, etc.) identified during a public health emergency, within twenty-four (24) hours after the Home becomes aware of the illness or the next working day;

5. Noticeable adverse reaction to medication(s);

6. Exclusion of sick children;

7. Exclusion and readmission of children with communicable diseases, as defined on the most current version of the communicable disease chart, as found on the Department's website, or with cases or suspected cases of viruses or illnesses (COVID-19, etc.) identified during a public health emergency;

8. Protection of children in the event of: severe weather, fire, and physical plant problems, such as a power failure, that affect climate control, loss of water, or structural damages;

9. The transportation of Children to and from school or home, if provided, to include the procedure to be followed if no one is home to receive the transported Child;

10. Identification of others providing care. The Provider must inform the Parents of Children in care of the names of any caregiver and their responsibilities, and the names of the persons who would be called upon in an emergency;

11. Parents' ability to visit the Family Child Care Learning Home unannounced and at any time that their Child is in care;

12. Any information requested by the Parent concerning the operation of the Family Child Care Learning Home or the care of the Child, including but not limited to a description of any special procedures to be followed in caring for the Child, such as any special services which the Home agrees to provide to a Child with special needs. The Parent(s) will be provided daily communication (verbal/written) regarding the care of the Child, especially with infants, toddlers and nonverbal Children. Additionally, the Provider must bring special problems or significant developments to the Parent's attention as soon as they arise;

13. Notification of the existence of a firearm in the Family Child Care Learning Home;

14. Notification of any changes in the regular composition of the household. The Provider must notify the Parent(s) of anyone regularly on the premises, including but not limited to spouse, friend(s), relative(s), or significant other(s);

15. Notification of the existence of any pets or other animals residing in the Home or on the property of the Family Child Care Learning Home; and

16. Notification of infant sleep position practices. The Provider must notify Parent(s) of Sudden Infant Death Syndrome (SIDS) risk reduction practices, sleep positioning policies, and arrangements for placing all infants on their backs for sleep.

17. A description of the practices followed by the Home to prevent shaken baby syndrome and abusive head trauma in children up to five years of age that includes the following information: how to recognize, respond to, and report the signs and symptoms of shaken baby syndrome and abusive head trauma; strategies to assist staff members in understanding how to care for infants and how to cope with a crying, fussing, or distraught child; strategies to ensure

staff members understand the brain development of children up to five years of age; and a list of prohibited behaviors when dealing with children.

(9) Documenting the Child's arrival and departure. The Parent or person(s) authorized by the Parent to drop off and pick up the Child will document each time the Parent or authorized person drops off and picks up the Child. The documentation shall include at least the following information: the date, the Child's name, the arrival and departure times, and the signature or initials of the Parent or authorized person and shall be made available to the Department in printed or written form upon request.

(10) The Home shall ensure that Children are only released to authorized person(s), and the Home shall take necessary steps to determine that any such person(s) presenting to pick up a Child in care is authorized by the Parent(s) of the Child and that person matches the identifying information provided by the Parent.

(11) If applicable, notification of the absence of a liability insurance policy. If the Home is not covered by liability insurance sufficient to protect its clients, the Home must notify the Parent of each Child under the care of the program in writing. Each Parent must acknowledge receipt of such notice, and a copy of the acknowledgment shall be kept in the Child's file.

(12) Documentation of family relationships for related children, other than the Provider's own children, cared for in the Home shall be maintained and shall include a notarized statement by the related child's Parent(s) attesting to the relationship.

(13) Documentation of the non-pay status of related and unrelated children in care for whom no pay is received shall be maintained and shall include a notarized statement by such child's Parent(s) attesting to the non-pay status.

(14) If applicable, documentation of approved water and sewage disposal systems shall be maintained in the Home by the Provider.

Cite as Ga. Comp. R. & Regs. R. 290-2-3-.08

AUTHORITY: O.C.G.A. § 20-1A-1 **et seq.**

HISTORY: Original Rule entitled "Equipment and Supplies" adopted. F. Feb. 21, 1983; eff. Mar. 23, 1983, as specified by the Agency.

Repealed: New Rule entitled "Records" adopted. F. Feb. 4, 1994; eff. Mar. 1, 1994, as specified by the Agency.

Repealed: New Rule of same title adopted. F. Jan. 12, 2009; eff. Feb. 1, 2009.

Repealed: New Rule entitled "Children's Records" adopted Dec. 2, 2009; eff. December 22, 2009.

Amended: F. Aug. 16, 2013; eff. Sep. 5, 2013.

Amended: F. Dec. 4, 2015; eff. Dec. 24, 2015.

Amended: F. Sep. 26, 2016; eff. Oct. 16, 2016.

Amended: F. May 26, 2017; eff. June 15, 2017.

Amended: F. Aug. 26, 2022; eff. Sep. 15, 2022.

Amended: F. May 15, 2025; eff. June 4, 2025.

Department 375. RULES OF DEPARTMENT OF DRIVER SERVICES

Chapter 375-3. DRIVER LICENSE SERVICES

Subject 375-3-3. REVOCATION AND SUSPENSION

375-3-3-.05 Acceptance of Certificates for Reinstatement

(a) In order to be accepted for license reinstatement or to avoid a pending license suspension, the certificate of completion from a Driver Improvement Clinic or DUI Drug or Alcohol Use Risk Reduction Program must indicate that the course was taken and completed after the violation date which caused the pending or active suspension.

(b) Approval of any clinic certificate except as set out herein must be made by the Commissioner or his designee.

Cite as Ga. Comp. R. & Regs. R. 375-3-3-.05

AUTHORITY: O.C.G.A. § 40-5-4**.**

HISTORY: Original Rule entitled "Acceptance of Clinic Certificates for Reinstatement" adopted. F. Jan. 9, 2003; eff. Jan. 29, 2003.

Amended: New title, "Acceptance of Certificates for Reinstatement." F. May 28, 2025; eff. June 17, 2025.

375-3-3-.07 Reinstatement of Habitual Violator Revocation

(1) The Department shall reinstate a habitual violator revocation imposed pursuant to O.C.G.A. § 40-5-58 upon satisfaction of the following requirements:

(a) Five years have elapsed since the Department began calculating the customer's eligibility for reinstatement as provided in O.C.G.A. § 40-5-61(e);

(b) The customer has submitted a certificate of completion from an approved driver improvement clinic for any predicate offenses that were not violations of O.C.G.A. § 40-6-391;

(c) The customer has submitted a certificate of completion from an approved DUI Drug or Alcohol Use Risk Reduction Program, clinical evaluation and treatment (if recommended), and documentation of satisfaction of any applicable ignition interlock requirements for any predicate offenses that were violations of O.C.G.A. § 40-6-391;

(d) The customer successfully completes all testing required for the class and type of license to be reinstated; and

(e) The customer pays the applicable reinstatement fee of $210.00 (or $200.00 if paid by mail) for revocations imposed prior to July 1, 2009, or $410.00 (or $400.00 if paid by mail) for revocations imposed on or after July 1, 2009.

(2) The customer must surrender any previously issued driver's licenses or permits, including any habitual violator probationary licenses at the time of reinstatement.

Cite as Ga. Comp. R. & Regs. R. 375-3-3-.07

AUTHORITY: O.C.G.A. §§ 40-5-4**,** 40-5-61**,** 40-5-62**,** 40-5-63**.**

HISTORY: Original Rule entitled "Reinstatement of Habitual Violators at Expiration of Habitual Violator Revocation" adopted. F. Jan. 9, 2003; eff. Jan. 29, 2003.

Amended: F. Sept. 18, 2003; eff. Oct. 8, 2003.

Repealed: New Rule entitled "Reinstatement of Habitual Violator Revocation" adopted. F. Oct. 13, 2010; eff. Nov. 2, 2010

Amended: F. May 28, 2025; eff. June 17, 2025.

375-3-3-.10 Limited Driving Permits

(1) The issuance of limited driving permits and the permissible uses of such permits, which shall be reflected as restrictions on the permit, will be governed by the applicable provisions of state and federal law.

(2) Customers applying for a DUI limited driving permit following the suspension of a driver's license pursuant to O.C.G.A. § 40-5-63(a)(1) based upon a conviction for driving under the influence (DUI) in violation of O.C.G.A. § 40-6-391 or an equivalent offense must submit DDS Form 1126 completed by the convicting court or a certified copy of the conviction unless the DUI conviction is already reflected on the customers' driving record.

(3) The following applicants are not eligible for a limited driving permit:

(a) Customers who are not Georgia residents;

(b) Customers who have never been issued a Georgia driver's license; or

(c) Customers whose Georgia driver's license is suspended, revoked, cancelled, disqualified or otherwise withdrawn for any other reason in addition to the suspension imposed pursuant to O.C.G.A. § 40-5-63(a)(1) unless otherwise eligible for a limited driving permit for said withdrawal. This list should not be considered exhaustive, and the issuance of limited driving permits will be governed by the applicable provisions of state and federal law.

(4) Any customer applying for a limited driving permit must surrender any previously issued driver's license or execute a lost license affidavit on Form DS-250A.

(5) Issuance, renewal, and/or replacement of limited driving permits will be governed by the applicable provisions of state and federal law.

(6) Any person applying for an ignition interlock limited driving permit for a suspension imposed for a second conviction for DUI within five years pursuant to O.C.G.A. § 40-5-63(a)(2) must submit documentation satisfactory to the Department of the following:

(a) proof of installation of an approved ignition interlock device installed on any vehicle that he or she will be operating pursuant to such permit;

(b) A certificate of completion from a DUI Drug or Alcohol Use Risk Reduction program; and

(c) Authorization for issuance of such permit by the Court that handled the underlying DUI charge, and enrolled in a drug court or clinical treatment that satisfies the requirements of O.C.G.A. § 40-5-63.1.

1. No limited driving permit shall be available to any person subject to a driver's license suspension imposed pursuant to O.C.G.A. § 40-5-63(a)(2) who has been granted an exemption from installing an ignition interlock device limited driving due to financial hardship pursuant to O.C.G.A. § 42-8-111(a)(1) until such person has served at least 12 months of such suspensions.

(7) The Department shall interpret amendments to the statutory provisions relating to limited driving permit eligibility in the manner that is most advantageous to each customer so as to allow for the issuance of permits at the earliest date that is legally permissible.

(8) Any person applying for an ignition interlock permit due to a suspension triggered by a second DUI conviction within five years shall be required to maintain such ignition interlock device for the following period:

(a) For incidents prior to January 1, 2013: six months;

(b) For incidents between January 1, 2013 and June 30, 2013: eight months; and

(c) For incidents on or after July 1, 2013: 12 months. After maintaining such interlock for the time required, such customer shall be eligible for a permit without the interlock restriction if otherwise eligible.

(9) Any person who is subject to a suspension imposed pursuant to O.C.G.A § 40-5-75 who is participating in a drug court, mental health court, veteran's court program, or operating under the influence court for such conviction may be issued a limited driving permit for such suspension if authorized by the court.

(10) For the purposes of O.C.G.A. §§ 40-5-64(g) and 40-5-64.1(f) regarding the revocation of a limited driving permit, any bond forfeiture or plea of *nolo contendere* or conviction of O.C.G.A. §§ 40-8-76 or 40-8-76.1 shall not be considered a violation of state law relating to the movement of a motor vehicle, and shall not revoke a limited driving permit.

(11) Any person aged 18 or older whose driver's license has been suspended pursuant to O.C.G.A. § 40-5-57.1 as a result of a conviction for speeding where such person's speed was at least 24 miles per hour over the posted speed limit, but less than 34 miles per hour above the posted speed limit, shall be eligible for a limited driving permit.

Cite as Ga. Comp. R. & Regs. R. 375-3-3-.10

AUTHORITY: O.C.G.A. §§ 40-5-4**,** 40-5-57.1**,** 40-5-64**,** 40-5-64.1**,** 40-5-75**.**

HISTORY: Original Rule entitled "120 Day Limited Permit Application" adopted. F. Apr. 18, 2006; eff. May 8, 2006.

Repealed: New Rule entitled "Limited Driving Permits" adopted. F. Aug. 24, 2010; eff. Sept. 13, 2010.

Amended: F. Dec. 26, 2012; eff. Jan. 15, 2013.

Amended: F. June 19, 2014; eff. July 9, 2014.

Amended: F. Sept. 15, 2015; eff. Oct. 5, 2015.

Amended: F. Apr. 12, 2018; eff. May 2, 2018.

Amended: F. Jan. 13, 2022; eff. Feb. 2, 2022.

Amended: F. May 28, 2025; eff. June 17, 2025.

Department 391. RULES OF GEORGIA DEPARTMENT OF NATURAL RESOURCES

Chapter 391-2. COASTAL RESOURCES

Subject 391-2-4. SALTWATER FISHING REGULATIONS

391-2-4-.19 Commercial Shellfish; Requirements for Vibrio Control

(1) **Purpose.** The purpose of this Rule is to implement the authority of the Board of Natural Resources to promulgate rules and regulations based on current, sound principles of wildlife research and management establishing requirements for harvest of maricultured oysters from subtidal harvest areas during *Vibrio* control months, requirements for harvester tags and shading, additional harvest controls for shellfish harvested during certain months, and procedures for amending closures and harvest controls.

(2) **Definitions.**

(a) "Adequately iced" means the amount and application of ice is sufficient to ensure that immediate cooling begins and continues for oysters harvested during *Vibrio* control months. If ice slurry is used and the shellfish are submerged the presence of ice in the slurry indicates adequate icing.

(b) "Adequately shaded" means measures taken to shelter shellstock from direct exposure to sunlight that may cause a significant increase in *Vibrio* growth due to an increase in temperature. Adequate shading may be accomplished by any means that effectively protects shellstock from direct sunlight and prevents excessive heat build-up in the shaded area. A gap must be maintained between the top of the shellstock and shade cover to allow for sufficient air flow.

(c) "Approved icing container" means a clean and durable receptacle fabricated from safe non-porous materials with effective drainage.

(d) "Closed season harvest record" means a document where harvesters during the *Vibrio* control months record the date, harvester name, harvest location, the time of initial harvest, the time of initial icing, the time of final harvest, quantities harvested, the time of final icing or any information as determined and approved by the Department.

(e) "Harvest" means the removal of shellstock from the water with the intention of marketing the product for consumption and not returning the shellstock to the water after husbandry practices. Harvest commences when the first shellstock not intended to be returned to the water is removed from the water, regardless of whether the shellstock is temporarily placed back into the water after culling, sorting, or other activities.

(f) "Harvester" means a person who is authorized by the Department to harvest shellfish for commercial purposes at the request of a master harvester.

(g) "Harvest area" means the designated area that has been granted to an individual to plant, grow and harvest shellfish for commercial purposes.

(h) "Harvest tag" means a durable, waterproof tag affixed by a commercial shellfish harvester to an individual container of shellstock or, if a bulk tag is used, an individual lot of shellstock, and meeting the specifications for harvester tags contained in the NSSP Model Ordinance and as required by the Department and Georgia Department of Agriculture

(i) "Husbandry" means any activity related to the cultivation and management of shellstock prior to their harvest, including but not limited to grading, sorting, culling, tumbling, biofouling control and cleaning, but does not include processing.

(j) "Internal temperature" means the internal temperature of the meat of any shellstock as measured using a calibrated probe thermometer. The internal temperature of shellstock is, under most circumstances, reflected by the external temperature of the space surrounding the shellstock, or the external temperature of its shell. The internal temperature of shellstock may be measured by inserting a thermometer probe into the center of the container of shellfish or by measuring the external shell temperature with an infrared thermometer. Should circumstances dictate, it may be necessary for the Department, Georgia Department of Agriculture or a harvester to open the shellstock to measure its internal temperature with a thermometer probe.

(k) "Landing" means the point of time at which shellstock are put on land or a dock at the certified dealer's facility.

(l) "Lot" means the shellstock harvested during a distinct harvest operation from a shellfish harvest area. A lot of shellstock may be identified by a single harvest tag or a single bulk harvest tag.

(m) "Master harvester" means a person who has acquired a lease with permission to grow or harvest shellfish from the state or from an owner with exclusive rights to shellfish pursuant to Code Sections 44-8-6 through 44-8-8, who has been permitted by the Department.

(n) "Mechanical refrigeration" means a mechanically refrigerated cooler which is part of a certified shellfish dealer's facility permitted by the Georgia Department of Agriculture and which shall maintain an ambient air temperature of 45°F or below and shall be capable of achieving the time-temperature requirements of this rule.

(o) "Original dealer" means the dealer who initially received shellstock from a harvester. The original dealer may also be the master harvester, if permitted by the Georgia Department of Agriculture as a certified shellfish dealer.

(p) "Potable water" means water from a water supply that meets the requirements of the Safe Drinking Act, as administered by the US Environmental Protection Agency, and all applicable state or local requirements.

(q) "Processing" means any activity associated with the handling, shucking, freezing, packing, labeling or storing of shellfish in preparation for distribution.

(r) "Resubmergence" means the return of market-sized oysters by a harvester to their harvest area for reconditioning due to excessive time-temperature exposure from oyster husbandry activities or off-site culling or due to a recall and as prescribed by the Department and in the NSSP Model Ordinance.

(s) "Resubmergence Closed Season Logbook" means a document that clearly identifies and segregates shellstock under resubmergence and where harvesters (during the closed season harvest periods) must record the harvest area, date when oysters were removed from the site and quantities, date when oysters were returned to the harvest area for resubmergence and quantities, approximate size range, type and number of cages, reason for resubmergence (off-site culling, on-site culling e.g. exposure time was greater than two hours, anti-fouling, etc.), date oysters were taken out of resubmergence and any other information as determined and approved by the Department.

(t) "Shellstock" means live molluscan shellfish in the shell.

(u) "Subtidal" means the area of the marine shoreline that is below mean low tide and is covered with seawater at all stages of the tide.

(v) "Temperature control" means the use of adequate icing methods or mechanical refrigeration which is capable of lowering the internal temperature of oysters to 50°F then maintaining the internal temperature of the oysters at 45°F or below, and of achieving the time-temperature requirements of this Rule.

(w) "Time of final harvest" means the time when the last oyster or clam harvested in a lot is removed from the water.

(w) "Time of initial harvest" means the time when the first oyster or clam harvested in a lot is removed from the water.

(x) "Time of final icing" means the time when the last oyster in a lot is adequately iced.

(y) "Time of initial icing" means the time when the first oyster in a lot is adequately iced.

(z) "*Vibrio* control months" means the months with heightened risk for *Vibrio* presence due to elevated air and water temperatures that require closures to harvest or more restrictive harvest controls, as determined by the Department.

(3) **Georgia *Vibrio* Control Plan.**

(a) The Department shall produce an annual Georgia *Vibrio* Control Plan. The plan shall prescribe the controls and requirements for eligible master harvesters to petition the Department for the harvest of maricultured oysters from subtidal harvest areas using additional harvest controls during otherwise closed seasons corresponding to *Vibrio* control months, as determined by the Department.

(b) Months that require additional temperature controls will be specified in the most recent version of the Georgia *Vibrio* Control Plan. Specifically for this plan, shellstock shall refer to Eastern Oysters (*Crassostrea virginica*) and Hard Clams (*Mercenaria* spp.), unless otherwise specified by the Department.

(4) **Shellstock Temperature Controls.**

(a) Harvest When Additional Temperature Controls are Not Required. Shellstock harvested during the months that do not require additional temperature controls shall be placed under mechanical refrigeration by the certified dealer within ten (10) hours from the start of harvest.

(b) Harvest When Additional Temperature Controls are Required, But Harvest is Outside of *Vibrio* Control Months. All maricultured oysters harvested during the 30 days prior to and the 30 days following the *Vibrio* control months shall be limited to five (5) hours from harvest to mechanical refrigeration.

(c) Harvest When Additional Temperature Controls are Required and Harvest is During the *Vibrio* Control Months.

(1.) Master harvesters and their harvesters may harvest oysters during the closed season/*Vibrio* control months without the use of an approved icing method, in accordance with their approved Closed Season Shellfish Operations Plan, provided that the oysters are delivered within two (2) hours of initial harvest and placed into mechanical refrigeration at their certified dealer's facility before 10:00 AM on the same day. Upon receipt, the certified dealer is required to cool the oysters under mechanical refrigeration to an internal shell/meat temperature of 50°F or less within two (2) hours; or

(2.) Master harvesters and their harvesters may harvest oysters during the closed season/*Vibrio* control months provided adequate ice is used upon harvest and the oysters are placed into mechanical refrigeration at a certified dealer's facility within four (4) hours from the start of harvest. Upon receipt, the certified dealer is required to cool the oysters under mechanical refrigeration to an internal shell/meat temperature of 50°F or less within two (2) hours.

(d) Approved icing methods for all harvested oysters are:

(1.) Upon removal from the water, immediate placement of oysters into mesh bags by a harvester and placement of mesh bags between layers of wet ice into an approved icing container completely surrounded by ice; or

(2.) Upon removal from the water, immediate placement of loose oysters into an approved icing container completely surrounded by ice; or

(3.) Upon removal from the water, immediate placement of oysters into an ice and water mixture (e.g., ice slurry) at or below 45 degrees Fahrenheit and fully submerged until the temperature of the oysters is at or below 55 degrees

Fahrenheit. After the oysters have been submerged and are below 55 degrees Fahrenheit, oysters must be stored in an approved icing container as prescribed in either method 1. or 2. above. The water used for the slurry must be from a potable source or from the approved growing area.

(5) **Tagging Requirements for All Shellstock.** All containers of commercially harvested shellstock must be tagged with a harvester tag or, if a bulk tag is used, an individual lot of shellfish, and meeting the specifications for harvester tags as prescribed in the NSSP Model Ordinance and as required by the Department and Georgia Department of Agriculture.

(6) **Shading Requirements for All Shellstock.** All harvested shellstock must be adequately shaded at all times using effective coverings that shade the shellstock from direct sunlight and other contaminates, such as bird waste, onboard the vessel as well as during transport in any vessel, vehicle or conveyance from the harvest area to the original dealer. A gap must be maintained between the top of the shellstock and shade cover to allow for sufficient air flow.

(7) **Confirmed Illness Response.** In the event that a confirmed *Vibrio vulnificus* or *Vibrio parahaemolyticus* illness outbreak, as defined in the NSSP Model Ordinance, occurs due to the consumption of shellfish that have been commercially harvested in Georgia, the Department will follow the established protocols as defined in the most recent version of the NSSP Model Ordinance to amend shellfish growing area closures for harvest and temperature controls. Public notice of such an amendment shall be given by posting a notice at the courthouse in each coastal county and by other means as may appear feasible to inform interested persons. Such notice shall be posted at least 24 hours prior to any enforcement action taken pursuant to this rule.

(8) **Requirements for Harvest During *Vibrio* Control Months.**

(a) Master harvesters may annually request permission from the Department to harvest maricultured oysters from subtidal harvest areas during *Vibrio* control months. Master harvesters may be required to demonstrate their ability to meet shellstock temperature controls as described above to receive or maintain *Vibrio* control months permissions.

(b) Master harvesters must submit a Closed Season Shellfish Operations Plan to be approved by the Department prior to conducting harvesting activities during *Vibrio* control months. The plan shall include a list of trained and licensed harvesters, a resubmergence plan, husbandry plans, a routine schedule for all harvest and landing plans and all other information as required by the Department.

(c) Master harvesters that are authorized for harvest during *Vibrio* control months shall only harvest oysters that have been submerged for a minimum of 14 consecutive days prior to harvest.

(d) Resubmergence plans shall clearly identify and segregate all oysters greater than two (2) inches in the harvest area that have been put into resubmergence due to excessive time/temperature exposure. Oysters are required to remain in resubmergence for 14 consecutive days prior to harvest and must be clearly identified in a Resubmergence Closed Season Logbook.

(e) Master harvesters and their harvesters must maintain and complete a Resubmergence Closed Season Logbook for their designated harvest area. Logbooks must be maintained for a minimum of 90 days and made immediately available to the Department or a law enforcement officer upon request.

(f) Master harvesters and their harvesters shall complete a harvest tag and closed season harvest record for each lot of shellstock from the time of initial harvest through final harvest prior to leaving the harvest area. Closed season harvest records must be maintained for a minimum of 90 days and made immediately available to the department or a law enforcement officer upon request.

(g) Master Harvesters and their harvesters will be required to use only the shellstock temperature controls described above and must ensure continuous cooling is maintained during delivery and upon receipt of the oysters by the certified dealer.

(9) **Minimum Eligibility Requirements for Harvest During *Vibrio* Control Months.** A master harvester meeting the following minimum requirements may petition the Department for permission to harvest maricultured oysters from subtidal harvest areas during *Vibrio* control months:

(a) The master harvester must have a minimum of six (6) months of reported harvested shellstock outside of *Vibrio* control months in accordance with the Department's control plan, and

(b) The master harvester's past compliance with the provisions in O.C.G.A. § 27-4-187 through O.C.G.A. § 27-4-204 and associated Rules and Regulations will be considered by the Department in determining eligibility.

Cite as Ga. Comp. R. & Regs. R. 391-2-4-.19

AUTHORITY: O.C.G.A. §§ 27-1-4**,** 27-4-189**.**

HISTORY: Original Rule entitled "Commercial Shellfish; Requirements for *Vibrio* Control" adopted. F. May 2, 2025; eff. May 22, 2025.

Department 391. RULES OF GEORGIA DEPARTMENT OF NATURAL RESOURCES

Chapter 391-3. ENVIRONMENTAL PROTECTION

Subject 391-3-1. AIR QUALITY CONTROL

391-3-1-.03 Permits. Amended

(1) **Construction (SIP) Permit.**

(a) **Any person** prior to beginning the construction or modification of any facility which may result in air pollution shall obtain a permit for the construction or modification of such facility from the Director.

(b) **The application** for a construction permit shall be made on forms supplied by the Director, and shall be signed by the applicant. Said application shall be filed with the Director well in advance of any critical date involved in the construction or modification of such facility, so that adequate time will be available for review, discussion, and revision where necessary. Said application shall include and/or be accompanied by all pertinent information as the Director may require for a full evaluation of the proposed construction or modification of the facility, such as: process flow diagrams; plot plans; description of control devices; description of the proposed new or modified operation; type of operation; raw materials and chemicals to be used, the finished products; type, quantity and peak output of fuels to be used; the amount of combustible waste that will be generated and the method of disposing of same; characteristics and amounts of emissions into the atmosphere; engineering reports; plans and specifications; time schedules and reports of progress; records; and related information.

(c) **The permit** for the construction or modification of any facility shall be issued upon a determination by the Director that the facility can reasonably be expected to comply with all the provisions of the Act and the rules and regulations promulgated thereunder.

(2) **Operating (SIP) Permit.**

(a) **Any person** operating a facility or performing an activity which is not exempted under 391-3-1-.03(6) from which air contaminants are or may be emitted shall obtain an Operating (SIP) Permit from the Director.

(b) **Application** for an operating permit must be made within thirty (30) days after commencement of normal operations. Said application for an operating permit shall be accompanied by such plans, specifications, and other information deemed necessary by the Director to make full evaluation of the performance of the facility. If any of the necessary information cannot be provided within the required time, the application shall include a schedule, subject to the approval of the Director, for submission of all such information as soon as practicable.

(c) **An operating permit** will be issued upon evidence satisfactory to the Director of compliance with the provisions of the Act and the rules and regulations promulgated thereunder. Said permit shall specify the conditions under which the facility shall be operated in order to comply with the Act and rules and regulations. As a condition for the issuance of an operating permit, the Director may require the applicant to conduct performance tests and monitoring and provide reports concerning operations, to demonstrate compliance with the Act and the rules and regulations. Such tests and monitoring shall be conducted, and such required reports submitted, in accordance with methods and procedures approved by the Director.

(d) **The Director** may grant a temporary operating permit for such period of time and under such conditions as he shall specify in the permit, in order to allow the applicant a reasonable period of time in which to correct deficiencies in any existing facility. The temporary operating permit shall specify a schedule for bringing the existing facility into compliance with the Act and rules and regulations in the shortest practical time period.

(e) **The requirements** of this section (2) shall not apply to any emissions unit as defined in 40 CFR 70.2 which has been issued a part 70 permit under the requirements of section (10), unless there is a modification to such unit.

(f) **Any person** operating a facility or performing an activity from which air contaminants are or may be emitted, may be required to obtain a Permit by Rule, a Generic Permit or a Part 70 Permit from the Director in addition to an Operating (SIP) Permit.

(g) **Under penalty** of law, the holder of any Air Quality Permit must adhere to the terms, limitations, and conditions of that permit and subsequent revisions of that permit.

(h) **The limitations**, controls, and requirements in federally enforceable operating permits are permanent, quantifiable, and otherwise enforceable as a practical matter.

(i) **Prior to the issuance** of any federally enforceable operating permit, EPA and the public will be notified and given a chance for comment on the draft permit.

(3) **Revocation, Suspension, Modification or Amendment of Permits.**

(a) **Any permit** issued by the Director shall be subject to periodic review and the Director may revoke, suspend, modify or amend any permit issued, for cause, including but not limited to, the following:

1. Violation of any condition of said permit, or failure to comply with a final order of the Director;

2. Failure to comply with any applicable rules or regulations in effect pursuant to this Chapter;

3. Obtaining a permit by misrepresentation, or failure to disclose fully all relevant facts, or failure to inform the Division of modifications affecting emissions;

4. Modifications which affect emissions. In the event of modification, amendment, suspension or revocation of a permit, the Director shall serve written notice of such action on the permit holder and shall set forth in such notice the reason for the action.

5. The Director may amend any permit to establish an emission limitation based on existing equipment design and reasonable operation and maintenance practices. Such limitation shall not allow emissions greater than those allowed by other provisions and emission limits specified elsewhere in the Rules, Chapter 391-3-1.

(4) **Permits Not Transferable.**

A permit is not transferable from one person to another nor from one facility to another facility.

(5) **Permits Public Records.**

Except as to information required to be kept confidential by O.C.G.A. Section 12-9-19, as amended all applications for construction permits and operating permits shall be public record.

(6) **Exemptions.**

Unless otherwise required by the Director, SIP permits shall not be required for the following source activities. These exemptions may not be used to avoid any emission limitations or standards of the Rules for Air Quality Control Chapter 391-3-1-.02, lower the potential to emit below "major source" thresholds or to avoid any "applicable requirement" (i.e., NSPS, NESHAP, etc.) as defined in 40 CFR Part 70.2.

(a) **Mobile Sources.**

Mobile sources, such as automobiles, trucks, buses, locomotives, airplanes, boats and ships, whether or not designated as subject to mandatory inspection, maintenance, or emission requirements pursuant O.C.G.A. Section 12-9-40, et seq., as amended, the Georgia Motor Vehicle Emission Inspection and Maintenance Act. This exemption relates only to the requirement for a permit issued under the Act, not to any other requirement under the Act, and in no way affects any requirement for a permit, license, or a certificate under any other law. This limited exemption from the permit requirements of the Act shall in no way affect the applicability of any other requirement related to mobile sources, or any other requirement or limitation which may affect mobile sources.

(b) **Combustion Equipment.**

1. Fuel-burning equipment having a total heat input capacity of less than 10 MMBtu/hr burning only natural gas, LPG and/or distillate fuel oil containing 0.50% sulfur by weight or less.

2. Fuel-burning equipment rated at less than 5 MMBtu/hr burning a wood or fossil fuel.

3. Any fuel-burning equipment with a rated input capacity of 2.5 MMBtu/hr or less.

4. Equipment used for cooking food for immediate human consumption.

5. Blacksmith forges.

6. Clean steam condensate and steam relief vents.

7. Funeral homes and crematories of any size.

8. Air curtain destructor used for land clearing at a construction site.

9. Open burning.

10. Small incinerators operating as follows:

(i) less than 8 MMBtu/hr input, firing types 0, 1, 2 and/or 3 waste; or

(ii) less than 8 MMBtu/hr input with no more than 10% pathological (type 4) waste by weight combined with types 0, 1, 2 and/or 3 waste; or

(iii) less than 4 MMBtu/hr heat input firing Type 4 waste.

11. Stationary engines.

(i) Burning natural gas, LPG, gasoline, dual fuel, or diesel fuel which are used exclusively as emergency generators;

(ii) Burning natural gas, LPG, and/or diesel fuel and used for peaking power (including emergency generators used for peaking power) where the peaking power use does not exceed 200 hours-per-year except in the counties of Banks, Barrow, Bartow, Butts, Carroll, Chattooga, Cherokee, Clarke, Clayton, Cobb, Coweta, Dawson, DeKalb, Douglas, Fayette, Floyd, Forsyth, Fulton, Gordon, Gwinnett, Hall, Haralson, Heard, Henry, Jackson, Jasper, Jones, Lamar, Lumpkin, Madison, Meriwether, Monroe, Morgan, Newton, Oconee, Paulding, Pickens, Pike, Polk, Putnam, Rockdale, Spalding, Troup, Upson, and Walton where such engines with a rated capacity equal to or greater than 100 kilowatts are not exempt; or

(iii) Used for other purposes provided that the total horsepower of all non-gasoline burning engines combined are less than 1500 engine horsepower and no individual engine operates for more than 1000 hours-per-year; or

(iv) Used for other purposes provided that the total horsepower of all gasoline burning engines combined are less than 225 horsepower and no individual engine operates for more than 1000 hours-per-year.

(v) For the purpose of this subsection, the following definitions shall apply:

(I) An "emergency generator" means a generator whose function is to provide back-up power when electric power from the local utility is interrupted and which operates for less than 500 hours-per-year, except in the counties of Banks, Barrow, Bartow, Butts, Carroll, Chattooga, Cherokee, Clarke, Clayton, Cobb, Coweta, Dawson, DeKalb, Douglas, Fayette, Floyd, Forsyth, Fulton, Gordon, Gwinnett, Hall, Haralson, Heard, Henry, Jackson, Jasper, Jones, Lamar, Lumpkin, Madison, Meriwether, Monroe, Morgan, Newton, Oconee, Paulding, Pickens, Pike, Polk, Putnam, Rockdale, Spalding, Troup, Upson, and Walton where such generator operates less than 200 hours-per-year.

(II) "Used for peaking power" means used to reduce the electrical power requirements on the local utility grid. This could be for supplying power during the local utility's peak demand periods, or for peak shaving by the facility.

12. Boiler water treatment operations.

13. Firefighting equipment, including fire pumps or other emergency/safety equipment used to fight fires or train firefighters or other emergency personnel.

14. Temporary stationary engines used to generate electricity that are used to replace main stationary engines during periods of maintenance or repair (provided the actual and potential emissions of the temporary sources do not exceed that of the main sources).

15. Temporary fuel-burning equipment (i.e., boilers) that are used to replace main fuel-burning equipment during periods of maintenance or repair (provided the actual and potential emissions of the temporary sources do not exceed that of the main sources.) Temporary fuel-burning equipment that remains at a location for more than 180 consecutive days is no longer considered to be a temporary boiler. Temporary fuel-burning equipment that replaces temporary fuel-burning equipment at a location and is intended to perform the same or similar function will be included in calculating the consecutive time period.

16. Onsite air curtain incinerators with mist controls used for the purpose of decontamination and disposal of livestock and materials contaminated with the avian flu virus where on-site composting and burial are not viable methods of disposal.

(c) **Storage Tanks.**

1. All petroleum liquid storage tanks storing a liquid with a true vapor pressure of equal to or less than 0.50 psia as stored.

2. All petroleum liquid storage tanks with a capacity of less than 40,000 gallons storing a liquid with a true vapor pressure of equal to or less than 2.0 psia as stored.

3. All petroleum liquid storage tanks with a capacity of less than 10,000 gallons storing a petroleum liquid.

4. Pressurized vessels designed to operate in excess of 30 psig storing a petroleum fuel.

5. Gasoline storage and handling equipment at loading facilities handling less than 20,000 gallons per day or at vehicle dispensing facilities.

6. Portable drums and barrels provided that the volume of each container does not exceed 550 gal.

7. All chemical storage tanks used to store a chemical with a true vapor pressure of less than or equal to 10 millimeters of mercury.

(d) **Agricultural Operations.**

1. Farm equipment used for soil preparation, livestock handling, crop tending and harvesting and for other farm related activities.

2. Herbicide and pesticide mixing and application activities for on site use.

(e) **Maintenance, Cleaning & Housekeeping.**

1. Heating, air conditioning and ventilation systems not designed to remove air contaminants generated by or released from process or fuel-burning equipment.

2. Routine housekeeping activities such as painting buildings, roofing or paving parking lots, all clerical activities and all janitorial activities.

3. Maintenance activities such as: vehicle repair shops, brazing, soldering and welding equipment, carpenter shops, electrical charging stations, grinding and polishing operations maintenance shop vents, miscellaneous non-production surface cleaning, preparation and painting operations.

4. Miscellaneous activities such as: aerosol spray cans; air compressors; cafeteria vents; copying, photographic and blueprint machines; decommissioned equipment; dumpsters; fire training activities; fork lifts; railroad flares; refrigerators; space heaters.

5. Cold storage refrigeration equipment.

6. Vacuum-cleaning systems used exclusively for industrial, commercial, or residential housekeeping purposes.

7. Equipment used for portable steam cleaning.

8. Blast-cleaning equipment using a suspension of abrasive in water and any exhaust system or collector serving them exclusively.

9. Portable blast-cleaning equipment.

10. Laundry dryers, extractors, or tumblers for fabric cleaned with only water solutions of bleach or detergents.

11. Non-Perchloroethylene Dry-cleaning equipment with a capacity of 100 pounds per hour or less of clothes.

12. Cold cleaners having an air/vapor interface of not more than 10 square feet and that do not use a halogenated solvent.

13. Steam sterilizers.

14. Portable equipment used for the on site painting of buildings, towers, bridges and roads.

15. Non-routine clean out of tanks and equipment for the purposes of worker entry or in preparation for maintenance or decommissioning.

16. Equipment used for the washing or drying of fabricated products provided that no VOCs are used in the process and that no oil or solid fuels are burned.

17. Devices used exclusively for cleaning metal parts or surfaces by burning off residual amounts of paint, varnish, or other foreign material, provided that such devices are equipped with afterburners.

18. Fresh water cooling towers provided that the total potential emissions from the entire source remain below 10 tons per year of any single hazardous air pollutant and below 25 tons per year of any combination of hazardous air pollutants.

(f) **Laboratories and Testing.**

1. Laboratory equipment used exclusively for chemical or physical analyses;

2. Sampling connections used exclusively to withdraw materials for testing and analysis, including air contaminant detectors and vent lines;

3. Vacuum producing devices;

4. Research and development facilities, quality control testing facilities and/or small pilot projects, where combined daily emissions from all operations are below all of the following thresholds:

(i) Less than 125 pounds per day of carbon monoxide;

(ii) Less than 0.8 pounds per day of lead;

(iii) Less than 50 pounds per day of particulate matter, PM_{10}, or sulfur dioxide;

(iv) Less than 50 pounds per day of nitrogen oxides or VOCs except in the Counties of Cherokee, Clayton, Cobb, Coweta, DeKalb, Douglas, Fayette, Forsyth, Fulton, Gwinnett, Henry, Paulding, or Rockdale, where less than 15 pounds per day of nitrogen oxides; or VOCs; and

(v) Less than 5 pounds per day of any single hazardous air pollutant and less than 12.5 pounds per day of any combination of hazardous air pollutants.

(g) **Pollution Control.**

1. Sanitary wastewater collection and treatment systems, except incineration equipment, that are not subject to any standard, limitation or other requirement under section 111 or section 112 (excluding section 112(r)) of the federal Clean Air Act.

2. On site soil or groundwater decontamination units that are not subject to any standard, limitation or other requirement under Section 111 or 112 [excluding 112(r)] of the Federal Act.

3. Bioremediation operations.

4. Garbage compactors and garbage handling equipment.

5. Municipal Solid Waste Landfills which meet the following criteria:

(i) The total design capacity of the landfill is less than or equal to 2.756 million tons (2.5 million megagrams) or 3.27 million cubic yards (2.5 million cubic meters) of solid waste; and

(ii) The emissions of VOC are less than 25 tons per year for landfills located within Cherokee, Clayton, Cobb, Coweta, DeKalb, Douglas, Fayette, Forsyth, Fulton, Gwinnett, Henry, Paulding, or Rockdale counties; and

(iii) The emissions of nitrogen oxides (NOx) from operations other than the final control device are less than 25 tons per year for landfills located within Cherokee, Clayton, Cobb, Coweta, DeKalb, Douglas, Fayette, Forsyth, Fulton, Gwinnett, Henry, Paulding, or Rockdale counties.

(h) **Industrial Operations.**

1. Concrete block, brick plants, concrete products plants, and ready-mix concrete plants producing less than 125,000 tons per year of product.

2. Small aluminum scrap metal reclaimers (non-smelters).

3. Any of the following processes or process equipment which are electrically heated or which fire natural gas, LPG or distillate (#2) fuel oil at a maximum total heat input rate of not more than 10 MMBtu/hr.

(i) Furnaces for heat treating glass or metals, the use of which does not involve molten materials, oil-coated parts, or oil quenching.

(ii) Porcelain enameling furnaces or porcelain enameling drying ovens.

(iii) Kilns for firing ceramic ware.

(iv) Crucible furnaces, pot furnaces, or induction melting and holding furnaces with a capacity of 1,000 pounds or less each, in which sweating or distilling is not conducted and in which fluxing is not conducted utilizing free chlorine, chloride or fluoride derivatives, or ammonium compounds.

(v) Bakery ovens and confection cookers.

(vi) Feed mill or grain mill ovens.

(vii) Surface coating drying ovens.

4. Grain, metal, or mineral extrusion process.

5. Equipment used exclusively for rolling, forging, pressing, stamping, spinning, or extruding either hot or cold metals or plastic such as drop hammers or hydraulic presses for forging or metalworking.

6. Die casting machines.

7. Equipment used exclusively for sintering of glass or metals, but not exempting equipment used for sintering metal-bearing ores, metal scale, clay, fly ash, or metal compounds.

8. Equipment for the mining and screening of uncrushed native sand and gravel.

9. Ozonization process or process equipment.

10. Electrostatic powder coating booths with an appropriately designed and operated particulate control system.

11. Equipment used for the application of a hot melt adhesive.

12. Equipment used exclusively for mixing and blending water-based adhesives and coating at ambient temperatures.

13. Equipment used for compression, molding and injection of plastics.

14. Wood products operations in the following SIC categories (combustion equipment and coatings operations are not included in this exemption):

(i) 2426 Dimensional Hardwood Lumber Mills,

(ii) 2431 Lumber Millwork,

(iii) 2434 Wood Kitchen Cabinets,

(iv) 2439 Structural Wood Trusses,

(v) 2441 Wood Boxes,

(vi) 2448 Wood Pallets,

(vii) 2449 Wood Containers, and

(viii) 2499 Miscellaneous Wood Products.

15. Industrial process equipment used exclusively for educational purposes at educational institutions.

(i) **Other.**

1. Facilities where the combined emissions from all non-exempt source activities [i.e., not listed in 391-3-1-.03(6)(a)-(h)] are below the following for all pollutants:

(i) 50 tons per year of carbon monoxide;

(ii) 300 pounds per year of lead total; with a 3.0 pound per day maximum emission;

(iii) 20 tons per year of particulate matter, PM_{10}, or sulfur dioxide;

(iv) 20 tons per year of nitrogen oxides or VOCs except in the counties of Cherokee, Clayton, Cobb, Coweta, DeKalb, Douglas, Fayette, Forsyth, Fulton, Gwinnett, Henry, Paulding, or Rockdale, where less than 5 tons per year of nitrogen oxides or VOCs is exempted; and

(v) 2 tons per year total with a 15 pound per day maximum emission of any single hazardous air pollutant and less than 5 tons per year of any combination of hazardous air pollutants.

2. Facilities where the combined emissions from all source activities are below the thresholds in "1" above for one or more pollutants, are not required to list those pollutants in the permit application.

3. Cumulative modifications not covered in an existing permit to an existing permitted facility where the combined emission increases (excluding any contemporaneous emission decreases, i.e., "netting" is not allowed) from all nonexempt modified activities are below the following thresholds for all pollutants:

(i) 25 tons per year of carbon monoxide;

(ii) 150 pounds-per-year total with a 1.5 pound-per-day maximum emission of lead;

(iii) 10 tons per year of particulate matter, PM_{10} or sulfur dioxide;

(iv) 10 tons per year of nitrogen oxides or VOCs except in the counties of Cherokee, Clayton, Cobb, Coweta, DeKalb, Douglas, Fayette, Forsyth, Fulton, Gwinnett, Henry, Paulding, or Rockdale, where less than 2.5 tons per year of nitrogen oxides or VOCs is exempted; and

(v) 2 tons per year total with a 15 pound per day maximum emission of any single hazardous air pollutant and less than 5 tons per year of any combination of hazardous air pollutants.

4. As an alternative to subparagraph 3, cumulative modifications not covered in an existing permit to an existing permitted facility where the combined emissions increases, including any contemporaneous emission decreases (i.e., "netting is allowed") from all nonexempt modified activities are less than 10 tons per year of particulate matter and PM_{10}. For the purpose of this subparagraph, "contemporaneous" means within that period beginning on the date of issuance of the most recent permit through the date of reissuance of such permit. This shall exclude any amendment to such permit unless such amendment incorporates the previously exempted modification(s) in which case the amendment shall be considered a reissuance of such permit for the purpose of this subparagraph. Facilities using this exemption shall maintain records of all emissions increases and decreases and shall notify the Division, in writing, within 7 days after making any modification covered by this subparagraph. The Division may require the use of a Division approved form for tracking the emissions increases and decreases. If a facility elects to use this

subparagraph in lieu of subparagraph 3, it shall not use subparagraph 3 with respect to particulate matter and PM_{10} until such time that all modifications exempted from SIP permitting under subparagraph 4 have been incorporated into the permit. A facility may use subparagraph 3 with respect to any pollutant other than particulate matter and PM_{10} while using this subparagraph. Only the following facilities are eligible for this exemption:

(i) Facilities with an SIC code of 1422 or 1423 that are not a major source subject to the provisions of 391-3-1-.03(10) (i.e., a minor or synthetic minor source).

5. Changes in a process or process equipment which do not involve installing, constructing, or reconstructing an emission unit or the primary air cleaning device of an air pollution control system provided that such changes do not result in the increase of emissions from any emission unit or the emissions of a pollutant not previously emitted. Examples of such changes in a process or process equipment include the following:

(i) Change in the supplier or formulation of similar raw materials, fuels, or paints and other coatings;

(ii) Changes in product formulations;

(iii) Change in the sequence of the process;

(iv) Change in the method of raw material addition;

(v) Change in the method of product packaging;

(vi) Change in process operating parameters;

(vii) Replacement of a fuel burner in a boiler with a more efficient burner; or

(viii) Lengthening a paint drying oven to provide additional curing time.

6. Sources of minor significance as specified by the Director.

7. Sources for which there is no applicable emission limit, standard or other emission requirement established under, by, or pursuant to the Act.

(j) **Construction Permit Exemption for Pollution Control Projects.**

Projects listed in subparagraphs 391-3-1-.01(qqqq)1. and 2. of these rules are exempt from the requirement to obtain a construction (SIP) permit as specified in paragraph 391-3-1-.03(1) of this rule provided that the project is not subject to the provisions of paragraph 391-3-1-.02(7), Prevention of Significant Deterioration of Air Quality. The Director has the authority to rebut the presumption that projects listed in subparagraphs (qqqq) 1. and 2. are environmentally beneficial in accordance with the criteria specified in subparagraph (qqqq) and thus exempt from the requirement to obtain a construction (SIP) permit. Owners and operators of projects exempt from the requirement to obtain a construction (SIP) permit under this subparagraph (6)(j) shall obtain an operating permit or amendment under either paragraph 391-3-1-.03(2) or 391-3-1-.03(10) of this rule, whichever is applicable, prior to commencement of operation of the project.

(7) **Combined Permits and Applications.**

The Director may combine the requirements of and the permits for construction and operation (temporary or otherwise) into one permit. He may likewise combine the requirements of and applications for construction and operating permits into one application.

(8) **Permit Requirements.**

(a) **Each application** for a permit to construct a new stationary source or modify an existing stationary source shall be subjected to a preconstruction or premodification review by the Director. The Director shall determine prior to

issuing any permit that the proposed construction or modification will not cause or contribute to a failure to maintain any ambient air quality standard, a significant deterioration of air quality, or a violation of any applicable emission limitation or standard of performance or other requirement under the Act or this Chapter (391-3-1). Each person applying to the Director for a permit to construct a new stationary source or modify an existing stationary source shall provide information required by the Director to make such determination.

(b) **In addition** to any other requirement under the Act, or this Chapter (391-3-1), no permit to construct a new stationary source or modify an existing stationary source shall be issued unless such proposed source meets all the requirements for review and for obtaining a permit prescribed in Title I, Part C of the Federal Act, and paragraph 391-3-1-.02(7) of these Rules.

(c) **In addition** to any other requirement under the Act, or this Chapter 391-3-1, no permit to construct a new stationary source or modify an existing stationary source shall be issued unless such proposed source or modification meets all the requirements for review and for obtaining a permit prescribed in subparagraph 391-3-1-.02(9)(b)16. of this Rule.

(9) **Permit Fees.**

(a) **The owner** or operator of any stationary source subject to the provisions of Georgia Air Quality Rule 391-3-1-.03"Permits. Amended" shall pay to the Division an annual fee or its equivalent (e.g., quarterly payments).

(b) **The dollar-per-ton fee** rate for each calendar year is specified in the table below. Each calendar year's emissions and annual permit fees shall be determined and submitted in accordance with the Georgia Department of Natural Resources' Fee Manual specified below.

Calendar Year	$/Ton Rate	Fee Manual
1991	$25/Ton	"Procedures for Calculating Air Permit Fees" dated July 1, 1992.
1992	$25/Ton	"Procedures for Calculating 1992 Air Permit Fees" dated May 1, 1993.
1993	$25/Ton	"Procedures for Calculating Air Permit Fees for Calendar Year 1993" dated February 1, 1994.
1994	$25/Ton	"Procedures for Calculating Air Permit Fees for Calendar Year 1994" dated May 1, 1995.
1995	$25/Ton	"Procedures for Calculating Air Permit Fees for Calendar Year 1995" dated April 2, 1996.
1996	$25/Ton	"Procedures for Calculating Air Permit Fees for Calendar Years 1996 and 1997" dated August 1, 1997.
1997	$28/Ton	"Procedures for Calculating Air Permit Fees for Calendar Years 1996 and 1997" dated August 1, 1997.
1998	$28/Ton	"Procedures for Calculating Air Permit Fees for Calendar Years 1998 and 1999" dated January 19, 1999.
1999	$28/Ton	"Procedures for Calculating Air Permit Fees for Calendar Years 1998 and 1999" dated January 19, 1999.
2000	$31/Ton	"Procedures for Calculating Air Permit Fees for Calendar Year 2000" dated April 30, 2001.

Calendar Year	$/Ton Rate	Fee Manual
2001	$31/Ton	"Procedures for Calculating Air Permit Fees for Calendar Year 2001" dated February 26, 2002.
2002	$32.50/Ton	"Procedures for Calculating Air Permit Fees for Calendar Year 2002" dated March 25, 2003.
2003	$32.50/Ton	"Procedures for Calculating Air Permit Fees for Calendar Year 2003" dated April 20, 2004.
2004	$32.50/Ton	"Procedures for Calculating Air Permit Fees for Calendar Year 2004" dated March 22, 2005.
2005	$33.00/Ton	"Procedures for Calculating Air Permit Fees for Calendar Year 2005" dated March 15, 2006.
2006	$28.50/Ton	"Procedures for Calculating Air Permit Fees for Calendar Year 2006" dated February 7, 2007.
2007	$34.00/Ton	"Procedures for Calculating Air Permit Fees for Calendar Year 2007" dated April 2, 2008.
2008	$34.00/Ton	"Procedures for Calculating Air Permit Fees for Calendar Year 2008" dated February 12, 2009.
2009	$34.00/Ton	"Procedures for Calculating Air Permit Fees for Calendar Year 2009" dated January 26, 2010.
2010	$35.84/Ton for coal-fired electric generating units; $34/Ton for all other sources	"Procedures for Calculating Air Permit Fees for Calendar Year 2010" dated January 31, 2011.
2011	$35.84/Ton for coal-fired electric generating units; $34/Ton for all other sources	"Procedures for Calculating Air Permit Fees for Calendar Year 2011" dated March 2, 2012.
2012	$37.34/Ton for coal-fired electric generating units; $35.50/Ton for all other sources	"Procedures for Calculating Air Permit Fees for Calendar Year 2012" dated February 5, 2013.
2013	$37.34/Ton for coal-fired electric generating units; $35.50/Ton for all other sources	"Procedures for Calculating Air Permit Fees for Calendar Year 2013" dated January 14, 2014.
2014	$37.34/Ton for coal-fired electric generating units; $35.50/Ton for all other sources	"Procedures for Calculating Air Permit Fees for Calendar Year 2014" dated January 12, 2015.
2015	$37.34/Ton for coal-fired electric generating units; $35.50/Ton for all other sources	"Procedures for Calculating Air Permit Fees for Calendar Year 2015" dated February 22, 2016.
2016	$37.34/Ton for coal-fired electric generating units; $35.50/Ton for all other sources	"Procedures for Calculating Air Permit Fees for Calendar Year 2016" dated February 8, 2017.
2017	$37.34/Ton for coal-fired electric generating units; $35.50/Ton for all other sources	"Procedures for Calculating Air Permit Application & Annual Permit Fees for Calendar Year 2017" dated February 8, 2018.
2018	$37.34/Ton for coal-fired electric generating units;	"Procedures for Calculating Air Permit Application & Annual Permit

Calendar Year	$/Ton Rate	Fee Manual
	$35.50/Ton for all other sources	Fees for Fees Due Between July 1, 2019 and June 30, 2020" dated December 26, 2018.
2019	$37.34/Ton for coal-fired electric generating units; $35.50/Ton for all other sources	"Procedures for Calculating Air Permit Application & Annual Permit Fees for Fees Due Between July 1, 2020 and June 30, 2021" dated February 3, 2020.
2020	$37.34/Ton for coal-fired electric generating units; $35.50/Ton for all other sources	"Procedures for Calculating Air Permit Application & Annual Permit Fees for Fees Due Between July 1, 2021 and June 30, 2022" dated February 3, 2021.
2021	$37.34/Ton for coal-fired electric generating units; $35.50/Ton for all other sources	"Procedures for Calculating Air Permit Application & Annual Permit Fees for Fees Due Between July 1, 2022 and June 30, 2023" dated February 3, 2022.
2022	$37.34/Ton for coal-fired electric generating units; $35.50/Ton for all other sources	"Procedures for Calculating Air Permit Application & Annual Permit Fees for Fees Due Between July 1, 2023 and June 30, 2024" dated February 3, 2023.
2023	$37.34/Ton for coal-fired electric generating units; $35.50/Ton for all other sources	"Procedures for Calculating Air Permit Application & Annual Permit Fees for Fees Due Between July 1, 2024 and June 30, 2025" dated February 2, 2024.
2024	$45.37/Ton for coal-fired electric generating units; $43.13/Ton for all other sources	"Procedures for Calculating Air Permit Application & Annual Permit Fees for Fees Due Between July 1, 2025 and June 30, 2026" dated February 3, 2025.

When no applicable calculation method or procedure is published therein, the Director may specify or approve an applicable method or procedure prior to its use.

(c) **For the purpose** of this paragraph, the following definitions shall apply:

1. "Criteria Pollutant" means volatile organic compounds, sulfur dioxide, particulate matter, and nitrogen oxides.

2. "Stationary source" means all of the pollutant-emitting activities which belong to the same industrial grouping, are located on one or more contiguous or adjacent properties, and are under the control of the same person (or persons under common control) except the activities of any vessel. Pollutant-emitting activities shall be considered as part of the same industrial grouping if they belong to the same "Major Group" (i.e., which have the same first two digit code) as described in the most recent Standard Industrial Classification Manual, published by the U.S. Government Printing Office.

(d) **No annual fee shall** be collected for more than 4,000 tons per year per stationary source of any individual criteria pollutant as calculated in accordance with the Fee Manual.

(e) **The Director** may reduce any permit fee required under this Chapter to take into the account the financial resources of small businesses stationary sources.

(f) **The collection** of fees pursuant to this Chapter shall preclude collection of any air quality control permit fee by any other state or local government authority.

(g) **The collection** of annual fees pursuant to this paragraph shall begin on or after July 1, 1995, and shall be for the calendar year ending December 31, 1994. Thereafter, annual permit fees for each calendar year are due no later than September 1 of the following calendar year. Fees shall be paid in accordance with the procedures specified in the Fee Manual.

(h) **The owner** of a stationary source subject to this paragraph (9), "Permit Fees" shall make a one-time payment on or before April 30, 2001, in accordance with the following schedule. This one-time payment shall serve as a credit toward the calendar year 2000 permit fees (which are to be adopted at a later date). The procedures and methods contained in the Georgia Department of Natural Resources **Procedures for Calculating Air Permit Fees for Calendar Years 1998 and 1999 dated January 19, 1999** (1998/1999 Fee Manual), which is hereby incorporated by reference, along with calendar year 2000 activities and emissions shall be used to determine which, if any, of the following one-time payments are applicable to each stationary source.

1. Any Stationary Source subject to one or more Federal Standard of Performance for New Stationary Sources (NSPS) that is not classified as a Part 70 major source is defined in 40 CFR 70.2 shall pay a one-time payment of $400 unless ALL of the equipment at the stationary source that is subject to an NSPS standard is listed in the exception list found in section 2.0(a) of the 1998/1999 Fee Manual and/or did not operate during calendar year 2000.

2. Any Stationary Source that is classified as a Part 70 major source, as defined in 40 CFR 70.2, that operated for any period of time in calendar year 2000, and whose calculated emissions (calculated using the Methods of Calculation contained in section 3.2 of the 1998/1999 Fee Manual and calendar year 2000 activities) of EACH OF THE FOUR criteria pollutants (as defined in section 1.0 of the 1998/1999 Fee Manual: particulate matter, sulfur dioxide, volatile organic compounds, and nitrogen oxides) are less than or equal to the threshold values listed in section 3.16 of the 1998/1999 Fee Manual shall pay a one-time payment of $600.

3. Any Stationary Source that is classified as a Part 70 major source, as defined in 40 CFR 70.2, that operated for any period of time in calendar year 2000, whose calculated emissions (calculated using the Methods of Calculation contained in section 3.2 of the 1998/1999 Fee Manual and calendar year 2000 activities) of AT LEAST ONE of the four criteria pollutants (as defined in section 1.0 of the 1998/1999 Fee Manual: particulate matter, sulfur dioxide, volatile organic compounds, and nitrogen oxides) are above the applicable threshold value listed in section 3.16 of the 1998/1999 Fee Manual, and whose COMBINED calculated emissions (calculated using the Methods of Calculation contained in section 3.2 of the 1998/1999 Fee Manual and calendar year 2000 activities) is less than 700 tons shall pay a one-time payment of $1150. For the purpose of determining this one-time payment, the calculated emissions of any single criteria pollutant shall not be considered when determining if the calculated emissions are less than 700 tons if the calculated emissions for that criteria pollutant are less than or equal to the applicable threshold value listed in section 3.16 of the 1998/1999 Fee Manual.

4. Any Stationary Source that is classified as a Part 70 major source, as defined in 40 CFR 70.2, that operated for any period of time in calendar year 2000, whose total calculated emissions (calculated using the Methods of Calculation contained in section 3.2 of the 1998/1999 Fee Manual and calendar 2000 activities) of AT LEAST ONE of the four criteria pollutants (as defined in section 1.0 of the 1998/1999 Fee Manual: particulate matter, sulfur dioxide, volatile organic compounds, and nitrogen oxides) is above the applicable threshold value listed in section 3.16 of the 1998/1999 Fee Manual, and whose COMBINED calculated emissions (calculated using the Methods of Calculation contained in section 3.2 of the 1998/1999 Fee Manual and calendar year 2000 activities) are greater than or equal to 700 tons shall pay a one-time payment of $3000. For the purpose of determining this one-time payment, the calculated emissions of any single criteria pollutant shall not be considered when determining if the calculated emissions are greater than or equal to 700 tons if the calculated emissions for that criteria pollutant are less than or equal to the applicable threshold value listed in section 3.16 of the 1998/1999 Fee Manual.

(i) **As part of the annual permit fees** required under this paragraph, the owner or operator of any stationary source shall also pay administrative fees in accordance with the following subparagraphs in addition to the permit fees determined in accordance with the Fee Manual(s) specified in subparagraph (b) of this paragraph.

1. The owner or operator shall pay an administrative fee of 0.05 percent of the total fee due determined in accordance with the Fee Manual(s) specified in subparagraph (b) of this paragraph for each calendar day in which the air permit fee form is submitted to the Division following the first business day of September of the calendar year in which the fee was due or October 1, 2010, whichever is later.

2. For air permit fee forms submitted using the online Georgia air emissions fee reporting form, that date on which the air permit fee form is submitted to the Division shall be the date in which the owner or operator completes a final submittal on the online reporting form. For air permit fee forms that were submitted using a hard-copy paper form, the date on which the air permit fee form is submitted to the Division shall be the date on which the permit fee form and required payment are received at the address specified in the Fee Manual or at the office of the Division's Air Protection Branch.

(j) **Beginning with calendar year 2009 fees,** when the ownership of any stationary source is transferred to a new owner or operator, the new owner or operator of the stationary source shall be responsible for paying any past due fees.

(k) **Beginning on March 1, 2019,** the owner or operator of any stationary source subject to the provisions of Georgia Air Quality Rule 391-3-1-.03"Permits. Amended" shall pay to the Division a processing fee when submitting an application for the following permit application types:

Permit Type
Minor Source Permit or Amendment
Synthetic Minor Source Permit or Amendment
Major Source Permit or Amendment (but not subject to PSD or 112(g))
Name Change
Permit-by-Rule
Title V 502(b)(10) Permit Amendment
Title V Minor Modification with Construction
Title V Minor Modification without Construction
Title V Significant Modification with Construction
Title V Significant Modification without Construction
PSD Permit per 391-3-1-.02(7)
112(g) permit per 391-3-1-.02(9)(b)16.

1. Fees shall be paid in accordance with the procedures specified in the Fee Manual.

2. No final action of the Director shall occur until complete fee payment is received, unless the fee payment is waived or partially waived in accordance with subparagraph 391-3-1-.03(9)(e).

3. Application fees shall not be refunded as the fee is used to cover application processing labor.

4. Title V modification application fees are waived for applicants submitting PSD/112(g) permit applications via Title V permit applications. The PSD/112(g) fee still applies.

(l) **Beginning on July 1, 2020,** the owner or operator of any stationary source subject to the provisions of Georgia Air Quality Rule 391-3-1-.03(10)"Title V Operating Permits" shall pay to the Division an annual maintenance fee for Title V sources. Fees shall be paid in accordance with the procedures specified in the Fee Manual.

(10) **Title V Operating Permits.**

(a) **General Requirements.**

1. The provisions of this paragraph (10) shall apply to any source and the owner and operator of any such source subject to any requirements under 40 Code of Federal Regulations (hereinafter, 40 CFR), Part 70.

2. All sources subject to this paragraph (10) shall have a Part 70 Permit to operate that assures compliance by the source with all applicable requirements. Such Part 70 Permits will be issued consistent with the timing established in subparagraph (10)(c).

3. The requirements of this paragraph (10), including provisions regarding schedules for submission and approval or disapproval of permit applications, shall apply to the permitting of affected sources under the federal acid rain program except as provided herein or modified in federal regulations promulgated under Title IV of the federal Clean Air Act.

4. Definitions: For the purpose of this paragraph (10), 40 CFR Part 70.2 is hereby incorporated and adopted by reference, with the following exception(s):

(i) "Potential to emit" shall have the meaning ascribed in subparagraph (ddd) of rule 391-3-1-.01.

(ii) [Reserved.]

(iii) The definition and use of the term "subject to regulation" in 40 CFR, Part 70.2 is hereby incorporated by reference; provided, however, that in the event all or any portion of 40 CFR, Part 70.2 containing that term is:

(I) declared or adjudged to be invalid or unconstitutional or stayed by the United States Court of Appeals for the Eleventh Circuit or for the District of Columbia Circuit; or

(II) withdrawn, repealed, revoked, or otherwise rendered of no force and effect by the United States Environmental Protection Agency, Congress, or Presidential Executive Order.

Such action shall render the regulation as incorporated herein, or that portion thereof that may be affected by such action as invalid, void, stayed, or otherwise without force and effect for purposes of this rule upon the date such action becomes final and effective; provided, further, that such declaration, adjudication, stay, or other action described herein, shall not affect the remaining portions, if any, of the regulation as incorporated herein, which shall remain of full force and effect as if such portion so declared or adjudged invalid or unconstitutional or stayed or otherwise invalidated or effected were not originally a part of this rule. The Board declares that it would have incorporated the remaining parts of the federal regulation if it had known that such portion hereof would be declared or adjudged invalid or unconstitutional or stayed or otherwise rendered of no force and effect.

5. The subparagraphs of paragraph (10) that incorporate by reference portions of 40 CFR, Part 70 are as promulgated and published in the Federal Register through October 18, 2016, unless otherwise specified.

(b) **Applicability.**

1. The following sources shall be subject to this paragraph (10):

(i) Any major source as defined in 40 CFR Part 70.2, which is incorporated by reference in subparagraph (a)4;

(ii) Any source, including an area source, subject to a standard, limitation, or other requirement under Section 111 of the federal Act;

(iii) Any source, including an area source, subject to a standard or other requirement under Section 112 of the federal Act, except that a source is not required to obtain a permit solely because it is subject to regulations or requirements under Section 112(r) of the federal Act;

(iv) Any affected source as defined in 40 CFR Part 70.2, which is incorporated by reference in subparagraph (a)4; and

(v) Any source in a source category designated by the EPA Administrator pursuant to 40 CFR Part 70.3.

2. The following sources shall not be subject to this paragraph (10):

(i) Any source listed in subparagraph 10(b)1.(ii) that is not a major source;

(ii) Any source required to obtain a permit solely because they are subject to 40 CFR Part 61, Subpart M, National Emission Standard for Hazardous Air Pollutants for Asbestos, 61.145, Standard for Demolition and Renovation, or solely because they are subject to 40 CFR Part 60, Subpart AAA Standards of Performance for New Residential Wood Heaters; and

(iii) Any source listed in subparagraph (10)(b)1.(iii) that is an area source except those subject to an Emission Standard for Hazardous Air Pollutants under 40 CFR Part 63 that does not exempt the owner or operator from the obligation to obtain a Part 70 permit.

3. Emission units and Part 70 permits.

(i) For major sources, Part 70 permits shall include all applicable requirements for all relevant emission units in the major source.

(ii) For any non-major source subject to the requirements of this paragraph (10), Part 70 permits shall include all applicable requirements applicable to emission units that cause the source to be subject to this paragraph (10).

4. Fugitive emissions from a source subject to the requirements of this paragraph (10) shall be included in the permit application and the Part 70 permit in the same manner as stack emissions, regardless of whether the source category in question is included in the list of sources contained in the definition of major source.

5. Any Part 70 source may make Section 502(b)(10) changes as defined in 40 CFR 70.2, which is incorporated by reference in subparagraph (a)4, without requiring a Part 70 permit revision, if the changes are not modifications under any provisions of Title I of the federal Act and the changes do not exceed the emissions allowable under the permit (whether expressed therein as a rate of emissions or in terms of total emissions). For each such change, the source shall provide the Director and the EPA Administrator with written notification as required below in advance of the proposed changes and shall obtain any permits required under Rules 391-3-1-.03(1) and (2). The source and the Director shall attach each such notice to their copy of the relevant permit.

(i) For each such change, the source's written notification and application for a construction permit shall be submitted well in advance of any critical date (construction date, permit issuance date, etc.) involved in the change, but no less than seven days in advance of such change and shall include a brief description of the change within the permitted facility, the date on which the change is proposed to occur, any change in emissions, and any permit term or condition that is no longer applicable as a result of the change.

(ii) The permit shield described in subparagraph (d)6. shall not apply to any change made pursuant to this paragraph.

6. Off-permit Changes: Any Part 70 source may make changes that are not addressed or prohibited by the permit, other than those described in subparagraph 7., without a Part 70 permit revision, provided the following requirements are met:

(i) Each such change shall meet all applicable requirements and shall not violate any existing permit term or condition.

(ii) Sources must provide contemporaneous written notice to the Director and EPA Administrator of each such change, except for changes that qualify as insignificant as specified in subparagraph (g). Such written notice shall describe each such change, including the date, any change in emissions, pollutants emitted, and any applicable requirement that would apply as a result of the change.

(iii) The change shall not qualify for the shield under subparagraph (10)(d)6.

(iv) The permittee shall keep a record describing changes made at the source that result in emissions of a regulated air pollutant subject to an applicable requirement, but not otherwise regulated under the permit, and the emissions resulting from those changes.

(v) The source shall obtain any permits required under Rules 391-3-1-.03(1) and (2).

7. No Part 70 source may make, without a permit revision, any changes that are not addressed or prohibited by the Part 70 permit, if such changes are subject to any requirements under Title IV of the federal Act or are modifications under any provision of Title I of the federal Act.

(c) **Permit Applications.**

1. For each Part 70 source, the owner or operator shall submit a complete application:

(i) Within 12 months after the U.S. EPA grants approval of this paragraph (10) or on or before such earlier date as the Director may establish, for a source applying for the first time;

(ii) Within 12 months after commencing operation, for a source required to meet the requirements under Section 112(g) of the federal Clean Air Act or to have a permit under the preconstruction review program requirements of Rule 391-3-1-.03(8)(b). Where an existing Part 70 permit would prohibit such construction or change in operation, the source must obtain a permit revision before commencing operation;

(iii) At least six months, but not more than 18 months prior to the date of permit expiration, for a source subject to permit renewal; or

(iv) By January 1, 1996, for initial Phase II sulfur dioxide acid rain permits and by January 1,1998, for initial Phase II nitrogen oxide acid rain permits.

(v) within 12 months after commencing operation for a major source which commences operation after the date specified in subparagraph (10)(c)1.(i).

2. Standard Permit Application and Required Information. The application shall be made in a format specified by the Director. It shall be signed by a responsible official, as defined in 40 CFR 70.2, which is incorporated by reference in subparagraph (a)4, certifying its truthfulness, accuracy and completeness. For the purpose of this paragraph (10), 40 CFR 70.5(c) and 40 CFR 70.5(d) are hereby incorporated and adopted by reference. The application may require additional pertinent information which is not specified in 40 CFR 70.5(c), as incorporated by reference in this subparagraph, as the Director may require. To be deemed complete, an application must provide all information required pursuant to this subparagraph and subparagraph (g), except that applications for permit revision need supply such information only if it is related to the proposed change.

3. Unless the Director determines that an application, including renewal applications, is not complete within 60 days of receipt of the application, such application shall be deemed to be complete, except as otherwise provided in 40 CFR 70.7(a)(4) which is hereby incorporated by reference.

4. If, while processing an application that has been determined or deemed to be complete, the Director determines that additional information is necessary to evaluate or take final action on that application the Director may request such information in writing and set a reasonable deadline for a response. The source's ability to operate without a Part 70 permit shall be in effect from the date the application is determined or deemed to be complete until the final permit is issued, provided that the applicant submits any requested additional information by the deadline specified by the Director.

5. Any applicant who fails to submit any relevant facts or who has submitted incorrect information in a permit application shall, upon becoming aware of such failure or incorrect submittal, promptly submit such supplementary facts or corrected information. In addition, an applicant shall provide additional information as necessary to address any requirements that become applicable to the source after the date it filed a complete application but prior to release of a draft permit.

(d) **Permit Content.**

1. Standard Permit Requirements.

(i) For the purposes of this paragraph (10), 40 CFR Part 70.6(a) and 40 CFR 70.7(f) are hereby incorporated and adopted by reference.

(ii) The permit may include terms and conditions allowing for the trading of emissions changes in the permitted facility solely for the purpose of complying with a federally enforceable emissions cap that is established in the permit independent of otherwise applicable requirements. The permit applicant shall include in its application proposed replicable procedures and permit terms that ensure that the emissions trades are quantifiable and enforceable. The Director shall not be required to include in the emissions trading provisions any emissions units for which emissions are not quantifiable or for which there are no replicable procedures to enforce the emissions trades. The following conditions apply to the emissions trades:

(I) The permittee shall provide written notification to the Director and EPA no less than seven days in advance of any change made pursuant to this subparagraph. The written notification shall state when the change will occur and shall describe the changes in emissions that will result and how these increases and decreases in emissions will comply with the terms and conditions of the permit.

(II) The permit shield described in subparagraph (d)6. may extend to the permit terms and conditions that allow for the emissions increases and decreases described in this subparagraph.

(iii) The permit may include additional elements not specified in 40 CFR Part 70.6(a), which is incorporated by reference in subparagraph (d)1.(i), as required by the Director.

2. The Director shall specifically designate as not being federally enforceable under the federal Clean Air Act any terms and conditions included in the permit that are not required under the federal Clean Air Act or under any of its applicable requirements. If the Director does not so designate a term or condition, it shall be deemed federally enforceable.

3. Compliance Requirements. For the purposes of this paragraph (10), 40 CFR 70.6(c) is hereby incorporated and adopted by reference.

4. General Permits: For the purpose of this paragraph (10), 40 CFR 70.6(d) is hereby incorporated and adopted by reference.

5. The Director may issue a single permit authorizing emissions from similar operations by the same source owner or operator at multiple temporary locations. The operation must be temporary and involve at least one chance of location during the term of the permit. No affected source shall be permitted as a temporary source. Permits for temporary sources shall include:

(i) Conditions that will assure compliance with all applicable requirements at all authorized locations;

(ii) Requirements that the owner or operator notify the Director at least 30 days in advance of each change in location; and

(iii) Conditions that assure compliance with all of the provisions of this paragraph.

6. Permit Shield.

(i) Except as provided in this paragraph (10), the Director may expressly include in a Part 70 permit a provision stating that a source which is in compliance with the conditions of the permit shall be deemed to be in compliance with any applicable requirements as of the date of the permit issuance, provided that:

(I) Such applicable requirements are included and are specifically identified in the permit; or

(II) The Director, in acting on the permit application or revision, determines in writing that other requirements specifically identified are not applicable to the source, and the permit includes the determination or a concise summarythereof.

(ii) A Part 70 permit that does not expressly state that a permit shield exists shall be presumed not to provide such a shield.

(iii) Nothing in this paragraph or in any Part 70 permit shall alter or affect the following:

(I) The provisions of Section 303 of the federal Clean Air Act (emergency orders), including the authority of the Administrator under that section or the provisions of O.C.G.A. Section 12-9-14;

(II) The liability of an owner or operator of a source for any violation of applicable requirements prior to or at the time of permit issuance; or

(III) The applicable requirements of the acid rain program, consistent with Section 408(a) of the federal Clean Air Act; or

(IV) The ability of EPA to obtain information from a source pursuant to Section 114 of the federal Clean Air Act or of the Director to obtain information from a source pursuant to paragraph 391-3-1-.02(6).

7. Emergency Provision: For the purpose of subparagraph (d)7., 40 CFR Part 70.6(g) is hereby incorporated and adopted by reference.

(e) **Permit Issuance, Renewal, Reopenings and Revisions.**

1. Action on application.

(i) A permit, permit modification, or renewal may be issued only if all of the following conditions have been met:

(I) The Director has received a complete application, except that a complete application need not be received before issuance of a general permit under subparagraph (d);

(II) Except for modifications qualifying for minor permit modification procedures under subparagraphs (e)5.(i) or (e)5.(ii), the Director has complied with the requirements for public participation under subparagraph (e)8.;

(III) The Director has complied with the requirements for notifying and responding to affected States under subparagraph (f);

(IV) The conditions of the permit provide for compliance with all applicable requirements; and

(V) The EPA Administrator has received a copy of the proposed permit and any notices required under subparagraph (f) and has not objected to issuance of the permit under subparagraph (f) within the time period specified therein.

(ii) Except as provided under the initial transition plan or under regulations promulgated under Title IV of the federal Clean Air Act, the Director shall take final action on each permit application (including request for permit modification or renewal) within 18 months after receiving a complete application.

(iii) The Director shall provide a statement that sets forth the legal and factual basis for the draft permit conditions (including references to the applicable statutory or regulatory provisions). The Director shall send this statement to EPA and to any other person who requests it.

(iv) The submittal of a complete application shall not affect the requirement that any source have a preconstruction permit under paragraph 391-3-1-.03(8).

2. Requirement for a permit.

Except as provided in subparagraphs (b)5., (e)5.(i)(V) and (e)5.(ii)(V), no Part 70 source may operate after the time that it is required to submit a timely and complete application, except in compliance with a permit issued under this paragraph (10). If a Part 70 source submits a timely and complete application for permit issuance (including for renewal), the source's failure to have a Part 70 permit is not a violation until the Director takes final action on the permit application. This protection shall cease to apply if, subsequent to the completeness determination, the applicant fails to submit by the deadline specified in writing by the Director any additional information identified as being needed to process the application.

3. Permit renewal and expiration.

(i) Permits being renewed are subject to the same procedural requirements, including those for public participation, affected State and EPA review, that apply to initial permit issuance.

(ii) Permit expiration terminates the source's right to operate unless a timely and complete renewal application has been submitted.

(iii) If a timely and complete application for permit renewal is submitted, but the Director has failed to issue or deny the renewal permit before the end of the term of the previous permit, then the permit shall not expire until the renewal permit has been issued or denied and any permit shield that may be granted pursuant to subparagraph (d)6. shall extend beyond the original permit term until renewal.

4. Administrative permit amendments.

(i) Definitions: For the purpose of this paragraph, 40 CFR, Part 70.7(d)(1) is incorporated and adopted by reference.

(ii) Administrative permit amendments for purposes of the acid rain portion of the permit shall be governed by regulations promulgated under Title IV of the federal Clean Air Act.

(iii) An administrative permit amendment may be made by the Director consistent with the following:

(I) The Director shall take no more than 60 days from receipt of a request for an administrative permit amendment to take final action on such request, and may incorporate such changes without providing notice to the public or affected States provided that it designates any such permit revisions as having been made pursuant to this subparagraph.

(II) The Director shall submit a copy of the revised permit to the EPA Administrator.

(III) The source may implement the changes addressed in the request for an administrative amendment immediately upon submittal of the request.

(iv) The Director may, upon taking final action granting a request for an administrative permit amendment, allow coverage by the permit shield for administrative permit amendments made pursuant to 40 CFR Part 70.7(d)(1)(v), which is incorporated by reference in subparagraph (e)4.(i) of this rule, which meet the requirements for significant permit modifications.

5. Permit modification.

A permit modification is any revision to a Part 70 permit that cannot be accomplished under subparagraph 4. A permit modification for purposes of the acid rain program shall be governed by regulations promulgated under Title IV of the federal Clean Air Act.

(i) Minor permit modification procedures.

(I) Minor permit modification procedures may be used only for those permit modifications that:

I. Do not violate any applicable requirement;

II. Do not involve significant changes to existing monitoring, reporting, or recordkeeping requirements in the permit;

III. Do not require or change a case-by-case determination of an emission limitation or other standard, or a source specific determination for temporary sources of ambient impacts, or a visibility or increment analysis;

IV. Do not seek to establish or change a permit term or condition for which there is no corresponding underlying applicable requirement and that the source has assumed to avoid an applicable requirement to which the source would otherwise be subject, including a federally enforceable emissions cap assumed to avoid classification as a modification under any provision of 391-3-1-.03(8), and an alternative emissions limit approved pursuant to regulations promulgated under Section 112(j)(5) of the federal Clean Air Act;

V. Are not modifications under any provision of 391-3-1-.03(8); and

VI. Are not required by this paragraph (10) to be processed as a significant modification.

(II) An application requesting the use of minor permit modification procedures shall meet the requirements of paragraph (8) and shall include the following:

I. A description of the change, the emissions resulting from the change, and any new applicable requirements that will apply if the change occurs;

II. The source's suggested draft permit;

III. Certification by a responsible official, consistent with subparagraph (c), that the proposed modification meets the criteria for use of minor modification procedures and a request that such procedures be used; and

IV. Completed forms for the Director to use to notify the EPA Administrator and affected States as required under subparagraph (f).

(III) Within five working days of receipt of a complete minor permit modification application, the Director shall meet his obligation under subparagraph (f)(1) and subparagraph (f)(2)(i) to notify the EPA Administrator and affected States of the requested permit modification. The Director shall promptly send any notice required under subparagraph (f)(2)(ii) to the EPA Administrator.

(IV) The Director may not issue a final permit modification until after EPA's 45-day review period or until EPA has notified the Director that EPA will not object to issuance of the permit modification, whichever is first, although the Director can approve the permit modification prior to that time. Within 90 days of the Director's receipt of an application under minor permit modification procedures or 15 days after the end of the EPA Administrator's 45-day review period under subparagraph (f)(3), whichever is later, the Director shall:

I. Issue the permit modification as proposed;

II. Deny the permit modification application;

III. Determine that the requested modification does not meet the minor permit modification criteria and should be reviewed under the significant modification procedures; or

IV. Revise the draft permit modification and transmit to the EPA Administrator the new proposed permit modification as required by subparagraph (f).

(V) The source may make changes proposed in its minor permit modification application as follows:

I. For proposed changes that require a permit in accordance with 391-3-1-.03(1), the source may make the change proposed in its minor permit modification application immediately after obtaining a permit for the modification pursuant to the requirements of 391-3-1-.03(1). After the source makes such change and until the Director takes any of the actions specified in subparagraph (IV), the source must comply with the applicable requirements governing the change, the proposed permit terms and conditions, and requirements of the construction permit issued under 391-3-1-.03(1). During this time period, the source need not comply with the existing permit terms and conditions it seeks to modify. However, if the source fails to comply with its proposed permit terms and conditions and the requirements of the construction permit issued under 391-3-1-.03(1) during this time period, the existing permit terms and conditions it seeks to modify and the requirements of the construction permit issued under 391-3-1-.03(1) may be enforced against it.

II. For proposed changes that do not require a permit in accordance with 391-3-1-.03(1), the source may make the change proposed in its minor permit modification application upon receipt of a letter from the Division acknowledging receipt of said application. If the Director denies the permit modification application in accordance with subparagraph (IV)II, the existing terms and conditions that the applicant seeks to modify may be enforced by the Division.

(VI) The permit shield may not extend to minor permit modifications.

(ii) Group processing of minor permit modifications. The Director may modify the procedure outlined in subparagraph (e)5.(i) to process groups of a source's applications for certain modifications eligible for minor permit modification processing.

(I) Group processing of modifications may be used only for those permit modifications:

I. That meet the criteria for minor permit modification procedures under subparagraph (e)5.(i); and

II. That collectively are below 10 percent of the emissions allowed by the permit for the emissions unit for which the change is requested, 20 percent of the applicable definition of major source in subparagraph (a)4., or 5 tons per year, whichever is least.

(II) An application requesting the use of group processing procedures shall meet the requirements of subparagraph (c)2. and shall include the following:

I. A description of the change, the emissions resulting from the change, and any new applicable requirements that will apply if the change occurs.

II. The source's suggested draft permit.

III. Certification by a responsible official that the proposed modification meets the criteria for use of group processing procedures under a request that such procedures be used.

IV. A list of the source's other pending applications awaiting group processing, and determination of whether the requested modification, aggregated with these other applications, equals or exceeds the threshold set under subparagraph (e)5.(ii)(I)II.

V. Certification that the source has notified EPA of the proposed modification. Such notification need only contain a brief description of the proposed modification.

VI. Completed forms for the Director to use to notify the EPA Administrator and affected States as required under subparagraph (f).

(III) On a quarterly basis or within five business days of receipt of an application demonstrating that the aggregate of a source's pending applications equals or exceeds the threshold level set in subparagraph (e)5.(ii)(I)II., whichever is earlier, the Director promptly shall comply with subparagraphs (f)(1) and (f)(2). The Director shall send any notice required under subparagraph (f)(2)(ii) to the EPA Administrator.

(IV) The provisions of subparagraph (e)5.(i)(IV) shall apply to modifications eligible for group processing, except that the Director shall take one of the actions specified in subparagraphs (e)5.(i)(IV)I. through IV. within 180 days of receipt of the application or 15 days after the end of the EPA Administrator's 45-day review period under subparagraph (f)(3), whichever is later.

(V) The provisions of subparagraph 5.(i)(V) shall apply to modifications eligible for group processing.

(VI) The provisions of subparagraph 5.(i)(VI) shall also apply to modifications eligible for group processing.

(iii) Significant modification procedures.

(I) Significant modification procedures shall be used for applications requesting permit modifications that do not qualify as minor permit modifications or as administrative amendments. At a minimum, every significant change in existing monitoring permit terms or conditions and every relaxation of reporting or recordkeeping permit terms or conditions shall be considered significant. Nothing herein shall be construed to preclude the permittee from making changes consistent with this paragraph (10) that would render existing permit compliance terms and conditions irrelevant.

(II) Significant permit modifications shall meet all requirements of this paragraph (10), including those for applications, public participation, review by affected States, and review by EPA, as they apply to permit issuance and permit renewal.

6. Reopening for cause.

(i) A permit shall be reopened and revised under any of the following circumstances:

(I) Additional applicable requirements become applicable to a major Part 70 source with a remaining permit term of three or more years. Such a reopening shall be completed not later than 18 months after promulgation of the applicable requirement. No such reopening is required if the effective date of the requirement is later than the date on which the permit is due to expire, unless the original permit or any of its terms and conditions has been extended under subparagraph (e)3.(iii).

(II) Additional requirements (including excess emissions requirements) become applicable to an affected source under the acid rain program. Upon approval by the Administrator, excess emissions offset plans shall be deemed to be incorporated into the permit.

(III) The Director determines that the permit contains a material mistake or that inaccurate statements were made in establishing the emissions standards or other terms or conditions of the permit.

(IV) The Director determines that the permit must be revised or revoked to assure compliance with the applicable requirements.

(ii) Proceedings to reopen and issue a permit shall follow the same procedures as apply to initial permit issuance and shall affect only those parts of the permit for which cause to reopen exists.

(i) Reopenings shall not be initiated before a notice of such intent is provided to the source by the Director at least 30 days in advance of the date that the permit is to be reopened, except that the Director may provide a shorter time period in the case of an emergency.

7. Reopenings for cause by EPA.

(i) If the EPA Administrator finds that cause exists to terminate, modify or revoke and reissue a permit pursuant to subparagraph 6. and notifies the Director of such finding in writing, the Director shall, within 90 days after receipt of such notification, forward to EPA a proposed determination of termination, modification, or revocation and reissuance, as appropriate. If the EPA Administrator finds that a new or revised permit application is necessary or that the Director must require the permittee to submit additional information and extends this 90 day period, the Director shall forward the subject determination within 180 days of receipt of EPA's notification.

(ii) Within 90 days from receipt of an EPA objection, the Director shall resolve such objection and terminate, modify, or revoke and reissue the permit in accordance with EPA's objection.

8. Public participation.

40 CFR Part 70.7(h) is hereby incorporated and adopted by reference.

(f) **Permit review by EPA and affected states.**

1. The Director shall provide the EPA Administrator a copy of each permit application (including any application for permit modification), each proposed permit, and each final Part 70 permit. The Director may require the applicant to provide a copy of the permit application (including the compliance plan) directly to the EPA Administrator. Upon approval by the EPA Administrator, the Director may submit to the EPA Administrator a permit application summary form and any relevant portion of the permit application and compliance plan, in place of the complete permit application and compliance plan.

2. Review by affected States.

(i) The Director shall give notice of each draft permit to any affected State on or before the time that the Director provides this notice to the public under subparagraph (e)8., except to the extent that subparagraphs (e)5.(i) or (e)5.(ii) require the timing of the notice to be different.

(ii) The Director, as part of the submittal of the proposed permit to the EPA Administrator [or as soon as possible after the submittal for minor permit procedures allowed under subparagraphs (e)5.(i) or (e)5.(ii)], shall notify the EPA Administrator and any affected State in writing of any refusal by the Director to accept all recommendations for the proposed permit that the affected State submitted during the public or affected State comment period. The notice shall include the Director's reasons for not accepting any such recommendation. The Director is not required to accept recommendations that are not based on applicable requirements or the requirements of this paragraph (10).

3. EPA objection.

(i) No permit for which an application must be transmitted to the EPA Administrator under subparagraph (f)1. shall be issued if the EPA Administrator objects to its issuance in writing within a timely manner pursuant to 40 CFR 70.8(c) and 40 CFR 70.8(d) which are hereby incorporated by reference.

(g) **Insignificant Activities List.**

Unless otherwise required by the Director, the following air pollutant sources/activities must be listed, but need not be described in detail, in the Part 70 permit application. Exclusion of these emissions from detailed reporting does not exclude them from inclusion in any applicability determination. Additionally, this insignificant listing may not be used to avoid any applicable requirement (i.e., NESHAP, NSPS, etc.) as defined in 40 CFR Part 70.2, which is incorporated by reference in subparagraph (a)4.

1. Mobile Sources.

(i) Cleaning and sweeping of streets and paved surfaces.

2. Combustion Equipment.

(i) Firefighting equipment, including fire pumps or other emergency/safety equipment used to fight fires or train firefighters or other emergency personnel.

(ii) Small incinerators that are not subject to any standard, limitation or other requirement under Section 111 or 112 [excluding 112(r)] of the Federal Act and are not considered a "designated facility" as specified in 40 CFR 60.32e of the Federal emissions guidelines for Hospital/Medical/ Infectious Waste Incinerators, that are operating as follows:

(I) Less than 8 million BTUs per hour heat input, firing types 0, 1, 2 and/or 3 waste; or

(II) Less than 8 million BTUs per hour heat input with no more than 10% pathological (Type-4) waste by weight combined with types 0, 1, 2 and/or 3 waste; or

(III) Less than 4 million BTUs per hour heat input firing Type 4 waste.

(IV) For the purpose of this subparagraph, the following definitions apply:

I. "Type 0 waste" means trash. This refers to a mixture of combustible waste such as paper, cardboard, wood and floor sweepings; which contains up to 10% petrochemical waste, 5% non-combustibles and 10% moisture, by weight; which is generated from commercial activities; and having a higher heat value (HHV) of approximately 8,500 BTU/lb.

II. "Type 1 waste" means rubbish. This refers to a mixture of combustible waste such as paper, cardboard, wood foliage and floor sweepings; which contains up to 10% petrochemical waste, 5% non-combustibles and 10% moisture, by weight; which is generated from domestic and commercial activities; and having a HHV of approximately 6,500 BTU/lb.

III. "Type 2 waste" means refuse. This refers to an evenly distributed mixture of rubbish and garbage as usually received in municipal waste; which contains up to 50% moisture content, by weight and 7% non-combustible solids; and having a HHV of approximately 4,300 BTU/lb.

IV. "Type 3 waste" means garbage. This refers to animal and vegetable wastes from restaurants, cafeterias, hotels, markets, and like installations; which contains up to 70% moisture, by weight, and 5% non-combustible solids; and having a HHV of approximately 2,500 BTU/lb.

V. "Type 4 waste" means human and animal remains. This refers to carcasses, organs, and solid organic wastes from hospitals, laboratories, abattoirs, animal pounds; and having a HHV of approximately 1,000 BTU/lb.

(iii) Open burning in compliance with Georgia Rule 391-3-1-.02(5).

(iv) Stationary Engines Burning:

(I) Natural gas, gasoline, diesel fuel, or dual fuels which are used exclusively as emergency generators; or

(II) Natural gas, LPG, and/or diesel fuel and used for peaking power (including emergency generators used for peaking power) where the peaking power use does not exceed 200 hours-per-year, except in the counties of Banks, Barrow, Bartow, Butts, Carroll, Chattooga, Cherokee, Clarke, Clayton, Cobb, Coweta, Dawson, DeKalb, Douglas, Fayette, Floyd, Forsyth, Fulton, Gordon, Gwinnett, Hall, Haralson, Heard, Henry, Jackson, Jasper, Jones, Lamar, Lumpkin, Madison, Meriwether, Monroe, Morgan, Newton, Oconee, Paulding, Pickens, Pike, Polk, Putnam, Rockdale, Spalding, Troup, Upson, and Walton where such engines with a rated capacity equal to and greater than 100 kilowatts are not insignificant activities; or

(III) Natural gas, LPG, and/or diesel fuel used for other purposes, provided that the output of each engine does not exceed 400 horsepower and that no individual engine operates for more than one thousand hours-per-year; or

(IV) Gasoline used for other purposes, provided that the output of each engine does not exceed 100 horsepower and that no individual engine operates for more than 500 hours-per-year except in the counties of Banks, Barrow,

Bartow, Butts, Carroll, Chattooga, Cherokee, Clarke, Clayton, Cobb, Coweta, Dawson, DeKalb, Douglas, Fayette, Floyd, Forsyth, Fulton, Gordon, Gwinnett, Hall, Haralson, Heard, Henry, Jackson, Jasper, Jones, Lamar, Lumpkin, Madison, Meriwether, Monroe, Morgan, Newton, Oconee, Paulding, Pickens, Pike, Polk, Putnam, Rockdale, Spalding, Troup, Upson, and Walton where such engines with a rated capacity equal to and greater than 100 kilowatts used for peaking power are not insignificant activities.

(V) For the purpose of this subparagraph, the following definitions shall apply:

I. An "emergency generator" means a generator whose function is to provide back-up power when electric power from the local utility is interrupted and which operates for less than 500 hours-per-year, except in the counties of Banks, Barrow, Bartow, Butts, Carroll, Chattooga, Cherokee, Clarke, Clayton, Cobb, Coweta, Dawson, DeKalb, Douglas, Fayette, Floyd, Forsyth, Fulton, Gordon, Gwinnett, Hall, Haralson, Heard, Henry, Jackson, Jasper, Jones, Lamar, Lumpkin, Madison, Meriwether, Monroe, Morgan, Newton, Oconee, Paulding, Pickens, Pike, Polk, Putnam, Rockdale, Spalding, Troup, Upson, and Walton where such generator operates less than 200 hours-per-year.

II. "Used for peaking power" means used to reduce the electrical power requirements on the local utility grid. This could be for supplying power during the local utility's peak demand periods or for peak shaving by the facility.

3. Trade Operations.

(i) Brazing, soldering and welding equipment, and cutting torches related manufacturing and construction activities whose emissions of hazardous air pollutants (HAPs) fall below 1,000 pounds per year.

4. Maintenance, Cleaning, and Housekeeping.

(i) Blast-cleaning equipment using a suspension of abrasive in water and any exhaust system (or collector) serving them exclusively.

(ii) Portable blast-cleaning equipment.

(iii) Non-Perchloroethylene Dry-cleaning equipment with a capacity of 100 pounds per hour or less of clothes.

(iv) Cold cleaners having an air/vapor interface of not more than 10 square feet and that do not use a halogenated solvent.

(v) Non-routine clean out of tanks and equipment for the purposes of worker entry or in preparation for maintenance or decommissioning.

(vi) Devices used exclusively for cleaning metal parts or surfaces by burning off residual amounts of paint, varnish, or other foreign material, provided that such devices are equipped with afterburners.

(vii) Cleaning Operations: Alkaline/phosphate cleaners and associated cleaners and burners.

5. Laboratories and Testing.

(i) Laboratory fume hoods and vents associated with bench-scale laboratory equipment used for physical or chemical analysis.

(ii) Research and development facilities, quality control testing facilities and/or small pilot projects, where combined daily emissions from all operations are not individually major and are not support facilities making significant contributions to the product of a collocated major manufacturing facility.

6. Pollution Control.

(i) Sanitary wastewater collection and treatment systems, except incineration equipment or equipment subject to any standard, limitation or other requirement under Section 111 or 112 [excluding 112(r)] of the Federal Act.

(ii) On site soil or groundwater decontamination units that are not subject to any standard, limitation or other requirement under Section 111 or 112 [excluding 112(r)] of the Federal Act.

(iii) Bioremediation operations units that are not subject to any standard, limitation or other requirement under Section 111 or 112 [excluding 112(r)] of the Federal Act.

(iv) Landfills that are not subject to any standard, limitation or other requirement under Section 111 or 112 [excluding 112(r)] of the Federal Act.

7. Industrial Operations.

(i) Concrete block and brick plants, concrete products plants, and ready-mix concrete plants producing less than 125,000 tons per year.

(ii) Any of the following processes or process equipment which are electrically heated or which fire natural gas, LPG or distillate fuel oil at a maximum total heat input rate of not more than five million BTUs per hour:

(I) Furnaces for heat treating glass or metals, the use of which do not involve molten materials or oil-coated parts.

(II) Porcelain enameling furnaces or porcelain enameling drying ovens.

(III) Kilns for firing ceramic ware.

(IV) Crucible furnaces, pot furnaces, or induction melting and holding furnaces with a capacity of 1,000 pounds or less each, in which sweating or distilling is not conducted and in which fluxing is not conducted utilizing free chlorine, chloride or fluoride derivatives, or ammonium compounds.

(V) Bakery ovens and confection cookers.

(VI) Feed mill or grain mill ovens.

(VII) Surface coating drying ovens.

(iii) Carving, cutting, routing, turning, drilling, machining, sawing, surface grinding, sanding, planing, buffing, shot blasting, shot peening, or polishing; ceramics, glass, leather, metals, plastics, rubber, concrete, paper stock or wood, also including roll grinding and ground wood pulping stone sharpening, provided that:

(I) The activity is performed indoors; and

(II) No significant fugitive particulate emissions enter the environment; and

(III) No visible emissions enter the outdoor atmosphere.

(iv) Photographic process equipment by which an image is reproduced upon material sensitized to radiant energy (e.g., blueprint activity, photographic developing and microfiche).

(v) Grain, food, or mineral extrusion processes.

(vi) Equipment used exclusively for sintering of glass or metals, but not including equipment used for sintering metal-bearing ores, metal scale, clay, fly ash, or metal compounds.

(vii) Equipment for the mining and screening of uncrushed native sand and gravel.

(viii) Ozonization process or process equipment.

(ix) Electrostatic powder coating booths with an appropriately designed and operated particulate control system.

(x) Activities involving the application of hot melt adhesives where VOC emissions are less than 5 tons per year and HAP emissions are less than 1,000 pounds per year.

(xi) Equipment used exclusively for mixing and blending water-based adhesives and coatings at ambient temperatures.

(xii) Equipment used for compression, molding and injection of plastics where VOC emissions are less than 5 tons per year and HAP emissions are less than 1,000 pounds per year.

(xiii) Ultraviolet curing processes where VOC emissions are less than five tons per year and HAP emissions are less than 1,000 pounds per year.

8. Storage Tanks and Equipment.

(i) All petroleum liquid storage tanks storing a liquid with a true vapor pressure of equal to or less than 0.50 psia as stored.

(ii) All petroleum liquid storage tanks with a capacity of less than 40,000 gallons storing a liquid with a true vapor pressure of equal to or less than 2.0 psia as stored that are not subject to any standard, limitation or other requirement under Section 111 or 112 [excluding 112(r)] of the Federal Act.

(iii) All petroleum liquid storage tanks with a capacity of less than 10,000 gallons storing a petroleum liquid.

(iv) All pressurized vessels designed to operate in excess of 30 psig storing petroleum fuels that are not subject to any standard, limitation or other requirement under Section 111 or 112 [excluding 112(r)] of the Federal Act.

(v) Gasoline storage and handling equipment at loading facilities handling less than 20,000 gallons per day or at vehicle dispensing facilities that are not subject to any standard, limitation or other requirement under Section 111 or 112 [excluding 112(r)] of the Federal Act.

(vi) Portable drums, barrels, and totes provided that the volume of each container does not exceed 550 gallons.

(vii) All chemical storage tanks used to store a chemical with a true vapor pressure of less than or equal to 10 millimeters of mercury (0.19 psia).

(11) **Permit by Rule.**

(a) **General Requirements.**

1. Accepting a Permit by Rule does not exempt that facility from the obligation to apply for and obtain a Construction (SIP) Permit and/or an Operating (SIP) Permit unless specifically exempted in the permit by rule. Complying with the requirements of a Permit by Rule does not relieve a facility of having to comply with other requirements of the Rules.

2. The permitting authority may, after notice and opportunity for public participation, issue a Permit by Rule covering numerous similar sources. Any Permit by Rule shall identify criteria and standards by which sources may qualify for the Permit by Rule. Any facility wishing to operate under a Permit by Rule shall certify that in writing to the permitting authority, unless specifically exempted from this requirement in the specific Permit by Rule. To sources that qualify, the permitting authority shall grant the conditions and terms of the Permit by Rule by Certification letter. Notwithstanding the shield provisions of 40 CFR Part 70.6(f), the source shall be subject to enforcement action for operation without a Part 70 Permit if the source is later determined not to qualify for the conditions and terms of the Permit by Rule.

3. It is the responsibility of any facility accepting a "Permit by Rule" to submit a report within 15 days following the last day of any month in which the facility exceeds the annual limit during the previous 12 months or monthly limit during the previous month. The report shall include the following:

(i) Facility name, ID, and location.

(ii) The "Permit by Rule" name, number and applicable limits.

(iii) A summary of the records showing the exceedance along with an explanation.

(iv) What the facility plans to do to prevent future occurrences.

(b) **Permit by Rule Standards.**

1. Fuel-Burning Equipment Burning Natural Gas/LPG and/or Distillate Oil.

(i) Notwithstanding any other provision of these Rules, this standard applies to facilities with external combustion fuel burning equipment rated at less than or equal to 100 million BTU per hour, with a potential to emit in excess of the Part 70 major source threshold, without existing permit conditions that are federally enforceable or enforceable as a practical matter limiting the source to below Part 70 major source thresholds. Facilities for which the only source of regulated air pollutants from external combustion fuel-burning equipment (excluding turbines) is from equipment permitted to burn natural gas/LPG and/or distillate oil exclusively shall be deemed to have a Permit by Rule if the conditions in paragraph (I) and (II) are met. Facilities that have potential emissions of greater than major source thresholds even after this rule is met or are not able to meet the conditions in paragraphs (I) and (II) shall obtain a Part 70 Permit. All facilities located in the counties of Cherokee, Clayton, Cobb, Coweta, DeKalb, Douglas, Fayette, Forsyth, Fulton, Gwinnett, Henry, Paulding, and Rockdale, which were granted a Permit by Rule by certification letter dated prior to January 1, 2004 and which seek to continue to operate under this Permit by Rule, shall submit a new written certification of compliance with revised paragraphs (I) and (II) by no later than October 31, 2004.

(I) Monitoring and Record keeping. A log of the monthly fuel use must be kept. The total fuel usage for the previous twelve consecutive months must be included in each month's log. Consumption of distillate oil shall be recorded in gallons, consumption of LPG shall be recorded in gallons and consumption of natural gas shall be recorded in cubic feet. This log shall be kept for five years from the date of last entry. The log shall be available for inspection or submittal to the Division.

(II) Fuel Usage. Facility fuel usage shall be limited to 900 million cubic feet of natural gas (or 7.0 million gallons of LPG) and 1.6 million gallons of distillate oil during any twelve consecutive months except in the counties of Cherokee, Clayton, Cobb, Coweta, DeKalb, Douglas, Fayette, Forsyth, Fulton, Gwinnett, Henry, Paulding, and Rockdale, where fuel usage shall be limited to 300 million cubic feet of natural gas (or 1.5 million gallons of LPG) and 500,000 gallons of distillate oil during any twelve consecutive months.

2. Fuel-Burning Equipment Burning Natural Gas/LPG and/or Residual Oil.

(i) Notwithstanding any other provision of these Rules, this standard applies to facilities with external combustion fuel burning equipment rated at less than or equal to 100 million BTU per hour, with a potential to emit in excess of the Part 70 major source threshold without existing permit conditions that are federally enforceable or enforceable as a practical matter limiting the source to below Part 70 major source thresholds. Facilities for which the only source of regulated air pollutants from external combustion fuel burning equipment is from equipment permitted to burn only natural gas/LPG and/or residual fuel oil exclusively shall be deemed to have a Permit by Rule if the conditions in paragraph (I) and (II) are met. Facilities that have potential emissions greater than major source thresholds even after this rule is met or are not able to meet the conditions in paragraphs (I) and (II) shall obtain a Part 70 Permit. All facilities located in the counties of Cherokee, Clayton, Cobb, Coweta, DeKalb, Douglas, Fayette, Forsyth, Fulton, Gwinnett, Henry, Paulding, and Rockdale, which were granted a Permit by Rule by certification letter dated prior to January 1, 2004 and which seek to continue to operate under this Permit by Rule, shall submit a new written certification of compliance with revised paragraphs (I) and (II) by no later than October 31, 2004.

(I) Monitoring and Recordkeeping. A log of the monthly fuel use must be kept. The total fuel usage for the previous twelve consecutive months must be included in each month's log. Consumption of residual fuel oil shall be recorded in gallons, consumption of LPG shall be recorded in gallons and consumption of natural gas shall be recorded in cubic feet. This log shall be kept for five years past the date of last entry. The log shall be available for inspection or submittal to the Division.

(II) Fuel Usage. Annual facility fuel usage shall be limited to 1,000 million cubic feet of natural gas (or 7.5 million gallons of LPG) and 400,000 gallons residual fuel oil during any twelve consecutive months except in the counties of Cherokee, Clayton, Cobb, Coweta, DeKalb, Douglas, Fayette, Forsyth, Fulton, Gwinnett, Henry, Paulding, or Rockdale, where fuel usage shall be limited to 300 million cubic feet of natural gas (or 1.5 million gallons of LPG) and 200,000 gallons of residual fuel oil.

3. On-Site Power Generation.

(i) Notwithstanding any other provision of these Rules, this standard applies to facilities with a potential to emit in excess of the Part 70 major source threshold without existing permit conditions that are federally enforceable or enforceable as a practical matter limiting the source to below Part 70 major source thresholds. Facilities that operate internal combustion engines for purposes of generating emergency power, peaking power, and/or temporary on-site power and where such equipment burns natural gas/LPG, #1 fuel oil (kerosene/JP4 or JP5) and/or #2 fuel oil/diesel exclusively shall be deemed to have a Permit by Rule if the conditions in paragraph (I) and (II) are met. Facilities that have potential emissions of greater than major source thresholds even after this rule is met or are not able to meet the conditions in paragraphs (I) and (II) shall obtain a Part 70 Permit. All facilities located in the counties of Cherokee, Clayton, Cobb, Coweta, DeKalb, Douglas, Fayette, Forsyth, Fulton, Gwinnett, Henry, Paulding, and Rockdale, which were granted a Permit by Rule by certification letter dated prior to January 1, 2004 and which seek to continue to operate under this Permit by Rule, shall submit a new written certification of compliance with revised paragraphs (I) and (II) by no later than October 31, 2004.

(I) Monitoring and Record Keeping. A log of the monthly total horsepower-hours for the facility based on the number of hours of operation of each unit per month times the maximum horsepower rating of that unit must be included in each month's log. The total horsepower-hours for the previous twelve consecutive months must be included in each month's log. This log shall be kept for five years from the date of last entry. The log shall be available for inspection or submittal to the Division.

(II) Power Production Limits. A facility's power generation is limited to a total of no more than 6.7 million horsepower-hours during any twelve consecutive months except in the counties of Cherokee, Clayton, Cobb, Coweta, DeKalb, Douglas, Fayette, Forsyth, Fulton, Gwinnett, Henry, Paulding, and Rockdale counties, where the total is no more than 1.675 million horsepower-hours during any twelve consecutive months.

4. Concrete Mixing Plants.

(i) Notwithstanding any other provision of these Rules, this standard applies to facilities with a potential to emit in excess of the Part 70 major source threshold without existing permit conditions that are federally enforceable or enforceable as a practical matter limiting the source to below Part 70 major source thresholds. Concrete mixing plants shall be deemed to have a Permit by Rule if the conditions in paragraph (I) and (II) are met. Facilities that would otherwise have potential emissions of greater than major source thresholds even after this rule is met or are not able to meet the conditions in paragraphs (I) and (II) shall obtain a Part 70 Permit.

(I) Monitoring and Recordkeeping. A log of the monthly production must be kept. The total production for the previous twelve consecutive months must be included in each month's log. This log shall be kept for five years from the date of last entry. The log shall be available for inspection or submittal to the Division.

(II) Annual Production. Production on the plant site shall be limited to 600,000 cubic yards during any twelve consecutive months.

5. Hot Mix Asphalt Plants.

(i) Notwithstanding any other provision of these Rules, this standard applies to hot mix asphalt facilities with a potential to emit in excess of the Part 70 major source threshold without existing permit conditions that are federally enforceable or enforceable as a practical matter limiting the source to below Part 70 major source thresholds. Hot mix asphalt plants shall be deemed to have a Permit by Rule if the conditions in paragraph (I) and (II) are met. Facilities that would otherwise have potential emissions of greater than major source thresholds or are not able to meet the conditions in paragraphs (I) and (II) shall obtain a Part 70 Permit. All facilities located in the counties of Cherokee, Clayton, Cobb, Coweta, DeKalb, Douglas, Fayette, Forsyth, Fulton, Gwinnett, Henry, Paulding, and Rockdale, which were granted a Permit by Rule by certification letter dated prior to January 1, 2004 and which seek to continue to operate under this Permit by Rule, shall submit a new written certification of compliance with revised paragraphs (I) and (II) by no later than October 31, 2004.

(I) Monitoring and Record Keeping.

I. New asphalt plants (which commenced construction or modification after June 11, 1973) permitted to burn natural gas/LPG and/or distillate oil only shall maintain a monthly log of production and hours of operation. The total production and hours of operation for the previous twelve consecutive months must be included in each month's log. These logs shall be kept for five years from the date of last entry and shall be available for inspection and/or submittal to the Division.

II. New and existing asphalt plants permitted to burn natural gas/LPG, distillate oil, and residual oil in any combination shall maintain a monthly log of production, hours of operation and monthly fuel use. The total production, hours of operation and fuel oil usage for the previous twelve consecutive months must be included in each month's log. Fuel oil certifications showing sulfur content equal to or less than 1.5% shall also be maintained. These logs and certifications shall be kept for five years from the date of last entry and shall be available for inspection and/or submittal to the Division.

(II) Annual Production.

I. New asphalt plants (which commenced construction or modification after June 11, 1973) permitted to burn natural gas/LPG and/or distillate oil only shall limit:

A. Production to 400,000 tons during any twelve consecutive months; and

B. Operations to 3000 hours during any twelve consecutive months.

II. New and existing asphalt plants permitted to burn natural gas/LPG, distillate oil, and residual oil in any combination shall limit:

A. Production to 200,000 tons during any twelve consecutive months;

B. Fuel sulfur content to less than or equal to 1.5%;

C. Operation to 3000 hours during any twelve consecutive months; and

D. Fuel oil usage to 678,000 gallons during any twelve consecutive months.

III. New asphalt plants (which commenced construction or modification after June 11, 1973) permitted to burn natural gas/LPG and/or distillate oil only, which are located in the counties of Cherokee, Clayton, Cobb, Coweta, DeKalb, Douglas, Fayette, Forsyth, Fulton, Gwinnett, Henry, Paulding and Rockdale shall limit:

A. Production to 300,000 tons during any twelve consecutive months; and

B. Operations to 3000 hours during any twelve consecutive months.

IV. New and existing asphalt plants permitted to burn natural gas/LPG, distillate oil, and residual oil in any combination, which are located in the counties of Cherokee, Clayton, Cobb, Coweta, DeKalb, Douglas, Fayette, Forsyth, Fulton, Gwinnett, Henry, Paulding and Rockdale shall limit:

A. Production to 125,000 tons during any twelve consecutive months;

B. Fuel sulfur content to less than or equal to 1.5%;

C. Operation to 3000 hours during any twelve consecutive months; and

D. Fuel oil usage to 250,000 gallons during any twelve consecutive months.

6. Cotton Ginning Operations.

(i) Notwithstanding any other provision of these Rules, this standard applies to facilities with a potential to emit in excess of the Part 70 major source threshold without existing permit conditions that are federally enforceable or enforceable as a practical matter limiting the source to below Part 70 major source thresholds. Cotton ginning operations shall be deemed to have a Permit by Rule if the conditions in paragraph (I) and (II) are met. Facilities that have potential emissions greater than major source thresholds even after this rule is met or are not able to meet the conditions in paragraphs (I) and (II) shall obtain a Part 70 Permit.

(I) Monitoring and Record keeping. A log of the monthly production must be kept. The total production for the previous twelve consecutive months must be included in each month's log. This log shall be kept for five years from the date of last entry. The log shall be available for inspection or submittal to the Division.

(II) Annual Production. Production shall be limited to 120,000 standard bales of cotton during any twelve consecutive months.

7. Coating and/or Gluing Operations.

(i) Notwithstanding any other provision of these Rules, this standard applies to facilities with a potential to emit in amounts equal to or exceeding the Part 70 and Part 63 major source thresholds without existing permit conditions that are federally enforceable or enforceable as a practical matter limiting the source to below Part 70 or Part 63 major source thresholds. This standard applies only to facilities:

(I) Where the actual VOC emissions from coating and/or gluing operations represent at least 90 percent of the plant wide actual VOC emissions; and

(II) Where the actual HAP emissions from coating and/or gluing operations represent at least 90 percent of the plant wide actual HAP emissions or where the actual HAP emissions from non-coating and non-gluing operations are less than 1.0 tons per year.

(ii) This standard establishes federally enforceable conditions limiting the potential to emit for VOC and HAPs. Coating and/or gluing operations shall be deemed to have a Permit by Rule if the conditions in one of the following subparagraphs (I), (II), (III), or (IV) are met. Facilities that have potential emissions of greater than major source thresholds even after this rule is met or are not able to meet the conditions in subparagraphs (I), (II), (III), or (IV) and the remainder of this subparagraph shall obtain a Part 70 Permit. In accordance with the General Requirements in subparagraph (11)(a)2., the owner or operator of a facility wishing to operate under this Permit-by-Rule must also declare which of the four options are going to be met.

(I) The owner or operator of the source shall consume less than 20,000 pounds of any VOC and/or HAP containing materials during any twelve consecutive months. A log of the monthly consumption of VOC and/or HAP containing material must be kept. The total consumption for the previous twelve consecutive months must be included in each month's log. Records for materials (including but not limited to coatings, thinners, and solvents) shall be recorded in pounds. These records shall be maintained and made readily available for inspection for a minimum of five years upon date of entry and shall be submitted to the Division upon request.

(II) The owner or operator of the facility shall use less than 250 total gallons each month, of coating, gluing, cleaning, and washoff materials at the facility. The owner or operator shall demonstrate compliance by maintaining records of the total gallons of coating, gluing, cleaning, and washoff materials used each month. These records shall be maintained and made readily available for inspection for a minimum of five years upon date of entry and shall be submitted to the Division upon request.

(III) The owner or operator of the source shall use less than 3,000 total gallons per rolling 12-month period, of coating, gluing, cleaning, and washoff materials at the facility. A rolling 12-month period includes the previous 12 months of operation. The owner or operator of the facility shall demonstrate compliance by maintaining records of the total gallons of coating, gluing, cleaning, and washoff materials used each month and the total gallons used each rolling 12-month period. These records shall be maintained and made readily available for inspection for a minimum of five years upon date of entry and shall be submitted to the Division upon request.

(IV) The owner or operator of the facility shall use materials containing less than 5 tons of any one HAP per rolling 12-month period, less than 12.5 tons of any combination of HAPs per rolling 12-month period, less than 25 tons of VOC per rolling 12-month period for sources located in Cherokee, Clayton, Cobb, Coweta, DeKalb, Douglas, Fayette, Forsyth, Fulton, Gwinnett, Henry, Paulding, and Rockdale counties, and less than 50 tons of VOC per rolling 12-month period for facilities not located in Cherokee, Clayton, Cobb, Coweta, DeKalb, Douglas, Fayette, Forsyth, Fulton, Gwinnett, Henry, Paulding, and Rockdale counties. The owner or operator shall demonstrate compliance by maintaining records that demonstrate that annual emissions do not exceed these levels, including monthly usage records for each finishing, gluing, cleaning, and washoff material used to include the VOC and individual HAP content of each material; certified product data sheets for these materials; summation of VOC and individual and total HAP usage on a monthly basis; and the total VOC and individual and total HAP usage each rolling 12-month period and any other records necessary to document emissions. These records shall be maintained and made readily available for inspection for a minimum of five years upon date of entry and shall be submitted to the Division upon request.

(iii) The owner or operator that chooses to comply with this Permit by Rule for Coating and/or Operations shall maintain all purchase orders and/or invoices of materials containing VOC's and HAP's for a minimum of five years. These purchase orders and/or invoices must be made available to the Division upon request for use in confirming the general accuracy of the records retained and reports submitted.

(iv) For the purpose of this paragraph, the following definitions apply:

(I) "Certified product data sheet (CPDS)" means documentation furnished by coating or adhesive suppliers or an outside laboratory that provides the Volatile Hazardous Air Pollutant (VHAP), as listed in Table 2 of 40 CFR Part 63, Subpart JJ, content of a finishing material, contact adhesive, or solvent, by percent weight, measured using Method 311 of the Georgia Department of Natural Resources Procedures for Testing and Monitoring Sources of Air Pollutants (PTM), or an equivalent or alternative method [or formulation data if the coating meets the criteria specified in 40 CFR 63.805(a)]; the solids content of a finishing material or contact adhesive by percent weight, determined using data from Method 24 of the Georgia PTM as referenced in this subparagraph, or an alternative or equivalent method [or formulation data if the coating meets the criteria specified in 40 CFR 63.805(a)]; and the density, measured by Method 24 of the Georgia PTM as referenced in this subparagraph or an alternative or equivalent method. Therefore, the reportable VHAP content shall represent the maximum aggregate emissions potential of the finishing material, adhesive, or solvent in concentrations greater than or equal to 1.0 percent by weight or 0.1 percent for VHAP that are carcinogens, must be reported on the CPDS. The purpose of the CPDS is to assist the affected source in demonstrating compliance with the emission limitations presented in subparagraph (11)(b)7.(ii)(IV).

(Note: Because the optimum analytical conditions under Method 311 vary by coating, the coating or adhesive supplier may also choose to include on the CPDS the optimum analytical conditions for analysis of the coating, adhesive, or solvent using Method 311. Such information may include, but not be limited to, separation column, oven temperature, carrier gas, injection port temperature, extraction solvent, and internal standard.)

(II) "Coating" means a protective, decorative, or functional film applied in a thin layer to a surface. Such materials include, but are not limited to, paints, topcoats, varnishes, sealers, stains, washcoats, basecoats, enamels, inks, and temporary protective coatings. Aerosol spray paints used for touch-up and repair are not considered coatings under this subparagraph of the rule.

(III) "Gluing" means those operations in which adhesives are used to join components, for example, to apply a laminate to a wood substrate or foam to fabric.

8. Printing Operations.

(i) Notwithstanding any other provision of these Rules, this standard applies to facilities with a potential to emit in excess of the Part 70 major source threshold without existing permit conditions that are federally enforceable or enforceable as a practical matter limiting the source to below Part 70 major source thresholds. Printing operations shall be deemed to have a Permit by Rule if the conditions in paragraph (I), and (II) are met. Facilities that have potential emissions of greater than major source thresholds even after this rule is met or are not able to meet the conditions in paragraphs (I) and (II) shall obtain a Part 70 Permit.

(I) Monitoring and Record keeping. A log of the monthly consumption of VOC and/or Hazardous Air Pollutant containing material must be kept. The total consumption for the previous twelve consecutive months must be included in each month's log. Records for materials (including but not limited to inks, thinners, and solvents) shall be recorded in pounds. This log shall be kept for five years from the date of last entry. The log shall be available for inspection or submittal to the Division.

(II) Annual consumption. The consumption of any VOC and/or Hazardous Air Pollutant emitting materials (including but not limited to inks, thinners, and solvents) by the facility shall be limited to 20,000 pounds during any twelve consecutive months.

9. Non-Reactive Mixing Operations.

(i) Notwithstanding any other provision of these Rules, this standard applies to facilities with a potential to emit in excess of the Part 70 major source threshold without existing permit conditions that are federally enforceable or enforceable as a practical matter limiting the source to below Part 70 major source thresholds. Non-reactive mixing operations shall be deemed to have a Permit by Rule if the conditions in paragraphs (I) through (V) are met. Facilities that have potential emissions of greater than major source thresholds even after this rule is met or are not able to meet the conditions in this rule shall obtain a Part 70 Permit.

(I) Monitoring and Record keeping. A monthly log of materials mixed must be kept. The mixing total for the previous twelve consecutive months must be included in each month's log. Records for materials (including but not limited to coatings, thinners, and solvents) shall be recorded in pounds. This log shall be kept for five years from the date of last entry. The log shall be available for inspection or submittal to the Division.

(II) Annual mixing limit. Materials mixed shall be limited to 500 tons during any twelve consecutive months.

(III) Mixing/blending tanks shall be equipped with lids.

(IV) Tank lids must be closed at all times during operation except when charging raw materials, retrieving samples, or discharging finished product.

(V) Mixing tanks must be maintained at a temperature of less than 150°F.

10. Fiberglass Molding and Forming Operations.

(i) Notwithstanding any other provision of these Rules, this standard applies to facilities with a potential to emit in excess of the Part 70 major source threshold without existing permit conditions that are federally enforceable or enforceable as a practical matter limiting the source to below Part 70 major source thresholds. Fiberglass molding operations shall be deemed to have a Permit by Rule if the conditions in paragraph (I) and (II) are met. Facilities that

have potential emissions greater than major source thresholds even after this rule is met or are not able to meet the conditions in paragraphs (I) and (II) shall obtain a Part 70 Permit.

(I) Monitoring and Record keeping. A log of the combined monthly usage of polyester resin and gel coat must be kept. The previous twelve consecutive month material usage total must be included in each month's log. Records for the combined weight of polyester resin and gel coat shall be recorded in pounds. This log shall be kept for five years from the date of last entry. The log shall be available for inspection or submittal to the Division.

(II) Material Usage. Annual facility material usage shall be limited to 89,000 pounds during any twelve consecutive months for any combination of hand and spray lay-up operations. Annual facility material usage shall be limited to 120,000 pounds during any twelve consecutive months for spray lay-up operations only. This material input must represent the combined weight of polyester resin and gel coat used during any twelve consecutive months.

11. Peanut/Nut Shelling Operation.

(i) Notwithstanding any other provision of these Rules, this standard applies to facilities with a potential to emit in excess of the Part 70 major source threshold without existing permit conditions that are federally enforceable or enforceable as a practical matter limiting the source to below Part 70 major source threshold. Peanut/nut shelling facilities shall be deemed to have a Permit by Rule if the conditions in paragraph (I), (II) and (III) are met. Facilities that have potential emissions greater than major source thresholds even after this rule is met or are not able to meet the conditions in paragraph (I), (II) and (III) shall obtain a Part 70 Permit.

(I) Monitoring and Recordkeeping. A log of the monthly unshelled peanuts/nuts processed must be kept. The total amount of unshelled peanuts/nuts processed for the previous 12 consecutive months must be included in each month's log. This log shall be kept for five years from the date of last entry. The log shall be available for inspection or submittal to the Division.

(II) Annual Process input: Facility process input shall be limited to 130,000 tons of unshelled nuts during any twelve consecutive months.

(III) Annual hours of operation shall not exceed 5000 hours during any twelve consecutive months.

(ii) For the purposes of this standard, the term process, as it applies to peanut/nut shelling facilities, shall include all of the activities associated with the nut shelling process from nut drying, cleaning, shelling, to and including product and waste material handling at the facility.

(12) **Generic Permit.**

(a) **Under penalty** of law, the holder of any Air Quality General Generic Permit must adhere to the terms, limitations, and conditions of that permit and subsequent revisions of that permit.

(b) **The limitations**, controls, and requirements in federally enforceable operating permits are permanent, quantifiable, and otherwise enforceable as a practical matter.

(c) **Prior to the issuance** of any federally enforceable operating permit, EPA and the public will be notified and given a chance for comment on the draft permit.

(13) **Emission Reduction Credits.**

(a) **Applicability.**

This paragraph provides for the creation, banking, and transfer of nitrogen oxides and VOC Emission Reduction Credits in Federally designated ozone non-attainment areas in Georgia and any areas designated by the Director as contributing to the ambient air level of ozone in Federally designated ozone non-attainment areas in Georgia. The following sources are eligible to create and bank nitrogen oxides and VOC Emission Reduction Credits:

1. [reserved]

2. Any stationary source located within the counties of Bartow, Cherokee, Clayton, Cobb, Coweta, DeKalb, Douglas, Fayette, Forsyth, Fulton, Gwinnett, Henry, Newton, Paulding, and Rockdale and which has the potential to emit nitrogen oxides or VOCs in amounts greater than 100 tons-per-year.

3. Electrical Generating Units located at any stationary source within the counties of Banks, Barrow, Butts, Carroll, Chattooga, Clarke, Dawson, Floyd, Gordon, Hall, Haralson, Heard, Jackson, Jasper, Jones, Lamar, Lumpkin, Madison, Meriwether, Monroe, Morgan, Oconee, Pickens, Pike, Polk, Putnam, Spalding, Troup, Upson, and Walton and which has the potential to emit nitrogen oxides in amounts greater than 100 tons-per-year.

(b) **Eligibility of Emission Reductions.**

1. In order to be approved by the Division as an Emission Reduction Credit, a reduction in emissions must be real, permanent, quantifiable, enforceable, and surplus and shall have occurred after December 31, 1996.

2. To be eligible for consideration as Emission Reduction Credits, emission reductions may be created by any of the following methods:

(i) Installation of control equipment;

(ii) A change in process inputs, formulations, products or product mix, or raw materials;

(iii) A reduction in actual emission rate;

(iv) A reduction in operating hours;

(v) Production curtailment;

(vi) Shutdown of emitting sources or facilities; or

(vii) Any other enforceable method as determined by the Division.

(c) **Quantification of Emission Reduction Credits.**

1. For purposes of calculating the amount of emission reduction that can be quantified as an Emission Reduction Credit, the following procedures must be followed:

(i) The source must calculate its average actual annual emissions prior to the emission reduction. Actual emissions prior to the reduction shall be calculated in tons per year. In calculating average actual annual emissions prior to the emission reduction, the source shall use data from the 24-month period immediately preceding the reduction in emissions. The Division may allow the use of a different time period upon determination that such period is more representative of normal source operation.

(ii) The Emission Reduction Credit generated by the emission reduction shall be calculated by subtracting the allowable annual emissions rate following the reduction from the average actual annual emissions prior to the reduction.

(d) **Discounting and Revocation of Emission Reduction Credits.**

1. Except as provided below, the Director shall not discount or otherwise reduce the value of Emission Reduction Credits banked under this paragraph.

(i) [reserved]

(ii) Discounting Based on Time Banked.

Emission Reduction Credits banked under this paragraph will not expire at any time. However, Emission Reduction Credits will be discounted at a rate of 10 percent of the original Emission Reduction Credit value per year beginning on the 11th anniversary of the date on which the reduction in emissions initially occurred, up to a maximum total discount of 50 percent of the original Emission Reduction Credit value on the 15th anniversary of the date on which the reduction in emissions initially occurred. Annual discounting under this subparagraph (ii) shall not occur if the affected Emission Reduction Credits have already been discounted by 50% or more under the following subparagraph (iii) due to the promulgation of more stringent regulations affecting the source category that created the Emission Reduction Credits.

(iii) Discounting for More Stringent Regulations.

If any State or Federal statute, rule, or regulation decreases an allowable emission rate or otherwise requires a reduction in nitrogen oxides or VOC from a particular source category or categories, any banked nitrogen oxides or VOC Emission Reduction Credits created by that source category or categories shall be reduced to reflect the new more stringent allowable emission limit or required reduction.

(iv) Discounting or Revocation for Cause.

The Director may revoke, suspend, or reduce the value of Emission Reduction Credits for cause, including evidence of noncompliance with permit conditions imposed to make the emission reductions permanent and enforceable; failure to achieve in practice the emission reductions on which the Emission Reduction Credits are based; or misrepresentations made in the Emission Reduction Credit application or any other applications on which the Emission Reduction Credits are based, supporting data entered therein or attached thereto, or any subsequent submittal or supporting data.

2. The owner of a Certificate of Emissions Reduction Credit may submit an application to re-evaluate a Certificate of Emission Reduction Credit to determine whether the amount of credits specified in the Certificate of Emission Reduction Credit has been discounted or revoked in accordance with subparagraph 1., above. Such application shall be submitted on forms and contain information specified by the Division.

(e) **Creation and Banking of Emission Reduction Credits.**

1. Sources seeking to create and bank Emission Reduction Credits must submit an application on forms supplied by the Division and signed by the applicant. The application shall include, at a minimum, the following information:

(i) The company name, contact person and phone number, and street address of the source seeking the Emission Reduction Credit;

(ii) A description of the type of source, including SIC code, where the proposed emission reduction shall occur;

(iii) A detailed description of the method or methods to be employed by the source to create the emission reduction;

(iv) The date the emission reduction occurred or is to occur;

(v) Quantification of the Emission Reduction Credit, as required under subparagraph (c);

(vi) The proposed method for ensuring the reductions are permanent and enforceable, including any necessary application to amend the source's operating permit or, in the case of a shutdown of process equipment or an entire source, request for permit revocation;

(vii) Whether any portion of the reduction in emissions to be used to create the Emission Reduction Credit has previously been used to avoid New Source Review through a "netting demonstration;" and

(viii) Any other information that may be required to demonstrate that the reduction in emissions is real, permanent, quantifiable, enforceable, and surplus, as defined in subparagraph (b).

2. The Division will determine whether the application is complete and will notify the source seeking the Emission Reduction Credit of its determination. A Certificate of Emission Reduction Credit will be issued to the source upon a determination by the Director that the emission reduction meets the requirements of this paragraph. Upon issuance of the Certificate, the Division will simultaneously take any action required to ensure the reduction is permanent and enforceable, including issuance of a revised permit or revocation of a permit.

3. Certificates of Emission Reduction Credit shall be issued by the Director and shall contain the following information:

(i) The amount of the credit, in tons per year;

(ii) The pollutant reduced (nitrogen oxides or VOC);

(iii) The date the reduction occurred;

(iv) The street address and county of the source where the reduction occurred; and

(v) The date of issuance of the Certificate.

4. The Division shall maintain an Emission Reduction Credit registry that constitutes the official record of all Certificates of Emission Reduction Credit issued and all withdrawals made. The registry shall be available for public review. For each certificate issued, the registry will indicate the amount of the Emission Reduction Credit, the pollutant reduced, the location of the facility generating the Emission Reduction Credit, and the facility contact person.

(f) [reserved]

(g) **Transfer of Certificates of Emission Reduction Credit.**

1. If the owner of a Certificate of Emission Reduction Credit transfers the Certificate to a new owner, the Division shall issue a Certificate of Emission Reduction Credit to the new owner and shall revoke the certificate held by the current owner of record.

2. If the owner of a Certificate of Emission Reduction Credit transfers part of the Emission Reduction Credits represented by the Certificate to a new owner, the Division shall issue a Certificate of Emission Reduction Credit to the new owner reflecting the transferred amount and shall issue a Certificate of Emission Reduction Credit to the current owner of record reflecting the amount of Emission Reduction Credit remaining after the transfer. The original Certificate of Emission Reduction credit shall be revoked.

(h) **Administrative Fees.**

1. Any Source or person seeking to create, certify, bank, transfer, or re-evaluate Emission Reduction Credits shall pay fees to the Division in accordance with the following schedule:

(i) $6000 per application to create, certify and bank emission credits in accordance with subparagraph (e) of this paragraph.

(ii) [reserved]

(iii) $3000 per application to transfer a Certificate of Emission Reductions Credit as per subparagraph (g) of this paragraph. If a re-evaluation of the Certificate of Emission Reduction Credit has been completed by the Division in accordance with subparagraph (d)2. of this paragraph within 12 months prior to submission of an application to transfer the Certificate of Emission Reduction Credit, the administrative fee to transfer the Certificate of Emission Reduction Credit shall be reduced by the amount administrative fee paid for re-evaluation. The 12-month period shall be based on the date of written notification of the owner of the results of the re-evaluation by the Division.

(iv) $2500 per application to re-evaluate a Certificate of Emission Reduction Credit as per subparagraph (d)2. of this paragraph.

2. Payment of administrative fees required by this subparagraph shall be submitted along with an application to create, certify, bank, transfer, or re-evaluate Emission Reduction Credits.

(i) **Definitions.**

For the purposes of this paragraph, the following definitions shall apply:

1. "Electrical Generating Unit" means a fossil fuel fired stationary boiler, combustion turbine, or combined cycle system that serves a generator that produces electricity for sale.

2. "Enforceable" means enforceable by the Division. Methods for ensuring that Emission Reduction Credits are enforceable shall include, but not be limited to, conditions in air quality construction or operating permits issued by the Division.

3. "Netting Demonstration" means the act of calculating a "net emissions increase" under the preconstruction review requirements of Title I, Part D of the Federal Act and the regulations promulgated thereunder.

4. "Permanent" means assured for the life of the corresponding Emission Reduction Credit through an enforceable mechanism such as a permit condition or revocation.

5. "Quantifiable" means that the amount, rate and characteristics of the Emission Reduction Credit can be estimated through a reliable method and are approved by the Division.

6. "Real" means a reduction in actual emissions emitted into the air.

7. "Surplus" means not required by any local, state, or federal law, regulation, order, or requirement and in excess of reductions used by the Division in issuing any other permit or to demonstrate attainment of federal ambient air quality standards or reasonable further progress towards achieving attainment of federal ambient air quality standards. For the purpose of determining the amount of surplus emission reductions, any seasonal emission limitation or standard shall be assumed to apply throughout the year. Emission reductions which have previously been used to avoid New Source Review through a netting demonstration are not considered surplus.

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Department 391. RULES OF GEORGIA DEPARTMENT OF NATURAL RESOURCES

Chapter 391-3. ENVIRONMENTAL PROTECTION

Subject 391-3-5. RULES FOR SAFE DRINKING WATER

391-3-5-.04 Approval Required

(1) **Approval.** No person shall erect, construct, or operate a public water system, nor undertake substantial enlargements, extensions, additions, modifications, renovations or repairs to any public water system, including storage, distribution, purification, or treatment components, without having first secured the Division's approval of: the source of water supply; the means and methods of treating, purifying, storing and distributing said water; and obtaining a permit to operate a public water system, except as provided by paragraph (2) of this Rule. The approval of the Director must be obtained prior to the dividing of a public water system. For purposes of these rules "substantial" as used in this Rule shall not include routine maintenance.

(2) **Limited Additions.** Governmentally owned public water systems and water authorities and privately owned community water systems whose owners serves a combined population of greater than 10,000, with qualified staff and meeting operating criteria developed by the Division may, with prior approval from the Division, approve limited additions to the water system. These additions will be limited to water distribution lines to serve subdivisions, apartment complexes and shopping centers. The review of other additional types of water distribution system additions and/or extensions may be delegated to those water systems that have demonstrated the capability for such reviews. All delegations shall be by written agreement. Additions approved by the water system must be reported annually in a format prescribed by the Division. The report shall be due by July 1 of each year and describe additions approved in the previous calendar year.

(3) **Local Governmental Approval.** Except as specified in paragraph (6), before a person may initiate construction of a new public water system or increase the capacity of an existing public water system, the person shall notify the local government in which the system is located and obtain the local government's approval for development of the project within its jurisdiction, prior to the submittal of the plans and specifications to the Division for approval. To the extent practicable, the person should avoid locating part or all of the new or expanded facility at a site which:

(a) is subject to a significant risk from earthquakes, floods, fires or other disasters which could cause a breakdown of the public water system or a portion thereof; or

(b) except for intake structures, is within the floodplain of a 100-year flood or is lower than any recorded high tide where appropriate records exist; or

(c) is on or in close proximity to an abandoned landfill or any other site used for waste disposal.

(4) **Connect to Local Governmental Public Water System.** Any person who desires to own or operate or who desires to commence the operation of a public water system shall first evaluate connecting to an existing local governmentally owned and operated public water system.

(5) **Approval for No Connection to Local Governmental Public Water System.** Except as specified in paragraph (6), no approval of the plans and specifications for the development of a separate source of water supply or the construction of the water system will be made and no permit to operate will be issued until the owner has provided acceptable certification to the Division outlining the reasons why the system cannot connect to an existing local governmentally owned water system.

(6) **Pre-Operating Compliance Conditions.** Beginning January 1, 1998, the Division shall require compliance with the following conditions prior to the issuance of the initial permit to operate to a new privately owned community public water system or a permit modification to increase service connection(s) of a previously permitted privately owned public water system:

(a) The owner shall provide written certification from the local government, water authority or other public entity which has the power to provide water for consumptive use, in which the system is located, that the local government, water authority or other public entity is in concurrence with the development of the privately owned public water system. The certification shall be provided to the Division with the submission of the permit application and prior to or concurrently with the submission to the Division of the plans and specifications for construction of the proposed public water system.

(b) Where all the following conditions are met, a letter of concurrence for a new or expanded privately-owned public water system will not be required in the following counties. The requirements of this paragraph (b) shall expire on January 1, 2029.

1. The source water for the new or expanded permit to operate a public water system would be provided from groundwater within the Counties of Brantley, Bryan, Camden, Charlton, Chatham, Effingham, Glynn, Long, Liberty, McIntosh, and Wayne;

2. A person seeking water service has made the request for such service in writing via certified mail to the local government, water authority or other public entity which has the power to provide water for consumptive use;

3. The local government lacks the capability or permitted capacity to provide the requested water service within a period of 18 months from the date of such request; and

4. The owner of the privately owned community public water system has delegated authority as specified in paragraph (2) and demonstrated that it has the capability and permitted ground water capacity to provide the requested water service within a period of 18 months from the date of such request.

(c) The owner must retain a Professional Engineer, registered in the State of Georgia, to prepare plans and specifications for approval by the Division for the construction of the proposed public water system, and the owner shall submit to the Division a certification from the engineer that the water system was constructed according to the plans and specifications approved by the Division. The public water system must be designed and constructed in accordance with the Division's "Minimum Standards for Public Water Systems", latest edition.

(d) The owner must provide an approved back-up water source, such as an additional well, capable of providing adequate water service if the primary source becomes nonfunctional. The requirement for an approved back-up water source may be waived by the Director for systems with less than 25 service connections.

(7) **Treatment Products and Materials.** Products added directly to drinking water for its treatment or introduced indirectly into drinking water through its contact with surfaces of materials or products used for its treatment, storage, transmission, or distribution shall not adversely affect drinking water quality and public health.

(a) All treatment chemicals that come into contact with drinking water shall be certified for conformance with American National Standards Institute/National Sanitation Foundation Standard 60 (ANSI/NSF Standard 60) by an American National Standards Institute (ANSI) approved third-party certification program or laboratory.

(b) All products that come into contact with drinking water during its treatment, storage, transmission or distribution shall be certified for conformance with American National Standards Institute/ National Sanitation Foundation Standard 61 (ANSI/NSF Standard 61) by an American National Standards Institute (ANSI) approved third-party certification program or laboratory.

(8) **Infrastructure Security.** Public water systems must provide appropriate measures to protect and secure its critical drinking water supply infrastructure, including its water source, treatment, distribution, and any other component that is deemed pertinent to the safe operation and maintenance of the drinking water supply system.

(9) **Performance Bond or Letter of Credit**

(a) A performance bond or letter of credit may be required by the director to further assist in the assurance that a public water system serving year-round residents maintains compliance with the established contaminant levels and the provision of an adequate supply of water at or above the required minimum pressure. Such a performance bond or letter of credit shall be required of the owner or operator of any public water system serving year-round residents if:

1. After the first violation of contaminant or water supply standards or requirements, the owner or operator of the public water system fails to make the necessary corrections after receiving a notice from the director specifying:

(i) The corrections which must be made; and

(ii) A reasonable period of time for the completion of necessary corrective action; or

2. After a second violation of contaminant or water supply standards or requirements, the director decides, based on factors such as past performance, frequency and severity of violations, and timeliness of corrective action, that a performance bond or letter of credit is required.

(b) Any owner or operator of a public water system serving year-round residents who is required to obtain a performance bond or letter of credit pursuant to subparagraph (9)(a) shall file with the director the following:

1. A performance bond, payable to the director and issued by an insurance company authorized to issue such bonds in this state; or

2. An irrevocable letter of credit, issued in favor of and payable to the director, from a commercial bank or other financial institution approved by the director.

(c) The bond or letter of credit required in subparagraph (9)(a) shall be:

1. Conditioned upon faithful compliance with the Georgia Safe Drinking Water Act of 1977, the Rules for Safe Drinking Water Chapter 391-3-5, and the conditions and terms of the permit issued for the operation of the public water system;

2. In such amount as determined by the director as necessary to ensure the continued lawful operation of the public water system for a period up to ten years in the event the owner or operator fails to do so; provided, however, the range shall be as follows:

(i) Systems with 25 service connections or less -- an amount not to exceed $30,000.00;

(ii) Systems with 26 to 50 service connections -- an amount not to exceed $40,000.00; or

(iii) Systems with more than 50 service connections -- an amount not to exceed $50,000.00;

3. Subject to termination or expiration only upon 120 days' written notice to the director; and

4. Conditioned upon coverage for any violation occurring during the term of the bond or letter of credit of which written notice has been given to the owner or operator prior to 120 days after said term even though the initial or final determination of the violation occurs after the term of the bond or letter of credit.

(d) If an existing bond or letter of credit is to expire or terminate, the owner or operator of the public water system shall file a replacement bond or letter of credit meeting the requirements of this paragraph at least 60 days prior to the termination or expiration of the existing bond or letter of credit.

(e) Upon a determination by the director that an owner or operator has violated the Georgia Safe Drinking Water Act of 1977, the Rules for Safe Drinking Water Chapter 391-3-5, or the terms or conditions of a permit, the director may, after written notice of the violation to the owner or operator:

1. Forfeit or draw that amount of such bond or letter of credit that the director determines necessary to correct the violations determined and continue the lawful operation of the public water system; and

2. Expend such amount for such purposes.

(f) No action taken by the director pursuant to this paragraph, including the forfeiture of a bond or the drawing of funds from a letter of credit, shall relieve the owner or operator of a public water system from compliance with all provisions of this part, including the requirement to maintain in full force and effect a bond or letter of credit meeting the requirements of this paragraph.

(g) Every permit issued under the Rules for Safe Drinking Water, Chapter 391-3-5, shall be conditioned upon compliance with this paragraph.

(h) The provisions of this paragraph shall not apply to:

1. Any public water system of the state, an agency of the state, a county, a municipality, or of any other political subdivision or governmental entity;

2. Any water system owned by a church or other religious institution;

3. Any water system owned or provided by an employer and used primarily to serve employees; and

4. Any water system which is jointly owned by private individuals who are the users of the water supplied by the system.

(10) **Business Plan**. Beginning January 1, 1998, prior to the issuance of the initial permit to operate to a new community public water system, and beginning October 1, 1999, prior to the issuance of the initial permit to operate a new non transient, noncommunity water system, the Division shall require the owner to submit to the Division for approval a multiyear business plan. The multiyear business plan must adequately demonstrate the water system's managerial and financial capacity to comply with all drinking water regulations in effect, or likely to be in effect. The business plan shall be prepared in accordance with the latest edition of the Division's "Minimum Standards for Public Water Systems." The business plan shall be updated at intervals determined by the Director.

(11) **Asset Management Plan**

(a) Beginning January 1, 2024, prior to the issuance of a permit to operate a new community water systems (CWS) and new non-transient non-community water systems (NTNCWS) that serve a population greater than 3,300, the Division shall require the owner to submit an asset management plan prepared in accordance with subsection (d) of this rule for the Division's approval.

(b) Beginning January 1, 2024, prior to the issuance of a permit for ownership change or renewal permit for all existing community water systems (CWS) and non-transient non-community water systems (NTNCWS) that serve a population greater than 3,300, the Division shall require the owner to submit an asset management plan prepared in accordance with subsection (d) of this rule for the Division's approval.

(c) The asset management plan shall be prepared in accordance with Appendix C of the latest edition of the Division's "Minimum Standards for Public Water Systems." The asset management plan shall include the following elements:

1. Asset inventory;

2. The required sustainable level-of-service;

3. Determination of critical assets;

4. Determination of the lowest life-cycle cost options for providing the highest level-of service over time; and

5. Long-term financing strategy.

(d) The asset management plan shall be updated at intervals determined by the Director.

Cite as Ga. Comp. R. & Regs. R. 391-3-5-.04

AUTHORITY: O.C.G.A. § 12-5-170 ***et seq.***

HISTORY: Original Rule entitled "General Provisions" adopted. F. Sept. 6, 1973; eff. Sept. 26, 1973.

Repealed: New Rule entitled "Approval Required" adopted. F. July 5, 1977; eff. July 26, 1977, as specified by Rule 391-3-5-.47.

Amended: F. July 15, 1983; eff. August 4, 1983.

Repealed: New Rule, same title adopted. F. May 12, 1989; eff. June 1, 1989.

Amended: F. June 25, 1992; eff. July 15, 1992.

Amended: F. Sept. 26, 1997; eff. Oct. 16, 1997.

Amended: F. Sept. 24, 1999; eff. Oct. 14, 1999.

Amended: F. Sept. 29, 2000; eff. Oct. 19, 2000.

Amended: F. June 8, 2001; eff. June 28, 2001.

Amended: F. Dec. 10, 2002; eff. Dec. 30, 2002.

Amended: F. Dec. 21, 2004; eff. Jan. 10, 2005.

Amended: New title "Approval Required. Amended." F. Jan. 8, 2014; eff. Jan. 28, 2014.

Amended: F. July 26, 2016; eff. August 15, 2016.

Amended: F. Apr. 22, 2021; eff. May 12, 2021.

Amended: New title, "Approval Required." F. May 1, 2023; eff. May 21, 2023.

Amended: F. May 5, 2025; eff. May 25, 2025.

Department 515. RULES OF GEORGIA PUBLIC SERVICE COMMISSION

Chapter 515-2. PRACTICE AND PROCEDURE

Subject 515-2-1. GENERAL APPLICABILITY

515-2-1-.04 Applications, Petitions, Complaints and Filings. Procedural Requirements Relating Thereto

(1) All applications, petitions and complaints made to the Georgia Public Service Commission must plainly and distinctly state the grounds thereof, all being set forth in writing. In like manner, all defenses must be distinctly made in writing and must plainly and distinctly state the grounds thereof. These specifications may be accompanied, if the parties so desire, by any explanation or argument or by any suggestion, touching the proper remedy or policy. The parties may also be heard in person, or by attorney or by written argument, upon such written statements being first filed.

(2) Informal complaints may be made by letter or in person, and are given prompt attention by the Commission and its employees in an endeavor to bring about satisfaction of the complaint without a formal hearing.

(3) On all applications, petitions and complaints, and in any instance in which the Commission initiates an action, notice shall be given to the persons or corporations interested in or affected by said action at least thirty (30) days before any hearing that may be scheduled; provided, however, that the notification provisions of this subpart shall not apply to any emergency action that the Commission may need to take in the interest of safeguarding the public health, safety and welfare or any action in which the parties do not object to proceeding on a more expedited basis.

(a) Unless otherwise directed by the Commission or one of its hearing officers in a written order, the testimony of any witness who testifies as an expert or about matters of a technical nature must be pre-filed in its Executive Secretary's Office at least ten (10) days prior to the commencement of the hearing date, along with any exhibits in support thereof. In the event that the tenth day before the hearing falls on a weekend or state holiday, said testimony and accompanying exhibits shall be pre-filed on the next working day. Lay witnesses or witnesses whose testimony is not of a technical nature may present their testimony verbally, in writing, or in affidavit form at the hearing.

(b) All testimony pre-filed with the Commission shall conform with the filing requirements set forth in Rule 515-2-1-.04(4) and must also be served on all parties of record and the Consumers' Utility Counsel Division of the Governor's Office of Consumer Affairs.

(4) All filings at the Commission shall be made utilizing the electronic filing portal or through mail, courier or in-person. The procedures below outline the requirements for making filings at the Commission based on the manner utilized to submit the filing.

(a) Electronic Filing Portal. All filings made through the electronic filing portal shall be submitted in accordance with the instructions contained on the Commission's website https://psc.ga.gov/. All filings submitted through the electronic filing portal will be deemed as filed once the party filing the document receives an email confirmation from the Commission affirming that the filing has been accepted. All electronic filings submitted through the electronic filing portal shall be made using the type of format specified by the Commission in its Official Filing Schedule. If a filing is made utilizing the electronic filing portal no paper copy of the filing will be required except by order of the Commission or by request of a staff member of the Commission. If paper copies are directed in a Commission order or are requested by a staff member, the exact number of copies that a party must file shall be determined as specified in the Official Filing Schedule adopted by the Commission, outlined in a Commission order or communicated from a staff member. Once adopted, this Official Filing Schedule may be modified from time to time by order of the Commission.

Filings made through mail, courier or in-person. In addition to any other requirement set forth in Rule 515-2-1-.04, a party shall file an original of its filing along with a complete electronic version of its filing. If, for reasons beyond a party's control, any portion of a document cannot be filed electronically, the party making the filing shall include in the place of the unavailable item in its electronic filing a statement that the item in question is not available electronically and the reason(s) for its unavailability. All electronic filings shall be made using the type of software specified by the Commission in its Official Filing Schedule. In the event that a textual, substantive or other type of discrepancy exists between the original hard copy of the document and the electronic version filed, the contents of the original hard copy of the filing shall control.

(b) 1. Any party to a contested matter that lacks the technical ability to make an electronic filing with the Commission as required by (4)(b) of this rule may file a petition seeking an exemption from meeting this requirement. Any such petition that may be made pursuant to this rule shall conform with all of the filing requirements of this rule, except that it need not be accompanied by an electronic version of the petition filed. The decision whether to grant such a petition shall be made on a case-by-case basis by the Chairman of the Commission in accordance with Rule 515-1-1-.01.

2. Any filing made pursuant to Rule 515-2-1-.04 must be received by the Commission's Executive Secretary Office no later than 4:00 p.m. if it is to be date stamped as having been received that calendar day. Limited exceptions to the 4:00 p.m. filing deadline requirement may be made by the Executive Secretary's Office for good cause shown. Nothing set forth in this rule shall prevent a party from petitioning the Commission to obtain an exception to the filing deadline in the event that the Executive Secretary does not grant a request that a late filing be accepted nor shall this rule be interpreted to contradict the express provisions of O.C.G.A. § 50-13-23.

(c) All filings with the Commission shall include a valid mailing address, telephone number, and email address. In addition to any other applicable service requirements, all filings made at the Commission shall be sent electronically to all parties who have previously provided a valid email address in the Docket at issue (e.g., through requests for Intervention or other filings).

1. Inability of a party to serve documents electronically for lack of a valid email address as required by Section (c) shall not be construed as a violation of this Rule section.

2. If, for reasons beyond a party's control, any portion of a document cannot be served electronically, the serving party shall include in the place of the unavailable item in its electronic service documentation and a statement that the item in question is not available electronically.

3. In the event that a party is unable to serve another party because either the party to be served does not have or has not provided notice of a valid email address or the document or any portion thereof cannot be served electronically, the serving party shall affect service via the US mail or other acceptable means allowed by the Administrative Procedure Act.

4. Nothing in subsection (c) of this Rule shall supersede Commission Rule 515-3-1-.11: Trade Secrets.

(5) Each electric, natural gas, telephone, telegraph and radio common carrier utility company must also file with the Commission concurrently with their general rate increase applications and other exhibits two (2) copies of Minimum Filing Requirements (MFRs). The MFRs shall be in format and content as prescribed by the Commission for each different type utility, and as contained in form numbered MFR-books as described below in this paragraph. Each utility company desiring an exemption and/or a deviation from the prescribed filing must notify the Commission and receive approval of such exemptions and/or deviations from the Commission prior to the filing of its next application for a general rate increase after this Rule shall have been issued. Blank schedules of the MFRs to be completed by the utility companies will be furnished by the Commission to the companies upon their written request.

(a) Electric Companies, Form Number: GPSC-ELEC-MFR-1
Original Issued November 4, 1980 DATE

(a) Electric Companies, Form Number: GPSC-ELEC-MFR-1
Last Revision:
NUMBER
DATE
(b) Gas Companies, Form Number: GPSC-GAS-MFR-1
Original Issued November 4, 1980 DATE
Last Revision:
NUMBER
DATE
(c) Telephone Companies, Form Number: GPSC-TELP-MFR-1
Original Issued November 4, 1980 DATE
Last Revision:
NUMBER
DATE
(d) RCC Companies, Form Number: GPSC-RCC-MFR-1
Original Issued November 4, 1980 DATE
Last Revision:
NUMBER
DATE
(e) Reserved.

(6) Each electric utility company must also file with the Commission concurrently with their fuel cost recovery applications and other exhibits two (2) copies of Minimum Filing Requirements ("MFRs"). The MFRs shall be in format and content as prescribed by the Commission.

MINIMUM FILING REQUIREMENTS FOR FUEL FILINGS

The following package of proposed fuel filing minimum filing requirements ("MFRs") is organized in three parts:

I. General instructions for preparing and filing the MFRs.

II. MFRs referring to actual / historical data and the calculation of the over- /under- recovered balance. Such MFRs are labeled as "MFRH" to represent the historical period.

III. MFRs referring to the test year and / or future periods and the calculation of the proposed fuel factor. Such MFRs are labeled as "MFRP" to represent the projected period.

GENERAL INSTRUCTIONS

The following instructions are applicable to all schedules required in the process of a fuel filing with the Georgia Public Service Commission ("Commission"):

1. The listed information should be provided as testimony, exhibits, attachments, or schedules in the initial filing. Each schedule shall be sponsored by a witness providing testimony in the case. Schedules shall be referenced by schedule number and name as indicated in each instruction. Schedules which are not applicable at the present time shall be so designated.

2. Where required schedules are filed as exhibits in witness pre-filed testimony, reference to those schedules may be made in the MFRs.

3. To the extent feasible without imposing undue burden on the Utility, (i) all exhibits, schedules and supporting workpapers shall be filed in both hard copy and electronic format; (ii) numerical information shall be provided in Microsoft Excel (or any other compatible software) with formulas and links left intact; and (iii) documents containing primarily narrative information shall be filed in searchable PDF Format. Documents provided in electronic format shall be provided on a compact disk or other appropriate file storage media. Units of measure (*e.g.,* dollars, millions of dollars, MWh, tons) should be clearly identified.

4. Confidentiality: The Utility may allege that some information requested within the fuel filing package requirements is proprietary and confidential, and may be filed as "Trade Secret." In such case, the Utility will comply with the Commission's rules governing Trade Secret filings.

5. The term "historical period" is meant to designate the time period since the last FCR proceeding. Actual data shall be provided on an ongoing basis up to the hearing.

6. To the extent that the Utility already prepares reports with information listed below, those reports may be acceptable if the requested information is clearly identifiable from the report.

7. References to Utility actions include those which are taken by any affiliates acting on the Utility's behalf.

8. Where a coal description is required, it should be provided in terms of source (freight district), typical Btu/lb, and typical percent sulfur.

9. Fuel oil should include a description by type number.

10. Should the Utility propose treatment different from that used in prior fuel proceedings, the Utility will identify such different treatment and explain the reasons such treatment is proposed.

HISTORICAL PERIOD FUEL DATA AND INFORMATION

Schedule MFRH-1: Filing Workpapers

The Utility shall provide the complete set of workpapers, related to the historical period that was used in the Utility's preparation of its prefiled testimony and exhibits. Such workpapers shall include both numerical data and chart data. All sources used to generate any of the data incorporated in the attached worksheets should be provided as workpapers. All tabular data should include the measurement units for which data are provided.

Schedule MFRH 1.1: Historic Fuel Cost Recovery paid by Consumer in dollars- per-month

The Utility shall provide in dollars-per-month for bills rendered during the historical period, including supporting calculations:

1. The average municipal-residential consumer monthly bill and the percent thereof attributable to fuel costs;

2. The average county-residential consumer monthly bill and the percent thereof attributable to fuel costs;

3. The average municipal low-income senior consumer (eligible for the low-income senior discount) monthly bill and the percent thereof attributable to fuel costs; and

4. The average county-residential low-income senior (eligible for the low-income senior discount) monthly bill and the percent thereof attributable to fuel costs.

Schedule MFRH-2: Overall Description and Variance Report

The Utility shall provide a narrative description of the specific reasons for seeking a change in the FCR rate, statistical schedules, and supporting calculations comparing the historical period fuel and purchased power expense by component (*e.g.*, steam, nuclear, hydro, combined cycle, natural gas combustion turbine, oil combustion turbine, solar, wind, biomass, pump storage and other generation, purchased power, sales for resale, carrying costs, and other FCR costs) to the corresponding information used in the prior FCR rate case. The Utility shall include separate summary schedules by month for fuel costs incurred, actual energy generation/purchases, and $/MWH. The narrative description will include a report of all components of fuel costs that are included in the FCR filing showing the amounts for each by month and account. The statistical schedules should be provided on a Georgia Retail basis.

Schedule MFRH-3: Fossil Fuel Inventories Schedule

Schedule MFRH-3.1: Inventory Targets

This schedule shall present:

1. The Utility's monthly fossil fuel inventory targets and the ending inventory effective during the historical period broken down by plant, unit, and each separate inventory, as applicable. The Utility shall identify the time period over which each target existed.

2. If any of the Utility's coal-fired generating units were operated out of economic dispatch during the historic period due to coal inventory levels, the Utility shall identify the unit(s) and the dates on which such operation occurred.

Schedule MFRH-3.2: Fossil Fuel Inventories

This schedule shall present an analysis of fossil fuel inventories for the historical period. The analysis shall categorize historic inventories by tons, barrels, or cubic feet / Btu equivalent, and dollars.

For each separate plant owned or jointly owned by the Utility, for each month for this historical period, the Utility will provide:

1. Beginning-of-month inventory level, in tons, barrels, cubic feet / BTU equivalent and dollars;

2. Additions for each month, in tons, barrels, cubic feet / BTU equivalent and dollars;

3. Fuel removed from inventory for generation for month, in tons, barrels, cubic feet / BTU equivalent and dollars;

4. End-of-month inventory level, in tons, barrels, cubic feet / BTU equivalent and dollars; and

5. Adjustments to inventory level, in tons, barrels, cubic feet / BTU equivalent and dollars and reason for adjustment.

Schedule MFRH-3.3: Inventory Values

This schedule shall present a description of the accounting treatment of how the Utility determines the unit cost of fossil fuel burned from its inventory. The Utility shall include the method of determining the cost of fossil fuel burned from inventory (FIFO, LIFO, average, or other) for each stockpile at each plant.

Schedule MFRH-4: Unit Outages

Schedule MFRH-4.1: Nuclear Unit Outage

For each nuclear unit owned or co-owned by the Utility, identify each unplanned, forced, and scheduled outages and deratings that occurred during the historical period and provide the following details in Excel spreadsheet format as reported in the GADS database:

1. Unit name;

2. Date started;

3. Date ended;

4. Duration of outage or derating in hours;

5. Type of outage or derating;

6. If derating, indicate the amount of derating (MWh) and maximum power level permitted (MWh);

7. Reason code for outage derating and explanation;

8. The amount of generation lost (MWh);

9. For all forced outages and deratings that occurred during the historic period that resulted in 50,000 MWHs or more of lost generation (as determined on a total unit basis, irrespective of Utility's ownership share), the replacement power cost (as determined based on Utility's ownership share of the unit). Include all calculations; and

10. Upon request from Commission Staff, make available for inspection by Commission Staff the root cause analysis (or similar document) for all outages identified in item #9 if available.

Schedule MFRH-4.2: Fossil Unit Outage

For each fossil unit owned or co-owned by the Utility, list the outages, in Excel spreadsheet format, unplanned and forced outages that occurred during the historical period:

1. Unit name;

2. Date started;

3. Date ended;

4. Duration of outage or derating in hours;

5. Type of outage or derating;

6. If derating, indicate the amount of derating (MWhs) and maximum power level permitted (MWh);

7. Reason code for outage or derating and explanation;

8. The amount of generation lost (MWh);

9. The replacement power cost (as determined based on Utility's ownership share of the unit) for all forced outages and deratings that occurred during the historic period that lasted longer than 7 consecutive days. Include all calculations; and

10. Root cause analysis for all outages identified in item #9 if available.

Schedule MFRH-4.3: Fossil and Nuclear Unit Equivalent Availability

To the extent not covered in MFRH-4.1 and 4.2, the Utility will report actual equivalent availability for the historical period. Such report will include a listing of all unplanned outages, and, if reported in the NERC GADS data base, deratings greater than 75%, and deratings of more than 90% and continuing for at least one month. Listing should be sorted by type of event (maintenance outage, forced outage, derating), plant, unit, and date and should include a brief description of cause (*e.g.*, boiler tube leak).

Schedule MFRH-4.4: Transmission Outage and Congestion

List in column form any transmission outages and/or congestion that led to the need for replacement power during the historical period. Include:

1. Identity of transmission facility;

2. Date started;

3. Date ended;

4. Duration of outage or congestion in hours;

5. Reason for outage or congestion; and

6. Incremental cost of the outage or congestion.

Schedule MFRH-5: Generating Plant and Unit Data

For each unit operated by the Utility and which is located at a plant at least partly included in retail rate base, the Utility shall provide an identification of generating resources, including:

1. Name of plant, location by city or county and unit designation;

2. Year the unit was first placed in operation;

3. Maximum net dependable capacity for each unit (MW);

4. Generator nameplate rating (MW or MVA (specify));

5. Percent of total net dependable capacity included in retail rate base;

6. For any units with capacity not included in rate base, the name of each Utility or other entity which receives unit energy and net dependable MW or percent of total net MW assigned to that Utility or entity. Identify primary type of fuel used by these generating units;

7. Primary types of fuel used by each generating unit and types of fuel used for startup/ignition. For coal units, the following information will be provided:

a. Type of coal used, if applicable: design coal, current coal used, and other types of coal which can be burned in the unit;

b. If coals are blended, the maximum percentages of each coal which may be used and the types of coal which may be blended together;

c. Description of specific design and permitting constraints on coal blending;

8. Copy of the annual Environmental Compliance Strategy Review;

9. Type of flue gas control equipment installed at unit for each part of the historical period (*e.g.*, flue gas desulfurization system), if applicable;

10. Listing of environmental regulations and/or permits related to SO2 and NOx emissions effective during each part of the historical period which affect the type of coal that may be burned at the unit (*e.g.*, state of Georgia limit of 3% sulfur in all coal burned);

11. Railroads with track physically available to deliver coal to plant; and

12. Pipelines physically able to deliver natural gas and/or fuel oil to plant.

13. The Utility should provide the following data for each unit on a monthly basis:

a. Net unit heat rate, Btu per net kWh;

b. Gross and net energy generated by unit, MWH by Utility unit share if applicable;

c. Net unit capacity factor; and d. Fuel cost.

14. Within 15 days of the filing of a full fuel cost recovery application, the Utility shall provide the following data on a monthly basis, as available, for each generating unit from which the Company receives energy or capacity under a PPA:

a. Net unit heat rate, Btu per net kWh;

b. Gross and net energy generated by unit (MWH);

c. Net unit capacity factor;

d. Fuel cost; and

e. VOM cost.

Schedule MFRH-6: Fuel and Purchased Power Procurement Practices

This schedule shall include the current fuel procurement procedures and a narrative of purchased power procurement practices of the Utility during the historical period. Utility shall provide a copy of the most current long term coal procurement strategy summary, financial review procedures summary, natural gas procurement strategy summary, and Intercompany Interchange Contract ("IIC") and note any changes from the previously filed IIC.

Schedule MFRH-7: Fuel and Fuel-Related Contracts

This schedule shall include summaries as described in more detail below of all fuel and fuel-related contracts existing between the Utility and its suppliers, or between any affiliate of the Utility that supplies fuel or fuel-related services to the Utility and its suppliers. Provide those summaries of contracts that were in effect during any portion of the historical period. The Utility shall provide a copy of any recurring internal fuel and fuel transportation outlook summary analysis (to the extent such summary analysis is produced in the ordinary course).

Schedule MFRH-7.1: Long-Term Coal Supply Contracts

For each long-term coal supply contract (which, for purposes of this MFRH-7-1, shall mean coal supply contracts with a delivery term of greater than one year), the Utility will provide:

1. Name and number by which the Utility identifies the contract;

2. Supply start date;

3. Supply termination date;

4. Description of contract year, if other than January 1 through December 31;

5. Minimum and maximum tons of coal to be supplied for each contract year ending in the historical period and for remainder of contract term;

6. Number of tons actually received each contract year ending in the historical period and projected number of tons which will be provided each contract year through end of test year;

7. Name of mine and coal district from which coal is to be supplied;

8. Coal quality: percent sulfur and heating value;

9. Name of rail transporters between mine (or port) and plants and freight district in which coal loading facility is located;

10. Actual cost per ton FOB mine (or port) for each contract month ending in the historical period;

11. Method of determining cost of coal under the contract (*e.g.*, fixed price, market review including the years in which reviews are effective), base price plus escalation. List by date of the value of any index used to compute price of coal (*e.g.*, Producer Price Index);

12. Location of scale used to determine tons of coal shipped and party responsible for cost of weighing;

13. Location of coal sampling equipment and party responsible for obtaining coal analysis;

14. A copy of any notice of force majeure sent by the Utility or agent for the Utility to any coal supplier under long-term contract during the historic period; and

15. A copy of any notice of force majeure sent by any coal supplier or its agent under long-term contract to the Utility or agent for the Utility during the historic period.

The Utility will also provide a list of any filed litigation between the Utility and any contract coal supplier beginning or pending during the historical period.

Schedule MFRH-7.2: Spot Coal Purchase Information

For each spot coal purchase order or other agreement (which, for purposes of this MFRH-7-2, shall mean coal purchases with a delivery term of one year or less), other than long-term coal contracts, the Utility will provide a schedule with the following information:

1. Name and number by which the Utility identifies the purchase order or other agreement;

2. Supply start and end dates;

3. Number of tons actually received under purchase order or other agreement for the historical period to date, number of tons projected for the remaining historical period, and number of tons projected for the test year;

4. Name of mine and coal district from which coal is to be supplied;

5. Coal quality: percent sulfur and heating value;

6. Name of rail transporters between mine (or port) and plants and freight district in which coal loading facility is located;

7. Cost per ton FOB mine (or port);

8. A copy of any notice of force majeure sent by the Utility or agent for the Utility to any coal supplier under a spot purchase during the historic period; and

9. A copy of any notice of force majeure sent by any coal supplier or its agent under a spot purchase to the Utility or agent for the Utility during the historic period.

Schedule MFRH-7.3: Natural Gas Contracts

If there have been any changes since the last fuel cost recovery proceeding to the standardized contracts used by the Utility for natural gas procurement, the Utility shall provide such revised standardized contract(s). If no changes have been made, the Utility will provide a link (if available) to the current standardized contract form(s) and identify

the most recent fuel cost recovery proceeding in which the standardized contract was provided as part of MFRH-7.3. In addition, the following items should be included in a summary schedule:

1. Contract description;

2. Supplier;

3. Negotiation date or date signed;

4. Term of deal;

5. Specific service provided under the contract, including any swing provisions offered through the contract (ability to take more of less gas for any one hour, day, or month of contract) or any gas storage capability;

6. Pricing terms, including specific index upon which contract price is based (if applicable) and premiums or discounts from index;

7. For each index used to compute price of gas, listing of the values of that index applicable for any part of the historical period;

8. Purchase volume obligation;

9. Delivery point(s) and a summary of potential receipt points for each supply contract; and

10. Transportation provision, if applicable.

Schedule MFRH-7.4: Natural Gas Transportation Contracts

The Utility will provide a summary of all applicable firm natural gas transportation and storage agreements and will provide the following information:

1. Identification of the transportation or storage provider;

2. Facility identification (plant assigned);

3. Contract date;

4. Term dates (start and end);

5. Firm transport or capacity storage rate ($/MMBtu);

6. Volume: daily (transport, injection and withdrawal, as applicable) or capacity for storage;

7. A copy of any notice of force majeure sent by the Utility or agent for the Utility to any natural gas transportation provider during the historic period; and

8. A copy of any notice of force majeure sent by any natural gas transportation provider or its agent to the Utility or agent for the Utility during the historic period.

Schedule MFRH-8: Coal Transportation

1. The Utility will provide a copy of the coal transportation strategy effective for any part of the historical period or for the test year.

2. The Utility will also provide a list of any filed litigation between the Utility and any coal transporter beginning or pending during the historical period.

3. The Utility will provide a copy of any notice of force majeure sent by the Utility or agent for the Utility to any supplier of coal transportation (other than coal rail transportation) during the historic period.

4. The Utility will provide a copy of any notice of force majeure sent by any supplier of coal transportation (other than coal rail transportation) or its agent to the Utility or agent for the Utility during the historic period.

Schedule MFRH-8.1: Rail

The Utility will provide a listing of coal rail transportation contracts with the following information:

1. Name and number of transportation contract;

2. Effective date and term of contract;

3. Contract year, if different from calendar year;

4. Maximum and minimum tonnage which can be transported under the contract on an annual basis;

5. Actual tons transported under the contract for each contract year ending in the historical period;

6. Points of origin under the contract;

7. Points of delivery under the contract;

8. Table of rates applicable to the Utility's coal transportation for each contract year, (*i.e.*, rate for specific origins and delivery points with information for different railcar equipment), if applicable. For future months through end of test year, if rate is not specifically set out in contract, provide the rates used by the Utility in projecting fuel costs;

9. Description of method of pricing under contract (*e.g.*, fixed by year, base plus escalation);

10. List of any indices or other factors upon which escalation or other rate change is based (*e.g.*, RCAF-A or price of diesel fuel);

11. Cost per ton for weighing coal, if applicable;

12. A copy of any notice of force majeure sent by the Utility or agent for the Utility to any railroad providing coal or commodity transportation during the historic period; and

13. A copy of any notice of force majeure sent by any railroad providing coal or commodity transportation to the Utility or agent for the Utility to during the historic period.

Schedule MFRH-8.2: Other

The Utility shall provide a listing of any other coal transportation contracts or agreements (*e.g.,* any for trucking or transshipment at docks), including service provided, terms of agreement, any coal tonnage and costs per contract year, actual or projected through end of test year.

Schedule MFRH-8.3: Railcar Leases and Maintenance

The Utility shall provide a list of number of railcars owned by the Utility, including type of car and tons of coal which can be loaded into each car, and whether these cars are included in rate base. It shall also provide a list of railcar leases including the following details:

1. Name and identification of lease;

2. Beginning date and term of lease;

3. Number of railcars provided under lease;

4. Type of car provided, including aluminum or steel; and

5. Annual costs for the lease.

The Utility shall specify the total number of rail cars available for coal transportation, number of cars in a typical unit train, number of spare cars, and number of unit trains assigned to each originating or delivering railroad. It shall provide a listing of lease and maintenance costs used by the Utility for evaluation of costs of delivered coal from different mining districts and freight districts and for delivery to the Utility's various coal-fired plants. The Utility shall provide a listing of actual lease costs and actual maintenance costs since the beginning of the historical period and a description of how and when these costs are included in the Utility fuel costs.

Schedule MFRH-9: General Coal Cost Breakdown

This schedule shall be provided in Excel worksheet and present the breakdown of the purchased fuel costs for the Utility's coal-fired stations into the following categories per ton, on a monthly basis during the historical period:

1. FOB mine price;

2. Rail transportation;

3. Railcar maintenance;

4. Railcar ownership/lease expenses;

5. Railcar depreciation;

6. Other transportation costs (specify);

7. Ad valorem, state and use taxes; and

8. Any other costs or credits which can be separately identified.

Schedule MFRH-10: Natural Gas Hedging

This schedule shall include an explanation of the Utility's fuel hedging practices and hedging results during the historical period. The following items should be included with the hedging results:

1. Administrative cost of the hedging program; and

2. Hedging gains and/or losses.

Schedule MFRH-11: Nuclear Fuel Expense

This schedule shall present:

1. The monthly nuclear fuel expenses based on Utility's ownership share of the plant/unit for each of the Utility's nuclear plants during the historical period;

2. Both the monthly total number and the percentage of total generation of scheduled outages during the historic period for each of the Utility's nuclear plants; and

3. Both the monthly total number and the percentage of total generation of unscheduled outages during the historic period for each of the Utility's nuclear plants.

Schedule MFRH-12: Gas & Oil Cost Breakdown

To the extent that accounting records are kept in this format, this schedule shall present the breakdown of the purchased fuel costs for the Utility's gas and oil fired stations into the following categories per mmBtu, on a monthly basis during the historical period:

1. Delivered price;

2. Fixed pipeline (transportation) costs;

3. Other transportation costs (specify);

4. Ad valorem taxes; and

5. Details of any gain or loss on sales to other parties.

Schedule MFRH-13: Purchased Power / Off-System Sales

Schedule MFRH-13.1: Power Pool Purchases and Sales Data

This schedule shall provide, for the historical period, copies of the monthly IIC billing ("Pool Bill") for the Utility. It will include the Associated Pool Purchases for each month of the historical period.

Schedule MFRH-13.2: Summary of Contract Purchased Power Data

This schedule shall provide, for the historical period, documents summarizing the Utility's purchased power agreements for procuring generation. The summary will include:

1. Term of the contract, including whether the contract expired during the historic period;

2. Counter party on the contract;

3. Capacity of the contract;

4. Generation asset tied to the contract;

5. Capacity pricing of the contract;

6. Energy pricing of the contract;

7. Amount of generation obtained under the contract by dollars and MWH; and fuel accounting treatment of each cost component of the purchase; and

8. Citation for the Commission order (including docket number) approving the purchase power agreement, if applicable.

Schedule MFRH-13.3: Energy Strips

This schedule shall provide documents summarizing the purchase of any energy strips during the historical period.

Schedule MFRH-13.4: Summary of Off-System Sales and Sales for Resale

This schedule shall provide documents summarizing the Utility's wholesale contracts for off-system sales. The summary shall include:

1. Term of the contract;

2. Counter party on the contract;

3. Capacity of the contract;

4. Generation assets used for supplying the contract;

5. Firmness of the sale;

6. Capacity pricing of the contract;

7. Energy pricing of the contract;

8. Amount of generation sold under the contract by dollars and MWH;

9. Fuel accounting treatment of each revenue component of the sale; and

10. Classification of the contracts using the following categories (as applicable):

a. Sales made from a non-certified asset (or a non-certified portion of a certified asset) but the Utility must offer right of first refusal to retail customers upon expiration of current contract.

b. Sales made from a non-certified asset (or a non-certified portion of a certified asset) but the Utility has no obligation to offer right of first refusal to retail customers upon expiration of current contract.

c. Sales made from a certified asset.

d. Other.

Schedule MFRH-13.5: Historical Retail Energy Sales Data

Provide the following energy retail sales information on an actual (calendar) and billed basis:

1. Monthly kWh sales by customer class for the three most recent historic calendar years, including the historic period of the fuel filing;

2. Actual Sales - Provide actual sales data in MWHs by month for the historical period; and

3. A reconciliation for any differences between its historic per book sales MWH for GPSC jurisdictional customers and the MWHs assumed in previous filing budget.

Schedule MFRH-14: Fuel Cost Over- / Under-Recovery

This schedule shall begin with the deferred fuel balance as approved in the Utility's last fuel case. The schedule shall present the adjusted monthly booked over- / under-recovery of fuel costs since the date of the Utility's last fuel proceeding through the last month of the historical period requested. This schedule shall include monthly amounts as reported to the Commission on the monthly fuel cost recovery reports. This schedule shall note any material, non-routine adjustments to the fuel balance, which shall include any adjustments related to replacement power cost for significant Utility-owned generating unit outages.

Schedule MFRH-15: Carrying Cost Calculation

This schedule shall include the calculation and presentation of the carrying cost of the over-/ under-recovered fuel balance in Excel spreadsheet format and shall include supporting documents to verify the monthly carrying cost rates and charges used in calculating the fuel cost over-/under- recovery.

Schedule MFRH-16: Emission Costs

This schedule shall include an analysis of emission costs recovered through FCR during the historical period and shall include:

1. Explanation of how costs of emissions flow through to fuel costs on an accounting basis;

2. Tabulation of total number of SO^2 emissions allowances allocated to the Utility each calendar year ending in the historical period;

3. Number of SO^2 allowances retained for auction by EPA and resulting revenue returned to the Utility each calendar year ending in the historical period;

4. Tabulation of SO^2 emission allowance activity with following information for the historical period:

a. Number and vintage of allowances banked by the Utility;

b. Number of SO^2 allowances surrendered to EPA on both a total Company and Georgia Retail basis;

c. Number and vintage of allowances sold, name of buyer, and revenue received per allowance;

d. Number, vintage, and seller for any allowances which the Utility bought / will buy; and

e. Cost of each allowance bought for use with rate base generation.

5. Tabulation of all NOx allowance activity, i.e., allocation, purchase, use, trade or sales, for this historical period;

6. Table of average actual market price by month of the historical period of SO^2 emission allowances and source of information; and

7. Table of average actual market price by month of the historical period of NO^2 emission allowances and source of information.

Schedule MFRH-17: Data to be Made Available:

The Utility shall make available by appointment the following documents at the office in which the documents are routinely kept or in Atlanta at a Utility office:

1. Fuel supply contracts, unless otherwise specified above;

2. Fuel transportation contracts;

3. Fuel contract, spot fuel, and transportation buy books;

4. Purchased power contracts; and

5. Power sales contracts with wholesale customers.

Schedule MFRH-18: Spinning Reserves:

This schedule shall present data including:

1. The percentage of operating (spinning) reserves the Utility was carrying across the peak-hour for each day of the year for the most recently completed three calendar years.

2. The Utility's load in the peak-hour for each day of the year as a percentage of the total system load for that hour for the most recently completed three calendar years.

TEST YEAR / PROJECTED FUEL DATA AND INFORMATION

Schedule MFRP-1: Filing Workpapers

The Utility shall provide the complete set of workpapers, related to the projected test period that was used in the Utility's preparation of its prefiled testimony and exhibits. Such workpapers shall include both numerical data and chart data and will include a list of all inputs and assumptions used to derive the expected fuel clause results, by month, for all months of estimated or projected data relied upon or used in the Utility's FCR filing. Such workpapers shall include the detailed energy budget, along with all assumptions and documentation used in the preparation of such budget.

Schedule MFRP-1.1: Projected Fuel Cost Recovery proposed in dollars-per-month: The Utility shall provide in dollars-per-month for the proposed bills to be rendered under the Utility's filing in this docket the following information:

1. The proposed average municipal-residential consumer monthly bill and the percent thereof attributable to fuel costs;

2. The proposed average county-residential consumer monthly bill and the percent thereof attributable to fuel costs;

3. The proposed average municipal low-income senior (eligible for the low-income senior discount) monthly bill and the percent thereof attributable to fuel costs; and

4. The proposed average county-residential low-income senior (eligible for the low-income senior discount) monthly bill and the percent thereof attributable to fuel costs.

Schedule MFRP-1.2: Average FCR Residential data The Utility shall provide:

1. The per kW-hour increase, and percentage increased, under the Company's FCR proposal for the average municipal-residential, average county-residential, average municipal low-income senior (eligible for the low-income senior discount) and average county low-income senior (eligible for the low-income senior discount) and

2. The average monthly kWh usage for the average municipal-residential, average county-residential, average municipal low-income senior (eligible for the low-income senior discount) and average county low-income senior (eligible for the low-income senior discount).

Schedule MFRP-2: Calculation of Fuel Cost Recovery Factor

This schedule shall include the calculation of the fuel cost recovery factor and will include the increase/decrease for the average residential consumer, and for the average low-income senior citizen that would result under the Utility's FCR filing; and the average residential monthly kWh usage and the average low-income senior citizen monthly kWh usage.

Schedule MFRP-3: Fossil Fuel Inventories

Schedule MFRP-3.1: Inventory Targets

This schedule shall present the Utility's fossil fuel inventory targets effective for the test period.

Schedule MFRP-3.2: Fuel Inventories

This schedule shall present an analysis of fossil fuel inventories projected for the test period by type and by location whether at the Utility's generating plant sites or otherwise. The Utility shall categorize such projected inventories by tons, barrels, or cubic feet / Btu equivalent, and dollars and include all assumptions which support estimated values.

Schedule MFRP-3.3: Inventory Values

This schedule shall present a complete description of the accounting treatment of how the Utility determines the unit cost of fossil fuel burned from its inventory for the test period. The Utility shall include the method of determining the cost of fossil fuel burned from inventory (FIFO, LIFO, average, or other.)

Schedule MFRP-4: Outage Planning

Schedule MFRP-4.1: Nuclear Unit Outage Planning

This schedule shall present the projected start date (month and year) and the projected length of outage (days) for each refueling scheduled from the beginning of the test period through 12 months after the end of the test period.

Schedule MFRP-4.2: Fossil Unit Outage Planning

This schedule shall present the projected start date (month and year), the projected length of outage (hours), and the reason for the outage/major work planned for each outage scheduled from the beginning of the test period through 12 months after the end of the test period.

Schedule MFRP-4.3: Fossil and Nuclear Unit Equivalent Availability

To the extent not covered in MFRP-3 and 4, Utility shall report and specify equivalent availability or forced outage rate (or other), depending on input data for modeling program.

Schedule MFRP-5: Generating Plant and Unit Data

Provide the same information as requested in Schedule MFRH-5, Items 1 through 12 for any new generating unit to be on-line during the test year.

Schedule MFRP-6: Fuel Expense Information

The following schedules shall be presented, as specified, for fuel expenditures and operating statistics for the test year.

Schedule MFRP-6.1: Fuel by Classification

This schedule shall provide, as appropriate, projected fuel expense by classification consistent with FERC Uniform System of Accounts for each month through the test year.

Schedule MFRP-6.2: Fuel to be Burned

This schedule shall present projected fuel expense by each of the Utility's generating stations for each month through the test year. The information shall be disclosed for each individual fuel type and shall include units burned, cost of fuel burned, and price per unit burned.

Schedule MFRP-6.3: Fossil Fuel Purchases

This schedule shall present projected fossil fuel purchases by each of the Utility's generating stations for each month of the test year. The information shall be disclosed for each individual fuel type and by supplier and shall include units purchased, cost of fuel purchased, and price per unit purchased. With regard to coal, it shall include projected cost of coal per ton FOB mine according to supplier, projected transportation cost per ton according to supplier; the

number of tons delivered per month according to supplier and heating value and percent sulfur estimated for those coal tons, and any other per ton or per MMBtu costs (or credits) known or projected for purchases from each supplier (*e.g.*, states taxes, lease and maintenance costs, synfuels discount).

Schedule MFRP-6.4: Gas and Oil Forecast

The Utility shall include its forecast for the test year of gas and oil prices detailed by month.

Schedule MFRP-6.5: Variable Fuel Cost Components

This schedule shall present variable cost components of the total net recoverable fuel cost for the test year. The information shall be disclosed for each individual fuel type and shall include costs which are directly tied to the volume, price or cost of fuel. Variable cost does not include O&M expenses, administrative cost, overhead allocations or depreciation. Variable natural gas cost shall also include hedging gains or losses, but not administrative costs.

Schedule MFRP-7: Fuel and Fuel-Related Contracts

This schedule shall include summaries described below of all fuel and fuel-related contracts that have changed since the historical period and that will be in effect during the test year between the Utility and its suppliers. The Utility shall also include summaries of new agreements that will be effective during the test period:

Schedule MFRP-7.1: Coal Supply Contracts

For each coal supply contract in effect for the test year, the Utility will provide:

1. Name and number by which the Utility identifies the contract;

2. Supply start date;

3. Supply termination date;

4. Description of contract year, if other than January 1 through December 31;

5. Minimum and maximum tons of coal to be supplied for remainder of contract term;

6. Projected number of tons which will be provided each contract year through end of test year;

7. Name of mine and coal district from which coal is to be supplied;

8. Coal quality: percent sulfur and heating value;

9. Name of rail transporters between mine (or port) and plants and freight district in which coal loading facility is located;

10. Projected cost per ton FOB mine (or port) through the end of the test year;

11. Method of determining cost of coal under the contract (*e.g.*, fixed price, market review including the years in which reviews are effective), base price plus escalation. List by date of the value of any index used to compute price of coal;

12. Location of scale used to determine tons of coal shipped and party responsible for cost of weighing; and

13. Location of coal sampling equipment and party responsible for obtaining coal analysis.

Schedule MFRP-7.2: Coal Not Under Contract

The Utility will list by month of coal requirements, through the end of the test year, which are not yet under contract, purchase order or other agreement, including the following information:

1. Projected tons of coal needed by type and originating / delivering railroad;

2. Coal quality: percent sulfur and heating value; and

3. Projected price per ton FOB mine (or port).

The Utility will provide the internet bid list of potential fuel and transportation service providers including the most recent bids solicited from competitive suppliers.

Schedule MFRP-7.3: Natural Gas Contracts

If there have been any changes since the last fuel cost recovery proceeding to the standardized contracts used by the Utility for natural gas procurement, the Utility shall provide such revised standardized contract. If no changes have been made, the Utility will provide a link (if available) to the current standardized contract form(s). In addition, the following items should be included in a summary schedule:

1. Contract description;

2. Supplier;

3. Negotiation date or date signed;

4. Term of deal;

5. Specific service provided under the contract;

6. Pricing terms;

7. Purchase volume obligation;

8. Receipt point(s); and

9. Transportation provision, if applicable.

Schedule MFRP-8: Coal Transportation

The Utility will provide a copy of the coal transportation strategy effective for any part of the test year along with the information in MFRH-8 to the extent that any changes are projected to occur.

Schedule MFRP-9: Fuel and Purchased Power Assumptions Narrative

This schedule shall provide an explanation setting out the major methods, assumptions, and sources of information used by the Utility to project fuel and purchased power costs for the test year.

Schedule MFRP-10: Natural Gas Hedging Narrative

This schedule shall include an explanation of the fuel hedging practices anticipated for the test year.

Schedule MFRP-11: Budget By Generating Plant

This schedule shall provide the budget input assumptions for each unit and shall include the following:

1. Summary of dependable capability;

2. Monthly and annual net energy generated by unit (in MWH) generated;

3. Average monthly and annual heat rate;

4. Monthly Capacity factor;

5. Scheduled outage rate;

6. Forced outage rate;

7. Number of start-ups;

8. Maintenance schedules; and

9. Standard output file in the native electronic format produced by the model used by the Utility in preparation of its fuel cost recovery budget.

For plants that are not 100% included in rate base, provide unit net capacity factor data on both a total unit and Georgia Retail, as well as gross and net generation data on a total unit basis and net generation from the Utility's rate base portion of the capacity. For hydro, report only hydro system net generation. Report results from modeling program used to project future fuel costs for the thirty-six months subsequent to the test year.

Schedule MFRP-12: Gas & Oil Cost Breakdown

This schedule shall present the breakdown of the purchased fuel costs for the Utility's gas and oil fired stations into the following categories per MMBtu, on a monthly basis during the test year:

1. Delivered price;

2. Fixed pipeline (transportation) costs;

3. Other transportation costs (specify);

4. Ad valorem taxes; and

5. Details of any gain or loss on sales to other parties.

Schedule MFRP-13: Purchased Power / Off-System Sales

Schedule MFRP-13.1: Projected Power Pool Purchases and Sales Data

This schedule shall provide, for the test year, monthly projected Pool purchases and sales by dollar and MWH. This information shall also include the estimated MWh sales for each forecast month by supplier.

Schedule MFRP-13.2: Summary of Contract Purchased Power Data

This schedule shall provide documents summarizing, for the projected period, the Utility's purchased power agreements for procuring generation that will be in effect for the time period. The summary will include:

1. Term of the contract, including whether the contract is scheduled to expire during the test period;

2. Counter party on the contract;

3. Capacity of the contract;

4. Generation asset tied to the contract;

5. Capacity pricing of the contract;

6. Energy pricing of the contract;

7. Forecast of expected procurement from the resource by dollars and MWH;

8. MW demand by month for forecast period; and

9. Citation for the Commission order (including docket number) approving the purchase power agreement

The Utility shall identify all assumptions used in the development of estimated purchase power MWHs and associated fuel costs. Such assumptions shall be contained in a separate list along with a narrative that summarizes how the assumptions were determined.

Schedule MFRP-13.3: Energy Strips

This schedule shall provide documents summarizing the proposed purchase of any energy strips during the test period.

Schedule MFRP-13.4: Summary of Off-System Sales and Sales for Resale

This schedule shall provide documents summarizing, for the projected period, the Utility's wholesale contracts for off-system sales. The summary will include:

1. Term of the contract, including whether the contract is scheduled to expire during the test period;

2. Counter party on the contract;

3. Capacity of the contract;

4. Generation assets used for supplying the contract;

5. Firmness of the sale;

6. Capacity pricing of the contract;

7. Energy pricing of the contract;

8. Forecast of expected sales by dollars and MWH;

9. The portion of estimated fuel revenue associated with off-system sales, including MWH, by month for the forecast period; and

10. Identify all assumptions used in the development of estimated off-system sale MWHs and associated fuel revenues. Such assumptions shall be contained in a separate list along with a narrative that summarizes how the assumptions were determined.

11. Classification of the contracts using the following categories (as applicable):

a. Sales made from a non-certified asset (or a non-certified portion of a certified asset) but the Utility must offer right of first refusal to retail customers upon expiration of current contract.

b. Sales made from a non-certified asset (or a non-certified portion of a certified asset) but the Utility has no obligation to offer right of first refusal to retail customers upon expiration of current contract.

c. Sales made from a certified asset.

d. Other.

Schedule MFRP-13.5: Marginal Replacement Fuel Cost

The Utility shall identify the monthly assumed marginal replacement fuel costs ("MRFC") for each Utility-owned generating station by month for the forecast period. All assumptions and support for the development of the MRFCs shall be included within the filing.

Schedule MFRP-14: Fossil Fuel Mix

This schedule shall present, by month, the projected mix of contract and spot fossil fuel purchased for each of the Utility's generating plants in the test year. Contract fuels are defined as those provided under agreements with a term of generally more than one year, while spot fuels are defined as those provided under agreements with a term of generally one year or less.

Schedule MFRP-15: Carrying Cost Assumptions Narrative

This schedule shall provide a detailed explanation setting out the major methods, assumptions, and sources of information used by the Utility to determine carrying costs for the test year.

Schedule MFRP-16: Emission Cost Assumptions Narrative

This schedule shall provide an explanation setting out the major methods, assumptions, and sources of information used by the Utility to project emission costs for the test year and shall include where available:

1. Tabulation of total number of SO^2 emissions allowances allocated to the Utility for the test year;

2. Number of SO^2 allowances retained for auction by EPA and resulting revenue returned to the Utility for the test year;

3. Tabulation of SO^2 emission allowance activity with following information anticipated through the end of the test year:

a. Number and vintage of allowances banked by the Utility;

b. Number of SO^2 allowances surrendered to EPA each year on both a total Company and Georgia Retail basis;

c. Number and vintage of allowances sold, name of buyer, and revenue received per allowance;

d. Number, vintage, and seller for any allowances which the Utility bought / will buy; and

e. Cost of each allowance bought for use with rate base generation.

4. Tabulation of all NOx allowance activity (*e.g.*, allocation, purchase, use, trade or sales) anticipated through the end of the test year;

5. Table of average actual market price by month of the historical period of SO^2 emission allowances and source of information. Include projected market price for each month through end of test year;

6. Table of average actual market price by month of the historical period of NO^2 emission allowances and source of information. Include projected market price for each month through end of test year;

7. Unit SO^2 emissions, in tons. Provide data on both a total unit basis; and

8. Unit NOx emissions, in tons. Provide data on both a total unit.

Scheduled MFRP-17: Forecasted Energy Sales Data

Provide the monthly kWh sales by customer class, by delivery voltage, by calendar month for the proposed test year plus three additional forecasted years. All assumptions used in developing the projected sales data shall be identified and testimony shall be provided that supports all assumptions incorporated in the sales forecast.

Schedule MFRP-18: Fuel Price Workshop Presentations

This schedule shall include copies of the most recent Fuel Price Workshop presentations.

Cite as Ga. Comp. R. & Regs. R. 515-2-1-.04

AUTHORITY: O.C.G.A. § 46-2-30, Ga. L. 1878-79, p. 125; 1907, pp. 72-81; 1922, pp. 42-147; 1950, p. 311; 1956, p. 104, 105; 1954, pp. 338-356; 1965, p. 283; 1970, p. 104; 1972, pp. 138, 439-446; 1973, pp. 200-220, 664, 677, 678; 1975, pp. 404-412; 1976, p. 419; 1979, p. 1084 (O.C.G.A. § 93-307).

HISTORY: Original Rule entitled "Applications, Petitions and Complaints" adopted. F. Dec. 29, 1975; eff. Jan. 1, 1976, as specified by Ga. L. 1975, p. 411.

Amended: F. July 26, 1979; eff. August 15, 1979.

Amended: F. Nov. 17, 1980; eff. Dec. 7, 1980.

Amended: F. Jan. 21, 1981; eff. Feb. 10, 1981.

Amended: F. Sept. 23, 1983; eff. Oct. 13, 1983.

Amended: F. Oct. 7, 1986; eff. Oct. 27, 1986.

Amended: F. Nov. 9, 1995; eff. Nov. 29, 1995.

Amended: F. Rule retitled "Applications, Petitions, Complaints and Filings. Procedural Requirements Relating Thereto". F. July 6, 1999; eff. July 26, 1999.

Amended: F. Dec. 18, 2008; eff. Jan. 7, 2009.

Amended: F. Apr. 28, 2011; eff. May 18, 2011.

Note: Correction of non-substantive typographical error in Rule on SOS Rules and Regulations website. In accordance with Official Compilation Rules and Regulations of the State of Georgia, "**Amended:** F. Apr. 27, 2011; eff. May 17, 2011." corrected to "**Amended:** F. Apr. 28, 2011; eff. May 18, 2011." Effective July 15, 2018.

Amended: F. June 25, 2018; eff. July 15, 2018.

Amended: (i.e., 515-2-1-.04(4) as specified by the Agency.) F. May 12, 2025; eff. June 1, 2025.

Department 560. RULES OF DEPARTMENT OF REVENUE

Chapter 560-12. SALES AND USE TAX DIVISION

Subject 560-12-1. ADMINISTRATIVE RULES AND REGULATIONS

560-12-1-.28 [Repealed]

Cite as Ga. Comp. R. & Regs. R. 560-12-1-.28

AUTHORITY: O.C.G.A. §§ 48-2-12**,** 48-8-31**,** 48-8-162**.**

HISTORY: Original Rule was filed on June 30, 1965.

Amended: F. Feb. 5, 1991; eff. Feb. 25, 1991.

Repealed: F. Mar. 23, 2012; eff. Apr. 12, 2012.

Note: Correction of administrative error in Rule History, "**Repealed:** F. Mar. 23, 2012; eff. Apr. 12, 2012." added to the History to record the repeal as originally filed. Effective May 29, 2025.

Department 591. RULES OF BRIGHT FROM THE START GEORGIA DEPARTMENT OF EARLY CARE AND LEARNING

Chapter 591-1.

Subject 591-1-1. CHILD CARE LEARNING CENTERS

591-1-1-.02 Definitions

In these rules, unless the context requires otherwise, the capitalized symbols, words and phrases set forth herein shall mean the following:

(a) "Adult" means any competent individual eighteen (18) years of age or older.

(b) "Adverse Action" means any Intermediate or Closure Action issued as a result of one or more rule violations.

(c) "Child Care Learning Center" or "Center" means any place operated by an individual or any business entity recognized under Georgia law wherein are received for pay for group care, for fewer than 24 hours per day without transfer of legal custody, seven or more children under 18 years of age and which is required to be licensed. Child Care Learning Center also includes any day care center previously licensed by the Department of Human Resources and transferred pursuant to Code Section 20-1A-1 et seq.

(d) "Child with Special Needs" means a child enrolled in a Center who, due to a physical problem, mental health disorder, behavioral disorder, or developmental disability, which is either permanent or temporary, requires some adaptation of the Center's standard program of care or activities to accommodate the child's special needs.

(e) "Closure Action" means the most restrictive category of Enforcement Actions including emergency closure, long-term suspension and revocation.

(f) "Comprehensive Records Check Determination" means a satisfactory or unsatisfactory determination by the Department, based upon a Federal Bureau of Investigation fingerprint based criminal record check, a search of appropriate sex offender registries, repositories, or data bases, compliance with relevant state and federal law, and a search of the following registries, repositories or databases in the state where the actual or potential employee or director resides and in each state where such individual resided during the preceding five years: criminal registry or repository; state sex offender registry or repository; and state based child abuse and neglect registry and database.

(g) "Correctable Abuse Dereliction or Deficiency" means any conduct of a License or Permit Holder which violates any of these rules wherein the Department determines that the rule violation is not the result of any Non-Correctable Abuse, Dereliction or Deficiency.

(h) "Crime" means

1. Any felony pursuant to O.C.G.A. § 20-1A-30 and in accordance with 42 U.S.C. § 9858f(c)(1)(E);

2. A violation of O.C.G.A. § 16-5-23, relating to simple battery, where the victim is a minor;

3. A violation of O.C.G.A. § 16-5-23.1, relating to battery, where the victim is a minor;

4. A violation of O.C.G.A. § 16-21-1, relating to contributing to the delinquency of a minor;

5. A violation of O.C.G.A. § 16-6-1 et seq. relating to sexual offenses;

6. A violation of O.C.G.A. § 16-5-29, relating to battery of an unborn child;

7. A violation of O.C.G.A. § 16-5-60, relating to reckless conduct causing harm when the victim is a minor;

8. A violation of O.C.G.A. § 16-5-70, relating to cruelty to children;

9. A violation of O.C.G.A. § 16-12-1.1, relating to child care facility operators being prohibited from employing or allowing to reside or be domiciled persons with certain past criminal violations;

10. A violation of O.C.G.A. §§ 16-12-100, 16-12-100.1, 16-12-100.2, 16-12-100.3, relating to obscenity and related offenses where the victim is a minor;

11. A violation of O.C.G.A. § 40-6-391, relating to endangering a child while driving under the influence of alcohol or drugs;

12. A violation of O.C.G.A. § 19-7-5, relating to a failing to report if mandated to do so by law;

13. Child pornography, in accordance with 42 U.S.C. § 9858f(c)(1)(E);

14. Abuse of, endangerment of, or sexual assault against a child by an adult, in accordance with 42 U.S.C. § 9858f(c)(1)(E);

15. Any other violent misdemeanor against a child by an adult, in accordance with 42 U.S.C. § 9858f(c)(1)(E);

16. A violation of O.C.G.A. § 16-4-1, relating to criminal attempt when the crime attempted is any of the crimes specified by this paragraph; or

17. Any other offenses committed in another jurisdiction which, if committed in this state, would be one of the enumerated crimes listed in this paragraph.

(i) "Criminal Record" means:

1. Conviction of a crime; or

2. Arrest, charge, and sentencing for a crime where:

(i) A plea of nolo contendere was entered to the charge; or

(ii) First offender treatment without adjudication of guilt pursuant to the charge was granted; provided, however, that this division shall not apply to a violation of O.C.G.A. § 16-13-1 et seq., relating to controlled substances, or any other offense committed in another jurisdiction which, if it were committed in this state, would be a violation of O.C.G.A. § 16-13-1 et seq. if such violation or offense constituted only simple possession; or

(iii) Adjudication or sentence was otherwise withheld or not entered on the charge; provided, however, that this division shall not apply to a violation of O.C.G.A. § 16-13-1 et seq. relating to controlled substances, or any other offense committed in another jurisdiction which, if it were committed in this state, would be a violation of Chapter 13 of Title 16 if such violation or offense constituted only simple possession; or

3. Arrest and being charged for a crime if the charge is pending, unless the time for prosecuting such crime has expired pursuant to O.C.G.A. § 17-3-1 et. seq.

(j) "Department" means Bright from the Start: Georgia Department of Early Care and Learning.

(k) "Director" means the on-site manager of a Child Care Learning Center designated by the legal owner who has submitted a Records Check Application and has received a satisfactory Comprehensive Records Check

Determination and who is responsible for the supervision, operation and maintenance of the Center and meets the minimum qualifications as determined by the Department.

(l) "Employee" means any person, other than a Director or Provisional Employee, who has submitted a Records Check Application and has received a satisfactory Comprehensive Records Check Determination and who:

1. Regardless of age, is compensated by a Center for the care of children; or

2. Regardless of age, cares for, supervises or has unsupervised access to children at the Center; or

3. Is 17 years of age or older and resides at the facility; or

4. Regardless of age, performs duties for or services that benefit the Center, with or without compensation, which involve personal contact between that person and any child being cared for by the Center, including but not limited to volunteers that perform consistent services for the Center, where services are considered consistent when provided more than once in a ninety calendar day period; or

5. Regardless of age, is a parent or legal guardian of a child in care who is deemed an employee by the Center or either resides at the Center and is age 17 or older, or is compensated in any fashion by the Center except through appropriate state or federal funds; or

6. Regardless of age, is an independent contractor hired by the Center to offer supplemental educational or physical activities for children in care; or

7. Regardless of age, is a Student-in-Training.

(m) "Enforcement Action" means any action issued as a result of one or more rule violations ranging from technical assistance to a Closure Action.

(n) "Evening Care" means care provided to any child at a Center between the hours of 7:00 p.m. and 12:00 midnight.

(o) "Field Trip" means an excursion or program activity with a specific destination away from the Center. It does not include routine school or home pick-up and deliveries or transporting children to and from activities or events where the provider of the activities or the events assume responsibility for the children during the entirety of the event or activity, such as in dance classes or art lessons or regularly scheduled trips to the local public libraries.

(p) "Fingerprint" means an inked fingerprint card or an electronic image of a person's fingerprint.

(q) "Fingerprint Records Check Determination" means a satisfactory or unsatisfactory determination made by the Department that is based upon national criminal history record information obtained by the use of Fingerprints.

(r) "Group" means a specific number of children assigned to specific Staff throughout the day. More than one Group may occupy the same physical space.

(s) "Infant" means any child who is under twelve (12) months of age or any child who is under eighteen (18) months of age and who is not yet walking.

(t) "Intermediate Action" means a moderately restrictive category of Enforcement Actions including public reprimands, fines, per rule fines, per day fines, restrictions, emergency monitoring and short-term suspension.

(u) "License" means the document issued by the Department to authorize the License Holder to whom it is issued to operate a Center in accordance with these rules. (In lieu of a License, a commission may be issued to a local church ministry, religious nonprofit school or nonprofit religious charitable organization. The requirements to obtain a commission under these rules shall be identical to those for a License.)

(v) "License Holder" means the individual or business entity holding a License issued by the Department to operate a Center at a particular location and having responsibility for the operation and maintenance of the Center in accordance with these rules.

(w) "Night-time Care" means care provided to children at the Center between the hours of 12:00 midnight and 6:00 a.m.

(x) "Non-Correctable Abuse, Dereliction or Deficiency" means an abuse, dereliction or violation of these rules which demonstrates any of the following:

1. Flagrant and shocking intentional misconduct by the Center or Center Staff where those responsible for the operation of the Center knew or should have known of the likelihood of Staff to commit such acts;

2. An intentional or reckless disregard for the physical health, mental health or safety of a child in care which may or may not result in physical injury to the child by the Center or the Center Staff where those responsible for the operation of the Center knew or should have known of the likelihood of Staff to disregard; or

3. Some causal connection between the intentional violation of a rule and the death or major injury of a child in care.

(y) "Parent" means a person related within the second degree of consanguinity by either blood or marriage, or a person with lawful custody, or a state-regulated foster parent, or a legal guardian of a child in care. For purposes of these rules, a Parent shall not be considered an Employee unless such Parent is deemed an Employee by the Center or either resides in the Center or is compensated in any way by the Center other than through appropriate state or federal funds.

(z) "Permit" means the temporary document issued by the Department authorizing a Child Care Learning Center to operate without a License for a limited term and in accordance with these rules.

(aa) "Permit Applicant" means an individual or any business entity recognized under Georgia law applying for a Permit from the Department as defined in these rules.

(bb) "Permit Holder" means the individual or business entity issued a Permit by the Department to operate a Center at a particular location that is responsible for the operation and maintenance of the Center in accordance with these rules.

(cc) "Personnel" or "Staff" means all persons including the Director, Employees and Provisional Employees.

(dd) "Plan of Correction" means a written plan prepared by the authorized agent of the Center submitted to and approved by the Department which states the procedure(s), method(s) and time frame(s) that will be used to correct the area(s) of non-compliance with these rules.

(ee) "Prevention Action" means the least restrictive category of Enforcement Actions including technical assistance, citation, formal notice letter and office conference.

(ff) "Provisional Employee" means a person other than a Director or Employee, who has submitted a Records Check Application to become an Employee and has not received a Comprehensive Records Check Determination but who has received a satisfactory Fingerprint Records Check Determination and who must be supervised at all times by another Staff member who has a current and valid satisfactory Comprehensive Records Check Determination on file.

(gg) "Qualified" or "Qualifications" means that a person possesses, in addition to the other requirements set forth in these rules, certain minimum personal and health requirements necessary to administer or be employed in a Center. A person may be considered by the Department to be qualified with respect to the minimum personal and health criteria when he or she has a satisfactory Fingerprint Records Check Determination or a satisfactory Comprehensive Records Check Determination; is able to perform adequately the job duties of providing for the care and supervision of the children enrolled in the Center in accordance with these rules; has not made any material false statements

relating to any licensure requirement to the Department, the Permit Holder or the License Holder; and has not been shown by credible evidence, e.g., a finding of fact made by a court, jury or department investigation or other reliable evidence, to have abused, neglected, or deprived a child or adult or to have subjected any person to serious injury as a result of intentional or grossly negligent misconduct.

(hh) "Qualifying Work Experience" means verifiable experience working directly with children.

(ii) "Records Check Application" means a document created by the Department to be completed and submitted to the Department by every actual and potential Director, Employee and Provisional Employee of the Center that indicates such information as the Department deems appropriate and which authorizes the Department to receive any sex offender registry, child abuse and neglect registry and criminal history record information pertaining to the individual from any local, state or national agency of appropriate jurisdiction and render a Fingerprint or Comprehensive Records Check Determination.

(jj) "Records Check Clearance Date" means the date upon which an individual's fingerprint report was generated.

(kk) "School-age Children" means children who are at least five (5) years old by the first of September of the current school year and who are eligible to attend public school.

(ll) "School-age Center" means a Child Care Learning Center, or part thereof with separate physical facilities and a separate License, which provides day-time care exclusively to School-age Children before and/or after the normal school day. Such programs may operate a full-day program solely for the School-age Children enrolled in the program during the regular school year during those periods when school is not in session.

(mm) "Student-in-Training" means a student currently enrolled in either a high school recognized by the Department of Education or an early education curriculum through an accredited school of higher education which requires or permits the student to observe and participate in the care of children at a Center during a limited period of time, i.e., one quarter, one trimester or one semester, provided that they are under the direct supervision of Center Personnel at all times.

(nn) "Valid Evidence" means electronic proof of a satisfactory Fingerprint Records Check Determination or a satisfactory Comprehensive Records Check Determination as follows:

1. Directors - a valid and current satisfactory Comprehensive Records Check Determination letter issued by the Department; provided that the letter for a newly hired Director must have a Records Check Clearance Date that is within the immediate preceding 12 months of the Director's date of hire, and the Director has not had a lapse of employment from the child care industry that lasted for 180 days (6 months) or longer.

2. Provisional Employees - a valid and current satisfactory Fingerprint Records Check Determination issued by the Department; provided that the letter for a newly hired Provisional Employee must have a Records Check Clearance Date that is within the immediate preceding 12 months of the Provisional Employee's date of hire, and the Provisional Employee has not had a lapse of employment from the child care industry that lasted for 180 days (6 months) or longer;

3. Employees - a valid and current satisfactory Comprehensive Records Check Determination letter issued by the Department; provided that the letter for a newly hired Employee must have a Records Check Clearance Date that is within the immediate preceding 12 months of the Employee's date of hire, and the Employee has not had a lapse of employment from the child care industry that lasted for 180 days (6 months) or longer;

(oo) "Violation Class" means the category on the compliance and enforcement chart that corresponds with the level of risk of harm or actual harm as a result of one or more rule violation.

(pp) "Violation History Level" means the category on the compliance and enforcement chart that corresponds with the prior history of continued rule violations.

Cite as Ga. Comp. R. & Regs. R. 591-1-1-.02

AUTHORITY: O.C.G.A. § 20-1A-1 et seq., 42 U.S.C. § 9857 et seq.

HISTORY: Original Rule entitled "Definitions" adopted. F. Dec. 23, 1997; eff. Mar. 1, 1998, as specified by the Agency.

Amended: ER. 591-1-1-0.1-.02 adopted. F. Sep. 1, 2004; eff. Oct. 1, 2004, as specified by the Agency.

Amended: Permanent Rule adopted. F. Jan. 12, 2005; eff. Feb. 1, 2005.

Amended: F. Dec. 13, 2013; eff. Jan. 2, 2014.

Amended: F. Dec. 4, 2015; eff. Dec. 24, 2015.

Amended: F. June 2, 2016; eff. June 22, 2016.

Amended: F. Aug. 17, 2018; eff. Sep. 6, 2018.

Amended: F. Aug. 26, 2022; eff. Sep. 15, 2022.

Amended: F. May 15, 2025; eff. June 4, 2025.

591-1-1-.14 First Aid and CPR

(1) Training.

(a) All Staff who provide direct care to children must obtain certification in a biennial training program in pediatric cardiopulmonary resuscitation (CPR) and a triennial training program in pediatric first aid within the first 45 days of employment. Current and valid evidence of the successful completion of such training shall be maintained on the Center's premises. The hours obtained completing this certification will not count towards the required annual training hours.

(b) The training must be done by certified or licensed health care professionals or trainers and must deal with the provision of emergency care to infants and children.

(2) Staffing Requirement.

(a) When any child is present on the premises, at least fifty percent (50%) of the caregiver staff present shall be trained in pediatric cardiopulmonary resuscitation (CPR) and pediatric first aid.

(b) There must always be one staff person present in each classroom where children are present that has current and valid pediatric cardiopulmonary resuscitation (CPR) and pediatric first aid training.

(c) During any field trip or transportation of children, there must always be a staff member present who has current evidence of the successful completion of pediatric cardiopulmonary resuscitation (CPR) and pediatric first aid.

(d) The Center Director must have current evidence of successful completion of pediatric cardiopulmonary resuscitation (CPR) and pediatric first aid at all times.

(3) Supplies. Each building of the Center and any vehicle used by the Center for transportation of children shall have a first aid kit which shall at least contain: scissors; tweezers; gauze pads; adhesive tape; thermometer; band-aids, assorted sizes; antibacterial ointment; insect-sting preparation; an antiseptic cleansing solution; triangular bandages; rubber gloves; protective eye wear; a protective face mask; and cold pack. The first aid kit, together with a first aid instruction manual which must be kept with the kit at all times, shall be stored so that it is not accessible to children but is easily accessible to Staff.

Cite as Ga. Comp. R. & Regs. R. 591-1-1-.14

AUTHORITY: O.C.G.A. § 20-1A-1 et seq.

HISTORY: Original Rule entitled "First Aid and CPR" adopted. F. Dec. 23, 1997; eff. Mar. 1, 1998, as specified by the Agency.

Amended: F. Aug. 25, 2008; eff. Sept. 14, 2008.

Amended: F. Dec. 4, 2015; eff. Dec. 24, 2015.

Amended: F. Sep. 26, 2016; eff. Oct. 16, 2016.

Amended: F. May 26, 2017; eff. June 15, 2017.

Amended: F. May 15, 2025; eff. June 4, 2025.

591-1-1-.21 Operational Policies and Procedures

A Center shall establish and implement written policies and procedures which shall be kept current, be consistent with applicable laws, regulations and these rules, made available to the Parent(s) and used to govern the operations of the Center.

(1) The policies and procedures shall include the following:

(a) A description of services to be provided which specifies the ages of children to be served, days and times of operations and days and times that the Center is closed;

(b) A description of enrollment and admission requirements which specifies the Parents' responsibilities for supplying needed information to the Center and escorting the child to and from the Center;

(c) A fee and payment schedule that specifies the standard fees, fees related to absences and vacations and other charges and fees such as transportation and late fees;

(d) A description of the Center's transportation and field trip services (see rule .36 about transportation requirements);

(e) A description of handling administration of medication (see rule .20 about medications), and notifying Parent(s) of noticeable adverse reactions to prescribed medications;

(f) A description of parental notification in cases of illnesses and injury and exclusion of sick children (see rule .07 about children's health);

(g) A description of parental notification when a notifiable communicable disease is present (see rule .07 about children's health);

(h) A description of handling medical emergencies (see rule .07 about children's health);

(i) A description of meals and snacks served, including guidelines for food brought from the child's home;

(j) Permission for access by the child's Parent(s) to all Center areas used by the child (see rule .22 about parental access);

(k) Child abuse reporting law requirements;

(l) A description of behavior management and discipline actions used by the Center, to include the program's practices regarding the expulsion and suspension of children enrolled for care.

(m) Nondiscrimination statement;

(n) Center-sponsored religious and cultural activities, if any;

(o) If licensed for the care of an infant or toddler: Center's diapering procedures, Center's toilet training procedures, and Center's feeding procedures;

(p) A written plan for handling emergencies, including but not limited to severe weather, loss of electrical power or water and death, serious injury or loss of a child, a threatening event, or natural disaster which may occur at the Center. The Center will have in place procedures for evacuation, relocation, shelter-in-place, lock-down, communication and reunification with families, and continuity of operations. The plan must apply to all children in care and will include specific accommodations for infants and toddlers, children with disabilities, and children with chronic medical conditions. Such plan shall include assurance that no Center Personnel will impede in any way the delivery of emergency care or services to a child by licensed or certified emergency health care professionals.

(q) A description of the safe sleep practices followed by the Center that includes the following information: the initial placement of infants on their backs to sleep; no cover or other soft items in crib; appropriate sleep clothing for infants to be provided by Parent; individual crib, cot or mat and bedding provided and changing and cleaning practices for these items; infants who fall asleep in other equipment, on the floor or elsewhere will be moved to a crib to sleep; and no swaddling or positioning devices used.

(r) A description of the practices followed by the Center to prevent shaken baby syndrome and abusive head trauma in children up to five years of age that includes the following information: how to recognize, respond to, and report the signs and symptoms of shaken baby syndrome and abusive head trauma; strategies to assist staff members in understanding how to care for infants and how to cope with a crying, fussing, or distraught child; strategies to ensure staff members understand the brain development of children up to five years of age; and a list of prohibited behaviors when dealing with children.

(2) The Center shall have written documentation signed by the Parent(s) in each child's file that the Director or designee has: provided to the Parent(s) a copy of the Center's policies and procedures required by this rule; advised the Parent(s) of the safe sleep practices followed by the Center; advised the Parent(s) of the child's progress, issues relating to the child's care and individual practices concerning the child's special needs; and encouraged participation by Parent(s) in Center activities.

(3) The Center shall conduct drills for fire, tornado and other emergency situations. The fire drills will be conducted monthly and tornado and other emergency situation drills will be conducted every six months. The Center shall maintain documentation of the dates and times of these drills for two years.

(4) The Center shall provide the Parent(s) with a copy of the Center's policies and procedures as required by this rule.

Cite as Ga. Comp. R. & Regs. R. 591-1-1-.21

AUTHORITY: O.C.G.A. § 20-1A-1 **et seq.**

HISTORY: Original Rule entitled "Operational Policies and Procedures" adopted. F. Dec. 23, 1997; eff. Mar. 1, 1998, as specified by the Agency.

Amended: F. Aug. 25, 2008; eff. Sept. 14, 2008.

Amended: F. May 16, 2013; eff. June 5, 2013.

Amended: F. Dec. 4, 2015; eff. Dec. 24, 2015.

Amended: F. Sep. 26, 2016; eff. Oct. 16, 2016.

Amended: F. May 26, 2017; eff. June 15, 2017.

Amended: F. May 15, 2025; eff. June 4, 2025.

591-1-1-.33 Staff Training

(1) Center Orientation. Prior to assignment to children or task, all Employees (i.e., volunteers, students-in-training, independent contractors, etc.) and Provisional Employees must receive initial Center orientation.

(2) The initial Center orientation must include the following subjects:

(a) the Center's policies and procedures;

(b) the portions of these rules dealing with the care, health and safety of children;

(c) the Staff person's assigned duties and responsibilities;

(d) reporting requirements for suspected cases of child abuse, neglect or deprivation;

(e) communicable diseases and serious injuries;

(f) emergency weather plans;

(g) the program's emergency preparedness plan;

(h) childhood injury control;

(i) the administration of medicine;

(j) reducing the risk of Sudden Unexpected Infant Death (SUID), which includes Sudden Infant Death Syndrome (SIDS);

(k) hand washing;

(l) fire safety;

(m) water safety; and

(n) prevention of HIV/AIDS and blood borne pathogens.

(3) Health and Safety Orientation. Each staff member with direct care responsibilities shall complete health and safety orientation training within the first 90 days of employment. The state-approved training hours obtained will count toward required first year training hours. The training must address the following health and safety topics:

(a) prevention and control of infectious diseases (including immunization);

(b) prevention of sudden infant death syndrome and use of safe sleeping practices;

(c) administration of medication, consistent with standards for parental consent;

(d) prevention of and response to emergencies due to food and allergic reactions;

(e) building and physical premises safety, including identification of and protection from hazards that can cause bodily injury such as electrical hazards, bodies of water, and vehicular traffic;

(f) prevention of shaken baby syndrome, abusive head trauma and child maltreatment;

(g) emergency preparedness and response planning for emergencies resulting from a natural disaster or a human-caused event (such as violence at a child care facility);

(h) handling and storage of hazardous materials and the appropriate disposal of bio contaminants;

(i) precautions in transporting children;

(j) recognition and reporting of child abuse and neglect; and

(k) child development to include all major domains: cognitive; social and emotional; physical development and motor skills; communication, language, and literacy; and approaches to play and learning.

(4) Food Preparation and Nutrition Training. Within the first year of employment, the Director and the person primarily responsible for food preparation shall receive four (4) clock hours of training in food nutrition planning, preparation, serving, proper dish washing and food storage.

(5) Annual Training.

(a) Every calendar year after the first year of employment, all supervisory and caregiver Personnel, except independent contractors, Students-in-Training and volunteers, shall attend ten (10) clock hours of diverse training which is offered by an accredited college, university or vocational program or other Department-approved source.

(b) The annual ten (10) clock hours of training shall include the following:

1. At least two (2) hours in evidence based, developmentally appropriate language and literacy practices;

2. At least two (2) hours in on-going child development and health and safety related topics, which could include, but not be limited to:

(i) Child development (e.g., developmental domains (cognitive; social and emotional; physical development and motor skills; communication, language, and literacy; approaches to play and learning), discipline and guidance techniques, children with special needs);

(ii) Health (e.g., nutrition and the support of breast feeding, physical activity, prevention and control of illnesses and infectious diseases, immunizations, prevention of and response to emergencies due to food and allergic reactions, cleanliness, sanitation, and the appropriate disposal of bio contaminants);

(iii) Safety (e.g., prevention of Sudden Unexpected Infant Death (SUID) which includes Sudden Infant Death Syndrome (SIDS) and the use of safe sleeping practices, medication administration, injury control and prevention, transportation, handling and storage of hazardous materials, identification of and protection from hazards that can cause bodily injury such as electrical hazards, bodies of water, and vehicular traffic, and emergency preparedness planning and response);

(iv) Child abuse and neglect (e.g., identification and reporting, meeting the needs of abused and/or neglected children, prevention of shaken baby syndrome, abusive head trauma and child maltreatment).

3. No more than two (2) of the required ten (10) hours in business-related topics (e.g., parental communication, recordkeeping, management, business planning).

(6) Documentation of Training. Evidence of orientation and training shall be documented and maintained in the Personnel file and/or Georgia's workforce registry and professional development system of each Staff member which shall be available to the Department for inspection.

(7) Exemptions from Training. Custodial, maintenance Personnel or volunteers who provide no direct care to children are not required to obtain health and safety orientation training or annual training.

Cite as Ga. Comp. R. & Regs. R. 591-1-1-.33

AUTHORITY: O.C.G.A. § 20-1A-1 **et seq.**

HISTORY: Original Rule entitled "Staff Training" adopted. F. Dec. 23, 1997; eff. Mar. 1, 1998, as specified by the Agency.

Amended: F. Jan. 12, 2005; eff. Feb. 1, 2005.

Amended: F. Aug. 25, 2008; eff. Sept. 14, 2008.

Amended: F. Dec. 13, 2013; eff. Jan. 2, 2014.

Amended: F. Dec. 4, 2015; eff. Dec. 24, 2015.

Amended: F. Sep. 26, 2016; eff. Oct. 16, 2016.

Amended: F. May 26, 2017; eff. June 15, 2017

Amended: F. Aug. 28, 2019; eff. Sept. 17, 2019.

Amended: F. May 15, 2025; eff. June 4, 2025.

Department 622. SUBSEQUENT INJURY TRUST FUND

Chapter 622-2. DISSOLUTION OF THE BOARD OF TRUSTEES

622-2-.01 Dissolution of the Board of Trustees

The purpose of the Rule adopted is to provide for the dissolution of the Board of Trustees of the Subsequent Injury Trust Fund State of Georgia as required by O.C.G.A. Section 34-9-368, and to establish procedures for the pro rata refund of assessments as provided by O.C.G.A Section 34-9-358.

(1) **Suspension of Assessments to Fund by Insurers and Self-Insurers.** The suspension of assessments authorized by the Administrator on January 18, 2019 shall continue in effect until such time as a completed actuarial survey shows that further assessments are needed for all bona fide claims that are to be paid by the fund. If said suspension of assessments is rescinded and assessments required, said assessments shall resume in the manner and amount authorized by Code Section 34-9-358(c).

(2) **Payment of Assessments to Fund by Insurers and Self-Insurers.** The payment of assessments pursuant to Code Section 34-9-358 shall terminate when all claims made for injuries occurring on and prior to June 30, 2006 have been fully paid or otherwise resolved.

(3) **Pro-Rata Refund of Assessments.** In order to receive a pro rata refund pursuant to Code Section 34-9-358(f) at the time that all eligible claims have been paid and all related administrative costs have been accrued or paid and a balance remains in the fund, all insurers or self-insurers must have been in good standing and not delinquent in the payment of any assessments required by Code Section 34-9-358.

(4) **Personnel employed as of December 31, 2025.** All persons employed by the Subsequent Injury Trust Fund on December 31, 2025 shall transfer to the employment of the Department of Insurance effective January 1, 2026.

(5) **Department of Insurance.** The Department of Insurance shall take custody of all other books, records and property of the Subsequent Injury Trust Fund effective January 1, 2026.

(6) **Administrator.** Effective January 1, 2026 the Administrator of the Subsequent Injury Trust Fund shall report to the Commissioner of Insurance. The Administrator shall continue to have all authority granted by Code Section 34-9-355(b) and continue to administer the fund pursuant to Code Section 34-9-357.

(7) **Transfer to the Department of Insurance.** The fund shall transfer to the Department of Insurance effective January 1, 2026; provided, however, that pursuant to Code Section 34-9-352, it shall be maintained by the Department of Insurance for the sole purpose of making payments in accordance with the provisions of Code Section 34-9-350, et seq. until such time as all claims made for injuries occurring on and prior to June 30, 2006 have been fully paid or otherwise resolved. Thereafter any unexpended funds shall be disposed of pursuant to Code Section 34-9-358(f).

(8) **Final Accounting.** At such time as all claims made for injuries occurring on and prior to June 30, 2006 have been fully paid or otherwise resolved, the Administrator shall authorize a final accounting of the financial affairs of the fund, to be performed by an independent third-party professional.

(9) **No Loss Portfolio Transfer.** No loss portfolio transfer or other reinsurance agreement shall be made unless and until an actuarial survey is completed by an independent third-party actuary establishing that the projected liability for all active claims exceeds 95% of the fund.

Cite as Ga. Comp. R. & Regs. R. 622-2-.01

AUTHORITY: O.C.G.A. §§ 34-9-354**,** 34-9-358**,** 34-9-368**.**

HISTORY: Original Rule entitled "Dissolution of the Board of Trustees" adopted. F. May 19, 2025; eff. June 8, 2025.

Department 622. SUBSEQUENT INJURY TRUST FUND

Chapter 622-3. PRO RATA REFUND OF ASSESSMENTS

622-3-.01 Pro Rata Refund of Assessments

In the event that assessments are discontinued prior to the date that the last claim is paid pursuant to Code Section 34-9-360, the three-year period provided for in Code Section 34-9-358(f)(1) shall be the last three calendar years in which the fund collected assessments pursuant to Code Section 34-9-358. Insurers and self-insurers eligible for a pro rata refund of assessments previously collected pursuant to Code Section 34-9-358(f) shall be those who maintained workers' compensation insurance in the state and paid assessments to the fund at any time during the last three calendar years in which the fund collected assessments pursuant to Code Section 34-9-358.

Cite as Ga. Comp. R. & Regs. R. 622-3-.01

AUTHORITY: O.C.G.A. §§ 34-9-358**,** 34-9-360**.**

HISTORY: Original Rule entitled "Pro Rata Refund of Assessments" adopted. F. May 19, 2025; eff. June 8, 2025.